Southside Daycare
Day Care of Children

Block 3
Unit 15
Museum Business Park, 140 Woodhead Road
Glasgow
G53 7NN

Telephone: 01418 814 888

Type of inspection:
Unannounced

Completed on:
28 May 2026

Service provided by:
Pollok Enterprise Trust

Service provider number:
SP2007009130

Service no:
CS2007154351

About the service

Southside Daycare provides early learning and childcare to a maximum of 72 children, of whom 15 children are aged under two years, 21 children aged two years to three years, and 36 children aged three years to those not yet attending primary school.

At the time of inspection there were 71 children present on the first day and 71 children present on the second day.

The service is provided by Pollok Enterprise Trust and is in partnership with Glasgow City Council to provide early learning and childcare. It operates from purpose adapted units within a business park in the Darnley area of Glasgow. The business park is close to local shops, amenities, and access to public transport. Children also had access to an enclosed rear garden.

About the inspection

This was an unannounced inspection which took place on 27 and 28 May 2026. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with children using the service
- spoke with one parent and reviewed electronic feedback from 14 parents
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- assessed core assurances.

As part of our inspections, we assess core assurances. Core assurances are checks we make to ensure children are safe, the physical environment is well maintained and that the service is operating legally. At the time of this inspection, no improvements were identified relating to core assurances.

Key messages

- Children experienced warm, caring interactions from staff that knew them well.
- Staff had positive relationships with children and families.
- Children were confident, happy and having fun in their play and learning.
- Management should continue to work alongside staff to create enabling environments with resources that support children's curiosity, inquiry and creativity.
- Quality assurance, self-evaluation, and improvement planning had been improved and contributing to positive outcomes for children.
- Staff deployment should be improved to ensure children's needs are consistently met at all times.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

Leadership	3 - Satisfactory / Adequate
Children thrive and develop in quality spaces	4 - Good
Children play and learn	4 - Good
Children are supported to achieve	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

Leadership 3 - Satisfactory / Adequate

Leadership and management of resources

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

The service's vision, values and aims were reflected in daily practice, contributing to a positive and nurturing environment for children. Leaders shared plans were in place to review and further develop these with staff, children and families. We agreed this would strengthen everyone's sense of belonging and ownership within the service.

Improvements had been made to self-evaluation processes. This had helped the service to identify meaningful improvements and drive ongoing developments. We observed positive changes, including strengthened personal plans, improved approaches to planning for play and learning, and enhanced ways of sharing children's progress with families. Staff, children and families had opportunities to contribute their views, and these were used to inform developments across the service. The children's committee was at an early stage, but provided a positive foundation for children to influence change and have a voice in shaping their service.

Audits were carried out across a range of areas, including medication and accidents and incidents. This helped leaders monitor practice and identify improvements. To strengthen this further, we suggested accident and incident audits could include analysis of patterns, trends and the actions taken to minimise harm to children. We advised extending auditing practices to additional areas, such as, personal plans and learning journals. This would further promote consistency and support continuous improvement across the service.

Management carried out informal monitoring and reflected on staff practice, which led to positive changes within the service. As a result, improvements were observed, including a more positive mealtime experience for children. To strengthen this approach, the formal recording of monitoring and the sharing of feedback with staff would be beneficial. This would support the celebration of improvements and help identify any gaps in staff skills and knowledge, contributing to continued development and improved outcomes for children.

Staff were recruited safely and in line with safer recruitment guidance. A basic induction programme supported new staff to develop an initial understanding of their roles and responsibilities. We suggested staff would benefit from engaging with the National Induction Resource. This has the potential to encourage staff to reflect on their practice and identify further training or support required to develop their skills and learning.

Staff skills, knowledge, values and deployment

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

Appraisals had been planned but were yet to take place. Some informal discussions had supported the identification of staff training needs. Professional development was actively encouraged, and staff had

access to training opportunities linked to the service's improvement priorities. We discussed how observations of staff practice could be used to evaluate the impact of training on staff skills, knowledge and practice and how this had improved outcomes for children.

Overall, staff worked well together as a team. Experienced staff provided guidance to newer colleagues, supporting daily routines and contributing to positive experiences for children. In one playroom, staff were at times unsure of the number of children in their care. We discussed how communication could be strengthened, particularly around consistently sharing the number of children present when moving outdoors or when children arrived in the playroom. We suggested recording numbers on a whiteboard alongside the register to support accuracy. Strengthening these communication processes would enhance staff confidence and ensure children are consistently accounted for throughout the day.

Staff were deployed across playrooms to provide a balance of experience and skills, supporting positive routines and interactions for children. We found improvements were needed to staff deployment at the beginning of the day. This should be reviewed to ensure there are sufficient staff available to meet minimum ratio requirements during busier periods. Strengthening deployment at these times would enable staff to better support children's engagement, provide high-quality interactions and consistently meet individual needs.

The manager understood the importance of staff deployment and before the end of inspection was putting plans in place to improve current arrangements. An area for improvement has been made to support consistent and sustained staff deployment procedures (see area for improvement 1).

Areas for improvement

1. The service should review and strengthen staff deployment arrangements to ensure that staffing levels consistently meet children's needs throughout the day, including during busier periods. This should include but is not limited to, adhering to minimum ratio requirements at the start of the day.

This is in order to comply with section 7(1)(a) of the Health and Care (Staffing)(Scotland) Act 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state:
'My needs are met by the right number of people' (HSCS 3.15).

Children thrive and develop in quality spaces — 4 - Good

Children experience high quality spaces

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Children were cared for in a bright, clean and welcoming environment. Playrooms for younger children were welcoming, with soft furnishings to create cosy spaces, helping create calm, nurturing spaces for play and rest. Older children had access to a separate area for relaxation, quiet time and reading stories, supporting their need for comfort and downtime throughout the day. This promoted children's wellbeing, sense of security and positive engagement.

Buzzer entry systems, double and triple locked gates, and secure perimeter fencing contributed to a safe and secure environment for children. While playroom doors were fitted with keypads, these could be opened if not set to lock mode. Staff should remain vigilant in ensuring these doors are consistently locked at all times to maintain a safe and controlled environment for children.

Overall, environments were resourced to meet children's age and stage of development, with accessible materials that supported independent play choices. To further enhance children's experiences of high quality spaces, there was scope to increase natural materials and loose parts to promote curiosity, creativity and imagination. Leaders recognised this and shared that staff were currently participating in training focused on creating richly resourced, curiosity-inspiring environments. This ongoing development work had potential to strengthen the quality of spaces available to children of all ages.

Infection prevention and control practices were in place. Staff and children were observed washing their hands before and after meals, supporting good hygiene and promoting children's health and wellbeing. Staff wore appropriate protective clothing when meeting children's personal care needs, helping maintain a safe and hygienic environment. Further consideration should be given to the storage of toilet training seats to ensure they are kept out of children's reach and stored in a way that supports good hygiene practices.

Staff demonstrated responsive risk assessment in their daily practice. Sun safety practices such as applying sunscreen and providing shaded areas were implemented to keep children safe in the warm weather. Staff promptly mopped up water to prevent slips and encouraged children to pick up items they had dropped, helping them learn about keeping themselves and others safe. These approaches contributed to a safe environment while promoting children's awareness of risk and responsibility.

There were clear procedures in place for the maintenance of the building. Repairs reported were dealt with quickly, ensuring the environment was well maintained and safe for children.

Children play and learn 4 - Good

Playing, learning and developing

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Children were confident and engaged in their play and learning. They demonstrated a strong sense of independence, choosing where to play, selecting resources and deciding which friends to interact with. This supported them to lead their own learning and explore activities that were meaningful to them.

Younger children were engaged in a variety of play experiences that supported different areas of their development. They used resources to support imaginative play, helping them develop creativity and early social skills. Children enjoyed reading stories and joining in with singing and actions to songs. This positively contributed to their language development, and listening and attention skills.

Older children were engaged in a range of play experiences that supported their early literacy and numeracy development. Some children were practising writing letters and their names, while others confidently identified familiar letters within environmental print. This supported their early reading and writing skills in a meaningful, play-based way. Children naturally used mathematical language during their play, including colour, shape, size and counting. These opportunities helped them develop early numeracy skills while exploring resources and activities that interested them.

Access to outdoor play for older children was located downstairs. Staff responded well to children's requests to go outdoors and supported their choices when possible. This enabled children to engage in physical play, explore the environment and follow their interests.

To further enhance children's experiences, management and staff should review the daily routine to maximise opportunities for all children's access to outdoor play throughout the day. This would help ensure children can move freely between indoors and outdoors in line with their preferences, supporting choice, independence and a more flexible play environment.

Loose parts outdoors, such as tyres and crates, were used to create an obstacle course that offered children appropriate levels of risk and challenge. Children developed important physical skills as they balanced, stepped across and jumped between the materials. These opportunities supported children to build confidence and coordination through active, outdoor play.

We suggested the garden accessed by babies could be further developed and resourced to enhance their outdoor play experience. Leaders had identified this and had secured funding to purchase resources and equipment to develop the whole outdoor space. Plans were in place to involve staff, children and families in shaping these developments. This would ensure the outdoor space reflects children's needs and supports quality play experiences.

Improvements had been made to planning approaches since the last inspection. Information from parents was used to support children's interests and learning. Children's progress was shared with families through digital platforms, daily conversations and progress meetings, helping them feel involved in their child's learning journey.

Some observations showed evidence of developing skills, were linked to relevant frameworks and included next steps to support progression. However, there were some inconsistencies in the quality of recorded information, with a few gaps across children's profiles. Improving consistency would help ensure all children's learning is clearly captured and planned for. Plans were in place to continue working with Glasgow's leaders of early learning to further strengthen planning and assessment processes. This had potential to improve consistency in information recorded to support planning for children's development and progression in learning.

Children are supported to achieve 4 - Good

Nurturing care and support

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Children were happy, settled and confident within the service. They experienced warm and caring interactions from staff, which helped them feel secure throughout the day. Staff knew children well and showed a good awareness of their individual needs and routines. They were attentive and offered reassurance, comfort and cuddles when needed. This supported children's emotional wellbeing and helped them build trusting relationships with staff. Parents commented positively on the care their children received and told us. "They have been taken care of my oldest child since they were a baby and they love the staff" and "we feel familiar and comfortable with all members of staff. I believe there is genuine care for my [child]."

Significant improvements had been made to personal plans. Overall, plans contained relevant information that supported staff to understand and meet children's individual needs. We suggested including more detailed information about children's allergies and intolerances to further strengthen clarity and safety. Plans were reviewed regularly with parents and updated to reflect children's most current needs, routines and preferences. This helped ensure information remained accurate and meaningful.

Plans contained baseline assessments linked to wellbeing indicators. This provided a helpful overview of each child's stage of development. Staff used this information to identify appropriate targets, plan support strategies and monitor children's progress over time. This contributed to a more consistent and informed approach to supporting children's learning and development.

Overall lunch was a relaxed, unhurried and sociable experience for children. Children were able to sit with friends and chat together, helping build social skills and a sense of belonging. Initially staff were task focussed, before they sat with children. We discussed how staff could share serving and supervision responsibilities to allow staff to sit with children for longer periods of time to further support safe and positive mealtimes.

There were opportunities for children to make choices, be independent and responsible with serving food and clearing away used lunch items. We suggested younger children could be provided with more opportunities to self-serve, and how more serving dishes and utensils would help reduce the time children waited to select their food items. Staff demonstrated a clear understanding of children's individual dietary requirements, ensuring meals were appropriate and safe. This supported children's health, safety, and wellbeing.

Medication was stored and administered safely, and staff followed appropriate procedures to support children's health needs. To further strengthen practice, we suggested some children that required life saving medication, such as, inhalers, would benefit from individual health care plans. This would ensure staff have clear, accessible guidance contributing positively to children's overall health, safety and wellbeing.

The service worked in partnership with local schools to support children's transitions into primary school. Transitions, both from home to nursery and between playrooms, were managed sensitively and thoughtfully. Staff planned these transitions on an individual basis to ensure they met the specific needs of each child and family. This allowed children to build relationships at their own pace and helped them feel comfortable and secure as they joined the service.

The service had established a range of approaches to keep families informed and involved in nursery life. This included a closed Facebook page, iConnect updates, newsletters, parents' meetings and opportunities for families to join events such as visiting Santa with their child. Leaders had recognised the need for more family engagement opportunities that were mindful of parents work commitments and busy family lives. We suggested the service consider ways to widen family engagement, through introducing home-link opportunities. Consulting with parents about what would work best for them would help ensure approaches are meaningful and accessible for all families.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 31 July 2025, the provider must ensure that children's care needs are met through personal planning.

To do this, the provider must, at a minimum:

a) ensure that each child has a personal plan in place within 28 days of starting the service
b) ensure personal plans contain information about children's needs and how they will be met
c) ensure personal plans are reviewed minimum every six months, or when information changes in partnership with parents and carers.

This is to comply with Regulation 5(1)(2) (Personal plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
'My personal plan (sometimes referred to as a care plan) is right for right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

This requirement was made on 11 April 2025.

Action taken on previous requirement
Significant improvements had been made to personal plans. All children had a personal plan in place within the required timescale, and plans contain detailed, relevant information that supports staff to meet children's individual needs. Plans were reviewed regularly with parents and updated promptly to reflect any changes. This ensures children receive consistent, well-informed care that supports their wellbeing and development.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To improve outcomes for children, the provider should ensure that self-evaluation and quality assurance impact on improved experiences for children. This should include but not limited to, gathering and responding to people's views, responding to agreed actions and auditing practice.

This is to ensure that care and support is consistent with the Health and Social care Standards (HSCS) which state that:
"I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes". (HSCS 4.19).

This area for improvement was made on 26 November 2025.

Action taken since then
The service had taken action to strengthen self-evaluation and quality assurance processes. These developments were now having a positive impact on children's experiences.

Participation processes had been established to gather the views of parents, staff and children. These are beginning to inform decision making and shape developments within the service.

Formal self-evaluation is at an early but positive stage, with activity taking place against national frameworks and guidance. The service has demonstrated commitment and capacity to continue building on this progress, and the improvements made are contributing to more positive experiences for children.

Leaders were informally auditing practice through time spent in playrooms and regular discussions with staff. This has supported a clearer understanding of strengths and areas for development.

Therefore we were satisfied this area for improvement has been met.

Previous area for improvement 2

To support children's wellbeing, learning and development, improvements should be made to the planning for play and learning processes. This should include but not be limited to ensuing children's achievements and progress are shared with families.

This is to ensure that care and support is consistent with the health and Social Care Standards (HSCS) which state that:
"I am supported to achieve my potential in education" (HSCS 1.27); and
"As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open-ended natura materials" (HSCS 1.31).

This area for improvement was made on 11 April 2025.

Action taken since then

The service had successfully enhanced its planning approaches through close collaboration with local authority leaders of early learning. Planning is now more child-centred, responsive and clearly informed by a range of meaningful evidence.

Mindmaps captured children's voices and choices, while observations of children's interests, information from parents and developmental trackers were used to plan next steps in learning. Children's achievements and progress were now consistently shared and celebrated with families.

As a result of these improvements, children experienced more purposeful, well-planned learning that supports their wellbeing, development and sense of achievement.

Therefore we were satisfied this area for improvement has been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

Leadership	3 - Satisfactory / Adequate
Leadership and management of staff and resources	4 - Good
Staff skills, knowledge, values and deployment	3 - Satisfactory / Adequate

Children thrive and develop in quality spaces	4 - Good
Children experience high quality spaces	4 - Good

Children play and learn	4 - Good
Playing, learning and developing	4 - Good

Children are supported to achieve	4 - Good
Nurturing care and support	4 - Good

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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