Rosebuds Daycare
Day Care of Children

Hilton Coylumbridge Hotel
Aviemore
PH22 1QN

Telephone: 01479 813 086

Type of inspection:
Unannounced

Completed on:
1 October 2026

Service provided by:
None None

Service provider number:
SP2012984390

Service no:
CS2012314104

About the service

Rosebuds Daycare provides a daycare of children service in Aviemore. The service is registered to provide a care service to a maximum of 40 children between the ages of 0 - 12 of whom a maximum of 15 children aged 0 - two can be cared for at any one time. At the time of the inspection 115 children were registered with the service and 35 were attending.

The service operates from two playrooms, a large outdoor space, cloakroom area, toilet facilities, and a small kitchen area.

About the inspection

This was an unannounced inspection which took place on 30 September 2026 between 08:15 and 17:00. The inspection was carried out by two inspectors from the Care Inspectorate. Feedback was shared with the service on 01 October 2026.

To prepare for the inspection, we reviewed information about the service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. To inform our evaluation, we:

- spent time with children using the service
- received seven questionnaires from families
- spoke with four families during the inspection
- spoke with the manager and provider and five staff
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents

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 a service is operating legally. At the time of this inspection, improvements were identified relating to core assurances. We have reported where improvement is necessary within Children thrive and develop in quality spaces.

Key messages

- Leaders had established supportive quality assurance and professional development arrangements which promoted improvement.
- Most children were happy, confident, and engaged in a range of meaningful play experiences indoors and outdoors.
- Staff interactions were strongest where skilled questioning extended children's thinking, language, and learning; greater consistency was needed across the staff team.
- Intentional planning and significantly improved floor books made children's learning visible and meaningfully shared with families.
- The quality and maintenance of the premises needed further improvement to ensure children consistently experienced safe, hygienic, and high-quality spaces.
- The provider responded promptly to infection prevention and control concerns and shared a plan for immediate improvement.

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	4 - Good
Children thrive and develop in quality spaces	3 - Satisfactory / Adequate
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 4 - Good

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 had a clear vision, values, and aims which had been developed and reviewed in partnership with children and families. These reflected the aspirations of the service and were evident in daily practice. Staff understood the values and demonstrated some of these throughout their interactions with children. As a result, there was a strong sense of shared purpose across the service.

Leaders had identified clear priorities for improvement through a well-considered improvement plan. Priorities focused on enhancing children's experiences through the development of staff interactions and the learning environment. Improvement priorities reflected the needs of the service and were appropriately informed by national and local guidance. This ensured improvements were relevant and meaningful for children and families.

Quality assurance processes were well established and provided management with a good oversight of the service. A quality assurance calendar supported a planned approach to monitoring and reviewing practice. Leaders regularly monitored key aspects of the service including mealtimes, staff interactions, learning journals, medication, and accident records. The use of a traffic light approach supported leaders to prioritise actions and monitor progress. Management demonstrated awareness of areas that required further development. To strengthen outcomes further, they should ensure actions identified through monitoring activities are revisited consistently and that the impact of improvements are evaluated and evidenced over time.

A culture of reflection and self-evaluation was evident across the staff team. Staff used a self-evaluation floor book to record reflections on practice, improvement priorities, and professional learning. Families contributed to this process, helping to ensure their views informed service developments. The service were beginning to use challenge questions from the quality improvement framework to support deeper reflection. Continuing to embed these approaches would help strengthen evaluative practice and support management to measure the difference improvements made to children's experiences.

Children and families had opportunities to influence change through regular questionnaires and consultations. Leaders actively sought feedback about what children and families valued and what could be improved. This demonstrated a commitment to partnership working and helped ensure improvement activity reflected the needs of those experiencing the service.

Staff benefited from supportive leadership and clear opportunities for professional development. Regular supervision and well-being meetings enabled meaningful discussions about achievements, professional learning, wellbeing, and practice. Leaders reviewed progress against previously agreed goals. This helped staff to recognise their development and the impact this had on outcomes for children. Staff told us they felt well supported and valued.

Recruitment processes reflected safer recruitment guidance and supported children's safety and wellbeing. New staff benefited from a structured induction programme and leaders recognised the value of continuing to embed the 'Early learning and childcare: national induction resource' into practice. Management maintained a clear overview of training undertaken across the service and encouraged staff to reflect on

how learning influenced their practice. This helped develop staff knowledge, confidence, and skills, which supported positive outcomes for children.

Children thrive and develop in quality spaces — 3 - Satisfactory / Adequate

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

The quality, safety, and maintenance of spaces needed further improvement. Leaders and staff understood the limitations of the premises and had made efforts to create more welcoming and homely areas. They had introduced new wooden and natural resources and identified the environment as a priority within the improvement plan. However, the building remained tired and needed further maintenance to ensure children experienced consistently high-quality spaces. The provider planned to complete refurbishment work during the December closure. Completing this work could provide children with more welcoming, well-maintained, and suitable environments. A previous area for improvement has not been fully met and has been continued within this report. (See area for improvement 1).

The toilet area needed improvement as its condition did not meet infection prevention and control expectations. Alongside inconsistent infection prevention and control practice, this meant children did not always experience a safe, hygienic, and well-maintained environment. Improvements were needed to reduce the risk of infection and ensure children's dignity and wellbeing were consistently promoted (see requirement 1). The provider responded promptly to these concerns and shared a clear plan outlining how immediate improvements would be implemented. This demonstrated a positive commitment to addressing the identified risks and improving outcomes for children.

Environmental risk assessments were in place, and staff followed the agreed measures to keep children safe. Children were involved in discussions about potential risks and learned how to keep themselves and others safe. This supported them to develop awareness and confidence when assessing risk. To help prevent potential risks, the service should continue to review the security of the outdoor area, including gates, fencing, and the positioning of resources next to boundaries.

Children influenced spaces through their interests, ideas, and learning. Resources generally reflected children's ages, stages of development, and current interests. Learning walls made children's learning journeys visible through their voices, photographs, and artwork. Staff demonstrated their understanding of guidance by linking learning walls to children's rights and relevant national and local guidance. School-aged children were also consulted about activities and their experiences. These approaches helped children feel that their views and contributions were valued.

Children aged three and over benefited from free-flow access to the outdoors. This enabled them to make choices and move confidently between indoor and outdoor play. Leaders had considered how planned environmental improvements could give younger children greater choice and more regular access to outdoor play. This included developing a suitable space where babies could safely crawl, shuffle, move freely, and explore. Taking this forward would support younger children's physical development, independence, and curiosity through developmentally appropriate outdoor experiences.

Information was managed appropriately. Children's records and confidential documents were stored safely and securely, helping to protect children's privacy and personal information. Current policies and procedures guided staff in areas including confidentiality, information sharing, medication, and child protection. This

ensured staff had access to accurate information and clear guidance to support children's safety, privacy, and consistent care.

Requirements

1. By 26 February 2027, the provider must ensure that infection prevention and control practices are well managed to provide safe spaces and reduce the risk of spread of infection.

To do this, the provider must, at a minimum:
a) ensure that warm running water is used for all handwashing;
b) ensure that PPE (personal protective equipment) is used appropriately throughout personal care;
c) ensure that the toilet facilities are clean, well maintained and safe for all children to access.

This is to comply with Regulation 4(1)(d) 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: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

Areas for improvement

1.
To ensure all children experience an environment which is welcoming and safe the provider should review the indoors and outdoor environment.

This should include, but is not limited to;

a) reviewing all environments to ensure they are effectively maintained and support Infection Prevention Control procedures;
b) reviewing all spaces throughout the service to promote a welcoming, homely and inviting environment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My environment is secure and safe' (HSCS 5.17).

Children play and learn 4 - Good

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.

Most children were happy, confident, and engaged in a range of play experiences indoors and outdoors. They made choices, followed their interests, and participated in imaginative, creative, and active play. One family told us, "My child loves it here. Staff are really good at sharing information about learning and play." This reflected the positive engagement and enjoyment observed during the inspection.

Children in the over three area benefited from well-organised, uncluttered spaces and accessible, good-quality resources. This supported them to lead their own play and sustain their engagement. School-aged

children integrated well with younger children, confidently sharing their ideas and views. The spaces and resources for younger children could be developed, and some shelving and play areas were cluttered. Further development was needed to ensure younger children experienced the same level of choice, independence, and meaningful engagement in play throughout the day.

Children particularly enjoyed regular forest school experiences and visits to the woods. They enthusiastically explored mud printing, rolled tyres, played tig, and investigated the natural environment. These experiences promoted curiosity, physical confidence, and sustained engagement in active outdoor play. Staff established clear safety boundaries. This enabled children to assess risk and participate confidently in challenging play.

The quality of staff interactions varied across the service. In the over three area, staff used skilled questioning and phrases such as "I wonder..." to encourage children to think, share ideas and solve problems. Staff recognised children's interests and sensitively extended their play, vocabulary, knowledge, and learning. This supported children to remain engaged, curious, and confident in leading their own learning.

In the under-three area, interactions to support play and learning were not consistent across the staff team. While some staff used questions and extended play experiences, opportunities were sometimes missed by other staff to respond to children's cues, introduce language and build on their interests. At times, interactions focused more on day-to-day routines than meaningful engagement. Strengthening the consistency and quality of interactions would ensure younger children received the same level of support, challenge and encouragement in their play and learning.

With support from the local authority, staff had developed an intentional planning approach as well as being responsive to children's interests. This supported meaningful play and learning experiences. The floor books were a significant strength and had improved considerably since the previous inspection. They clearly demonstrated the skills children were developing and brought their learning journeys to life through children's voices, families' contributions, and examples of artwork. This ensured children's learning was visible, valued, and meaningfully shared with families.

Staff were developing a next step system and displayed children's next steps within the playrooms. This gave staff an overview of children's current learning priorities and helped them plan experiences which supported progression. The quality of individual observations within children's learning journals was inconsistent. Some described the experience but did not clearly identify the learning and skills demonstrated or explain why these were significant for the child. More consistent recording of children's learning, progress and appropriate next steps would provide a clearer picture of their development and help staff plan meaningful future experiences.

Children are supported to achieve 4 - Good

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.

Interactions between staff and children were mostly warm, kind and nurturing. Throughout the inspection, most staff were observed getting down to children's level, engaging positively in play and responding sensitively to their needs. Children sought reassurance and support from familiar staff and received comfort when required. Staff and leaders demonstrated a good understanding of children's routines, preferences, and emotional needs. This enabled them to provide responsive support which contributed to children feeling secure, valued and cared for. A parent shared, 'My child loves it here.'

Relationships between children and staff were mostly positive, with children seeking comfort, reassurance, and support from familiar staff members. The quality of attachments was not yet consistently evident across the whole staff team. Management had identified this as an area for development and were using monitoring, feedback, and professional learning to support more consistent nurturing practice.

Children's personal care routines were carried out in a caring and respectful manner. During nappy changing, staff engaged positively with children through singing, conversation, and quality interactions. Staff were responsive to children's personal care needs, including regular nose wiping. However, some aspects of infection prevention and control practices were not consistently implemented. For example, handwashing procedures and the appropriate use of PPE (personal protective equipment) during nappy changing routines did not always align with best practice. These practices should be enhanced to reduce the risk of spread of infection. (See requirement one within the heading - Children thrive and develop in quality spaces).

Mealtimes provided positive opportunities for children to develop independence and social skills. Older children's mealtimes were calm, relaxed, and unhurried. Children were able to choose where they sat, serve themselves using appropriate utensils and take responsibility for tidying away when finished. Staff sat alongside children, engaging them in meaningful conversations and helping to extend learning and communication. These experiences promoted confidence and independence. Younger children were well supported by staff who provided caring support and some opportunities for developing self-help skills. However, there was scope to further maximise children's independence, choice, and participation during mealtimes. Extending these opportunities further for younger children would support a consistent approach to developing independence, life skills, and decision-making for all children.

Personal plans provided detailed information about children's routines, individual needs and strategies used to support them. Records demonstrated that changes were reviewed and updated regularly. This enabled staff to respond consistently to children's evolving needs.

The service demonstrated a strong commitment to working in partnership with families. A range of opportunities encouraged families to engage in the life of the setting. These included stay and play sessions, open mornings, settling-in opportunities, learning workshops and involvement in improvement planning. A parent shared, 'Communication is good and is mostly verbal.' These approaches helped strengthen relationships between home and the service and supported continuity in children's care and learning.

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 and families, the provider should ensure that quality assurance systems impact positively on outcomes for children.

This should include but not be limited to, implementing effective audits.

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 13 November 2025.

Action taken since then

The provider has developed their approach to quality assurance and audits are now regularly completed. This has supported the service to identify any patterns and has had a positive impact on outcomes for children.

This area for improvement has been met.

Previous area for improvement 2

To ensure all children experience an environment which is welcoming and safe the provider should review the indoors and outdoor environment.

This should include, but is not limited to;

- Identifying and reducing the potential risks of children leaving the service
- Review all environments to ensure they are effectively maintained and support Infection Prevention Control procedures.
- Review all spaces throughout the service to promote a welcoming, homely and inviting environment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My environment is secure and safe' (HSCS 5.17).

This area for improvement was made on 13 November 2025.

Action taken since then

The service is now mindful of potential risk within the service and has taken steps to minimise any risks. The service are continuing to review and make changes to their environments, this is an ongoing focus of the service.

This area for improvement has not been fully met and has been re-worded and continued within this report.

Complaints

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

Detailed evaluations

Leadership	4 - Good
Leadership and management of staff and resources	4 - Good

Children thrive and develop in quality spaces	3 - Satisfactory / Adequate
Children experience high quality spaces	3 - Satisfactory / Adequate

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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