Hummingbird Out of School Care Limited
Day Care of Children

35 Moss St
Paisley
Renfrewshire
PA1 1DL

Telephone: 07833 291 263

Type of inspection:
Unannounced

Completed on:
30 July 2026

Service provided by:
Hummingbird Out of School Care Limited

Service provider number:
SP2015012547

Service no:
CS2015342612

About the service

Hummingbird Out of School Care Limited is registered to provide a care service to a maximum of 57 primary school aged children at any one time. Of those 57 no more than 10 are aged four years to those not yet attending primary school at any one time. Two adults will be in attendance at all times. The service will operate from 7:00am to 9:00am and 3:00pm to 6:00pm during term time and 7:00am to 6:00pm during school holidays, Monday to Friday.

Hummingbird Out of School Care Limited provides an out of school care and holiday programme service in Paisley, Renfrewshire. Children access two playrooms on the first floor of an office building in the centre of Paisley.

About the inspection

This was an unannounced follow up inspection which took place on 30 July 2026. The inspection was carried out by two inspectors from the Care Inspectorate. The inspection focused on the requirements made during the previous inspection which took place on 22, 23 and 24 April 2026. We evaluated how the service had addressed these to improve outcomes for children. We identified that these requirements were now met, because the service had made progress by completing an action plan which supported medication procedures and quality assurance measures. During this follow-up inspection, we increased the evaluation for "Leadership of management and resources".

Key messages

- Following our previous inspection, the service had three requirements. They had now made sufficient progress to meet all three requirements.
- Medication management had improved and now supported children's safety and wellbeing.
- Quality assurance processes had been strengthened, with systems introduced to monitor key aspects of service delivery and staff responsibilities clearly allocated to support accountability.

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

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

Leadership 3 - Satisfactory / Adequate

Quality indicator: Leadership and management of staff and resources.

We previously made an evaluation of weak for this key question. We have now re-evaluated this key question as adequate, where the strengths just outweighed the weaknesses.

During our inspection in April 2026, we identified concerns regarding medication management procedures and quality assurance processes. Requirements were made for the service to address these areas. During this follow-up inspection, we found that the service had made improvements and had taken effective action to meet these requirements.

Medication management had improved and now supported children's safety and wellbeing. The medication policy had been shared with staff and the medication administration form had been updated in line with current guidance, supporting accurate record-keeping and safe administration.

Individual healthcare plans had been reviewed and updated with parents to ensure they reflected children's current needs, including signs and symptoms. These were stored with medication records and personal plans in a clearly organised and accessible location. The allergy list, diary system and review checklist had also been introduced to support staff to access current information and ensure plans remained up to date. This was at an early stage, and we encouraged the provider to continue to develop these systems and ensure they were consistently implemented and reviewed to support children's health and wellbeing.

Staff knowledge and confidence in supporting children with medical needs had improved. Medication procedures had been discussed during staff meetings to reinforce knowledge and promote consistent practice. Staff had received training in allergy awareness and the safe administration of EpiPens. During the inspection, staff demonstrated an awareness of children's identified medical needs, understood procedures for the safe storage and administration of medication, and were aware how to access individual healthcare plans and medication.

Quality assurance systems had been introduced to support the monitoring and evaluation of practice. A weekly quality assurance checklist had been developed, incorporating medication monitoring, environmental checks, maintenance reporting and room set-up checks. Roles and responsibilities had been allocated, strengthening accountability and supporting staff to take ownership of improvement priorities. The service had plans to establish a quality assurance calendar to further support the regular monitoring, review and evaluation of practice.

The service had reviewed its processes for communicating with families. Policies and relevant information had been shared with parents through the service's digital app, and parents had been encouraged to download and use the app to support effective communication. A structured settling-in process had also been introduced to ensure all relevant information and required documentation, including personal and healthcare plans, had been completed before children attended.

An action plan had been put in place which identified improvement priorities, allocated responsibilities and set timescales. Staff meetings had been used more effectively to review practice, discuss procedures, reflect on service delivery and monitor progress against improvement priorities. We could see some progress had been made, with actions being implemented to strengthen practice and improve outcomes for children. We encouraged the provider to continue with their improvement journey and to make effective use of relevant guidance to further develop and support practice.

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

Requirements

Requirement 1

By 22 July 2026, the provider must ensure that medication processes and procedures in the setting are safe and effective to ensure children's health and wellbeing are supported. To do this, they must, at a minimum, ensure that clear and consistent procedures are in place for the safe administration, recording, storage, and monitoring of medication, in line with children's individual healthcare needs and current guidance.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that my care and support is in line with Health and Social Care Standards (HSCS) which states that "My care and support meets my needs and is right for me" (HSCS 1.19) and "Any treatment or intervention that I experience is safe and effective". (HSCS 1.24).

This requirement was made on 22 April 2026.

Action taken on previous requirement
We were satisfied with the progress the service had made for this requirement. We have given further details of the action taken under quality indicator "Leadership of management and resources".

Met - within timescales

Requirement 2

By 30th August 2026, the provider must ensure that staff receive appropriate training to support children's healthcare needs. To do this, they must, at a minimum, ensure that staff understand individual medical conditions, can recognise and respond to children's symptoms, and safely administer medication in line with individual healthcare plans.

This is in order to comply with regulation 8 (1) (a)) of the Health, and Care (Staffing)(Scotland) Act 2019.

This is to ensure staffing is consistent with the Health and Social Care Standards which state: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes (HSCS 3.14) and "Any treatment or intervention that I experience is safe and effective". (HSCS 1.24).

This requirement was made on 22 April 2026.

Action taken on previous requirement

We were satisfied with the progress the service had made for this requirement. We have given further details of the action taken under quality indicator "Leadership of management and resources".

Met - within timescales

Requirement 3

By the 20th of June 2025, to ensure children consistently receive high quality play and learning experiences the manager should ensure effective quality assurance systems are developed and implemented to improve outcomes for children and staff. To do this, the manager must, at a minimum:

a) ensure robust quality assurance processes are embedded to help identify areas for improvement.
b) action plans are created with clear timescale to resolve areas for improvement highlighted.
c) ensure monitoring of staff practice and children's play and learning experiences is regularly carried out to identify strengths and any areas for improvement.

This is in order to comply with Part 3, Section 7(1) of the health, and Care (Staffing)(Scotland) Act 2019. This is in order 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 requirement was made on 8 April 2025.

Action taken on previous requirement

We were satisfied with the progress the service had made for this requirement. We have given further details of the action taken under quality indicator "Leadership of management and resources".

Met - outwith 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 support children's wellbeing, the provider should ensure personal plans are used effectively to meet children's needs, ensuring all children have a personal plan in place, and that these are reviewed every six months or sooner.

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

This area for improvement was made on 22 April 2026.

Action taken since then

This area for improvement has not been assessed and remains in place.

This area for improvement has not been met.

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	3 - Satisfactory / Adequate
Leadership and management of staff and resources	3 - Satisfactory / Adequate

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.gov.scot

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