Puddleduck Private Nursery
Day Care of Children

18 Cathedral Square
Glasgow
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Telephone: 01415 527 569

Type of inspection:
Unannounced

Completed on:
9 April 2025

Service provided by:
Puddleduck Nursery Ltd

Service provider number:
SP2017012863

Service no:
CS2017354017

About the service

Puddleduck Private Nursery is a day care of children service which is situated in the city centre of Glasgow. The early learning and childcare service is in partnership with Glasgow City Council to provide commissioned places for children aged between three and five years and eligible two year olds.

The service can accommodate 44 children not yet attending primary school at any one time. This includes no more than 12 children aged 1 year to under 3 years and no more than 32 children aged 3 years to those not yet attending primary school full time. At the time of our inspection there were a total of 11 children present.

The service is located in premises within a church building in Cathedral Square. The accommodation consists of one large playroom and a playroom with an adjoining space. Children have access to an outdoor play area for physical play and outdoor learning. There is changing and toilet facilities for children and office, catering and staff facilities. The service is close to transport routes, shops and community services.

About the inspection

This was an unannounced inspection which took place on 8 and 9 April 2025. 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
- reviewed feedback from five parents and carers whose children attend the service
- reviewed feedback from five staff members employed in the service
- spoke with the manager and staff
- observed practice and staff interactions with children
- reviewed documents.

As part of this inspection we undertook a focus area. We have gathered specific information to help us understand more about how services support children's safety, wellbeing and engagement in their play and learning. This included reviewing the following aspects:

- staff deployment
- safety of the physical environment, indoors and outdoors
- the quality of personal plans and how well children's needs are being met
- children's engagement with the experiences provided in their setting

This information will be anonymised and analysed to help inform our future work with services.

Key messages

- Children were settled, happy and having fun.
- Lunch was a relaxed, unhurried, and sociable experience for children.
- Management and staff should review risk assessments to improve the safety and security of the setting.
- The manager was visible, friendly and approachable to children, families and staff.
- Quality assurance and self-evaluation processes could be further developed to support continuous improvement of the service.
- The provider should ensure safe recruitment procedures are followed to ensure staff are recruited safely.
- Staff knew children well and worked well together as a team.

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

How good is our care, play and learning?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good

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

How good is our care, play and learning? 4 - Good

We evaluated this key question as good as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children's experiences.

Quality Indicator 1.1: Nurturing care and support
Children were happy and settled and had developed friendships which enhanced their wellbeing. The children were confident in their environment and were familiar with nursery routines.

Staff were warm, nurturing and caring towards children. The interactions between staff and children were responsive and engaging. We observed some children approach staff for help and comfort when needed. This showed they felt comfortable, safe and secure and contributed to the positive relationships they had with staff. Parents commented, "They made my baby feel safe and happy from the start" and "The staff on the floor have made such genuine bonds with my child, helping him to feel safe, settled and cared for when his mum isn't there!"

Lunch was a relaxed, unhurried, and sociable experience for children. We saw improvements had been made to the mealtime experience for older children. Staff were sitting with children, supervising the mealtime experience and children were engaging in quality conversations with staff. This contributed to a sociable and safe mealtime experience for children. For younger children, staff were supervising and supporting children with feeding. The mealtime experience could be enhanced with children having greater opportunities to self-serve contributing to supporting their independence and responsibility skills. Staff were aware of children's dietary requirements, contributing to children's health, safety, and wellbeing.

Staff confidently described children's individual needs and how they were supported. Staff knew the children well which meant they were able to respond to their individual needs and preferences.

Personal plans were in place for children. Plans were created in partnership with parents and carers. Plans contained information for staff to support children and meet their individual needs. We discussed with management strategies could be clearer and next steps and actions could be clearly evaluated. This has the potential to improve outcomes for children. Improvements had been made to personal plans with the addition of a chronology to record significant events. For children these were in place for, the plans were being regularly updated with information of the event and support that was being provided.

There was no medication stored on the premises during our visit. Children attending the service on the day of inspection did not require any medication. The service had a medication policy in place and had medication administration records available. We were satisfied medication would be administered and stored safely if a child required this.

Staff had attended child protection training. They were aware of their responsibility to safeguard children in their care and had the ability to recognise when children and families needed support.

Quality Indicator 1.3: Play and learning
Children were having fun and engaged in experiences. All older children chose to play outdoors which was facilitated well by staff. They had good opportunities to lead their own play and learning, which impacted positively on their development and wellbeing. Younger children had opportunities for outdoor play

contributing to fresh air to support their health and wellbeing. Almost all parents told us their child had the opportunity to play outdoors. One parent commented, "staff give him the freedom to take part in activities but also choose what and where he would like to play with that day."

There were opportunities for children to join in physical play. Children were playing on bikes and manoeuvring these around obstacles in the garden. Contributing to opportunities for development of their gross motor and problem-solving skills. A water experience was popular with younger and older children. They were exploring the texture of the water through touching and splashing and emptying and filling containers contributing to the development of sensory and numeracy skills. Children were filling up syringes and pushing the water out of these and looking to see where this would go and laughing in delight. Children recognised they were running out of water and a staff member supported the children with questions to problem solve and to come to a solution to provide more water for their play to continue. Parents commented "The staff tailor learning experiences to accommodate my child's goals and abilities, they provide outstanding child centred care!"

All staff were interacting and joining in experiences with children. Some staff would benefit from training linked to children's play, learning and interactions. This has the potential to support staff in knowing when to engage in play, to step back from play and the use of effective discussions and questions to support children's play and learning.

Management and staff had reviewed and developed their planning processes and were developing these to support with responsive planning for children's interests. We could see some examples of children's interests being taken forward to support their play and learning. We made suggestions to support continued development of the plans to extend children's voices and capture child led & responsive experiences. This has the potential to support children to recall and build on previous learning and provide a message to children that they are valued.

Online learning journals shared information with parents and carers of children's learning and skills. This supported learning to continue at home. The approach to the recording of observations was inconsistent. Some observations posted were of multiple experiences within the one observation. This made it difficult to see progression and development of children's skills. Staff recorded next steps for children's learning. Some of these were general and could be more specific. Meaningful observations and next steps have the potential to support progression in children's play and learning.

How good is our setting? 4 - Good

We evaluated this key question as good as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children's experiences.

Quality Indicator 2.2: Children experience high quality facilities

Children were cared for in an environment that was bright and clean. The three to five years playroom was spacious for children and younger children had opportunities to move between two play spaces, one of which was a sensory room. We observed improvements had been made to environments to support children's play and learning.

Indoor and outdoor play environments were set out attractively with stimulating and open-ended resources to support and extend children skills and curiosity. Storage of resources including natural materials were accessible and supported children's choices to support their needs and interests. We identified gaps in toys

and resources in some play areas. Management told us they were in the process of completing resource audits to identify where additional resources could enhance children's play and learning. This has the potential to improve outcomes for children's play and learning.

Cosy areas had been extended in the three to five years play environment and in the outdoor play environment. This enhanced opportunities for children to rest or relax. An outdoor shelter had been extended to support children's play and learning and provided shelter for children from most weathers contributing to children's health and wellbeing.

Older children's health and wellbeing was supported as they had direct access to the outdoor play environment for fresh air and exercise. There were opportunities for children to take positive risks and to be challenged in their play. Almost all parents told us their child has the opportunity to play outdoors. One parent commented, "My child is involved in lots of outdoor and natural play, he enjoys risk play and learning through real experiences."

Most environments were safe and secure for children. For example, the garden areas had secure fencing, and children accessed them safely, directly from the indoor play environment. In contrast we identified safety and security to environments could be improved. We observed safety gates within the service where not always closed over after use and internal doors leading to stairwells to the church building were not secured. We discussed with management priority should be given to minimise children leaving the playrooms and accessing these areas.
Risk assessments were in place to support children's health, safety and well-being. Some risk assessments needed to be relevant to the current environments and level of risk. This would support all staff working towards the same shared control measures, to support safe and secure environments for children's care, play and learning. As this has the potential to compromise children's safety and security we have made an area for improvement (see area for improvement 1).

Children and staff were washing their hands before and after mealtimes and after activities of outdoor play. Tables were cleaned before and after mealtimes. This contributed to minimising the potential spread of infection.

Areas for improvement

1. To support children's health, safety and well-being needs, children should be cared for in a secure environment both indoors and outdoors. Robust risk assessments should take place and action taken to mitigate risks to children.

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

How good is our leadership? 4 - Good

We evaluated this key question as good as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children's experiences.

Quality Indicator 3.1: Quality assurance and improvement are led well
Management were visible, friendly, and approachable to children, families and staff. Staff shared with us that they felt supported by management.

Staff were supported to engage in the settings improvement journey. They had made progress with planning processes and the development of family and home learning links.

A staff member had not met the deadline to complete their annual declaration to the professional registration body Scottish Social Services Council (SSSC). We highlighted this to management, and this was renewed quickly after our discussion.

A quality assurance calendar was in place and the service were using this to monitor and audit aspects to include SSSC registration, medication and play and learning environments. Monitoring and auditing of SSSC registration, personal plans and learning journals should be more robust to support with improvements to support children's care, play and learning and the safeguarding and protection of children.

Monitoring of staff practice took place identifying strengths and areas for development. We discussed re-visiting areas for development with staff. This has the potential to enhance continual staff development that promotes positive outcomes for children.

At our previous inspection we made a requirement for safe recruitment. We reviewed the procedures for safe recruitment within the service. We found that staff were overall recruited safely in line with best practice guidance. While we noted that checks had been carried out prior to employment to include Protecting Vulnerable Group records, we found there was not receipt of a reference for a staff member from their most recent employer. As this had the potential to compromise the protection and safeguarding of children, we have made an area for improvement (see area for improvement 1).

Management and staff had made a positive start to self-evaluation by reflecting on the regulatory body SSSC codes of practice and identifying how they meet these in practice. We suggested management and staff could enhance the process by reflecting on how improvements could be made and progressing towards these to improve outcomes for children.

Children and parents had opportunities to be involved in self-evaluation of the service within the services children and parent's committee groups. We could see some suggestions for improvements had been taken forward, for example having a cook within the service would contribute to being more nurturing for the service. This contributes to valuing and respecting their contribution to improve outcomes for children. Discussions had taken place with children on the new lunchtime routine. We discussed with management the opportunity to extend children's involvement further by including children's voice within other areas of the service. For example, when making changes to playroom environments. All parents who provided feedback shared that they and their children were involved in a meaningful way to help develop the service. One parent commented, "Staff are incredibly inclusive of parents, encouraging of parents expressing their thoughts feelings, ideas and getting involved with their child's learning by having stay and play days and parents committees."

Areas for improvement

1. To keep children safe and secure the provider should ensure that safe recruitment procedures include but not be limited to receipt of a reference from the candidates previous employer.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: '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)

How good is our staff team? 4 - Good

We evaluated this key question as good as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children's experiences.

Quality Indicator 4.3: Staff Deployment
The service had reduced numbers of children attending as a result of the easter holiday period. There was a small core staff team who were present to care for the children. We could see staff knew children well and had positive connections with them. We observed that there were enough staff to meet children's individual needs. Almost all parents and almost all staff told us there are always enough staff in the service to meet children's needs. Staff told us "The staff in the rooms always meet the child to staff ratio as legally required, however if there is a need for more support due to children's needs, management always ensure this is received to support staff, sometimes helping in the rooms themselves."

There had been a high number of staff leavers and new staff had been recruited to the staff team. Staff shared with us they were being inducted into the service which included reading the service's policies and procedures and understanding their processes, roles, and responsibilities. We suggested management and staff use the Scottish Government 'Early learning and childcare: national induction resource.' This has the potential to support new staff to develop a better understanding of their roles and responsibilities to meet children's needs.

The staff team provided a range of skills and experience to the service. Key working arrangements ensured there was consistency in individual children's care across the day. Parents commented, "Staff members have always presented as professional, competent and truly caring, this shows in the way they show they understand my child on a personal level."

We saw staff working well together. We observed examples of communication and team working taking place. Staff supported each other and communicated when leaving a space or attending to a child's needs. Staff were deployed indoors and outdoors to supervise children. We saw that staff were vigilant of children. Staff used registers and updated each other of children arriving in the service, contributing to the safety of children.

Improvements had been made to staff deployment during the lunchtime experience. Staff were with children and supervising children throughout the experience, supporting their health, safety and well-being.

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

Requirements

Requirement 1

By 19 April 2024, the provider must ensure all staff working with children have been safely recruited to the service and procedures include but not be limited to a suitable Protecting Vulnerable Scheme Group record in place and receipt of a minimum of two references, including one from the candidate's previous employer.

This is to comply with Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure staffing is consistent with the Health and Social Care Standards (HSCS) 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).

This requirement was made on 21 March 2024.

Action taken on previous requirement

Staff working with children had a suitable Protecting Vulnerable Scheme Group record.

One staff member did not have a reference from their most recent employer. Two personal character references were in place. We asked the manager to continue to pursue a reference from their most recent employer. This was in place prior to the inspection being concluded.

The requirement had been met. We have made an area for improvement to continue to support recruitment within the service with the receipt of a minimum of two references, including one from the candidate's previous employer. Please refer to 'How good is our leadership?' for further information.

Met - within timescales

Requirement 2

By 31 July 2024 the provider must ensure all staff working with children are registered as appropriate with a regulatory body. This must include but not be limited to undertaking regular monitoring of staff registration with regulatory body Scottish Social Services Council (SSSC).

This is to comply with Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure staffing is consistent with the Health and Social Care Standards (HSCS) 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).

This requirement was made on 21 March 2024.

Action taken on previous requirement

All staff were registered with Scottish Social Services Council (SSSC). One staff member's renewal of their annual declaration was overdue by four days. This was renewed on the same day of inspection after discussing this with the manager.

Management was carrying out monitoring of staff SSSC registration. More robust procedure needs to be in place to include staff members annual declarations.

The requirement had been met. Please refer to 'How good is our leadership?' for further information.

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 support children to achieve their potential, the service should further develop its approach to providing high-quality play, based on children's needs and interests. To achieve this, consideration should be given to:

- reviewing and developing the planning and observation approaches to support children's play and learning.
- staff engage in professional development in observation and curriculum planning approaches that support children's engagement in collaborative play.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'I am supported to achieve my potential in education' (HSCS 1.27) and 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

This area for improvement was made on 21 March 2024.

Action taken since then

Management and staff had reviewed and developed their approaches to planning and observations for children. Staff had received training to support them with the changes and develop their skills, knowledge and understanding.

We made suggestions of how planning processes could be further improved.

We were satisfied the area for improvement had been met. Please refer to 'How good is our care, play and learning?' for further information.

Previous area for improvement 2

To support high quality supervision, interaction, and engagement the manager must review and improve the deployment of staff at lunchtime. This should ensure children's safety and wellbeing and promote opportunities for children's independence.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state, 'People have time to support and care for me and to speak with me.' (HSCS 3.16).

This area for improvement was made on 21 March 2024.

Action taken since then

The manager and staff had reviewed and developed their lunchtime experience by introducing a rolling lunch for children. We did not observe this experience on the day of the inspection as numbers of children attending the service were quieter and children had lunch together at the one table.

We observed staff were sitting with older children at the table. Staff were supervising children and children were engaging in quality conversations with staff.

We were satisfied the area for improvement had been met. Please refer to 'How good is our staff team?' for further information.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	4 - Good

How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good

How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good

How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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