Drumfork Nursery and Family Centre
Day Care of Children

Drumfork Community Centre
Churchill Square
Helensburgh
G84 9HL

Telephone: 01436 268120

Type of inspection:
Unannounced

Completed on:
13 May 2026

Service provided by:
Drumfork Family Centre Limited

Service provider number:
SP2018013242

Service no:
CS2018371781

About the service

Drumfork Nursery and Family Centre is provided by Drumfork Family Centre Limited and works in partnership with Argyll and Bute Council to provide early learning and childcare. The service is registered to provide a daycare of children service to a maximum of 64 children not yet of an age to attend primary school at any one time, of whom:

- no more than 16 are aged under 2
- no more than 20 are aged 2 to under 3
- no more than 28 are aged 3 to those not yet of an age to attend primary school.

The service is based within purpose-built accommodation in the Churchill community in Helensburgh. The accommodation comprises of three large playrooms with adjoining outdoor play areas, a communal space in the centre of the building and toilet and changing facilities for children. The service provides valuable support to the Naval community. The centre is near local bus routes and is within walking distance of several local primary schools.

About the inspection

This was an unannounced inspection which took place on Tuesday 12 May 2026 from 08:30 - 17:00 and Wednesday 13 May 2026 from 08:30 - 17:20. 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 12 children using the service and 10 of their families
- spoke with eight staff and management
- observed practice and daily life
- reviewed documents
- spoke with one visiting professional.

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 the Leadership heading.

Key messages

- Recruitment and retention issues had undermined the leadership team's capacity to progress improvement and build consistent, confident practice. Despite a core of experienced staff, workforce instability had increased reliance on unqualified staff, creating pressures that risked inconsistency in practice and negatively impacted on children's experiences.
- The lack of targeted training and reflective feedback systems limited staff development and weakened the service's ability to deliver consistently high quality experiences and positive outcomes for children.
- Overall, children enjoyed their play experiences alongside their friends and were happy, confident and relaxed within the setting. At times, play experiences lacked sufficient challenge and personalisation, with limited resources and missed opportunities for staff to extend children's learning.
- Overall, staff were caring and responsive. At times, creating a warm, playful environment where children felt secure, valued and emotionally supported, which contributed positively to their wellbeing.

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 play and learn	3 - Satisfactory / Adequate
Children are supported to achieve	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 evaluated these quality indicators as satisfactory/adequate where strengths just outweighed the weaknesses.

The leadership team were keen to improve outcomes for children and families. However, their ability to drive change had been undermined by persistent recruitment and retention challenges, resulting in limited progress against the required improvements. Although they were aware of the required improvements and were clear about what needed to change, it had been difficult to secure sufficient stability within the staff team. As a result, this had undermined the development of staff confidence, knowledge and practice.

While we acknowledged the wider recruitment pressures across the sector in Scotland, the leadership team were optimistic that they had now achieved increased stability within the staff team. With increased staffing in place, leaders hoped to be less reliant on operational cover and better positioned to drive improvement, indicating improved capacity for sustained progress.

Although the vision, values and aims statement had last been reviewed two years ago, leaders recognised the importance of revisiting this with staff and families. This planned review would support reflection on practice, strengthen shared understanding across the team and help ensure families were clear about the philosophy underpinning the service.

The leadership team recognised the challenges of gathering meaningful feedback from families and needed to explore alternative ways of increasing opportunities for families to share their views and contribute to improvement activities. Building staff confidence was recognised as a key factor in strengthening family engagement and supporting more effective collaborative working with children and families. While a small number of staff were confident in observing children's interests and voices to inform planning, leaders acknowledged that this approach was not yet consistent across the team.

Staff wellbeing had been appropriately prioritised, with leaders recognising the importance of supporting staff and valuing their views and contributions. As a result, staff were more settled and positive in their roles, which had begun to contribute to a more constructive team ethos. Leaders recognised that maintaining this focus would be important in further strengthening staff confidence and resilience and in supporting positive working relationships.

Approaches to quality assurance and monitoring had been limited due to constraints on leaders' time. Much of this activity had taken place informally and was not routinely recorded or evaluated. As a result, we were not assured that expected standards were being met, and this required improvement.

Self-evaluation was at an early stage of development. While leaders had begun to consider A quality improvement framework for the early learning and childcare sectors to evaluate the service against relevant quality indicators, this work had not yet been implemented consistently across the setting. Plans to involve staff, children and families, and to reinstate a formal improvement planning cycle, had been delayed to allow staff to build confidence in their roles and to support the wider programme of change required (see area for improvement 1).

While a system was in place to ensure the premises were maintained to a high standard, there was a number of outstanding issues requiring attention at the inspection. These included:

- out of order staff toilets
- a broken extractor fan in the baby changing room
- a pane of glass was cracked at child height in the toddler room door
- several areas did not meet the required standard of cleanliness.

Identified repairs were appropriately directed to the landlord for action; however, progress was often slow. During the inspection, leaders were actively pursuing these matters. Nevertheless, some of the outstanding issues posed potential health and safety risks and required more prompt resolution.

Robust staff recruitment procedures were in place to help ensure the safety of children. Formal induction processes supported new staff to develop confidence and understanding of their roles within the setting. Although these arrangements were occasionally disrupted by staff absence and the need to provide operational cover, leaders were committed to maintaining effective induction to support staff development.

Quality indicator: Staff skills, knowledge, values and deployment

Staff turnover remained relatively high within the team which had impacted on consistency for children and families, through changes to keyworkers and continued reliance on supply staff. The leadership had done their best to keep families updated with the changes to the staff team. Some families commented on the high staff turnover:

"My child told me they would be happy, 'If my other big people didn't all leave me and I had to get all new ones I didn't know'".

"Up until November when there was an entire staff reshuffle the best part was the strong bonds my child had with the staff as my child has been in the nursery since the baby room. My child felt loved and comfortable."

"Continuous turnover of staff makes it difficult for child to bond/feel safe without regular key person."

While a core group of experienced and appropriately qualified staff remained in post, a significant proportion of newer staff were unqualified and inexperienced. We recognised the challenges the leadership team faced in recruiting fully qualified staff within the current workforce context. This situation increased the risk of inconsistent practice and placed pressure on the service's ability to provide a consistently high quality experience for children. The reliance on training and supporting new staff placed additional demands on experienced staff and leaders, which, if not managed effectively, could impact on children's care, learning and wellbeing. This reinforced the need for the development of clear, well-embedded mentoring and support arrangements to ensure staff understood expectations and practice was safe, consistent and responsive to children's needs.

Some staff communicated effectively with one another throughout the day in ways that were responsive and sensitive to children's needs. They worked cooperatively to support proactive supervision and meaningful engagement with children. However, newer staff required support to develop their professional practice and to build confidence in working collaboratively as part of a team.

The provider had facilitated a programme of continuous professional development for staff which was largely delivered through online training. However, this did not sufficiently address the identified gaps in

staff knowledge and skills. Targeted training in areas such as child development, understanding children's behaviour and communicating effectively with children was required to strengthen practice and improve outcomes for children. In addition, there were no systems in place to support staff to reflect on the impact of their learning or to receive formal feedback on their performance. The absence of reflective and evaluative approaches limited staff development and reduced the service's ability to ensure consistently high quality experiences for children (see area for improvement 2).

All staff were appropriately registered with a regulatory body, either the Scottish Social Services Council (SSSC) or the General Teaching Council for Scotland (GTCS), and understood their responsibility to adhere to the relevant professional codes of practice at all times.

Areas for improvement

1. To support improvement, the service provider should ensure that a robust approach to quality assurance, including self-evaluation, is in place and leads to continuous improvement.

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).

2. To support staff development, the provider should:

a) Develop a staff training programme including, but not limited to, child development, understanding children's behaviour and communicating effectively with children.

b) Ensure all staff participate in training relevant to their roles.

c) Reintroduce processes to encourage staff to reflect on their learning and practice and receive feedback on their performance including performance appraisal.

d) Carry out effective monitoring to assess the impact of learning on staff practice and outcomes for children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state 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).

Children play and learn | 3 - Satisfactory / Adequate

Quality indicator: Playing, learning and developing

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

Children and families were warmly welcomed on arrival. Some families chatted comfortably with staff about their children, highlighting the positive relationships that had been developed. At the end of the day, collection arrangements were calm and we observed friendly chats between children, families and staff as they left. Families told us these relationships were important to them and commented:

"The staff always provide a warm welcome, they display genuine interest in my child, they have genuine interactions with my child and the detailed handovers I receive at pick up time tell me they have been invested in my child all day, and they care."

"Staff are pleasant and helpful. Although communication and continuity between staff members/change of hands gets lost sometimes. And there are a lot of staff changes between moves which creates anxiety for my child."

"We feel we have a really good relationship with the staff based on our interactions. They are always honest when providing updates on the day, really friendly and take into account how we parent our child."

"They [staff] are great at updating me on progress and letting me know what's been happening."

Most interactions were positive and supported children. Overall, staff were caring, responsive, respectful and nurturing in their interactions. They engaged at children's level to support communication and play. Staff were keen to celebrate children's achievements. On occasion, some staff could have responded more effectively to children's verbal and non-verbal cues to ensure all children were included in ways that suited their individual needs.

Overall, children enjoyed their play experiences alongside their friends and were happy, confident and relaxed within the setting. They shared their experiences readily and spoke positively about their play, with older children telling us they particularly enjoyed spending time in the garden. Families also reported that their children were happy and valued the opportunities for outdoor play, and commented:

"They have recently renovated the top garden so this is great news."

"They are outside daily during nursery days, which gives my child the support to develop."

"[My child likes] Bubbles in the garden, climbing, using the slide/chute, exploring the toys and tables outside."

All children had daily access to outdoor play which provided a range of opportunities to support physical development through activities such as climbing, running and balancing and sensory play experiences offered opportunities to explore, investigate and make sense of their surroundings through touch, sound, sight, taste and smell. Older children would have benefited from greater choice and influence over when they accessed the outdoor environment.

Some staff demonstrated an emerging understanding of children's individual schemas and recognised the importance of supporting schematic play to promote learning. However, this knowledge was not consistent across the team. Increased staff understanding and wider access to appropriate resources would have enabled staff to scaffold children's learning more effectively.

Play experiences were not always sufficiently personalised or challenging. Although children were able to choose their activities, opportunities were limited by a lack of appropriate resources and effective provocations to spark curiosity, extend thinking or encourage discussion about learning. While most staff were attentive and supportive, there were missed opportunities to build on children's interests and extend learning.

On the first day of the inspection most areas were provided with basic resources, but these needed to be enhanced to support depth, more meaningful play and curiosity and creativity.

While literacy and numeracy were supported through some books, stories and singing, there were limited resources available to support children to explore and develop their literacy and numeracy skills through self-directed play. The inclusion of additional puzzles, measuring equipment, number displays, environmental print and visual supports would have enhanced opportunities to develop children's numeracy, language and problem solving skills. A teacher from the local authority visited weekly to provide additional literacy and numeracy support for children preparing for transition to primary school. This also offered a valuable opportunity for staff to observe effective practice and develop their skills through role modelling.

While we were able to see that children were making some progress in their learning and development, there was insufficient evidence to show that staff were confident with observing and assessing children to evidence and record their progress. The leadership agreed that while there were skilfully recorded observations of children's learning, these lacked consistency across the team.

As noted previously, while some staff held relevant qualifications and had undertaken training aligned to their roles, there was an overall lack of experience and understanding of child development across the team. Further support and targeted training were required to strengthen staff knowledge of child development, appropriate use of language, the provision of more effective learning experiences and informed responses to children's behaviour.

There was no consistent approach to planning for learning across the service to support children to make choices and lead their own learning. Leaders recognised that staff required time to build relationships with the children in their groups and to develop their understanding of child development before introducing more formal planning processes. This would support staff to build confidence in planning learning opportunities that were responsive to children's observed and expressed interests and that effectively scaffolded their learning.

As an interim measure, to mitigate the absence of a formal planning approach, leaders needed to support staff to develop more enabling learning environments. Clearer definition and improved resourcing of learning zones within the playrooms would better support children's development and learning. These areas should be thoughtfully planned to be engaging, accessible and well-resourced, offering rich opportunities for exploration, play and interaction. This would support children to make choices, explore independently and take greater ownership of their learning.

Children are supported to achieve — 3 - Satisfactory / Adequate

Quality indicator: Nurturing care and support

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

Overall, staff were kind, nurturing and attentive to children's emotional needs, offering reassurance and comfort, including cuddles where appropriate, and respecting children's individual routines. They were keen to have fun with children and join in their play which helped children feel secure, valued and emotionally supported, contributing to their wellbeing.

Families were happy with the care their children received and commented:

"[We like] The friendly vibe from all the management team and staff, it's nice to see bonds across the nursery."

"Warm, welcoming and friendly atmosphere with the opportunity for children to truly express themselves. The staff really focus on creating bonds with each individual child."

"[We like] The attentiveness of staff and helping my child to develop, especially language skills."

"I feel very confident and happy leaving my child here with staff."

Transitions from home to the setting were handled sensitively and were tailored to meet the individual needs of each child. Daily transitions were not always managed smoothly and effectively, the leadership team needed to support staff to develop an increased awareness of how transitions can influence children's wellbeing. We identified that mealtime transitions would benefit from some minor adjustments to help maintain a calm and predictable environment for children.

Children enjoyed healthy snacks across the setting. Younger children would have benefited from a more calm, relaxing and sociable environment that supported the development of independence skills. Lunch was offered in separate sittings. Overall, lunchtime was a positive experience, with children enjoying a healthy meal and being provided with some opportunities to build independence. Arrangements for staff to spend more time sitting at the table with children could be strengthened, as this would help facilitate richer interactions, conversations and relationship-building during the meal.

Arrangements were in place to allow children to access their own bottles of water throughout the day, supporting their hydration and contributing positively to their overall wellbeing, concentration and comfort. However, some staff needed to ensure that these bottles remained accessible at all times.

Staff demonstrated an understanding of children's health needs, allergies and dietary requirements, ensuring these were met consistently. This reflected adherence to regulatory expectations around safeguarding children's health and wellbeing, and contributed to a safe, inclusive environment where children's individual needs were effectively supported.

Sleeping arrangements were in line with best practice guidance. However, leaders should ensure that all staff are familiar with current guidance on the safe use of slings, as published by The Lullaby Trust and RoSPA (The Royal Society for the Prevention of Accidents), to support safe practice and protect children's wellbeing. While some areas were available to offer children opportunities for rest and relaxation, further consideration could be given to creating dedicated, softer spaces within the playrooms. This would enhance the environment and provide additional support for children's emotional wellbeing.

Staff ensured that children wore sunhats and sunscreen, with applications being regularly reapplied throughout the day. This reflected best practice guidance for sun safety and contributed to protecting children's health and wellbeing during outdoor play. However, staff needed to adhere to infection control guidance when applying sunscreen.

Procedures for the safe storage and administration of medication were in place. However, these did not fully align with the most recent best practice guidance. In particular, consent forms did not clearly outline full details of medication received. Updating documentation to reflect current guidance would strengthen practice and ensure children's health needs are consistently and safely met.

Staff worked collaboratively with families to capture and record information about children's health, safety and wellbeing in their care plans. While the approach to care planning had improved since the previous inspection, plans did not always clearly identify how specific wellbeing needs would be addressed or enable progress and achievements to be tracked over time. The leadership team recognised that a more focused and consistent use of care plans would strengthen staff understanding of children's individual needs and support more effective practice.

Children's personal care needs were not always met sensitively and discreetly, which at times compromised their dignity and comfort. As noted earlier, improved staff training to support more effective communication with children would help to strengthen practice in this area.

The leadership team worked in partnership with staff, families and external agencies to ensure children requiring additional support for learning received targeted support tailored to their needs. This collaborative approach helped children make progress and supported them to reach their full potential.

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 improvement, the service provider should ensure that a robust approach to quality assurance, including self-evaluation, is in place and leads to continuous improvement.

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 20 December 2023.

Action taken since then

While some initial work had been completed to develop a more robust approach to quality assurance and self-evaluation, this had not progressed sufficiently to support continuous improvement.

This area for improvement has not been met.

Previous area for improvement 2

This area for improvement was made following a complaint investigation.

To support children and parents when concerns are raised about the service, the provider should review their practice for investigating complaints or concerns.

In doing so, at a minimum, consideration should be given to:

• Ensuring communication with parents is meaningful, accurate and clear.

This is to ensure care and support is consistent with Health and Social Care Standard 4.23: I use a service and organisation that are well led and managed.

This area for improvement was made on 9 October 2024.

Action taken since then
While no complaints had been received at the service, a new procedure had been developed to ensure appropriate communication with families throughout the process.

This area for improvement has been met.

Previous area for improvement 3

This area for improvement was made following a complaint investigation.

To support children and parents when accident and incidents occur in the service, the provider should review their practice for reporting.

In doing so, at a minimum, consideration should be given to:

• Ensuring parents are provided with accurate information that is reflective of their child's health, wellbeing and support needs when the accident or incident happened.

• Ensuring staff follow the service's policy and procedure when reporting accident and incidents.

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: 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.

This area for improvement was made on 9 October 2024.

Action taken since then
We sampled accident and incident reports on the online portal and had no concerns with the content of these. Staff were made aware of the procedure for report accidents and incident at induction.

This area for improvement has been met.

Complaints

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

You can also see our website for details of complaints about the service which have been upheld. www.careinspectorate.com

Detailed evaluations

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

Children play and learn	3 - Satisfactory / Adequate
Playing, learning and developing	3 - Satisfactory / Adequate

Children are supported to achieve	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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