Peerie Foxes Ltd
Day Care of Children

The Salvation Army Mission Hall
45 North Road
Lerwick
SHETLAND
ZE1 0NT

Type of inspection:
Unannounced

Completed on:
4 June 2026

Service provided by:
Peerie Foxes Ltd

Service provider number:
SP2019013296

Service no:
CS2019374246

About the service

Peerie Foxes Ltd is registered to provide a care service to a maximum of 30 children not yet attending primary school at any one time. No more than 10 are aged under two years; no more than 10 are aged two years to under three years.

Peerie Foxes Ltd is situated in the former Salvation Army Mission Hall in a residential area of Lerwick. The service has sole use of the building. Older children were cared for in a large playroom with younger children being cared for in two adjoining rooms. Children had access to toilet facilities and an enclosed outdoor play area.

There was up to 17 children present at the time of the inspection.

About the inspection

This was an unannounced inspection which took place on 03 June 2026 between 12:50 and 17:50 and 04 June 2026 between 08:15 and 13:30. 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:

- spent time with children using the service
- spoke with three of their parents/carers
- received 10 responses to our request for feedback from parents and staff
- assessed core assurances, including the physical environment
- spoke with staff and management
- observed practice and children's experiences
- 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, no improvements were identified relating to core assurances.

Key messages

- Children were happy, confident and engaged in a wide range of meaningful play experiences.
- Staff built warm, nurturing relationships that helped children feel safe, secure and valued.
- Families were included well and felt listened to, with good opportunities to be involved in the setting.
- Both the indoor and outdoor environments required further development to better support children's learning, engagement and independence.
- Leadership was good, with a supportive manager and team who worked well together and felt involved in decisions.
- Improvements were being made, but better evaluation was needed to show the impact on children's outcomes.

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

Quality Indicator: Leadership and management of staff and resources

We evaluated this key question as **good,** where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

The setting had recently reviewed its vision, values, aims as part of involving staff, parents and children. This helped ensure that everyone felt included and that the shared direction reflected the views of the whole community. These were displayed throughout the service, and staff felt they supported their work. However, they were not always fully embedded in daily practice in a manner that children could clearly understand, particularly across different age groups. The setting could consider making the vision, values and aims more meaningful in everyday experiences for children.

The service was well led by a motivated manager and practitioners who created a positive and supportive team. Staff said they worked well together, felt supported and were included in decision-making. Regular staff meetings and support and supervision sessions helped staff feel listened to and involved in changes. This created a good sense of teamwork and shared responsibility across the setting.

Parents were actively involved in self-evaluation, and their views were valued. Questionnaires were used to gather feedback, and parents said they felt listened to, for example in discussions about the menu where changes had been made. Events such as "FOMO" (family opportunity to meet others) nights allowed parents to see developments and understand the setting's work, including outdoor improvements. It was suggested that sharing response rates and using a clearer "You said, we did" approach would improve communication further. The setting worked well with families, supporting ongoing improvement and parents told us they were involved in a meaningful way to develop the service.

The setting had a clear improvement plan which was shared with parents and updated regularly. It focused on key areas such as the environment, medication audits, staffing and induction. Staff were involved in self-evaluation through meetings and used the quality framework to support improvements. The setting shared what had been done, such as updates to personal plans and outdoor changes however, reflection on the impact of these improvements was limited. This made it harder to measure how changes had improved outcomes for children and families. Therefore, improvement planning was clear, though evaluation needed to be strengthened.

Staff training had supported practice well. Staff spoke about using ideas from training and research to improve areas such as the outdoor environment, including resources to support children's emotional development. Training also helped staff better understand children's behaviour and needs. Senior staff were willing to take on more responsibilities, and the manager was considering how to support further professional development. Staff were developing well, with good opportunities for increased leadership.

Quality assurance processes were developing, with plans to introduce a quality assurance calendar to support audits, monitoring and supervision. Policies had been reviewed and were mostly up to date, though minor changes were still needed. Staff described supportive monitoring practices, including feedback given during practice and discussed further during supervision. Medication audits were highlighted as an area to simplify. Therefore, quality assurance systems were improving, though further structure and consistency were required.

Recruitment and induction processes were mostly effective. Safer recruitment practices had been followed, and the national induction resource supported staff to reflect and develop in their roles. Induction records were in place, although some lacked detail about expectations of practice. Improving this would help staff better understand their roles and support consistency. Overall, recruitment and induction were appropriate, though documentation could be clearer.

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

Quality Indicator: Children experience high quality spaces

We evaluated this key question as **adequate/satisfactory.** While the strengths had a positive impacted on outcomes for children, key areas need to improve.

The setting had taken steps to create a welcoming environment for children and families. The foyer displayed staff photos and useful information such as menus and learning updates, helping families feel informed. Within the rooms, plants, rugs and cushions created a homely feel, while children's work and family photos supported a sense of belonging. The environment was warm and welcoming, supporting positive relationships.

The baby room provided a safe and generally inviting space. Children had room to move and access resources independently. Staff took children outdoors or on walks in buggies to ensure access to fresh air. In the older children's room, the space was organised into different areas which supported children to choose activities. Since the last inspection, some areas, such as the sand tray and role play, had improved and were now well resourced with a variety of materials, including real-life items. A cosy area allowed children to relax with soft furnishings and books. However, the construction area was less inviting, with limited resources and no loose parts to extend play. Creative resources had improved but were not always easily accessible. While parts of the environment supported independence well, other areas needed further development. An area for improvement was made at the previous inspection and remains in place **(see section 'What the service has done to meet any areas for improvement we made at or since the last inspection' of this report).**

The outdoor space was still an area for development. There were some positive features such as mark making opportunities, signs and a mud kitchen. However, several areas were not fully inviting or well resourced. For example, the mud kitchen had limited accessible materials and seating areas were not set up to encourage use. Children were mainly drawn to water play where resources were available. The outdoor environment had potential but required further development to fully support learning. An area for improvement was made at the previous inspection and remains in place **(see section 'What the service has done to meet any areas for improvement we made at or since the last inspection' of this report).**

There were opportunities to involve children more in developing the outdoor space. While some progress had been made, giving children more responsibility and encouraging their ideas would help them feel more involved and engaged. Children's voices were considered, though this could be strengthened.

The setting had systems in place to support children's safety. Staff monitored attendance and communicated well to ensure supervision. Risk assessments were completed daily, although these were not detailed enough to clearly guide staff in managing risks. Positive practice was seen where children were supported to understand safety through discussion and examples. Therefore, safety systems were in place, though risk assessments needed to be clearer to guide staff more effectively.

Infection prevention and control was generally effective. Cleaning routines were followed, and children were supported to wash hands. Nappy changing was carried out respectfully. However, there were some inconsistencies, such as hand washing after certain activities and the use of outdoor buggies indoors. Accident records were completed, though parent signatures were not always recorded. Overall, hygiene practices were good but required more consistency.

The setting supported inclusion and diversity well. Staff adapted communication with families, including using different languages where needed. Children regularly accessed the local community, helping them develop a sense of belonging. Information was managed securely, with appropriate systems in place. The setting promoted inclusion and managed information effectively.

Children play and learn 4 - Good

Quality Indicator: Playing, learning and developing

We evaluated this key question as **good**, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

The setting used relevant theory to support children's development. The manager regularly linked practice to theory during staff meetings, helping staff understand why they used certain approaches. For example, discussion around 'Realising the Ambition' supported play and learning and increased staff awareness. This helped staff plan experiences with a clearer understanding of how children learn.

Children were happy, confident and engaged in their play. They moved freely between indoor and outdoor spaces. Babies had a designated outdoor area which meant their play wasn't interrupted by older children. Children showed good imagination, for example pretending to be fire fighters, drawing fires with chalk and using water to put them out. Others explored painting using a range of tools and spent time at the water tray developing their problem-solving and fine motor skills. These experiences supported curiosity, creativity and early literacy and numeracy skills.

Experiences supported children to develop skills for lifelong learning. Staff encouraged conversation during play, for example when exploring mini-beasts and counting legs. Children showed independence by hanging up their artwork and dressing themselves for outdoor play. There were some opportunities to explore digital technology through role play resources, though these were limited. This had been identified as an area for further development. Children developed key life skills, though digital learning could be strengthened further.

The setting offered some opportunities for family learning. "FOMO" sessions gave families a chance to come into the setting and see how their children learned through play. These sessions helped parents understand the importance of play and supported positive relationships between home and the setting. Children were included, which strengthened connections further. Partnerships with families were supported, though opportunities could be extended.

Staff interactions were mostly positive and supported children's learning. Staff observed children carefully and joined their play when appropriate, using comments and questions to extend learning. In the baby room, staff supported communication and early number skills through simple interactions. At the water tray, staff showed interest and provided support when needed. Children often invited staff into their play, showing secure relationships. Therefore, staff interactions were a strength and supported children's development well.

Planning involved all staff and included both planned ideas and children's interests. Plans were displayed and adapted as children's interests developed. The introduction of a floor book had been positive and helped share learning with parents. However, it was important to ensure this supported next steps and was not only used to record experiences. Overall, planning was responsive and inclusive, though its use for tracking progress could be improved.

Observations were shared with families and used to support planning. These were mainly carried out in groups, with staff working together to build a picture of learning. Parents were invited to comment, and children were encouraged to share their ideas. There were plans to develop individual learning journeys. The manager should use the developmental overviews to create a clear tracking and monitoring system, helping to identify gaps in learning and ensure children are appropriately supported and challenged.

The setting worked with families and other professionals to support children's needs. Care plans showed involvement from other services, and meetings were used to ensure the right support was in place. This helped children receive appropriate help to make progress. Partnership working supported children to reach their full potential.

Children are supported to achieve — 4 - Good

Quality Indicator: Nurturing care and support

We evaluated this key question as **good,** where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Staff were warm and nurturing in their interactions with children. Children appeared comfortable and relaxed and confidently approached staff when they needed help. Staff responded well to children's cues, for example supporting a child to use scissors safely by holding paper for them, which brought clear enjoyment and a sense of achievement. Children and staff used each other's names, and when children were upset, staff responded quickly with care and reassurance at the child's level. Relationships were positive and helped children feel safe and secure.

Children were familiar with daily routines, including snack, lunch and hand washing. These routines were generally well supported, with children washing their hands before and after eating. However, there were opportunities to encourage more consistent hand washing in small groups, particularly at snack time. Sleep routines reflected children's needs and parental wishes, though some children slept in buggies, which did not fully reflect safe sleep guidance. This had the potential to be reviewed with parents to support safer practice. Routines were well established, though some areas needed to be strengthened.

Transitions throughout the day were calm and supportive. Staff gave children clear warnings about what was happening next, helping them prepare for changes in routine. Consistent relationships with staff supported children to feel secure, and strong bonds were observed. Although visual supports were not always used, children did not appear unsettled. As a result, transitions were smooth and supported children's wellbeing.

The setting had a range of processes in place to support children's safety. Staff were clear about their responsibilities for child protection and understood what action to take if concerns arose. Medication was stored safely, although some inconsistencies were noted around recording, such as missing information and reviews not always taking place within agreed timescales. Careful attention to these details would strengthen safety further. Therefore, while safety practices were mostly good, some improvements were required to ensure consistency.

Mealtimes were mostly positive experiences for children. Staff supported routines well, encouraging hand washing and promoting independence through self-serving and clearing away. The atmosphere was calm and sociable, with children engaged in conversation and enjoying their food. Staff sat with children and offered support where needed, although in some cases, particularly with younger children, interactions were reduced when staff were focused on tasks. Rolling snack allowed children flexibility and did not interrupt play. Overall, mealtimes were nurturing and supported independence, though consistency in interactions could be improved.

Personal planning was effective and collaborative. Plans were in place for all children and were regularly reviewed with parents to reflect individual needs and interests. While documentation was detailed and supported tailored care, streamlining information would improve accessibility for staff. Support plans were in place where needed and showed strategies used at home and in the setting, supporting consistency. Some information could have been clearer to ensure all staff fully understood how to support individual needs. Therefore, personal planning supported children well, though improvements in detail and recording were needed.

The setting had positive relationships with families and created a welcoming environment. Staff knew children and families well and shared information at drop-off and pick-up times. Parents said they had a good relationship with staff and felt welcome and valued. One parent said, "The staff know and love all the bairns. They know the parents too. Lots of feedback is given. I feel we're part of a nursery community." Another commented, "The staff are really friendly and easy to talk to. I like the FOMO events, particularly as I moved to Shetland, so it's been a nice way to meet other parents and make friends." These helped families understand children's experiences and strengthened connections. Overall, the setting had strong partnerships with families, supporting a sense of community.

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 ensure children experience quality facilities the manager and staff should ensure that the environment is clean, tidy and well resourced. This should include but not be exhaustive to:

• Reviewing the outdoor space to ensure it is inviting and extends opportunities for outdoor learning.

• Reviewing the indoor environment to ensure it is well resourced with easy access to materials such as a variety of mark making, books and craft resources to support children's play and learning.

• The environment should be tidy to ensure this doesn't impact appropriate cleaning and children's experiences.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HSCS 5.21) and 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22)

This area for improvement was made on 22 July 2025.

Action taken since then

The outdoor space was still developing. There were some positive features however, several areas were not fully inviting or well resourced. Children were mainly drawn to areas where resources were available. The outdoor environment had potential but required further development to fully support learning.

Indoors some areas were well resourced with a variety of materials, including real-life items. However, other areas were less inviting, with limited resources to support children's play and learning. Creative resources were available but not always easily accessible. While parts of the environment supported independence well, other areas still required further development.

In general, the environment was now tidy meaning staff were able to maintain good levels of infection, prevention and control.

While progress had been made, this area for improvement had not yet been met and will remain in place.

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	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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