Puddleduck Nursery
Day Care of Children

Kirkfield
Dunkeld
PH8 0AE

Telephone: 01350 727117

Type of inspection:
Unannounced

Completed on:
27 August 2026

Service provided by:
Jill Rogers

Service provider number:
SP2024000110

Service no:
CS2024000246

About the service

Puddleduck Nursery is registered to provide a daycare of children service to a maximum of 20 children at any one time. Of those 20 no more than four are aged zero to under two years, no more than 16 are aged two to an age not yet attending primary school, with a maximum of five aged two to three years old. At the time of the inspection 27 children were registered with the service.

The service is provided from a converted building in the town of Dunkeld, Perthshire, and is close to local amenities including the local school, parks and shops. The setting consists of one main play room with two adjoining play spaces. Toilets and a nappy changing area are located off the main play room. A purpose-built cabin with nappy changing facilities is used to provide care to children aged zero to two years. Children have access to outdoor spaces at the front, rear and side of the service.

About the inspection

This was an unannounced inspection which took place on 25 and 26 August 2026. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered throughout the inspection year.

In making our evaluations of the service we:
- spent time with children using the service;
- received feedback from three families through an online survey;
- spoke with two families during our visit;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents.

As part of this inspection, we assessed 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 'Leadership' and 'Children are supported to achieve'.

Key messages

- A more consistent staff team, with a range of skills, knowledge and experience, helped provide positive experiences for children and continuity in their care.
- Weaknesses in leadership, governance and oversight meant regulatory requirements were not consistently understood or met. Quality assurance processes were not robust enough to identify and address concerns, contributing to poor outcomes for children's health, safety and wellbeing.
- Child protection and safeguarding procedures were not robust. Concerns were not always appropriately assessed, recorded or reported, placing children at significant risk of harm.
- Children were cared for in a bright, welcoming and homely environment, with well-organised indoor and outdoor spaces that promoted wellbeing, choice, independence and opportunities to follow their interests.
- Children were happy, confident and secure, benefitting from positive relationships with staff and their peers.
- Medication procedures were not sufficiently robust to ensure children's health needs were consistently met.

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	2 - Weak
Children thrive and develop in quality spaces	4 - Good
Children play and learn	4 - Good
Children are supported to achieve	2 - Weak

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

Leadership 2 - Weak

Quality indicator: Leadership and management of staff and resources

We evaluated this key question as weak. While we identified some strengths, these were compromised by significant weaknesses.

Staff provided a warm and welcoming ethos. This helped to build positive connections with children and families. Families spoke positively about their relationships with staff and praised the home-from-home atmosphere and nurturing care provided. The service's vision and values focused on creating a homely and caring environment. Staff reflected these values through caring and responsive interactions.

At the time of inspection, the service was not complying with conditions of registration. Care was being provided to school-age children, which the service is not registered to deliver. This demonstrated a significant weakness in the provider's understanding of their legal responsibilities and regulatory requirements. Although leaders addressed the issue and took corrective action, earlier and more effective oversight may have prevented the impact on children and families. The necessary changes resulted in some children losing access to care within the service. This caused disruption and required families to make alternative childcare arrangements at short notice.

Leadership and management arrangements were not effective in ensuring compliance with regulatory requirements or maintaining high-quality outcomes for children. Quality assurance processes were not robust enough to identify and address concerns in practice and oversight of key aspects of the service was insufficient. This resulted in poor practice in relation to children's health, safety and wellbeing (see Requirement 1).

Child protection procedures were not robust. Where concerns had been identified, these had not been appropriately actioned. The approach to child protection left children vulnerable and at significant risk of harm. The provider must ensure that all protection concerns are appropriately assessed, recorded and reported without delay, and that all staff fulfil their responsibilities to safeguard children (see Requirement 2).

Since the previous inspection, changes to staffing provided more consistency for children and families. Children benefitted from staff with a range of knowledge, skills and experience. Through practice reflections and self-evaluation, the team were beginning to make improvements to play and learning. Staff spoke positively about their involvement in developing the service. Champion roles promoted shared leadership and encouraged staff to contribute ideas and lead areas of practice. This created a culture where staff felt valued and invested in continuous improvement.

The provider was beginning to develop their recruitment procedures, with key pre-employment checks, including references and PVG checks, being obtained before individuals commenced employment. However, significant gaps remained in the recruitment process. Application forms and interviews had not been completed to assess candidates' suitability. The provider should further develop recruitment procedures in line with safer recruitment guidance. This would ensure all stages of the recruitment process are completed to support the selection of staff who can meet the needs of children. Strengthening this would promote children's safety and wellbeing. This was an area for improvement made at the previous inspection and will continue (See 'What the service has done to meet any areas for improvement we made at or since the last inspection).

Requirements

1. By 04 December 2026 the provider must develop their understanding of their regulatory responsibilities and implement effective governance, quality assurance arrangements and oversight to ensure the service operates safely, meets regulatory requirements and delivers positive outcomes for children. To do this, the provider must at a minimum:

a) ensure the service operates at all times within the conditions of its registration;

b) develop leaders' understanding of their legal and regulatory responsibilities;

c) implement robust quality assurance and auditing systems to identify, monitor and address concerns in practice;

d) ensure effective oversight of all aspects of the service, including children's health, safety and wellbeing.

This is to comply with Regulation 4(1)(a) 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 which state:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

'I use a service and organisation that are well led and managed' (HSCS 4.23).

2. By 04 December the provider must ensure children are safe and protected from harm through the effective identification, assessment, recording, reporting and management of child protection concerns. To do this, the provider must, at a minimum:

a) ensure all child protection and wellbeing concerns are appropriately assessed and acted upon without delay;

b) ensure child protection concerns are accurately recorded and reported in line with local and national child protection procedures;

c) ensure staff are clear about their individual and collective responsibilities for safeguarding children and take appropriate action when concerns are identified;

d) implement effective oversight and quality assurance processes to monitor child protection practice and ensure concerns are managed appropriately.

This is to comply with Regulation 4(1)(a) 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 which state:

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

Children thrive and develop in quality spaces — 4 - Good

Quality indicator: Children experience high quality spaces

We evaluated this quality indicator as good. This means that there were important strengths within the setting's work; however, some aspects could benefit from improvement.

Children were cared for in a bright, welcoming and clean environment. Soft lighting and natural materials contributed to a calm and homely feel. Displays were developing to include some of the children's family photographs and their comments. Staff shared plans to continue to add children's artwork and personal photos, and we would encourage them to develop these. This would contribute to children's sense of belonging and connection to the service.

Spaces provided ample space to support children to play comfortably within groups or independently. Resources were organised and accessible to children, supporting exploration and engagement. Cosy areas provided opportunities for children to rest, relax and enjoy quieter experiences. This supported children to make choices about their play, follow their interests and engage in experiences at their own pace.

Improvements were continuing within the outdoor environment, enhancing the quality of spaces and resources available to children. Children had regular opportunities to access outdoor learning experiences and engage in a range of play and learning. Free-flow access between the indoor and outdoor environments provided children with choice and control over where they played.

At the previous inspection, an area for improvement had been identified to ensure the environment was kept safe through effective risk assessments and maintenance. We found that progress had been made in this area. Concerns relating to cleanliness and infection prevention and control (IPC) had been addressed, and systems were in place to monitor and maintain a safe, clean environment for children. Ongoing risk assessments informed daily practice, ensuring children could access experiences in a safe and supported way. As a result, children benefitted from a setting that was safer, hygienic and better able to support their health and wellbeing.

Staff engaged with children in regular discussions about keeping themselves safe. For example, during an obstacle course and climbing experience children were encouraged to consider how to manage risks within their play and learning. This supported children to develop an understanding of their own safety and make informed choices.

Children benefitted from a generally secure environment. Boundary fencing, visitor supervision arrangements and secure entry systems helped to protect children and promote their safety. We discussed that while the lock on the entry gate was effective when used, there were occasions when visitors did not consistently close the gate after entering or leaving the premises. Staff were vigilant in monitoring access to the setting and took prompt action when required. However, further consideration could be given to introducing additional control measures to minimise this risk. This would strengthen existing safety arrangements, reduce reliance on staff intervention and help ensure children continue to be protected within a secure environment.

Children play and learn 4 - Good

Quality indicator: Playing learning and developing

We evaluated this quality indicator as good. This means that there were important strengths within the setting's work; however, some aspects could benefit from improvement.

Children were confident within their environment and appeared happy. They had developed friendships and close attachments with staff, which supported their emotional wellbeing. Most of the session provided free play opportunities, allowing children to investigate their ideas and explore their curiosities. This respected children's choice and allowed them to engage in experiences that were meaningful and fun.

On occasion planned group experiences were not always effective in supporting children's learning. This resulted in some children becoming restless and disengaged. When naturally forming group experiences occurred, these were more effective. During these, staff followed children's interests, used high-quality interactions to extend learning and respected children's choice about whether to participate. Children appeared engaged and enjoyed being involved at their own pace. These experiences provided meaningful opportunities for communication, learning and social interaction. Further consideration could be given to how group times are planned to reflect children's interests, levels of engagement and individual stages of development.

Children benefitted from a range of opportunities to develop their literacy, language and numeracy skills. Stories, rhymes and songs were included as part of daily routines, and staff supported language development by modelling and extending vocabulary during play. Resources encouraged sorting, counting and measuring, with staff using mathematical language to support early numeracy skills. This helped children to develop their communication, language and early mathematical skills through meaningful, play-based experiences.

Staff interactions were warm, respectful and responsive. They responded sensitively to younger children's non-verbal cues and were attentive to children's requests. This helped to sustain engagement and extend learning. For example while children explored raindrops outdoors, staff responded to their interest and used interactions to encourage curiosity and exploration. This helped children feel valued, listened to and involved in their play and learning. While some staff used open-ended questions effectively to promote children's thinking, greater consistency would encourage deeper engagement and extend children's learning throughout the day.

Planning for children demonstrated a good understanding of their individual interests and learning needs. Observations of children's play were meaningful and used to identify achievements, monitor progress and inform next steps in learning. Tracking systems supported staff to identify where children may benefit from additional support. This helped to ensure experiences were responsive to their developmental needs. Children's views were gathered through approaches such as voting systems and floor books, providing opportunities to influence their play and learning. Families were supported to share in their children's learning through an online app, with information from home used to inform planning and promote an individualised approach to children's development

Children are supported to achieve — 2 - Weak

Quality indicator: Nurturing care and support

We evaluated this key question as weak. While we identified some strengths, these were compromised by significant weaknesses.

Staff provided warm, kind and compassionate care, helping children feel safe and develop secure, positive relationships. As a result, children were settled, confident and comfortable in their environment. Staff responded sensitively to children's individual needs and preferences, taking time to offer reassurance when needed. While interactions were nurturing, transitions, particularly around lunchtime, could be further developed to ensure children consistently experience a responsive and child-centred approach.

Children enjoyed opportunities to sit and eat with friends during mealtimes and were supported to develop independence through self-serving some of their food. While staff remained close by to support children's safety and wellbeing, there were times they became task-focused. This reduced opportunities for meaningful interactions. By increasing children's involvement in preparing and setting up for mealtimes and encouraging staff to sit alongside them, the service could further support inclusion and social interactions.

Children's health and wellbeing were not consistently safeguarded due to weaknesses in medication management. Procedures were not robust and did not consistently ensure information about children's health and medication needs was accurate and up to date. Inaccurate records and gaps in staff understanding of children's current medical needs placed children at risk of not having their healthcare needs appropriately met (see Requirement 1).

Children's personal plans had been developed with families and included information about children's preferences, routines and key health and wellbeing needs. This supported staff to understand children as individuals. While most personal plans had been reviewed within required timescales, this was not consistent for all children. The service should ensure all plans are reviewed regularly to keep information current and accurate. Personal plans should also be further developed to include clearer strategies for meeting children's individual needs. This would support more consistent and personalised care (see Area for improvement 1).

Families were warmly welcomed into the service, with staff taking time to share information about children's days. Feedback from families highlighted positive relationships with staff and effective communication. One family shared, "I'm always kept well informed about my child while they are at nursery, the staff are all lovely and nothing is ever an issue, always on hand to answer any questions and my child has a good relationship and feels comfortable with them all". Another family told us, "They couldn't be more warm and welcoming and I feel they are all genuinely caring towards the children". This helped build positive connections with families, providing reassurance and confidence in the care and support their child received.

Requirements

1. By 04 December 2026 the provider must ensure children's health, wellbeing and safety are protected through the effective management of medication and healthcare needs.
To do this, the provider must, at a minimum:

a) ensure accurate, up-to-date information is maintained about children's health and medication needs;

b) ensure healthcare plans clearly reflect children's current medical needs and are regularly reviewed and updated;

c) ensure medication required to meet children's assessed healthcare needs is available within the service and managed appropriately;

d) ensure staff are aware of, understand and can respond to children's individual healthcare needs;

e) implement robust monitoring and quality assurance systems to ensure medication management and healthcare records are accurate and effective.

This is to comply with Regulation 4(1)(a) 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 which state: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

Areas for improvement

1. To ensure children receive consistent, personalised care that meets their individual needs, the provider should review all personal plans within required timescales to maintain current, accurate and meaningful information. Plans should clearly identify children's individual needs and the strategies staff use to meet them, so care and support can be provided consistently.

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

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 consistently positive outcomes and staff have the right skills to meet their needs, the provider should strengthen the approach to quality assurance.

This should include, but is not limited to:

- reinstating and carrying out regular observation and monitoring of staff practice
- reviewing staffing levels to ensure they consistently meet the needs of children
- assessing the skill mix within the team to ensure staff are equipped to meet children's individual needs.

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 4 March 2026.

Action taken since then

Since the previous inspection, increased staff consistency and staffing levels had improved continuity for children and families. Children benefitted from staff who brought a range of knowledge, skills and experience to their roles.

The team had begun to use practice reflection and self-evaluation to identify where improvements to play and learning could be made.
This area for improvement has been met.

Previous area for improvement 2

To protect children and promote their wellbeing, the provider should ensure that recruitment procedures are aligned with best practice guidance, so that only suitably skilled and appropriate individuals are employed within the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that:
'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

This area for improvement was made on 4 March 2026.

Action taken since then

The provider had begun to strengthen recruitment procedures, with key pre-employment checks, including references and PVG checks being completed before staff commenced employment. However, significant gaps remained within recruitment processes. Application forms and interviews had not been consistently completed, meaning there was limited evidence to demonstrate how candidates' suitability, skills and experience had been assessed prior to appointment.

The provider should continue to develop recruitment procedures in line with safer recruitment guidance to ensure all stages of the recruitment process are completed and appropriately recorded.

This area for improvement has not been met and will continue.

Previous area for improvement 3

To promote children's wellbeing and to maintain a safe environment, the provider should ensure that regular and comprehensive assessments of all areas of the environment are carried out. This would support to identify potential risks and enable prompt action to be taken, including essential maintenance.

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

This area for improvement was made on 4 March 2026.

Action taken since then

We found that positive progress had been made in this area. Concerns relating to cleanliness and infection prevention and control (IPC) had been effectively addressed, and systems were in place to support a safe, clean and hygienic environment for children.

Ongoing risk assessments informed daily practice and helped staff identify and manage potential hazards, supporting children to access experiences safely.

This area for improvement has 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	2 - Weak
Leadership and management of staff and resources	2 - Weak

Children thrive and develop in quality spaces	4 - Good
Children experience high quality spaces	4 - Good

Children play and learn	4 - Good
Playing, learning and developing	4 - Good

Children are supported to achieve	2 - Weak
Nurturing care and support	2 - Weak

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