

Little Stars Alloa Day Care of Children

The Pleasures Alloa West Alloa FK10 1TD

Telephone: 01259 720 142

Type of inspection:

Unannounced

Completed on:

1 October 2025

Service provided by:

Little Stars (Stirling) Limited

Service no:

CS2011299472

Service provider number:

SP2011011652



About the service

Little Stars Alloa is situated within a business park near Alloa town centre. Children were cared for in designated playrooms and had access to large outdoor areas.

The service is in partnership with Clackmannanshire Council and is registered to provide care to a maximum of 98 children not yet attending primary school at any one time.

The outdoor space has been taken into account when agreeing the maximum number of children aged three to under school age. Children must have access to the outdoor space at all times.

About the inspection

This was an unannounced inspection which took place on 30 September 2025 and 01 October 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:

- · observed practice and daily life
- · reviewed documents
- · spoke with the children using the service
- spoke with staff and the management team
- received and reviewed twenty five completed questionnaires, eighteen from family members and seven from staff, we spoke with two family members during the inspection
- assessed core assurances, including the physical environment.

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.

During this inspection we 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

Staff in all playrooms supported and nurtured children through their daily experiences and routines.

Responsive planning systems meant children were engaged in their play and enriched their play and learning.

Leaders and staff worked collaboratively together with a shared commitment to continuous improvement, and this was having a positive effect on outcomes for all.

Children's wellbeing was supported through safe recruitment and effective staff induction and mentoring programmes.

The manager had created a comprehensive training action plan. This meant training opportunities were aligned with the specific needs of the service and starting to address any gaps in staff knowledge and skills.

Children were kept healthy as infection, prevention and control systems had improved.

Children in the toddler and pre-school playrooms would benefit from the provision of quality resources being enhanced. For example, additional real-life experiences, loose parts and natural materials would inspire children's imaginative play and curiosities further.

Leaders should support staff to ensure observations are regularly shared with families and children's next steps in learning are developmentally appropriate and measurable.

Children were well supported during transitions, both from home to nursery and between playrooms.

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 | 4 - Good |
| 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

We evaluated this heading as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Quality indicator: Leadership and management of staff and resources

The manager was relatively new to their role, they were visible and had built positive relationships with staff, children, and most families. The staff team had undergone significant changes and despite their short time in post, the manager had successfully created a positive ethos. Staff morale, knowledge, and skills had improved; they had worked hard to meet one requirement made during a complaint's investigation and five areas for improvement made at the previous inspection. This told us, leaders and staff worked collaboratively together with a shared commitment to improving outcomes and continuous improvement. Further information can be found under the section 'What the service has done to meet any requirements or areas for improvement we made at or since the last inspection.' Families told us, 'The new management team are working hard to create and develop a more professional ethos and culture across the nursery,' 'I think the manager has identified areas of improvement and this will take time so it will be interesting to see if changes are maintained, but so far so good' and 'Since the introduction of the new management team, the nursery has undergone significant positive change'.

At the time of inspection, leaders were actively engaging families, staff, and children in shaping the service's vision and values. Meaningful consultation empowered stakeholders to share what mattered to them. This told us the service valued the views and opinions of all. We agreed once finalised; a shared vision and values would further support staff in meeting the needs of children and families. Furthermore, it would contribute to everyone feeling respected and included.

Improvement plans were realistic, achievable, and were aligned with the needs of the service. Leaders demonstrated a good understanding of robust quality assurance and self-evaluation processes to influence meaningful and positive change. A range of systems were used effectively to gather and analyse data. This meant leaders routinely monitored their progress against priorities and assessed the impact of changes.

Most staff were reflective and confident in discussing their role in sustaining positive outcomes. Regular staff meetings and opportunities for professional dialogue supported their understanding of service developments. Since the last inspection, key areas such as child protection and safeguarding, supervision of children, personal planning, infection control, and recruitment had significantly improved. These systems were in the early stages; however, they were contributing positively to improving outcomes. We encouraged leaders to continue to embed these approaches. This would help them sustain improvements made and support staff to consistently provide high-quality experiences and outcomes for all. Further information can be found under the section 'What the service has done to meet any requirements or areas for improvement we made at or since the last inspection.'

Children's wellbeing was supported through safe recruitment and effective staff induction and mentoring programmes. Staff new to the service benefited from a recently developed structured induction aligned with the Scottish Government Early Learning and Childcare: National Induction Resource. They met regularly with experienced staff which helped them understand expectations, their roles and responsibilities and build confidence. This meant they were empowered to develop professionally and supported well to deliver positive outcomes.

New staff, told us, 'New induction books have been implemented and are more thorough,' 'I really appreciate having a mentor because I know if I need anything help or I need help understanding something I can always go to them for some help and advice' and 'My induction was not fully completed in my first week which looking back now, worked amazing for me as it didn't overwhelm me'.

Quality indicator: Staff skills, knowledge, values, and deployment

Staff were deployed in a way that meant there was a good mix of skills, knowledge, and experience across the nursery playrooms. They were starting to form positive relationships, worked well together and were flexible to meet the needs of the children. We found staff communicated with each other well and were enthusiastic about their roles and responsibilities. This resulted in children that felt respected, valued, and were kept safe.

Staff were motivated to learn. The manager had created a comprehensive training action plan which meant training opportunities were aligned with the specific needs of the service and starting to address any gaps in staff knowledge and skills. Staff spoke positively about the impact of recent training and told us how it had enhanced their practice and contributed to improved experiences for children. The presence of a floor manager and an early year's consultant, both with skills and experience in the early years sector provided staff with additional support and guidance. These approaches contributed to a culture of reflective practice and enabled staff to build their competence and confidence in delivering good outcomes.

Children and families had experienced significant changes to staffing over the last few months which had had a varied impact on families. They told us, 'Staff have made a conscious effort to make me feel welcome,' 'Staff are always friendly and give me a descriptive run down of my child's day' and 'Staff seem caring and know my child well. It would be nice to have a key point of contact although all staff are friendly and approachable.' Other families were concerned about the staff changes and told us, 'Staff changes are really upsetting for children,' 'There has been a lot of staffing changes recently which has impacted childcare capabilities' and 'Staff move around classes a lot.' Leaders were able to provide evidence of their efforts to improve consistency and familiarity through initiatives such as staff meet-and-greets, stay-and-play sessions, and a staff photo board at the nursery entrance. We asked leaders to ensure they maintain these approaches and provide further opportunities for families to feel informed and support them to become familiar with staff caring for their children. This would help enhance communication and relationships with families.

Children thrive and develop in quality spaces 4 - Good

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Quality indicator: Children experience high quality spaces

Children's physical environments were safe, secure, and interesting spaces to play and learn. Secure entry systems and staff monitoring ensured children were kept safe at busier times, for example, lunchtime and collection times. Senior staff routinely checked playrooms and numbers of children throughout the day. Visitors were asked to sign in, and the appropriate risk assessments were in place. This meant staff were accountable for the safety of the children in their care, visitors, and each other.

The nursery entrance and three playrooms were welcoming and inviting. This demonstrated to children they mattered.

The playrooms were interesting and felt warm as lighting was softened with large floor lamps, ceiling mobiles, and fairy lights. Plants, neutral décor and furniture, rugs and sofas contributed to the calm ambience.

Children accessed toys and resources from attractive displays and baskets in storage units. This meant they could freely choose what to play with and supported them to lead their own play and learning. Younger children were offered a wide range of sensory and schematic play opportunities to support their development. Children in all playrooms had access to real life, loose parts, and natural materials. Children in the toddler and pre-school playrooms would benefit from the provision of these quality resources being enhanced. Staff told us they were slowly introducing these materials to better support children to understand how to play and learn from them.

Children's right to access outdoor play was promoted. Playroom doors to outdoor spaces were mostly kept open which meant children could move between their spaces and choose where to play. This approach supported children's choice, independence, and physical wellbeing. A large interesting outdoor space, which was shared between age groups enabled children to play with their siblings and peers. Children were fully engaged in their outdoor play, they climbed, played football, and discovered their natural world. One child proudly showed us a home they had made for a snail. They told us, 'Look, I've made him a bed, he's hiding in there, in his shell.'

Children were kept healthy as infection, prevention and control systems had improved. The nursery, and younger children's changing facilities were clean and tidy. Staff respected children's privacy and dignity and sensitively asked permission when younger children needed help with personal care. The kitchen was well organised, and staff were knowledgeable on food safety and practice. We observed a few children did not wash their hands when coming inside from the garden or before they ate. We suggested leaders undertake further quality assurance to ensure hand washing is embedded. This would help minimise the spread of infection further.

Children play and learn 4 - Good

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Quality Indicator: Playing, learning, and developing

Children's right to play was provided through engaging play and learning environment's that were of good quality and captured their interests. Children were fully engaged in a range of activities and experiences, such as imaginative play, sensory activities and building structures in the construction and loose parts areas.

Most staff were skilled at developmentally appropriate questioning, wondering aloud, and explaining. This enabled children to think, and problem solve for themselves. Most interactions were warm and playful and supported children to successfully self-regulate and enjoy their experiences with their peers.

Younger children were supported well through interactions that were warm, kind, and caring. Staff repeated words, used song, cuddles, and facial expressions to respond to children's cues for support and reassurance. This meant younger children were settled, happy and safe and were well cared for by the staff looking after them.

Children's interests were captured and provided for as a new planning system was responsive to their needs.

This was in the early stages; however, staff had a good understanding of the process. We were confident, given time, the planning process would support children to further develop interests and sustain progress in their learning.

Staff observations were focused and individualised which supported children's learning. A number of families told us they did not feel that their children's learning and progress was consistently communicated. We agreed that some children's successes and achievements had not been shared with families for some time. Leaders were able to evidence they had identified this and confirmed it would be addressed as part of next year's improvement priorities. Next steps in learning and development were now in place for all children. Some were too vast to be developmentally appropriate, measurable, or achieved (see area for Improvement 1). We provided some suggestions to strengthen the link between observations, next steps, and planning, to better support children's progress.

Areas for improvement

1. To support children's progression in their learning and development, observations should be regularly recorded. Next steps in children's development should be meaningful, measurable, and achievable to ensure children are supported to reach their full potential. Children's progress in their development should be shared with families.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am supported to achieve my potential in education and employment if this is right for me' (HSCS 1.27).

Children are supported to achieve 4 - Good

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Quality Indicator: Nurturing care and support

Staff in all playrooms supported and nurtured children through their daily experiences and routines. Staff responded to children with compassion and kindness, we observed age and stage appropriate interactions which meant children felt valued, safe, and secure.

Children were well supported during transitions, both from home to nursery and between playrooms. Shared outdoor spaces helped build familiarity and relationships between staff and children. Staff, whom children were attached to, accompanied them on regular visits to their new playrooms until they were confident to spend time there independently. This sensitive support resulted in smooth transitions and children successfully settling into their new routines.

Personal plans reflected children's needs and interests well, with clear strategies in place for those children who required extra support. Some families told us they did not feel included in their child's care. We discussed this with the manager who had identified this as part of their on-going improvement work. A new personal plan format, aligned with the wellbeing indicators and children's rights, had been developed. We agreed once implemented; it would contribute positively to family involvement and provide a more holistic, child-centred approach to meeting children's needs.

Children benefitted from mealtimes that were unhurried and sociable which supported children's wellbeing.

We observed lunch and snack times in all playrooms. Food was nutritious and safely prepared considering specific dietary needs, allergies, and intolerances. Younger children were sensitively supported with self-help skills. Older children were provided with opportunities for choice, independence responsibility. On a few occasions, due to food being to hot to serve some children experienced periods of waiting and became restless. We suggested, leaders undertake more quality assurance in this area of practice to enhance children's experience further.

Some staff knew children and families well and newer staff were gaining confidence in speaking to families. All staff recognised that positive relationships supported children's wellbeing. Families were warmly greeted on entering playrooms and the senior management team were visible and present at drop off and collection times. This created a warm and welcoming environment.

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

Requirements

Requirement 1

By 30 June 2025, the provider must ensure the service have robust procedures in place for staff reporting and acting upon concerns raised. This includes, but is not limited to all staff being clear in their responsibilities and duty to report concerns to relevant agencies in a timely manner.

To do this, the provider at a minimum must ensure:

- a) robust systems are in place to ensure that child protection and safeguarding protocols and procedures are covered as part of staff induction for all staff members within the service.
- b) systems are in place for reporting concerns to the designated person. Where the designated person is not available there is a clear structure of who the point of contact is.
- c) all staff can confidently and competently demonstrate they are able to follow policies and procedures and implement them without delay including accurate recording and reporting of concerns to all appropriate agencies.

To be completed by: 30 June 2025

This is in order 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 care and support is consistent with Health and Social Care Standard which states that:

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

This requirement was made on 14 May 2025.

Action taken on previous requirement

This requirement was made during a complaints investigation on 14 May 2025.

New system for reporting concerns is now in place. A flow chart, this has been developed from National guidance and there were child concern forms for staff to share if they have concerns around a child's welfare and wellbeing.

Four senior staff have been trained in advance child protection officer training with a clear structure in place of whom to go to and when. This protocol is displayed in all playrooms.

All staff we spoke to regarding child protection procedures demonstrated knowledge and confidence in how to report concerns without delay.

All staff have information on procedure should they have a concern on lanyards that they wear and leaders will ask challenge questions around safeguarding and child protection at staff meetings which promoted awareness and helped embed procedures.

New staff undertake child protection training as part of their induction.

This requirement has been met.

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 ensure children experience a consistently clean and safe environment, the provider should implement robust infection, prevention and control practices. To do this the provider must, at a minimum:

- a) ensure effective cleaning practices are conducted in all areas of the service;
- b) ensure toilets and nappy change areas are clean and in a good state of repair; and
- c) implement rigorous quality assurance systems for the management of infection, prevention and control and cleaning practices.

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

'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 15 January 2025.

Action taken since then

Toilets and nappy change areas were clean, tidy and well organised. A nappy changing procedure was implemented which included infection control and processes to follow.

Cleaning sheets in playrooms had been reviewed to contain more detail and support staff with daily cleaning tasks. Daily and weekly sheets were signed off and countersigned by a senior staff member and then by the manager.

Spot checks were carried out by management to ensure infection, prevention and control and cleaning practices were followed effectively by staff.

A contracted cleaner comes in to the nursery every night to clean floors, window sills and surrounds.

We observed all areas of the nursery and the playrooms to be clean and tidy.

This are for improvement has been met.

Previous area for improvement 2

To ensure children experience consistently positive care, play and learning opportunities, the provider should develop quality assurance systems that promote improved outcomes.

To do this, the provider must, at a minimum, introduce and continue to develop quality assurance processes that effectively promote children's health, safety and wellbeing.

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 15 January 2025.

Action taken since then

The manager provided evidence of robust quality assurance processes. This included collating data to help them measure if improvements had been made and sustained.

A quality assurance calendar evidenced most areas of practice being part of the services monitoring programme.

The manager had completed quality assurance training with the NHS and had introduced peer on peer monitoring within playrooms.

This area for improvement has been met.

Previous area for improvement 3

To ensure that the deployment of staff is effective in providing effective supervision of children, the provider should ensure staff work together flexibly to provide adequate supervision and quality engagement with children across the day.

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

'My needs are met by the right number of people' (HSCS 3.15).

This area for improvement was made on 15 January 2025.

Action taken since then

All playrooms had sufficient staff to meet children's needs. Staff worked well together and were flexible to ensure the appropriate supervision of children at all times. Regular headcounts were undertaken to ensure children were accounted for.

We observed a good mix of skills and knowledge in all playrooms. Interactions with children were mostly positive, warm and kind. Children were happy and settled and enjoying their time at nursery.

This area for improvement has been met.

Previous area for improvement 4

To support children's wellbeing, development and progress, personal planning approaches should be further developed. This should include, but not be limited to:

- a) ensuring meaningful support strategies are in place and used by staff to sensitively and effectively support children;
- b) ensuring children's next steps are clear and support them to continue to progress in their learning and development; and
- c) ensuring parents are meaningfully involved in reviewing children's personal plans at a minimum of every six months.

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

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

This area for improvement was made on 7 August 2024.

Action taken since then

Personal planning had improved. Each child had a plan in place and clear strategies were available for children who required extra support. This was effective in ensuring they were fully supported. The service had held some parents evenings and had plans for additional meetings to discuss plans with families.

A new personal plan format had been developed. We found it was more detailed and included children's rights and the well being indicators. The manager told us that they planned to share this with families imminently.

Next steps had been identified for each child, however, some were to vast to be achieved or developmentally appropriate. We have written a new area for improvement within this report regarding children's next steps and observations of learning.

This area for improvement has been met.

Previous area for improvement 5

To ensure that all staff have the appropriate training to fulfil their role, the provider should ensure a robust training plan and induction are in place which links to the priorities of the service.

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).

This area for improvement was made on 7 August 2024.

Action taken since then

A detailed training plan was in place to identify where learning was required across the staff team and linked to the improvements being made within the service.

Safer recruitment processes and an effective staff induction and mentoring programmes had been implemented to support staff in their roles and responsibilities.

Each staff member had a new folder with a safer recruitment checklist.

Staff new to the service benefited from a recently developed structured induction aligned with the Scottish Government Early Learning and Childcare: National Induction Resource.

This area for improvement has been met.

Complaints

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

Detailed evaluations

| Leadership | 4 - Good |
|--|----------|
| Leadership and management of staff and resources | 4 - Good |
| Staff skills, knowledge, values and deployment | 4 - Good |

| 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 | 4 - Good |
|-----------------------------------|----------|
| Nurturing care and support | 4 - Good |

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