

Villa Kindergarten Day Care of Children

Erskine Villa
Dumbarton Road
Duntocher
Clydebank
G81 6DS

Telephone: 01389 876 262

Type of inspection:
Unannounced

Completed on:
12 September 2025

Service provided by:
James Wright

Service provider number:
SP2003001148

Service no:
CS2003005552

About the service

Villa Kindergarten is registered to provide a daycare of children service to a maximum of 48 children not yet of an age to attend primary school, of whom a maximum of 6 children from birth to under 2 years, 9 children aged 2 to under 3 years, and 33 children aged 3 to 8 years. There were 22 children present during the inspection.

The service is in partnership with West Dunbartonshire Council to provide funded places for children 2 years to those not yet attending primary school.

The service operates from the first floor of a converted detached house in the Duntocher area of West Dunbartonshire. Children are cared for across three playrooms, and have access to toilets, nappy changing facilities and enclosed outdoor spaces. The service is close to bus routes and local amenities including parks, shops and primary schools.

About the inspection

This was an unannounced inspection which took place on 11 and 12 September 2025. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with a small number of children using the service
- gathered feedback from family members of children using the service
- spoke with staff and management present on the days we visited the service
- gathered feedback from 5 staff members using a questionnaire
- gathered feedback from 4 family members using a questionnaire
- observed staff practice and children's experiences
- reviewed documents.

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

This included reviewing the following aspects:

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

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

Key messages

- Children experienced kind and caring interactions from staff who knew them well.
- Most children were actively engaged in experiences that reflected their interests, leading to meaningful play and enjoyment throughout their day.
- Children enjoyed relaxed, unhurried, sociable snack and meal times.
- Parents' views were sought to help improve the service.
- Nappy changing areas required improvement to align with current best practice in infection prevention and control.
- Management and staff were committed to the continued development of the service to improve outcomes for children.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

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

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

How good is our care, play and learning?

4 - Good

Quality Indicator 1.1: Nurturing care and support

We evaluated this key question as good, where important strengths clearly outweighed areas for improvement and had a positive impact on outcomes for children.

Children and families were warmly welcomed by staff, creating a friendly atmosphere. Strong relationships between staff and families were evident during drop-off and pick-up times. Children arrived happily and settled quickly, showing they felt safe and secure in the environment. Children had developed trusting and caring connections with staff, who mostly responded to their needs and interests with kindness and respect. As a result, children felt settled and comfortable in the setting.

Most interactions were gentle and in tune with children's emotions. At times, interactions with some younger children were less consistent due to varying needs and the staffing structure. However, staff were caring and responsive, offering comfort and reassurance when children became upset. This contributed positively to children's emotional wellbeing and helped them feel safe and supported.

Personal plans were in place for all children and informed by a range of information to support children's wellbeing, with some identified next steps for learning. These were created and reviewed in partnerships with parents. One parent shared, 'Staff are always happy to discuss any updates in my child's routine'. Where additional support needs were identified, plans included well-considered strategies, helping to ensure children received the right care at the right time and appropriate support from other professionals.

While some personal plans we reviewed reflected children's individual needs, there were some inconsistencies, and it was not always clear how some children's needs were supported. We discussed with the manager the importance of revisiting best practice guidance to help ensure all personal plans consistently reflect children's needs, and include clear strategies for support. (see area for Improvement 1).

Mealtimes were calm, relaxed, and unhurried, with soothing music playing in the background. Older children were encouraged to be independent, using tongs to select sandwiches and pouring their own drinks and soup. Younger children had packed lunches from home, which were stored safely and presented well. Staff supported younger children and encouraged independence in ways suited to their age and stage of development. They sat with children to ensure their safety while eating and chatted with them, helping to create a positive social experience. Staff ensured food was safe and appropriately cooled. Children had access to their own water bottles, helping to keep them hydrated. We discussed with the manager the benefits of reviewing the food options and developing menus in line with current nutritional guidance to support a healthy, balanced diet.

Staff followed the service's safe sleep policy and current best practice guidance, with appropriate monitoring in place to ensure children's safety while sleeping. Children were offered comforters and soft crochet blankets, helping to create a calm and homely environment. These nurturing approaches contributed to children feeling secure, and well rested.

Older children were supported to develop independence in their personal care. Nappy changes were carried out in a relaxed and respectful way, with staff explaining each step and engaging warmly with children. As a result, children felt respected and confident in their care routines.

Staff had completed child protection training and demonstrated a good understanding of their safeguarding responsibilities. A policy was in place to guide practice. This supported staff to take appropriate action when needed, helping to ensure children were safe, protected, and well cared for.

Medication procedures were well-managed, with appropriate storage and administration practices in place. Staff had a good understanding of children's individual healthcare needs, and plans were in place to support these. A policy and procedure was in place. We suggested further developing the medication procedure to reflect current guidance. Overall, children's healthcare needs were met, with clear information in place to support this.

Quality Indicator 1.3: Play and learning

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

A wide variety of resources were available for most children, encouraging exploration and engagement in their play. However, this could be further developed in the 2-3 room to better reflect their age, stage of development, and interests. Adjusting the layout and setup could create more inviting and meaningful play experiences, to help promote curiosity, engagement, and learning. The manager responded positively, and we saw improvements had already begun on day two of the inspection.

Older children made independent choices in their play and confidently led their own learning. Literacy and numeracy were key strengths, naturally embedded throughout the day. Resources such as coloured cubes encouraged building, counting, comparing height, and colour matching. Mark-making tools, playdough, and peg boards supported fine motor skills, early writing, shape recognition, and sequencing. A rich, engaging environment fostered curiosity and purposeful play. Staff used thoughtful questioning to extend thinking and challenge ideas. Children often invited staff into their play, which led to meaningful and engaging learning experiences. As a result, children were motivated, confident, and actively involved in their learning.

Children enjoyed outdoor play in the garden. Older children had free-flow access between the playroom and the garden, which supported their choices and independence. They helped set up the outdoor space with what they wanted to play with. We saw children particularly enjoy water play, using pipettes to explore and experiment.

Younger children were also happy playing outside. Children were more engaged for longer periods, enjoying experiences such as, splashing in bubbles and playing in the sand. Children wore helmets and had fun rolling up and down the slope. Being outdoors gave children more freedom to move, make choices, and enjoy their play. For others, the pace and structure of the day should be reviewed to ensure outdoor play is offered more frequently and for longer periods, to support children's needs, physical development and wellbeing.

Staff in the 3-5 room used floor books to plan learning experiences, capturing children's ideas about what they wanted to learn. Children contributed through photos, comments, and evaluations, helping staff plan around their interests and needs. We suggested developing a simplified approach to planning for under-threes to reflect their interests and how these would be supported through play. As a result child-led planning helped promote engagement, ownership, and meaningful learning.

Parents spoke positively about the learning experiences offered. Comments included, 'Every day is a learning day with music, dance, crafts, outdoor play, and smart board learning,' and, 'My child loves going to see the staff and their friends. They enjoy drawing and playing outside, and it helps them develop their skills'.

Older children accessed their learning journals, stored in named trays, allowing them to add to and reflect on their work. One child proudly shared theirs, decorated with favourite stickers, giving a strong sense of ownership. It was suggested that journals be made available to some younger children to revisit photos and support reflection. Staff recorded photos and observations to share with families, who were kept informed through Instagram updates, progress summaries, meetings, and daily chats. This supported children's confidence, encouraged reflection, and strengthened home to nursery connections.

The 'Magic Moments' wall was a well-loved feature across all rooms, displaying photos from both home and nursery. Children enjoyed looking at the photographs and celebrating their achievements, as well as sharing other special memories such as holidays and new siblings. Parents were actively involved in contributing to the display, helping to build a strong sense of pride, connection, and belonging for the children.

Areas for improvement

1. In order to meet all children's needs consistently, the provider should ensure that each child has a personal plan that:

1. reflects best practice
2. captures children's individual needs
3. details how staff will meet these needs.

This is to ensure that 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 1.1).

How good is our setting?

4 - Good

Quality Indicator 2.2: Children experience high quality facilities

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

Children were cared for in a clean, well-maintained, and welcoming environment. The reception area was warm and inviting, leading families into the playrooms. One parent commented, 'The nursery is always clean and the rooms are lovely'. At the entrance, photos of staff and children helped create a sense of belonging. Each child had their own coat peg, supporting independence and routine. Parents had access to a range of helpful information, including speech and language resources, the service's vision and improvement plan, helpline contacts, and examples of children's consultation. This supported positive relationships with families and helped children feel secure and included.

Playrooms were bright with natural light, creating a calm and welcoming atmosphere. Across most areas, soft furnishings such as rugs and cushions provided comfort and quiet spaces for children to rest or play.

Wall displays and family photographs added to the homely, nurturing environment, helping children feel safe, valued, and connected to their surroundings. We discussed with management ways the 2-3 room could be further developed, particularly around layout and resources, to better support children's play and learning. We acknowledged that on day two, management and staff had responded positively to our suggestions and had begun to review the environment and resources. As a result, most children experienced a well-resourced, comfortable environment that supported their wellbeing and encouraged meaningful engagement (see area for Improvement 1).

Toys and materials were stored at low levels, allowing children to easily see and access them. This supported children to explore and interact with resources independently or alongside their peers. The resources were well-maintained and arranged to make it easy for children to find what they needed. This helped most children feel confident and engaged in their play.

Children benefited from regular outdoor play in the secure, well-resourced garden areas. The gardens offered a range of materials and equipment that supported active play and exploration. Older children were able to independently choose from a variety of open-ended resources stored in outdoor sheds. In addition, fixed structures within the garden encouraged creativity, problem-solving, and imaginative play. This supported physical development and thinking skills.

A range of safety measures contributed to creating a secure environment for children. A secure entry system was in place, gates remained closed during outdoor play, and all visitors were required to sign in. Staff carried out daily safety checks, and risk assessments were completed and regularly audited by the manager. We discussed the importance of separating these into individual, area-specific assessments rather than one large document. This would make each section clearer, easier to review and update as needed, supporting ongoing improvement and helping ensure the service continues to provide a consistently safe and secure environment for all.

Children were actively involved in learning about safety and managing risk through the Care Inspectorate's SIMOA (Safe, Inspect, Monitor, Observe, Act) approach. Parents were included through the use of 'learning from home' bags, with families sharing how these resources encouraged safety awareness at home. These approaches demonstrated a strong commitment to partnership working with families and children to promote safety both in the setting and at home.

Staff demonstrated good infection prevention and control practices. Children were supported and encouraged to wash their hands at appropriate times, helping them to develop positive hygiene habits. Staff followed procedures that promoted a clean and safe environment. However, the nappy changing area required updating to comply with best practice guidance. This includes ensuring the area is fully enclosed from floor to ceiling. The service should prioritise these improvements within the agreed timescale to ensure children continue to experience a safe and hygienic environment. (see requirement 1).

The service is registered with the Information Commissioner's Office (ICO) to ensure compliance with data protection regulations. This reflects the service's commitment to maintaining the privacy and confidentiality of families' personal information. Children's data is securely stored within the office, ensuring it is handled responsibly and kept safe.

Requirements

1. By 28 November 2025, the provider must provide a written plan, including timescales, for carrying out the necessary work to ensure children have access to nappy changing facilities which comply with current best practice guidance.

This is to comply with Regulations 4(1)(a) (Welfare of users) and 10(2)(a)(b)(c)(d) (Fitness of premises) 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 (HSCS) which state that: 'If I require intimate personal care, there is a suitable area for this, including a sink if needed' (HSCS 5.4).

Areas for improvement

1. The staff team should continue to further enhance the layout of the environment and presentation of resources to support children within the 2-3 room to make choices, self-select and lead their own play and learning taking into account the pace of the day. The addition of more natural resources would lead to increased open-ended play, provide more opportunities for children to explore and engage in creative loose parts play and enhance vocabulary skills.

In order to improve outcomes for children aged 2-3 years old, the provider should continue to work with the staff team to assess and improve the layout of the playroom and resources, ensuring these are varied and accessible.

This is to ensure that the environment 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 5.2).

How good is our leadership?

4 - Good

Quality Indicator 3.1: Quality assurance and Improvement is well led

We evaluated this key question as good, where important strengths clearly outweighed areas for improvement and had a positive impact on outcomes for children.

Staff and management demonstrated a collaborative and proactive approach throughout the inspection process. They were open to suggestions and actively engaged in discussions about service development. There was capacity for change, with feedback taken on board and acted upon quickly, resulting in improvements that were already visible during the visit. This positive approach supported ongoing progress and helped to maintain continuous improvement within the service.

Parental involvement was valued and actively promoted through informal daily conversations at drop-off and pick-up times, questionnaires, parents' meetings, home learning initiatives and stay-and-play sessions.

These opportunities allowed families to engage meaningfully in their child's experience and feel included in the life of the service.

The vision for the service was agreed in partnership with families and regularly reviewed to ensure it continued to reflect their needs and expectations. Feedback from families was listened to and used to inform ongoing improvements. A range of communication methods, including newsletters, notice boards, learning journals, and a private Instagram page, helped keep families well informed and connected. This collaborative approach strengthened relationships with families and contributed positively to the ongoing development of the service.

A self-evaluation calendar was in place, with evidence that included a balanced mix of photographs, staff comments, and monitoring records. We suggested adding a section to reflect more clearly on how changes made had impacted children's experiences. An improvement plan was also in place and regularly updated, with clear progress noted and the impact visible in day-to-day practice. Children benefited from a setting that consistently reviewed and improved its practice to enhance their care, learning, and overall experiences. We discussed the importance of continuing this reflective approach and apply this to the areas for improvement discussed at inspection.

Staff regularly engaged in team reflections and actively contributed to the self-evaluation process. They used key questions to help identify what was working well and where further development was needed, creating a shared understanding of the service's priorities for improvement. This reflective practice supported a culture of continuous learning and development across the team. As a result, children benefited from a service that was committed to making meaningful improvements to enhance their care, play, and learning experiences.

Accident and incident records were accurately completed and promptly shared with parents. Monthly audits were conducted to identify potential risks or concerns. Management regularly reviewed these findings and worked collaboratively with staff to consider and make any necessary improvements. This pro-active approach helped maintain a safe environment and promote ongoing safety.

Champion roles had been introduced to promote leadership across the team, with staff taking responsibility for key areas such as literacy, numeracy, loose parts play, and outdoor learning. These roles supported staff development and helped enhance the quality of experiences for children.

Staff valued children's achievements and made a genuine effort to recognise and celebrate their successes. This helped build children's confidence, self-esteem, and motivation to learn.

How good is our staff team?

4 - Good

Quality Indicator 4.3: Staff deployment

We evaluated this key question as good, where important strengths clearly outweighed areas for improvement and had a positive impact on outcomes for children.

Teamwork was greatly valued, with staff working well together and bringing a balanced mix of skills and experience to their roles. They spoke positively about how their strengths complemented one another and supported good practice.

Staff comments reflected a strong sense of job satisfaction and commitment. One member said, 'I love working at Villa Kindergarten. The children are wonderful, loving, happy, and safe with us.' They also shared, 'The staff are a good team and work well together. Our manager is very supportive and ensures we are the best childcare practitioners we can be'. Another added, 'We all work well as a team and provide the children with the best learning and care.'

A wide range of training opportunities supported staff in their ongoing professional development. This included core training such as child protection, first aid and infection control as well as additional courses like Setting the Table, Realising the Ambition, Loose Parts, Block Play, Schemas, and Partnership with Parents. Staff reflected on their learning through professional discussions and recorded this as part of their development, we could see the positive impact of some training in practice.

To further support this good practice, we discussed with the manager the importance of continuing to regularly review and adapt training plans to meet the learning needs of individual staff. We also discussed the benefits of additional training focused on positive role modelling and promoting age-appropriate behaviour, particularly for some staff working with younger children. These improvements would help staff better support children consistently, ensuring they are supported in a way that is responsive to their needs.

Staff were generally deployed well to meet required ratios. However, we suggested the service review staffing arrangements within the 2-3 room to ensure they fully supported the individual needs of the children. Adjustments in this area would also allow for longer periods of outdoor play. The manager shared plans to introduce a lunchtime cover staff member, which was agreed would be a positive addition. Whilst overall deployment met most children's needs, there were times when additional support could have better supported some children's wellbeing. This would help ensure children consistently benefit from safe, responsive, and supportive care.

Appropriate arrangements were in place to cover staff absences, supporting continuity of care for children. A well-organised system of rotas and clearly defined roles for specific task, such as lunch preparation and cleaning, helped staff manage their responsibilities alongside shift patterns. The manager was visible within the setting and provided ongoing support to staff, which contributed to a positive team environment and the smooth day-to-day running of the service. This supported positive experiences for children.

Parents shared positive feedback about the staff, with comments including, 'They have excelled in their care and nurturing of the children, the children are at the forefront of everything they do,' and, 'Love the staff, always helpful, my child has definitely improved and developed more due to the staff'. This reflected the strong relationships built between staff and families, helping to create a warm, trusting environment where children felt secure and families felt confident in the care their children received.

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

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	4 - Good
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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