

KLAS Care Day Care of Children

East Fulton Primary School
Gilmartin Road
Linwood
Paisley
PA3 3SG

Telephone: 07506 978 685

Type of inspection:
Unannounced

Completed on:
25 November 2025

Service provided by:
KLAS Care C.I.C.

Service provider number:
SP2014012399

Service no:
CS2014333589

About the service

KLAS Care is an after school care service which is provided by KLAS Care CIC. The service is registered to provide an out of school care service to a maximum of 40 children attending primary school. The outdoor space has been taken into account when agreeing the maximum number of children. Children must have access to the outdoor space at all times.

About the inspection

This was an unannounced inspection which took place on Monday 24 November 2025 between 08:00 and 18:00. We gave inspection feedback to the management team on Tuesday 25 November 2025.

There were 18 children present at breakfast club and 21 children in attendance at afterschool provision.

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 registration information, information submitted by the service and intelligence gathered throughout the inspection year.

In making our evaluations of the service we:

- spoke with some of the children, reviewed survey responses from 9 parents and 6 staff
- spoke with the manager and staff
- observed practice and staff interactions with children
- 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.

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 were happy, confident, and having fun. They experienced warm and nurturing care from staff who knew them well.
- Quality assurance approaches had been developed and were helping to drive continuous improvement within the service. We discussed adding a quality assurance calendar to further strengthen this work.
- The service should ensure that all required notifications are submitted promptly in line with regulatory guidance.
- The management team and staff demonstrated a strong commitment to nurturing approaches and building positive connections within the community.
- Children's views informed planning approaches, these could be strengthened by ensuring a balanced mix of responsive and intentional planning.

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

The management team demonstrated a clear passion for nurture and community engagement supporting a clear values-based leadership approach. Their commitment to children, families, staff, and the wider community was evident. One staff member shared "KLAS care has made itself a corner stone in the community providing an essential service for its residents".

They were visible within the setting, actively working alongside staff and children, which created an approachable and supportive atmosphere. One staff member shared "Management are approachable and supportive" and another commented "I feel confident that my managers have an interest in my wellbeing and would be happy to help me". This leadership style fostered a positive team culture where staff felt respected, valued, and motivated.

The vision, values, and aims of the service had been developed with a focus on being welcoming, respectful, inclusive, and kind. These values were reflected in staff practice and in the environment. We observed staff warmly greet children and parents. Children's artwork, suggestions and voices were displayed around the service. Children were supported as individuals, and staff interactions were kind and caring. It was suggested that the vision and values could be reviewed to incorporate aspects of nurture and community to better reflect the service's passion and commitment to its nurture programme and community support.

A commitment to continuous improvement was evident through the formal improvement plan, which addressed feedback from the previous inspection. Improvements had been made to the environment and planning systems. While these changes were positive, they were still in the process of being fully embedded. The improvement plan demonstrated a shared and responsive approach, with staff and management taking ownership of developments and confidently discussing progress and future plans including garden upgrades, further embedding the use of digital management system and STEM (Science, Technology, Engineering, and Mathematics) developments. One staff member commented "We have made a lot of improvements since our pilot visit and are continually evaluating and reflecting."

Families were informed and consulted through questionnaires, an open-door approach and a digital app. Most parents spoke positively about these methods. One parent commented "We have taken part in surveys and feedback" and another shared "We are asked through questionnaires what we like and what we would like to see." These approaches helped families feel involved. The management team told us of their plans to further develop the use of the digital app and had consulted with families on barriers to strive to fully implement the system and strengthen communication further.

Quality assurance systems were in place, including processes for reviewing accidents, medication, care plans, and snack menus which had been revised in line with the new Setting the Table guidance. We highlighted that some accidents and incidents required notification to the Care Inspectorate, and this was not carried out (see area for improvement one). We signposted the manager to the relevant guidance.

We discussed with the manager developing a monitoring calendar would strengthen quality assurance procedures and support identifying improvements such as planning, experiences, risk assessments and updating of policies. This would support ongoing improvements and help maintain high-quality experiences for children.

Self-evaluation was undertaken. The management team encouraged reflective practice through staff meetings, sharing best-practice documents, and plans were in place to issue questionnaires to parents to review the service. Staff and management had also reviewed some quality indicators, including "children experience high quality spaces." This helped everyone develop a shared understanding of what good practice looks like and supported improvement planning to achieve positive outcomes for children.

Staff and management were committed to professional development, with opportunities to gain qualifications actively promoted and supported. Training records were maintained through an online portal, and mandatory training in child protection, first aid, and food hygiene was monitored. This meant staff had the knowledge and skills to keep children safe, healthy, and well cared for.

Induction procedures were in place and staff were issued key documents such as the National Health and Social Care Standards, policies, and procedures. To further strengthen this process, we signposted the management to the Scottish Social Services Council (SSSC) national induction resource. Staff reported feeling supported both professionally and personally, reflecting the positive leadership and culture within the service.

Areas for improvement

1. The service should ensure that all required notifications are submitted promptly to the Care Inspectorate in line with regulatory guidance. This includes reporting significant events such as accidents, incidents and safeguarding concerns.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state "I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected" (HSCS 4.11)

Children play and learn 4 - Good

Quality indicator: Children play and learn.

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.

Children were observed to be happy, confident, and actively engaged in the experiences available on the day of inspection. They enjoyed spending time with their peers, taking part in role play in the home corner, using playdough, and drawing, which encouraged their creativity and social interaction. Children showed independence and choice as they moved freely between areas and led their own play. There was also some access to technology, such as children signing themselves in using the smart board, supporting children's digital skills.

Parents commented positively on the play activities offered. They all agreed that their child always or very often had opportunities to be involved in meaningful, interesting, and fun play experiences. One parent commented, "There always seems to be new things to do and new equipment which is great for the children." Another told us "The kids are always being creative whether it being with crafts or cooking or through music and movement."

Planning was informal and led by children's interests. Staff had begun to consult with children on experiences they would like using mind maps, this demonstrated staff valued children's voices and interests. Planning systems were identified as an area for improvement on the service improvement plan and were still at the early stages of being embedded. We noted that experiences within the main playroom were limited during parts of the day. We discussed with the manager that implementing a planning format would help link children's interests and would enable staff to plan experiences to ensure children have access to a broad, stimulating range of opportunities with a balance of responsive and intentional planning in all areas of the playroom.

Cosy spaces with beanbags and soft furnishings provided children with opportunities to rest and relax after a busy school day, supporting wellbeing and self-regulation. A range of books were available, promoting literacy development and offering quiet reading experiences. This supported children's wellbeing.

Outdoor play was observed as a positive feature with children free flowing between indoors and the enclosed garden. Children had fun playing football, playing high jump, and using a range of physical equipment such as pogo sticks, balancing balls, and stilts. We observed children were enjoying competing, supporting, and cheering each other on. These experiences supported physical development, social skills and teamwork. One parent shared "I always see children playing in the garden in all weathers and appreciate staff being out whatever the weather when kids want outside" and another commented "Great outdoor facility and visits to local parks."

Children are supported to achieve 4 - Good

Quality indicator: Nurturing care and support

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.

Children and families benefitted from a welcoming, warm, and inclusive service. On arrival, children were happy, settled, and relaxed. Staff interactions were warm and nurturing, with staff greeting children kindly, checking in on their wellbeing, and helping them feel safe and secure as they started their day.

We observed children having breakfast, with options including toast, cereal, and fresh fruit. Children were encouraged to be independent by self-serving and choosing what they wanted to eat. They sat together confidently and happily, chatting and engaging well with their peers. Staff supported this routine in a gentle and respectful manner, fostering positive social interactions and some independence.

Snack times and breakfast were sociable and unhurried. Children were offered choice at both mealtimes and enjoyed a healthy selection, including cucumber, fruit, peppers, tortillas, and salsa. An additional snack was provided at 5pm to ensure children remained well nourished. A voting system was used to gather children's views on snack choices, and children confidently used the system to express their preferences, showing their voices were valued in planning meals. We suggested further developing procedures that promote children's independence, such as involving them in tasks such as preparing and serving independently.

The service demonstrated a strong commitment to engage with families. Staff knew children and their families well and confidently discussed individual needs, supports, and any concerns. Families were welcomed into the service and staff took time to talk with each family at pick up, sharing how their child had spent their time. Parents commented positively, comments included, "If I ever have any questions there is always a member of staff to speak to" and "when we arrive to pick up and drop off we are always welcomed in to the building and passed on any information about their day". Family engagement was actively encouraged and the management team told us they were continuing to explore ways to strengthen this further. The service provided a variety of opportunities such as termly newsletters, use of the digital app and informal daily chats. As a result, families had developed trust in the service that promoted positive relationships and partnership working.

Personal plans were in place for all children and reflected their health, safety, and wellbeing needs. While most plans included strategies to support children's individual needs, we discussed with the management team the importance of implementing support plans for all children who require additional help to ensure strategies are applied consistently.

A digital platform was also used to share children's learning, with plans in place to make this use even more consistent. Additional support was offered to families through nurture programmes and family wellbeing initiatives, showing a strong commitment to positive relationships and supporting families. Effective multi-agency collaboration was evident, and online system used to share key information for children accessing a range of services. This ensured that staff had up-to-date, accurate information to plan effectively and provide consistent, holistic support for children and their families.

Medication procedures were in place, with appropriate storage and regular reviews helping to maintain safety. Staff were aware of children's allergies and intolerances. We advised reviewing medication records to include more detailed information in line with best practice, such as medication given before attending the service, instances of refusal, and the development of individual care plans, for example asthma plans. These improvements will help strengthen procedures to support children's health, safety, and wellbeing.

Staff demonstrated positive, respectful interactions and were skilled in knowing when to intervene and when to give children space. They joined in with children's play, helped children resolve conflicts sensitively, and guided them in regulating their emotions. This enhanced children's wellbeing and strengthened their social skills.

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 receive the right support, management should review and update care plans to include all relevant information. This should include, but not be limited to: Ensuring all information provided by parents is clearly documented in children's care plans. Regularly review care plans to reflect any changes in children's needs. Ensure all staff involved in children's care are informed of, and have access to, the most up-to-date versions of care plans.

This area for improvement was made on 26 September 2018.

Action taken since then

All children had personal plans in place which contained relevant information to support their health, safety and wellbeing needs. The plans were reviewed and shared with parents.

This area for improvement has been met.

Previous area for improvement 2

To ensure children receive the right support, management should review and update care plans to include all relevant information. This should include, but not be limited to: Ensuring all information provided by parents is clearly documented in children's care plans. Regularly review care plans to reflect any changes in children's needs. Ensure all staff involved in children's care are informed of, and have access to, the most up-to-date versions of care plans.

This area for improvement was made on 8 May 2025.

Action taken since then

Care plans were in place to support children's health, safety and wellbeing needs. These contained relevant information from parents and external agencies reflective of children's individual needs. Systems were in place including online platforms to ensure all staff have access and can contribute to ensuring care plans contain the most up to date information to support children's needs.

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
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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.