

Beith Hive Childcare Ltd Day Care of Children

Beith Primary School
Glebe Road
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KA15 1EZ

Telephone: 07932934190

Type of inspection:
Unannounced

Completed on:
30 October 2025

Service provided by:
Beith Hive Childcare Ltd

Service provider number:
SP2023000200

Service no:
CS2023000311

About the service

Beith Hive Childcare Ltd provides an out of school care service within the grounds of Beith primary school. The service operates from a classroom within the school premises and has planned access to a breakout space directly outside the classroom and the school gym hall.

The service is registered to provide care to 30 children of primary school age at any one time. At the time of our inspection, there were 33 children registered to attend the service.

About the inspection

This was an unannounced inspection which took place on 28, 29 and 30 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:

- spoke with children using the service
- issued an electronic questionnaire to parents/carers using the service and received two responses
- spoke with staff, manager and quality assurance officer
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents.

As part of our inspections, we assess core assurances. Core assurances are checks we make to ensure children are safe and that a service is operating legally. At the time of this inspection, some improvements were identified relating to core assurances and we have reported where improvement is necessary within this inspection report.

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

- Most children experienced warm and kind interactions from staff.
- Staff had built positive relationships with children and their families.
- Personal plans should be developed for all children attending the service to ensure their needs can be met.
- Improvements should be made to the quantity and quality of play resources available to children.
- The management team should review and improve the approach to quality assurance. Monitoring staff practice and the quality of interactions with children should be prioritised.
- The management team should establish a clear leadership structure that defines the roles and responsibilities of all individuals involved in managing aspects of the service.
- It should be made clear to children and families who has leadership responsibilities in the absence of the named manager.
- Improvements must be made to staff deployment to ensure all staff caring for children are registered with the appropriate regulatory body and are deployed to meet children's needs.

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	3 - Satisfactory / Adequate
Children play and learn	3 - Satisfactory / Adequate
Children are supported to achieve	3 - Satisfactory / Adequate

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

Leadership 2 - Weak

We made an evaluation of weak for this quality indicator, as there were some strengths, but these were compromised by important weaknesses.

Quality indicator: Leadership and management of staff and resources

The service had a vision, values, and aims in place, but these had not been reviewed since registration. As a result, they did not fully reflect the shared aspirations of staff, children, and families. Developing a clear and shared vision would help promote a sense of belonging, and guide the service towards achieving positive outcomes for children.

Leadership within the service was not effective in ensuring timely and transparent communication about significant changes. This limited families' understanding of the service they received. We acknowledged that the service had experienced managerial changes since the previous inspection; however, these were not communicated effectively or promptly, reducing transparency. At the time of inspection, a new manager had recently been appointed, and families had not yet been notified. The manager advised that they planned to share this information in the upcoming digital newsletter, which we encouraged. Making improvements to ensure clear and timely communication should promote transparency, build trusting relationships between the service and families and supporting positive outcomes for children.

Registration and public liability insurance certificates were displayed but had expired. We requested these be updated and shared with families, and the manager agreed. The provider's quality assurance officer advised that standard operating procedures and policies were under review to ensure compliance with organisational expectations and legislation. In addition, we asked for the complaints policy to be updated to reflect families' right to contact the Care Inspectorate if they have concerns and the relevant contact details are stated more clearly and prominently.

Overall, leadership within the service was weak and required significant improvement. Instability within the team, contractual shifts, and management changes had limited progress and compromised the service's capacity to deliver sustained improvement. Leaders had reduced strategic oversight which slowed improvement planning, resulting in missed opportunities to enhance outcomes for children and families. At the time of this inspection, there was no clear improvement plan, and most previously identified areas for improvement had not been met. To address this, the provider should implement a leadership structure with clearly defined roles and responsibilities and establish a transparent scheme of delegation. This should ensure families know who to contact in the absence of the named manager which promotes clear accountability within the service (see area for improvement 1).

Quality assurance processes, including self-evaluation, were not yet fully established. This restricted the service's capacity to monitor the quality of provision and drive improvement. An internal audit conducted earlier in the year identified key gaps in service delivery, however progress towards addressing these was limited. Improving quality assurance processes was an area for improvement identified at the previous inspection that had not progressed. Although regular meetings provided opportunities for team discussions, these could be used more effectively to share service priorities and review progress. Strengthening the focus of these meetings should support staff engagement in the improvement journey and promote shared ownership of developments, contributing to a clear and consistent vision for the service.

Staff were recruited in line with Care Inspectorate safer recruitment guidance and received a corporate induction. While most staff had completed core training, deployment did not consistently reflect their knowledge, skills, or professional registration. Staff did not always have the suitable skills and experience to provide targeted support and were not all registered with the Scottish Social Services Council (SSSC), which could compromise children's safety and wellbeing. There were no formal systems to monitor staff practice or ensure compliance with organisational procedures, this meant that leaders did not identify and address poor practice. The provider must ensure that staff are suitably deployed based on their skills, knowledge and experience, to meet children's needs (see requirement 1).

Requirements

1.
By 28 March 2026, to ensure the health, wellbeing and safety of service users, the provider must ensure that staff are deployed effectively in line with their skills, knowledge and professional registration. This is to ensure staff are competent in their roles and suitably deployed to meet children's needs. To do this the provider must at a minimum:

- a) ensure all staff working with children are registered with an appropriate regulatory body
- b) ensure staff are deployed in line with their skills, knowledge and experience
- c) implement quality assurance systems to evaluate the effectiveness of staff deployment and staff competencies in line with their job description.

This is to comply with Section 7(1)(a)(b) of the Health and Care (Staffing) (Scotland) Act 2019.

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).

Areas for improvement

1.
To ensure children and families experience a well-managed service, the provider should establish a clear leadership structure that defines the roles and responsibilities of all individuals involved in managing aspects of the service. A transparent scheme of delegation should be in place so that children and families know who to contact in the absence of the named manager. This information should be communicated effectively to families.

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

'I use a service and organisation that is well led and managed' (HSCS 4.23); and

'I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation' (HSCS 4.15).

Children thrive and develop in quality spaces

3 - Satisfactory / Adequate

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

Quality indicator: Children experience high quality spaces

Children were cared for in a setting which was clean and well-ventilated. Staff had prioritised developing wall space to display children's drawings and paintings and we saw children take pride in displaying and adding to their artwork. This supported their sense of belonging.

The service operated mainly from a small classroom with access to a large outdoor playground and use of the school gym hall. Although an adjacent breakout space was available, it was not planned for or used consistently. Regular use of this space would enhance play experiences by creating a more purposeful environment where resources remain accessible and are not disrupted by routines such as snack. This would also support better supervision of handwashing, promoting children's health and wellbeing.

The main classroom play space would benefit from further development to support children's comfort, curiosity and creativity. On children's arrival, there were limited play zones to encourage engagement or provide spaces to relax. For example, the football table was covered, indicating it was not for use, and creative and construction materials were offered in boxes and placed on tabletops. Presenting resources more invitingly, using provocations (intentional arrangements of materials designed to spark curiosity and exploration) and clear play invitations, would increase children's engagement and enjoyment. In addition, creating a dedicated space for rest and relaxation would support wellbeing. At the previous inspection, we asked the provider to improve play spaces and resources; this had not been addressed (see outstanding areas for improvement 2 under section 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Effective infection prevention and control (IPC) measures were in place, including regular cleaning and environmental checks of shared spaces before children's arrival. This supported children's safety and wellbeing. To further enhance practice, staff should include the shared sink in the open classroom as part of daily checks to ensure it is clean and well equipped for handwashing.

Accidents and incidents were appropriately recorded and shared with parents via the electronic platform IPal. This system enabled management to audit records and identify patterns, helping to reduce risks for children. Personal information was mainly stored electronically with suitable security measures in place to ensure compliance with data protection requirements.

Children play and learn

3 - Satisfactory / Adequate

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

Quality indicator: Playing, learning and developing

Staff's positive attitude towards outdoor play supported children's wellbeing. Training had helped staff provide experiences that encourage exploration, cooperation and problem-solving. However, due to limited

outdoor lighting, these types of play were not offered during our visit. Outdoors, children engaged in physical activities such as running and balancing, promoting physical development and coordination.

Planning for play and learning included mind maps to capture children's suggestions for snack and craft activities. For example, children requested Halloween crafts and were observed them making spiders using card and plastic ties. This experience limited creativity, as the use of pre-cut materials and identical resources restricted children's opportunities to develop and express their own ideas. Planning should be further developed to enable play that provides fun and challenging experiences that build on children's interests. This should include planning for outdoors and physical activity when accessing the gym hall, to support more meaningful play experiences that promote creativity, independence and physical development.

At the previous inspection, we asked the provider to improve the quantity and quality of resources to ensure a broad range of play experiences. No improvements had been made. We observed children requesting craft items that were unavailable and during play at the gym hall, only two balls were provided. When children requested safety mats, their request was declined without explanation. Limited resources resulted in low levels of engagement and restricted opportunities for children to lead their own play.

This area for improvement was not met and remains in place (see outstanding areas for improvement 2 under section 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Children are supported to achieve **3 - Satisfactory / Adequate**

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

Quality indicator: Nurturing care and support

Children experienced a warm welcome as they arrived at the service. Staff greeted children warmly offering hugs and engaged in relaxed conversations about their day. Parents told us, "Staff are always welcoming." This helped children feel valued and respected, promoting a sense of belonging.

Families were welcomed into the setting at collection times, and the recent introduction of electronic newsletters supported timely communication. One parent told us, "Staff are always friendly, welcoming and willing to chat." Improvements with communication strengthened relationships with families and promoted transparency, ensuring parents remained informed about service events.

Children self registered for snack, allowing them to choose when they ate. Snack was unhurried, enabling staff to support children's independence and decision-making, which promotes confidence. The snack menu had recently been reviewed to improve nutritional value in line with current best practice guidance. This supported children to experience healthy lifestyles, supporting their overall wellbeing.

Electronic registers were updated promptly to reflect arrival and departure times. We observed occasions where this process disrupted play, such as when attending the gym hall and staff needed to return to the main playroom to update the register. The manager advised that a new mobile electronic device would be sourced to allow staff to remain with children while updating registers. This improvement should reduce disruption to play and help ensure children remain engaged in experiences.

The service was provided to children attending four local primary schools within a wide rural catchment area, where childcare and transport options for families were limited. To support children's access to the service, the provider offered minibuss transport, which on some occasions involved one staff member collecting children from three schools. Risk assessments were in place and effective communication with school staff supported this process. We suggested that when all staff are present, the manager consider more effective deployment to provide additional support for school collections where possible. This would help ensure children consistently experience a safe and nurturing transition from school to the service.

At the previous inspection, we asked the provider to ensure personal plans were in place for every child, identifying their individual health, welfare and safety needs and how these would be met. Although a new format had been developed, and some plans had been introduced, they were not yet in place for all children. Children we spoke to had not been involved in creating their plan. As a result, it was unclear how individual needs would be met. This area for improvement remains in place (see outstanding areas for improvement 1 under section 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Staff used personal mobile devices to communicate when working in separate areas of the premises, such as between the playroom and the gym hall. While this supported staff coordination, this was not always used appropriately to promote safe practice. On one occasion, a staff member used their personal device to communicate externally while responsible for supervising children. This posed a potential safeguarding risk and could have compromised children's safety. Following our feedback, the manager advised that personal devices would no longer be used and portable communication devices (walkie-talkies) would be purchased. This change should enable staff to communicate effectively while ensuring children are cared for in a safe and secure environment. To embed this approach, the management team should monitor staff compliance as part of their quality assurance processes (see Leadership requirement 1).

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 support children's health and wellbeing, the provider should ensure all children have a personal plan that details their individual needs and choices. This information should be gathered in consultation with children and their parents/carers and reviewed every six months or sooner where required, to ensure they reflect children's current needs. Information gathered should be used to care for and support children effectively.

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 my 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 27 September 2024.

Action taken since then

A new format had been introduced for personal planning. They had not yet been completed for all children to ensure their health, welfare and safety needs were planned for. Children and their families had not been consulted in the development or review process.

This area for improvement was not met and remains in place.

Previous area for improvement 2

The provider should continue to develop the planning for play and learning processes to ensure children's ideas, wishes and interests inform planned and spontaneous play and learning experiences. They should also increase resources and make better use of space available to children to provide them with a greater range of choices through play. Improvements should include but is not limited to;

Further developing the use of Science, Technology, Engineering and Mathematical (STEM) concepts and introducing the use of natural and open-ended play materials in line with Inspiring Scotland's guidance, 'Loose parts play: A tool kit'.

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

'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended materials' (HSCS 1.31).

This area for improvement was made on 27 September 2024.

Action taken since then

The quantity and quality of children's play materials had not improved and the use of Science, Technology, Engineering and Mathematical (STEM) concepts and play materials had not been applied to support children's creativity, curiosity and inquiry.

This area for improvement was not met and remains in place.

Previous area for improvement 3

To keep children safe and promote their wellbeing, the provider should ensure that children have access to safe and hygienic environments. The provider and management team should ensure daily checks of children's toilets are undertaken prior to children's arrival at the setting, and review and improve the service approach to hand hygiene to ensure this is reflective of Health Protection Scotland's guidance, 'Infection Prevention and Control in Childcare Settings (Day Care and Childminding Settings)'.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 27 September 2024.

Action taken since then

Staff completed all relevant daily cleaning tasks and completed checks of shared communal spaces to ensure they were safe, clean and hygienic prior to children's arrival at the setting. This supported children's safety and wellbeing.

This area for improvement was met.

Previous area for improvement 4

To keep children safe, promote their wellbeing, and develop a culture of reflective practice which identifies and actions areas for improvement, the provider should ensure effective quality assurance processes are in place. This should include but is not limited to; ensuring views are routinely sought from children, staff and parents on aspects of the service and that these views are used to inform improvements, developing an improvement plan, monitoring staff practice and service delivery and ensuring self-evaluation processes are documented to support a culture of reflective practice across the setting.

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 27 September 2024.

Action taken since then

At the time of our inspection, there was no improvement plan in place to support the ongoing development of the service. Processes to identify service strengths and action areas for improvement were not in place. This meant that the service was not making relevant improvements to support positive outcomes for children and families.

This area for improvement was not met and remains in place.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

Leadership	2 - Weak
Leadership and management of staff and resources	2 - Weak
Children thrive and develop in quality spaces	3 - Satisfactory / Adequate
Children experience high quality spaces	3 - Satisfactory / Adequate
Children play and learn	3 - Satisfactory / Adequate
Playing, learning and developing	3 - Satisfactory / Adequate
Children are supported to achieve	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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