

Babes in the wood Day Care of Children

1 Queens Road
Stonehaven
AB39 2HQ

Telephone: 01569 760 123

Type of inspection:
Unannounced

Completed on:
12 December 2025

Service provided by:
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Service provider number:
SP2005955428

Service no:
CS2007142180

About the service

Babes in the wood is registered to provide a day care of children service to a maximum of 50 children at any one time. Of those 50, no more than 16 are aged under two years and no more than five are attending primary school.

The service is based in the residential area of Stonehaven, Aberdeenshire. Children have access to three playrooms. Babies and children up to the age of two years are based upstairs. Children aged two to five are based downstairs in the Tots and Beans playrooms. There is an enclosed garden at the rear of the building, as well as a 'treehouse' outbuilding which leads directly to the playroom and garden.

The service is close to parks, shops, and other amenities.

About the inspection

This was an unannounced inspection which took place on 10 December 2025 between 13:10 and 17:45 and 11 December 2025 between 08:40 and 17:30. 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:

- spent time with children using the service
- spoke with five of their parents/carers
- received 13 responses to our request for feedback from parents/carers and staff through our online questionnaire
- assessed core assurances, including the physical environment
- spoke with staff and management
- observed practice and children's experiences
- 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, improvements were identified relating to core assurances. We have reported where improvement is necessary within 'Children are supported to achieve'.

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 interactions from staff who knew them well.
- Significant staffing changes had recently taken place but management and staff were motivated to develop the service.
- Effective self evaluation had supported the service to identify key improvement priorities and create action plans.
- Children benefitted from daily access to outdoors and positive connections to the wider community.
- Families were beginning to feel more meaningfully involved in influencing change.
- Personal plans should be developed to capture strategies of support.
- A new planning process was in the early stages of development to support individual children's learning and progress.

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	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 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 service demonstrated leadership practices that contributed towards positive outcomes for children. The management team showed commitment to their roles and held high aspirations for both the setting and the children. Despite recent significant changes, including the appointment of a new manager and several new staff members, the team maintained a positive and forward-looking approach. Daily practice was guided by the service's vision, values, and aims, which were reflected in children's experiences. To further strengthen this, the service should continue to involve staff, children, and families in reviewing these, ensuring they remain relevant and meaningful.

Families were beginning to feel more involved in shaping the service. Questionnaires and daily conversations provided opportunities for them to provide feedback and influence change. Parental participation was encouraged on recent development priorities, such as meal provision and daily access. Changes to practice were then shared with families and assurances were provided to support transparency and the sharing of information. Parents reported there were suitable opportunities to be meaningfully involved and most felt confident to approach staff with queries or suggestions. One parent commented, "There has been a lot of questionnaires for me to complete to give my opinion". Recently increased opportunities for family engagement supported continuity of care and enhanced children's experiences by ensuring decisions reflected their needs and preferences.

Children benefitted from effective quality assurance practices. A quality assurance calendar was used as a working document, giving an overview of key tasks to be completed. This included monitoring of practice and audits, with identified trends highlighted and actioned. Staff took part in ongoing self evaluation through team meetings, which they valued as a meaningful way to contribute their thoughts and ideas. Staff needed more time to develop confidence in evaluating the service using best practice guidance. Once embedded, this would promote a continuous cycle of improvement through the identifications of strengths and areas for development.

Outcomes for children were supported by a relevant and achievable improvement plan, linked to the evolving needs of the service. Many issues identified during inspection were already known to the service, with action plans in progress but not yet fully implemented. Current improvement priorities aligned with the 'Quality improvement framework for the early learning and childcare sectors'. They included a new planning process, revised personal planning, and adaptations to play spaces. Timescales were in place to support maintaining momentum and evaluating the impact of these actions will help measure success in improving children's experiences.

Children were supported by staff who were committed to professional development. Many staff were working towards relevant qualifications and regularly completed training to strengthen their skills. Professional learning on the Care Inspectorate's 'SIMOA - Keeping Children Safe' campaign positively influenced practice, with staff applying principles such as regular head counts. The introduction of a SIMOA mascot helped children understand safety and plans to involve them in risk assessments will further

promote independence and awareness. Implementing best practice has improved learning opportunities and supported children's confidence and wellbeing.

The service was appropriately staffed and staff were effectively deployed throughout the day to meet children's needs. Recruitment followed guidance and a robust induction process, informed by the 'National Induction Resource', supported staff competence and confidence. Staff shared that they felt well supported by their team and this allowed them to become familiar with their role. Staff were flexible and communicated clearly with each other in a respectful way, to promote continuity of care for children. This helped to ensure that children were safe and well supported.

Children play and learn 3 - Satisfactory / Adequate

Quality indicator: Playing, learning and developing

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

Children were mostly engaged in play and learning experiences. Younger children spent time taking part in activities, such as riding scuttlebug trikes, exploring sensory trays, and listening to stories, with staff supporting language development through meaningful conversation. Older children participated in role play, block play construction, and arts and crafts. Children shared that their favourite things to do at nursery included "drawing" and "playing outside".

Children experienced a balance of planned and spontaneous play. Staff supported some spontaneous experiences, such as a game of hide and seek, alongside planned activities like seasonal crafts and baking. Plans were in the early stages of development to create a dedicated messy play room and introduce resources in technology and science. This would provide more challenging, stimulating opportunities that promote curiosity and meaningful engagement.

Children were encouraged to lead their own play and explore their interests. They had some opportunities to develop independence and problem-solving skills, indoors and outdoors, within daily routines, such as putting on outdoor clothing themselves. Indoors, imaginative play using real-life resources supported creativity. Staff involvement promoted early language and numeracy through activities like mark-making, singing, and counting. This created purposeful experiences that strengthened literacy and numeracy skills.

Staff engaged at children's level and showed interest in their play. While some use of open-ended questions were used to extend children's thinking, several missed opportunities were identified. Management demonstrated a strong understanding of child development and learning and advised plans were in place to develop staff skills and knowledge around this. Staff were enthusiastic about taking part in bespoke professional development sessions in the new term to enhance their understanding of child development. The management team were confident these plans would support staff to build confidence in extending learning. This would support more consistent use of skilled questioning to deepen learning and extend children's ideas.

Current planning approaches did not consistently support individual learning and progress. While plans reflected children's interests, they lacked focus on individual learning and progression. Observations were not consistent and often descriptive, rather than evaluative, with limited evidence of next steps to children's learning. Management and staff identified this as a priority through self evaluation. A new cycle of planning,

observation, and assessment was being developed for implementation next term. Management acknowledged that more time was needed to enhance staff skills and knowledge to embed these processes effectively. This would support purposeful play experiences that promote meaningful engagement and learning (see area for improvement 1).

Regular access to outdoors supported children's health and wellbeing. Children enjoyed opportunities for exploration in the garden and 'treehouse', which parents praised as a positive new addition. One parent shared, "I know [my child] loves the new treehouse". Children benefitted from connections with the local community through regular outings and visitors to the setting. During the inspection, children experienced a puppet show and commented on outings they were involved in. One child advised, "We went for a walk to see the Christmas tree one day. I liked that". Parents valued the opportunities for children to take part in different outings and community engagement, such as "forest walks, library visits, guest speakers". These connections promoted children's sense of belonging and developed their understanding of the wider community.

Areas for improvement

1. To ensure children experience high quality learning and development, the provider and manager should ensure that planning, observation, and assessment of children's individual learning supports and identifies progress.

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 my education and employment if this is right for me' (HSCS 1.27).

Children are supported to achieve 3 - Satisfactory / Adequate

Quality indicator: Nurturing care and support

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

Staff recognised the value of building positive relationships with children and their families. Effective use of communication methods supported sharing of key information, including daily conversations and a social media page. This promoted continuity of care between parents and staff. Most parents commented positively on their connection with staff. One shared, "Staff take time to provide verbal handovers at each collection". Another advised, "Staff are always very informative, positive, and friendly". Whilst staff and parents acknowledged there had been a period of uncertainty due to staff changes, they felt confident children continued to be well supported by staff. One parent commented, "Although the management has changed a lot over the past year, the day-to-day staff have remained quite consistent". The management team had recently consulted with parents and were in the process of supporting families to access the playrooms on a daily basis. This would strengthen family involvement and support stronger connections.

Children experienced kind and caring interactions that promoted emotional security. Children approached staff for comfort and invited them into their play. Whilst most interactions were positive and responsive, some non-verbal cues were missed, creating a potential risk where quieter children may receive fewer interactions. Management agreed to monitor this to ensure all children feel included and equally supported.

Children's overall health and wellbeing was not well supported by effective personal planning. Whilst plans captured immediate needs and preferences, most lacked detailed strategies for consistent support. Staff were knowledgeable about these strategies but this was not reflected in written plans. Children with specific needs had more comprehensive care plans and staff welcomed multi-agency working. Regular reviews with parents supported information being kept up-to-date and relevant. The management team had identified the need for plans to contain more specific information, including strategies of support to promote continuity of care. Management advised a new personal planning process was in development and would be implemented in the new term (see area for improvement 1).

Consistent routines helped children feel secure and understand what to expect. Transitions between spaces and activities were generally well managed, with staff preparing children to support predictability. Staff respected family preferences and mirrored home routines for personal care and sleep, ensuring continuity and comfort. Familiar adults provided support, promoting children's physical health and emotional wellbeing.

Children experienced relaxed and sociable mealtimes. Recent changes created a safer, more relaxed atmosphere with adults consistently sitting alongside children to model positive eating habits and social skills. Younger children were supported to wash hands and feed themselves, while older children had some opportunities for independence, such as pouring drinks and clearing plates. Children eating outside designated times received the same nurturing support, ensuring mealtimes remained unhurried. Snacks were nutritious and appealing and the use of plates with packed lunches added a homely feel. We discussed reviewing the lunch space in the Beans room to support smoother transitions back to play and enhance engagement. Overall, food experiences mostly followed infection prevention and control guidance. However, a few improvements were identified to further promote children's health and wellbeing and management agreed to implement these.

Staff demonstrated a clear understanding of their role in identifying, recording, and reporting any safeguarding concerns. Chronologies were used to record significant events in a child's life that may impact on their health and wellbeing, as well as any follow up actions taken. This supported continuity of care for children and their families.

Areas for improvement

1. To support children's health, wellbeing, and development, the provider and manager should implement effective personal planning for all children. This should include, but is not limited to, ensuring personal plans detail individual children's needs and how these will be met.

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 1.15).

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	4 - Good
Leadership and management of staff and resources	4 - Good
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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