

Kids Fun House Day Care of Children

St. Francis RC Primary School
North East Campus
Lothian Crescent
Dundee
DD4 0SX

Telephone: 07508 907 727

Type of inspection:
Unannounced

Completed on:
9 December 2025

Service provided by:
Kids Fun House

Service provider number:
SP2003000707

Service no:
CS2003000707

About the service

Kids Fun House is a registered daycare of children service. The service is delivered from St. Francis RC Primary School, Dundee. Children have access to a dining hall, community space, gym hall, and an enclosed playground.

The service is registered to provide a care service to a maximum of 65 children at one time, of an age to attend primary school.

About the inspection

This was an unannounced follow up inspection which took place on Tuesday 9 December 2025, between 15:15 and 18:00. The inspection was carried out by two inspectors and one inspector undertaking a shadowing opportunity.

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

To inform our evaluation we:

- spoke with children;
- spoke with management and staff;
- observed practice and children's experiences; and
- 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; and
- 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

- The one requirement made at the previous inspection had been met.
- We saw that progress had been made around the three areas for improvement made at the last inspection.
- One area for improvement around the approach to medication still needed further development and has been continued until the next inspection.
- Management and staff had worked hard at addressing issues raised at the previous inspection. As a result, grading against the six point grading criteria had improved. See quality indicator 'Leadership and management of staff and resources'.

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	3 - Satisfactory / Adequate
------------	-----------------------------

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

Leadership 3 - Satisfactory / Adequate

Quality Indicator: Leadership and management of staff and resources

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

The service was re-graded upwards as evidence showed previous weak areas were now satisfactory/adequate.

A clear commitment to continuous improvement addressed feedback from the last inspection. Changes included a better approach to recruitment, improved personal planning, accurate chronologies, and safer medication practices. These improvements showed a shared and responsive approach to meeting children's health, wellbeing, and safety needs. As a result, children experienced more consistent care, and their individual needs were considered more effectively.

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

Requirements

Requirement 1

By 1 November 2025, the provider must strengthen the management oversight across key areas of the service to improve outcomes for children

The provider must, at a minimum, ensure:

- a) newly recruited staff are recruited in line with best practice and that all relevant checks are carried out;
- b) revisit current staff information and ensure all staff have been recruited in line with safe recruitment processes, including, requesting accurate and appropriate information or references relating to a person's suitability to work in a specified role;
- c) that at all times, suitably qualified and competent persons are working in the care service in such numbers as are appropriate to meet the needs of children;
- d) staff register and maintain their registration with SSSC; and
- e) an effective quality assurance process, self-evaluation and improvement plan are in place, which have involved staff, children and parents to lead continuous improvement.

This is to comply with Section 8 of the Health and Care (Staffing) (Scotland) Act and Regulation 3 Principles 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:

'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); 'I am confident that people who support me have been appropriately and safely recruited.' (HSCS 4.24); and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

This is to ensure that practice is consistent with the Scottish Social Services Council, Codes of Practice for social service workers and employers (2024). Codes of practice for employers of social service workers, Section 1:

'Make sure people you recruit are suitable to be social service workers and that they understand their roles and responsibilities'

This requirement was made on 31 July 2025.

Action taken on previous requirement

The service showed significant improvement in safer staffing and recruitment practices. Staff files were well-organised with completed overview sheets, logs around Protecting Vulnerable Groups (PVG) and Scottish Social Services Council (SSSC) were in place and documented. The approach to recruitment procedures were aligned with safer recruitment guidance.

The reviewed staffing structures and approaches ensured adequate staffing coverage across the service. Staff reported rotas were better managed, especially during holiday periods, and described leadership and oversight as consistently positive. Feedback from staff indicated the last inspection drove meaningful improvements. Staff felt the service was in a better place and motivated to maintain progress.

The service effectively used questionnaires and staff feedback as part of its improvement plan. Incentives and child-friendly challenges involved families and strengthened team engagement.

Quality assurance and auditing procedures had improved, with templates available, although some information was not consistently recorded. Medication audits missed inconsistencies, but wider quality assurance approaches were stronger.

Self-evaluation and improvement planning were at an early stage. The improvement plan included priorities, a red, amber, green (RAG) system, and the setting of short, medium, and long-term goals. Priorities focused on better communication with families, trip experiences and use of digital platforms. Improvements across key areas ensured children experienced safer staffing, better care planning and more consistent support for their health, wellbeing and experiences.

We are satisfied that 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

The provider should develop the approach and knowledge across the staff team in recording significant events and incidents in children's lives. Chronologies should be used to keep records and document how children are supported through significant events and life changes.

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

'My care and support meet my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 31 July 2025.

Action taken since then

Child protection records were detailed and provided clear information on occurrences, incidents, and actions taken. Records had been updated since the previous inspection and showed improvement. Forms offered a clearer format, helping staff gather accurate and relevant information. Chronologies captured timelines, events and actions, enabling staff to track concerns and significant events in children's lives. This supported staff to monitor issues, follow up promptly, and take appropriate action to keep children safe. As a result, children were better protected, and staff could respond quickly to ensure their safety and wellbeing.

We are satisfied that this area for improvement has been met.

Previous area for improvement 2

To ensure children's health and wellbeing needs are supported, the provider should review their approach to medication and ensure it is in line with Care Inspectorate guidance 'Management of medication in daycare of children and childminding services'.

This should include but not be limited to:

- a) having a clear policy and procedure in place which is followed;
- b) completed consent forms to support instructions of medication; and
- c) medication forms that capture clear signs and symptoms, reviews and confirmation of first dose.

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

'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm.' (HSCS 3.21).

This area for improvement was made on 31 July 2025.

Action taken since then

Children's medication was stored safely, accessible to staff but out of children's reach. This helped keep children safe. Medication records had improved since the last inspection and updated forms were clearer. However, records lacked consistency in detail. Important information such as signs, symptoms, and clear times were not always recorded. Despite improvements, inconsistencies remained in record completion, level of detail, and auditing of medication procedures. These gaps could impact children's health needs. We outlined the need for a consistent approach to documenting medication to support safe administration of medication.

This area for improvement has not been met and remains in place.

Previous area for improvement 3

To promote children's health, wellbeing and safety needs the provider should implement a system to review all children's individual personal plans at least once every six months or sooner if changes occur. This will ensure the service complies with current legislation and information held is current and remains of good use.

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).

This area for improvement was made on 31 July 2025.

Action taken since then

Personal plans were reviewed termly in partnership with families, and review dates were clearly documented. Changes to children's needs and care were captured, ensuring information stayed accurate and relevant.

Plans had been developed since the last inspection and now included more detailed information. This supported staff to fully meet the individual needs of children in their care. As a result, children benefited from up-to-date plans that promoted consistent and responsive care.

We are satisfied that this area for improvement has been met.

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	3 - Satisfactory / Adequate
Leadership and management of staff and resources	3 - Satisfactory / Adequate

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 iartras.

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.