

Blue Kangaroo Happy Nursery Ltd

Day Care of Children

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Telephone: 0141 883 3585

Type of inspection:
Unannounced

Completed on:
7 January 2026

Service provided by:
Blue Kangaroo Happy Nursery Ltd

Service provider number:
SP2021000172

Service no:
CS2021000275

About the service

Blue Kangaroo Happy Nursery Ltd is a day care of children service in a suburban area of Glasgow. The service is located in a converted building within a residential area in Pollock. The early learning and childcare service is in partnership with Glasgow City Council to provide commissioned places for children aged between three and five years and eligible two year olds.

The service can accommodate 80 children. The age range of the children is from birth to those not yet attending primary school. This includes no more than 15 aged under two years, no more than 25 aged two years to under three years and no more than 40 aged three years to those not yet attending primary school full time. At the time of our inspection there were a total of 58 children present on the first day and 54 on the second day.

The accommodation consists of three large playrooms with each environment having direct access to an outdoor play area for physical play and outdoor learning. There is a reception area, changing and toilet facilities for children and office, catering and staff facilities. The service is close to schools, transport routes, shops and community services.

About the inspection

This was an unannounced inspection, which took place on 6 and 7 January 2026. The inspection was carried out by three inspectors from the Care Inspectorate. One inspector was shadowing as part of their induction process. 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
- reviewed feedback from four parents and carers whose children attend the service
- reviewed feedback from eight staff members employed in the service
- spoke with management and staff
- observed practice and staff interactions with children
- 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.

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 the 'Leadership' and 'Children are supported to achieve' section of this report.

Key messages

- Quality assurance and self-evaluation processes should be developed to support continuous improvement of the service.
- The new manager was leading positive changes within the service.
- The provider should review the deployment of staff and supervision of children to ensure the safety and wellbeing of all children.
- Changes to playroom environments had enhanced opportunities for children's play and learning.
- Children were settled and confident in the service.
- Personal plans should be further developed to ensure they fully support meeting children's individual needs.
- To ensure children's health and wellbeing improvements were needed to the record keeping of medication.

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
Children play and learn	4 - Good
Children are supported to achieve	3 - Satisfactory / Adequate

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

Leadership 3 – Satisfactory / Adequate

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

Leadership and management of staff and resources

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

Observations confirmed that the service's vision, values and aims promoted happy, secure, exciting and stimulating opportunities. This contributed to a positive environment for children. We discussed with management that involving children and families in reviewing and developing the vision, values, and aims would enhance their sense of belonging and ownership within the service.

Management were carrying out informal self-evaluation of the service. As a result, changes had been implemented that led to improvements in children's mealtime experiences and the documenting of children's personal plans. These developments contributed to more positive mealtime experiences for children and supported personal plans being more reflective of children's health and wellbeing. Self-evaluation processes could be strengthened further by incorporating the views of children and families. This would support more meaningful participation and empower them to influence positive and purposeful change within the service.

At our previous inspection, we made an area for improvement to the development of quality assurance systems. We identified areas of the service where no formal auditing and monitoring was taking place, such as medication and personal planning. While a quality assurance calendar was in place, only limited quality assurance activity had been carried out. Where tasks had been completed, we could see that strengths and areas for improvement had been identified. However, these processes remained at an early stage of development. The absence of robust quality assurance processes has the potential to compromise outcomes for children's care, play, and learning. We have continued to make this area for improvement. For further information refer to 'Outstanding areas for improvements.'

Following complaint activity, we made an area for improvement to ensure children's safety and wellbeing through staff deployment, supervision and the recording and reporting of accidents. We observed staff noticed and responded to accidents and incidents. First aid was provided where appropriate and accident/ incident records were completed.

We identified a high number of accidents and incidents taking place within the service. There was no regular auditing of accidents and incidents to support the identification of patterns and reduce the risk of injury. An auditing process had been introduced by the new manager. This was at the early stage of development. We have continued to make an area for improvement. For further information refer to 'Outstanding areas for improvements.'

The service had recruited four new staff members and for most the inspection was their first day in the service. Whilst the recruitment of staff was positive, all four staff had been deployed to the same playroom. This placed additional pressure on existing staff as they attempted to meet children's individual needs. We discussed this with management who responded by adjusting staff deployment for the remainder of the inspection, which resulted in noted improvements.

Management should consider the deployment of both existing and new staff across the service based on

their skills and experience. In addition, this would support new staff to develop a clear understanding of their roles, responsibilities, and effective ways of working to meet children's needs. We have continued the area for improvement and will combine two of the existing areas for improvement into a single, consolidated one. For further information refer to 'Outstanding areas for improvements.'

Staff Skills Knowledge, values and deployment

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.

All staff were supported to develop their skills and knowledge through access to professional learning opportunities. Staff told us how opportunities enhanced their learning and skills, and how this, in turn, positively impacted their practice. Staff told us, "It has allowed me to expand my knowledge and understanding of children and plan experiences around their individual needs" and "the trainings I have received have helped me develop a greater understanding of the differences in each child, and the many ways I can make sure each child's care is tailored to them." Some staff indicated they would benefit from further training focused on additional support needs, which we agreed would be valuable. Providing this additional training has the potential to enhance interactions and engagement with children and better meet their individual needs.

Appraisals supported staff to review their skills and identify training needs to improve their practice and knowledge. The service had plans to introduce champion roles. More opportunities for staff to lead practice, share ideas with other settings, and collaborate has the potential to further improve positive outcomes for children and their families.

Management provided coaching to enhance staff interactions and engagement with children. A Leader of Early Learning from Glasgow City Council was supporting staff in the development of planning, numeracy and literacy opportunities. Ongoing support in these areas has the potential to improve outcomes for children.

Regular team meetings gave staff the opportunity to reflect on service delivery and discuss any arising issues. Staff shared they valued the opportunity to have their voice heard and to come together as a team. This meant there was good communication across the team. Parents told us, "The staff is very engaging and helpful" and "they are easy to speak to and easily communicate with me about any concerns."

At our previous inspection we made an area for improvement to ensure children's safety and wellbeing to staff deployment and supervision. We observed in most playrooms, staff were deployed effectively and their supervision supported children's safety and wellbeing throughout the day. Staff communicated their movements when tasks took them away from the room and most staff worked well as a team. However, in one playroom we observed that some staff were focused solely on their allocated area or activity and did not monitor the wider environment. Staff were not working effectively as a team to communicate or meet children's individual needs. This meant children did not consistently receive the level of supervision and support to ensure their safety and wellbeing.

In addition, improvements should be made to the supervision of children during mealtime experiences to support the safety and wellbeing for older children. We observed room staff were task focused, and although staff were present in the area, children ate for short periods without adequate supervision. On several occasions, intervention was necessary to support staff in responding appropriately to children's interactions and activities. We have continued to make an area for improvement (see area for improvement 1). For further information refer to 'Outstanding areas for improvements.'

Areas for improvement

1. To support children's care, play and learning and ensure their safety and wellbeing consideration should be given by the provider of the skills, knowledge and experience of staff members and their deployment to meet children's individual needs. The provider should review and develop systems in place for the supervision of children to ensure children's safety and well-being. This should include but not be limited to closely monitoring children's play, recording and reporting all accidents/incidents and taking prompt action to reduce the risk of recurring injuries.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state, 'My needs are met by the right number of people' (HSCS.3.15) and 'My care and support meets my needs and is right for me' (HSCS.1.19)

Children play and learn 4 - Good

Play, learning and developing

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 happy, engaged and actively participating in a variety of experiences. They demonstrated confidence and independence by leading their own play and learning, supporting their overall development and wellbeing. Children told us, "I like it here, I can play with everything and I like drawing" and "I can play with anything until my mummy comes and I have a best friend."

Significant improvements have been made to the layout and organisation of play environments, creating enabling spaces that actively supported children's play and learning. The provision of quality, open-ended resources had promoted curiosity and creativity. This supported children to make independent choices aligned with their individual interests. We observed the enhancements had contributed positively to children's overall learning and development, fostering engagement, critical thinking, and exploration.

Older children were provided with opportunities to develop language, literacy, and numeracy skills through a range of experiences, including block play, playdough activities, storybooks, and art and crafts. These activities supported cognitive and communication development while fostering creativity. Younger children engaged in exploratory play with balls, focusing on rolling and throwing, which promoted physical development and coordination. Additionally, shared experiences with storybooks supported early language skills.

Children were observed actively engaging in outdoor play, participating in a range of stimulating activities including physical play, exploration of the mud kitchen, sand play, and mark-making. These experiences provided opportunities to support physical development, creativity, curiosity, and the development of early literacy and numeracy skills. The environment encouraged risk-taking and challenging play, promoting resilience and problem-solving in a safe and supportive context.

Most staff were observed engaging positively in play with children, with many interactions reflecting responsiveness and genuine connections that supported children's learning. However, some children appeared disengaged, moving between activities without clear purpose. These children would have benefited from timely and targeted support to enhance engagement and extend learning opportunities. Additionally, targeted professional development for some staff could further strengthen the quality of interactions, enriching children's experiences and fostering deeper engagement.

Staff planned experiences informed by children's interests, however, current plans were basic, with activities often repetitive and not fully responsive to children's evolving needs. Evidence of children's input was limited. Consultation with children has the potential to make planning more responsive and reflective of their interests. The manager had identified the need for improvement and outlined a clear vision for planning, supported by new templates and collaborative staff discussions. These developments have the potential to enhance the quality of play and learning experiences, supporting children's skill, development and progression.

Families received information about their child's care, play, and learning through an online platform. However, observations were inconsistent, with some children having significant gaps in recorded information. In addition, some observations did not effectively capture children's skills and lacked meaningful next steps to support ongoing learning and development. Further monitoring of the new planning approach, alongside dedicated reflection time, would support staff in developing their observation skills. This would enable more accurate tracking of children's progress over time. As this has the potential to compromise children's play and learning we have made an area for improvement (see area for improvement 1) in 'Children are supported to achieve' section.

Children are supported to achieve 3 - Satisfactory / Adequate

Nurturing, care and support

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

Children were confident in their environments and had developed friendships which supported their growth and development. Most staff were responsive to children's interactions and engagement of their verbal and non-verbal cues. This supported children to feel safe, secure, and contributed to the positive relationships they had with staff. One parent told us, "I absolutely love this nursery so does my daughter. She loves going in everyday and enjoys a lot. The staff takes very good care of her and they always give a full report to parents about the child's day" and "Very attentive to our child's needs, very nurturing."

We identified temperatures within playrooms did not support children's comfort. Thermometers present in playrooms were not being monitored. We discussed with management who responded by adjusting the heating and temperatures improved. Management and staff should continue to monitor the temperature of playrooms throughout the day and respond accordingly as temperatures change to support children's comfort and wellbeing.

Improvements had been made to the lunchtime experience for older children. A rolling lunchtime experience had been introduced supporting children's play to come to a natural end before having their lunch. There were opportunities for children to be independent, responsible and make choices with the collection and disposal of lunch items and pouring of drinks. We made suggestions as to how the mealtime experience could be enhanced through the self serving of meals and waiting times reduced. Mealtimes were a relaxed and unhurried experience for younger children with staff supervising children. This supported children's safety and wellbeing.

At our previous inspection we made an area for improvement to ensure children's health, safety and wellbeing in relation to the administration of medication. While progress was made, further improvements were needed. Most medication was labelled and stored safely. Records generally included symptoms, dosage, and parental permission, but some lacked consent and signatures from parents confirming administration of medication. We advised management that some children would benefit from health care

plans to ensure needs are understood, supported, and reviewed. We have continued to make an area for improvement. For further information refer to 'Outstanding areas for improvements.'

At our previous inspection we made an area for improvement to support with the development of children's personal plans. Whilst we noted improvements had been made we identified further improvements were needed. Personal plans were in place for all children. Plans had been developed in partnership with families and were reviewed regularly. While goals had been recorded, they were broad in description and there was no clear evidence of progress or evaluation of the goals. Staff were able to discuss strategies they used to support children; however, these strategies were not recorded within the personal plans we reviewed. In addition, there were no additional support plans in place for children who required these to support their development and progression. We have continued to make an area for improvement (see area for improvement 1). For further information refer to 'Outstanding areas for improvements.'

Areas for improvement

1. To support children's care, play and learning the manager and staff should ensure individualised personal plans include strategies to support children's individual needs. Plans and observations should capture children's skills and progression in learning to support children to reach their full potential.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, "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).

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 care, play and learning the manager and staff should ensure individualised personal plans capture children's health and welfare needs, progression in learning and support children to reach their full potential. The manager and staff should ensure meaningful strategies are identified and recorded to support children.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, "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 is to ensure personal plans are consistent with the Care Inspectorate Document: 'Guide for providers on personal planning early learning and childcare.'

This area for improvement was made on 30 January 2025.

Action taken since then

Personal plans were in place for all children and had been developed in partnership with families. These were reviewed regularly and contained information relevant to children's health and welfare needs. While goals had been recorded, they were broad in description and there was no clear evidence of progress or evaluation of these goals over time.

Staff were able to discuss strategies they used to support children, however, these strategies were not recorded within the personal plans. In addition, there were no additional support plans in place for children who required these to support their development and progression.

The area for improvement had not been met. Please refer to 'Children are supported to achieve' section for further information.

Previous area for improvement 2

To support children's health, safety and wellbeing needs management and staff should ensure all records include permission from parents to administer medication and detail the signs, symptoms and the dosage to be administered. The service should ensure effective quality assurance processes are in place and monitored by management and staff to ensure the safe management of medication.

This is to ensure that care and support is consistent with Health and Social Care Standards which state that, "Any treatment or intervention that I experience is safe and effective" (HSCS 1.24).

This is to ensure medication is consistent with the Care Inspectorate Document: 'Management of medication in daycare of children and childminding services.'

This area for improvement was made on 30 January 2025.

Action taken since then

Medication was clearly labelled for most children and stored safely. Administration records were in place. In most cases these included parental permission to administer medication; however, we identified some records where this permission had not been recorded.

Records described the signs, symptoms and dosage to be administered. Not all records had parent signatures acknowledging that medication had been administered.

There were no quality assurance systems in place to audit or monitor medication.

We discussed with management that some children would benefit from health care plans to ensure their health and wellbeing needs are clearly understood, consistently supported, and regularly reviewed.

The area for improvement had not been met. Please refer to 'Children are supported to achieve' section for further information.

Previous area for improvement 3

To improve outcomes for children, quality assurance systems should be developed further to assess and improve the quality of the provision in line with best practice.

This is to ensure care and support is consistent with Health and Social Care Standards, which state, '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 30 January 2025.

Action taken since then

A quality assurance calendar was in place; however, only limited quality assurance activity had been carried out. Where tasks had taken place, within environments and in relation to staff Scottish Social Services Council (SSSC) registration we could see that strengths and areas for improvements were identified. These processes were still at an early stage of development.

We also identified areas of the service where no formal monitoring was taking place for example, medication and personal planning.

The area for improvement had not been met. Please refer to 'Leadership' section for further information.

Previous area for improvement 4

To support children's care, play and learning and ensure their safety and wellbeing consideration should be given by the provider of the skills, knowledge and experience of staff members and their deployment to meet children's individual needs. The provider should review and develop systems in place for the supervision of children to ensure children's safety and wellbeing.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state, '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 goals' (HSCS 3.14); and 'My needs are met by the right number of people' (HSCS.3.15).

This area for improvement was made on 30 January 2025.

Action taken since then

Almost all staff working in the service were qualified practitioners. In the majority of playrooms, staff were deployed effectively, and their supervision supported children's safety and wellbeing throughout the day. Most staff communicated well when leaving the room for tasks and generally worked well as a team. However, in one playroom we observed that some staff were focused solely on their allocated area or activity and were not supervising the wider environment. Staff were not working effectively as a team to communicate or to meet children's individual needs.

In most playrooms, staff were deployed appropriately to supervise children during mealtimes. However, we observed that older children were eating for a very short period with no supervision. Room staff were task-focused within the mealtime area, and we had to intervene on several occasions to support staff in responding to children's interactions and activities.

The service had recruited four new staff members during the week of the inspection, all of whom had been deployed to the same playroom. This placed additional pressure on existing staff as they attempted to meet children's individual needs. We observed three new staff members caring for children on their own while other staff took tea breaks and another experienced staff member attended to children's needs outside the room. We alerted management, who responded by adjusting staff deployment for the remainder of the inspection, and improvements were noted.

Inspection report

In one playroom, not all children had been signed in on the register, resulting in a discrepancy between the number of children present and the number recorded on the playroom board. When this was highlighted to the staff member, it was rectified promptly.

The area for improvement had not been met. Please refer to 'Leadership' section for further information.

Previous area for improvement 5

Children have the right to experience care that safeguards their wellbeing. Staff should ensure that children are kept safe through effective supervision and support. To achieve this, staff should provide effective supervision to reduce the risk of injury and ensure children feel safe and supported. This should include but not be limited to: closely monitoring children's play recording and reporting all accidents/incidents and taking prompt action to reduce the risk of recurring injuries.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: 'My care and support meets my needs and is right for me.'

This area for improvement was made on 9 October 2025.

Action taken since then

Please see area for improvement 4 for information on the supervision and support of children within the service.

We observed staff noticed and responded to accidents and incidents. First aid was provided where appropriate and accident/incident records were completed.

We sampled a selection of completed accident and incident records and found that all relevant sections had been fully completed. The information was shared with families. We identified a high number of accidents and incidents taking place within the service.

There was no established system for the regular auditing of accidents and incidents to support the identification of patterns and reduce the risk of injury. A new auditing process had recently been introduced by the new manager. This was at the early stage of development.

The area for improvement had not been met. Please refer to 'Leadership' section for further information.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

Leadership	3 - Satisfactory / Adequate
Leadership and management of staff and resources	3 - Satisfactory / Adequate
Staff skills, knowledge, values and deployment	4 - Good
Children play and learn	4 - Good
Playing, learning and developing	4 - Good
Children are supported to achieve	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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