

Whitecrook ELCC Day Care of Children

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Type of inspection:
Unannounced

Completed on:
15 January 2026

Service provided by:
West Dunbartonshire Council

Service provider number:
SP2003003383

Service no:
CS2003014746

About the service

Whitecrook ELCC is a daycare of children service provided by West Dunbartonshire Council. The service is located in the Whitecrook area of West Dunbartonshire and is registered to provide care for up to 60 children aged from three years to those not yet attending primary school.

The service operates from purpose-built accommodation. This includes one large playroom, a smaller quiet playroom, a lunch room and changing and toilet facilities. A spacious, fully enclosed outdoor area is accessed directly from the main playroom, offering children regular opportunities for outdoor play and learning.

About the inspection

This was an unannounced inspection which took place on 13, 14 and 15 January 2026. 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 a small number of children using the service
- spoke with staff and management present on the days we visited the service
- gathered feedback from six staff members using a questionnaire
- gathered feedback from 11 family members using a questionnaire
- observed staff practice and children's experiences
- assessed core assurances, including the physical environment
- 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.

During this inspection, we 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

- Due to changes in management and peripatetic leadership arrangements, roles and responsibilities were still being established.
- Quality assurance and self-evaluation systems were in place; however, these were at an early stage and required further development to support improvement.
- Children were happy, settled and having fun. They experienced nurturing care from staff who knew them well.
- At times, staff deployment and supervision arrangements meant fewer opportunities to build on learning and support children's sustained engagement.
- A wide range of loose parts for play, indoors and outdoors, sparked creativity, imagination and problem-solving.
- Well-planned transitions helped children feel confident and secure, supporting continuity of care and relationships.
- Positive relationships had been established with families who were warmly welcomed into the service.

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	4 - Good

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

Leadership 3 - Satisfactory / Adequate

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

Quality indicator: Leadership and management of staff and resources

The provider, leadership and staff team engaged well throughout the inspection. They were open to sharing their views, acknowledged where changes were required, and were receptive to advice and support, demonstrating a willingness to take on feedback to improve outcomes for children.

The service had recently experienced a period of instability, including changes in management, the merger of two services, and the introduction of peripatetic leadership arrangement. Roles and responsibilities were still being established, and absences within the leadership team at times reduced leadership visibility and consistency. This meant that opportunities for consistent guidance, supervision and clear direction for staff were not always available, contributing to some gaps in quality assurance and oversight, including the monitoring of children's safety, supervision and staff deployment. This had the potential to impact the consistency of practice, and at times, the quality of experiences and care provided to children (see area for improvement 1).

The service's vision, values and aims were evident in practice, with play at the centre of the ethos and a focus on children being happy, secure and independent. The provider and leadership team recognised the need to revisit these with children, parents and staff to ensure they reflect the newly merged service and the evolving needs and views of families.

The provider and leadership were open and transparent about the impact of recent changes and areas requiring improvement. They had been working closely to support the service and had developed an action plan aligned with our inspection findings. Some progress was evident, including positive improvements to lunchtime experiences and the introduction of an indoor/outdoor register. While progress varied and some actions remained at an early stage, these developments had begun to support more positive experiences and care for children. We discussed that ongoing support for leadership should remain a priority, with a focus on developing systems, strengthening relationships, and improving quality assurance to ensure high-quality care and positive outcomes for children.

An improvement plan was in place with a focus on transitions between the services; this was planned and well thought out. A quality assurance calendar had been developed and some monitoring had taken place, such as reviewing learning journals. However, this was not yet consistent. Audits and checks, including accidents, incidents and medication reviews, safety checklists and risk assessments, were in place but required further development to better reflect best practice guidelines, indoor and outdoor environments, experiences and resources.

Audits of spaces had begun but were not yet completed, and staff deployment had not always been fully considered, which at times affected sustained interactions, children's play and supervision. The provider agreed to work with the leadership team to strengthen systems and review staff deployment to ensure a consistent approach to maintaining children's safety and quality of care.

Regular team meetings provided opportunities for discussion, reflection and sharing best practice. Leadership promoted an open-door approach, however, due to recent changes and relationships being at an early stage, staff were still building confidence in using it. While informal support was available, inconsistent supervision and appraisal, limited one-to-one discussions and on-the-floor feedback. Strengthening these arrangements will give staff clear expectations and continue to support their confidence contributing to positive outcomes for children.

The provider had recently created opportunities for staff and leadership wellbeing discussions, alongside issuing questionnaires. Staff reported feeling listened to and valued. The provider had plans to act on feedback, including individual support, team-building opportunities and increased leadership visibility which will further support staff, reinforce a positive, supportive culture and positively impact children's development and overall wellbeing.

Families were kept well-informed through information boards, newsletters and a digital app, and were given opportunities to share their views. Continuing to involve families in meaningful ways will further support and build on the positive partnerships already in place.

Areas for improvement

1. To ensure children consistently experience high quality care and support, the provider should strengthen leadership arrangements across the service. This should include, but is not limited to, developing approaches to peripatetic management by ensuring leaders have a clear understanding of their roles and responsibilities.

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 are well led and managed" (HSCS 4.23).

Children play and learn 4 - Good

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.

Quality indicator: Playing, learning and developing

Children were happy, motivated and enjoying their play. They confidently led their own learning, making choices that encouraged curiosity, creativity and independence. Children explored their interests, showed confidence, developed ideas and were having fun.

Most play spaces were thoughtfully planned and well-organised, creating warm and inviting areas that supported exploration and comfort. Cosy spaces offered opportunities for rest and connection, while a wide range of accessible, open-ended loose parts, available indoors and outdoors, encouraged problem-solving and imaginative thinking.

Children engaged in a variety of play experiences that supported learning across all areas. In the STEM room, they explored science, technology, engineering, and mathematics (STEM), experimenting with sand, mini laptops, nuts and bolts, and measuring and building with blocks. These activities promoted early mathematical thinking, enquiry and concentration.

Creative areas provided opportunities to mix paints, explore playdough and clay, build with recycled materials, create artwork and make potions. Imaginative play, including caring for baby dolls and exploring real fruit, supported communication, social skills and understanding of the world around them.

Literacy and numeracy were embedded throughout daily routines, wall displays and play experiences. Children enjoyed stories, number and matching games and a variety of mark-making opportunities. A word-aware approach, including a 'word of the week', supported vocabulary development, early literacy, numeracy, language and social interaction.

Outdoor play promoted active, sensory-rich experiences. Free-flow access supported independence and allowed children to make choices about their play. One parent told us: "Whatever the weather kids are outdoors which is very beneficial." Children explored ice, mud painting, water play and outdoor cooking, such as making porridge, supporting sensory exploration, life skills and creativity. Improved use of the garden on the second day of inspection increased opportunities for active, exploratory and risk-taking play. Children kept safe by wearing helmets while riding bikes and scooters and confidently used climbing and balancing equipment, developing coordination, resilience and physical skills.

Staff were passionate and caring. They had a good understanding of how children learn through play. Interactions were warm and encouraging, helping children feel secure, valued, and confident to try new experiences. Staff followed children's interests and offered meaningful, hands-on experiences.

At times, staff deployment and some aspects of the playroom and garden layout limited their ability to stay with children, which affected supervision and reduced opportunities to extend learning, provide challenge and sustain interaction. The provider agreed to review staff deployment and play space layouts, particularly within the large main area to better support supervision, learning and engagement.

Planning processes were in place, with responsive and intentional approaches linked to children's interests and next steps. Children's voices influenced planning and daily experiences, ensuring learning was meaningful. Teacher-led discussions supported a shared understanding of learning and development. The teacher and early learning lead worked closely with staff to monitor children's progress, particularly in literacy and numeracy. Evidence of children's development was well-documented and used to plan experiences that built on their skills, providing targeted support and challenge. As a result, children were making positive progress, and staff were confident in how best to support each child's individual learning.

Learning journals were available to children and parents, children proudly shared their learning and achievements. Some confidently talked about their experiences, friendships and important events. One child shared excitement about a new baby in their family, supported by baby doll play introduced beforehand to help with the transition. Another proudly showed a self-portrait, saying, "That's me, I'm happy", reflecting their wellbeing, self-awareness and sense of belonging.

Children are supported to achieve 4 - Good

We evaluated this quality indicator as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator: Nurturing care and support

Children were relaxed, settled and showed genuine warmth and affection towards staff, which was warmly returned. This reflected the strong, nurturing relationships in place. Staff were consistently kind, caring and respectful, offering cuddles, comfort and reassurance. They placed children at the heart of their practice, responding to their cues, emotions and needs, creating an environment where children felt secure and valued.

During welcome time, children arrived confidently and settled quickly with their key workers, engaging in nurturing conversations. Staff used this time to support children's emotional wellbeing, discussing safety and feelings and introducing supportive approaches, such as "paths," to help children understand and express emotions. The calm, unhurried start to the day helped children feel secure and ready to engage in learning at a time that was right for them.

Children were encouraged to develop independence in personal care, including using the toilet and handwashing, with staff offering praise and reassurance to support confidence and self-help skills. We discussed with the provider the importance of reviewing and prioritising supervision arrangements in this area to ensure children continue to feel safe and supported within the toilet area.

Mealtimes were calm, relaxed and unhurried. Staff sat alongside children whilst eating to ensure safety whilst eating, engaging them in conversation, supporting independence by encouraging children to serve food, pour drinks and clear plates, and praising their efforts. Food options were balanced, and staff demonstrated a good understanding of individual dietary needs and preferences. Recent improvements to mealtime routines supported children's wellbeing, confidence and independence. The leadership team planned to continue monitoring these experiences to ensure they remain positive and continue to meet the needs of all children.

Medication was stored safely, and staff confidently described how they supported children's individual healthcare needs, ensuring their safety and wellbeing. We observed staff involving children respectfully in their care, promoting their understanding of health, safety and encouraging active participation in managing their own needs.

Settling-in visits and transitions were carefully planned around the individual needs of children and their families. Staff shared information about routines, interests and additional support needs to ensure continuity of care. They worked flexibly across services to support children during transitions, demonstrating a strong understanding of each child's personality and needs, helping them feel secure and confident.

Personal plans were in place for all children and developed in partnership with families. Plans included key information about children's likes, dislikes, interests and health care needs. One parent commented: "We create targets collaboratively, which provides a strong homes link." Where additional support was required, the service worked proactively with families and other professionals to identify needs and implement strategies, ensuring each child's learning, development and wellbeing was fully supported.

Close, trusting relationships with families were evident. Parents were warmly welcomed at drop-off and pick-up, creating valuable opportunities for meaningful conversation and sharing information. One parent commented: "small chats at home time are purposeful and pleasant." Children observed these respectful interactions, which supported their sense of security and belonging. The cloakroom, with its individual coat pegs and dedicated spaces for artwork, encouraged children's independence while helping families feel connected to their child's daily experiences.

Family engagement was supported through stay-and-play sessions, Bookbug activities and an open-door approach. Parents commented on how much they enjoyed recent sessions, describing them as "fantastic", appreciating the chance to see their child's folder, and welcoming "more days where parents can get involved". Staff spoke of their plans to re-introduce further opportunities for engagement including forest experiences and parent evenings, recognising the value these bring to children and families.

Parents spoke positively about their relationships with staff, describing them as "lovely and approachable" and "always ready to help". Another parent said that: "Every member of staff is very caring and welcoming, and are grateful for the care, support, and attention the staff give to the children."

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 continue to develop children's personal plans, recording observations of children's learning and clearly identified next steps in learning. Next steps should be tracked to reflect on individual children's progress. Personal plans should be formally reviewed every six months with parents, or sooner if needed.

National Care Standards, Early Education and Childcare up to the age of 16, Standard 3: Health and wellbeing.

This area for improvement was made on 8 February 2018.

Action taken since then

Since the last inspection, the service had reviewed and updated the format of personal plans. These now include observations of children's learning, identified next steps and regular reviews with families.

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
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

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