

# Crown Corner Club Day Care of Children

Crown Corner Club  
Crown Church  
2 Midmills Road  
INVERNESS  
IV2 3NX

**Type of inspection:**  
Unannounced

**Completed on:**  
4 February 2026

**Service provided by:**  
Crown Corner Club

**Service provider number:**  
SP2003001775

**Service no:**  
CS2003008585

## About the service

Crown Corner Club is situated within the centre of Inverness. It is registered to provide a care service to a maximum of 40 children of primary school age at any one time. The service is provided by the management committee of Crown Corner Club.

The club operates from a hall in the upper floor level of Crown Church which is in close proximity to Crown Primary School. The service have the use of a hall space, kitchen and toilet facilities. Children also have indirect outdoor access to the primary school playing area. The club is close to local amenities such as shops, transport links and parks.

There were up to 38 children present at the time of the inspection.

## About the inspection

This was an unannounced inspection which took place on 02 February 2026 between 14:45 and 17:45 and 03 February 2026 between 13:45 and 18:00. The inspection was carried out by one inspector 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 15 responses to our request for feedback from parents and staff
- 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, 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**

- Children were settled and happily engaged in play experiences.
- Children received nurturing care and support from staff who knew them well.
- Children led their play through experiences inside and outdoors.
- The staff team were enthusiastic about their roles and were keen to continue engaging with training opportunities to develop their practice.
- Management should ensure children's play is consistently developed through skilled interactions and actions of staff.
- The setting should continue to develop quality assurance process, including the use of best practice documents, to support continuous improvement.

**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	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 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 new manager had recently reviewed the club's values, vision and aims with staff and children, using their feedback to develop a refreshed set of values. These were evident during inspection, with children engaged in creative activities and showing good awareness of safety when walking from school to the club. To embed these updated values, the manager introduced practical changes such as a fair Xbox sign up system and the use of SIMOA to support risk awareness. Although parents were not initially involved, as the manager had focused on building relationships with children, the new values were later shared with parents through newsletters and display boards, with positive parental feedback. This demonstrated a proactive approach to embedding values and improving experiences for children.

Children were meaningfully involved in shaping the service by introducing several new participation methods. They used a suggestion box to share snack ideas, with many requesting pasta, which was enjoyed during the inspection. A 'You said, we did' board helped show how children's views had led to changes, such as exploring circuits using blood glucose monitor components and test strips. The club also trialled a daily feelings chart where children placed their name under a happy, okay or sad face, encouraging conversations at home and enabling the manager to follow up on any concerns. Although parental questionnaires had not yet been issued under the new management, plans were now in place to introduce them; starting with a general survey and moving to more targeted ones. These approaches highlighted a developing, child centred ethos aimed to strengthen participation within the service.

Parents told us they felt meaningfully involved in helping develop the setting. One parent commented, "There's an active committee," while another said they felt welcomed to offer suggestions and were very satisfied with the service their child received. This reflected positively on parental engagement and the openness of the manager's approach.

The service was well led by a motivated manager who, despite limited management time, had established an inclusive and supportive environment for staff. Staff spoke positively about the changes made and the value placed on their ideas within staff meetings and support and supervision sessions. Self evaluation was developing well and included a detailed toy and resource audit involving children in identifying strengths, gaps and budget linked decision making. Staff meetings had also been used effectively for training, such as safeguarding, which staff found useful in recognising online risks. Leadership skills were developing through delegated responsibilities, including managing the creative area and medication systems. Staff also spoke about applying training, such as brain development learning, to support older children more effectively. The manager recognised this as an area for further development.

Quality assurance processes were strengthening. A new continuing professional development template was being used to support professional development. Support and supervision sessions were action focused, helping staff feel listened to and well supported. Policies had been updated, and audits such as medication checks were in place, with plans to extend this to accident and incident monitoring. Staff practice was observed informally, and although not yet recorded, the manager understood the value of documenting monitoring outcomes. A quality assurance calendar was supporting improvement planning, contributing to developments in values, children's voice and resources. The manager now plans to use the school aged childcare quality improvement framework to ensure improvements are specific, measurable and clearly linked to outcomes.

Since the last inspection, a new manager and bank play worker had joined the service. A recruitment oversight was identified. Two references had come from the same organisation; the manager acted quickly to obtain an additional reference. A staff specific recruitment checklist will now be introduced to support robust and consistent processes.

## Children play and learn 4 - Good

### Quality Indicator: Playing, 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.

The manager was beginning to strengthen the team's understanding of child development by signposting relevant training through support and supervision, for example a staff member developing their knowledge of brain development in adolescence, demonstrating a growing commitment to enhancing staff skills to support high quality experiences for children.

Children were happy, confident and engaged in their play during the inspection. They freely chose where to play and independently requested resources from staff. Following the toy audit, the setting created a picture catalogue of toys by category, which children used frequently at first and is still a helpful tool for supporting choice when children are unsure. Cosy spaces and open areas supported a range of play, such as babies and accessories on a rug on the floor and games on table tops. Children used resources well to extend their play, such as making a den with blankets and chairs in the cosy corner before enjoying books inside their den. Imaginative play was evident as children cared for baby dolls, dressing and settling them to sleep. Creative opportunities were strong, with children using loose parts like lollypop sticks, shells and silk flowers to make items such as photo frames. Children also explored a box of wool, making pom poms or finger knitting, and one parent shared that an older child had been teaching a younger child how to crochet. Social skills and cooperation were observed, with children problem solving together, for example, deciding whether glue or Sellotape worked best and helping each other hold materials. Older children supported their younger peers, such as sounding out the words for writing. The environment and interactions effectively promoted children's confidence, creativity, and social development.

Staff interactions were generally responsive, with staff picking up on children's cues and providing support when needed. For example, when a child appeared a little unsure, staff sensitively guided them towards the snappers activity, modelling how to use the snappers and helping the child create one. When staff supported children making pom poms, they used modelling and reflective questioning and problem solving alongside the children, particularly the younger ones, to help build their skills and confidence. On the second day of inspection, nine children played outdoors across two areas, the all weather pitch and the playground. We found however that experiences were limited and supervision was stretched, with only one staff member present. This meant the focus was on safety rather than interaction, support, or extending children's play, resulting in missed opportunities. The manager reflected on this and planned to ensure staff are clearer about expectations for outdoor interactions when children are split across play spaces. Overall, while staff showed strengths in responding to individual cues, further development is needed to ensure consistently high quality interactions, particularly during outdoor play.

The setting had developed a planning format that took account of the club's vision, values and aims, alongside national frameworks. The current format provided staff with an overview of planned experiences, supported by photographs. We discussed the potential for this to evolve into a floor book approach, enabling children to reflect on their play, contribute ideas and influence future planning. A key worker system was in place, with each key worker responsible for a group of children. Staff currently used notebooks to record brief observations, such as a child's developing interest and confidence in table tennis. These observations were undated and basic. There was scope to develop this further, and the manager planned to use iConnect software to share observations more meaningfully with children and parents. Good links with the school supported effective information sharing. The club also worked with community partners, such as the church elders to help promote recycling, with plans in place for children to take on monitoring roles. Planning and observation processes were developing well, with clear potential to strengthen children's involvement and enhance the quality and continuity of learning experiences.

## Children are supported to achieve 4 - Good

### Quality Indicator: Nurturing care and support

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.

Staff were warm and nurturing in their interactions with children. When younger children were collected from school, they were visibly excited to see staff, greeting them by name and eagerly holding their hands on the walk back to the club. Children sought staff out for reassurance when issues arose, and staff responded calmly, offering gentle guidance such as suggesting alternative solutions and supporting children to resolve concerns. Children told us they liked the staff and appreciated that "they don't shout, they just speak to us," highlighting the respectful and trusting relationships in place. It was clear that children felt safe, secure and able to approach staff confidently, knowing they would be listened to and that staff would act in line with the club's values. The quality of care and support was good and fostered positive relationships that promoted children's wellbeing, confidence and security.

Children were familiar with daily routines, independently hanging their belongings on pegs and washing their hands on arrival and before eating. While these routines were largely understood, some children would benefit from clearer support around snacks, particularly the expectation to sit at the table while eating. Staff encouraged this and used a visual reminder on the table. We discussed the importance of ensuring risk assessments and personal plans reflect these expectations to maintain clarity and safety. Transitions throughout the session were well supported; staff used cues such as the "five o'clock frenzy" reset to help children tidy up, and children moved smoothly between activities. The Xbox sign up system and timer worked effectively, most likely because children were involved in developing these routines and understood how they linked to fairness. Overall, routines and transitions were well managed, though greater consistency around snacks would further strengthen safety and clarity.

Safety procedures were also well managed. School pick up arrangements had recently been reviewed, including collecting primary one pupils directly from their classrooms. Older children who had permission to walk home alone were supported through an appropriate risk assessment. Children demonstrated strong awareness of safety during the walk from school: one reminded others to stay with the adult, while another completed a head count. Risk benefit assessments clearly outlined hazards, controls and benefits. Accident and incident forms were well completed and signed by staff and parents. Medication was stored securely in a cupboard, with individual items in named bags with photographs. One bag required a replacement label due to the existing label being faded. Medication forms were fully completed and were reviewed every three months with parents. Staff were trained and confident in the administration of medication. These effective safety practices contributed to maintaining children's wellbeing and security.

Snack time was a relaxed, social experience that children enjoyed. They spoke confidently about their involvement in planning snacks, helping with the Tesco order each Friday through the suggestion box. Children also described their enjoyment of preparing foods such as bread, sushi and pizza during holiday club. Daily snack preparation involved children chopping fruit and vegetables; one child proudly shared, "I have a proper knife because I am good at this." Children self served fruit, poured drinks and scraped plates, with scope to extend these opportunities further. Staff supervision improved on the second day of inspection, when staff sat with children throughout snack, supporting good social interaction and language development. Overall, snack time promoted independence and life skills while offering opportunities for refinement to enhance participation and safety.

Personal plans were in place for all children and key workers reviewed these regularly with parents to ensure information was accurate and up to date. Current plans included registration details and "All About Me" information completed with children. The manager planned to streamline these using the wellbeing indicators to create a more holistic overview. Chronologies recorded significant events, helping staff identify patterns and support children where needed. Personal planning processes were developing well, with clear steps to improve consistency and the quality of information used.

Staff knew children and families well, confidently discussing children's personalities, interests and preferences. Parents were warmly welcomed at collection time, and we observed positive conversations and effective handovers. A digital photo frame displayed in the public space showcased children's experiences. Parents praised communication and relationships with staff, noting they were friendly, professional and approachable and knew the children well. Positive relationships and open communication contributed to an environment where children and families felt valued and connected to the service.

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

### Requirements

#### Requirement 1

By 09 August 2024 the provider must ensure that the safety, health and wellbeing of the children is improved.

To do this the provider must, at a minimum:

- a) ensure that staff are knowledgeable and competent in relation to safe record keeping and administration of medication;
- b) implement a system for management to audit and review the storage, management and administration of medicine.

This is to comply with Regulations 4 and 10 and of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

4. — (1)

A provider must:

- (a) make proper provision for the health, welfare and safety of service users;

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 because people have the necessary information and resources".  
(4.27)

**This requirement was made on 1 August 2024.**

#### Action taken on previous requirement

Staff were knowledgeable and competent in relation to safe record keeping and administration of medication. The setting had implemented a system to audit and review the storage, management and administration of medicine. This was now in line with best practice guidance.

**This requirement has been met.**

**Met - outwith 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

To support children's wellbeing, development needs and progress, being effectively met, children's personal plans should be further developed and streamlined.

This should include but is not limited to:

- a) All information is accessible to staff and can be clearly shared.
- b) Plans should be reviewed and updated as children's needs, challenges and achievements change, or at least every six months in line with legislation.
- c) All staff are knowledgeable about each child's health and wellbeing needs and that tailored care and support strategies are provided and used effectively to meet those needs.

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 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 March 2023.**

#### Action taken since then

Plans were being reviewed and updated with key workers and families regularly. This meant that care was tailored to support children's needs, challenges and achievements. All staff were knowledgeable about each child's health and wellbeing needs and could discuss how they were supporting children effectively.

**This area for improvement has been met.**

#### Previous area for improvement 2

To ensure children experience homely and nurturing mealtimes, the provider and manager should review and improve the snack time experience.

This should include but is not limited to:

- a) promoting and developing opportunities for children to develop their self-help and independence skills;
- b) involving children in the preparation and delivery of snack; and
- c) reviewing staff deployment during the snack time experience to ensure there are more opportunities to promote social interactions.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can enjoy unhurried snack and mealtimes in as relaxed an atmosphere as possible.' (HSCS 1.35).

**This area for improvement was made on 27 March 2023.**

## Action taken since then

Children experienced relaxed and unhurried mealtimes. Children told us about their involvement in planning snacks, helping with the Tesco order each Friday through the suggestion box. Children also described their enjoyment of preparing foods such as bread, sushi and pizza during holiday club. Children self served fruit, poured drinks and scraped plates, with scope to extend these opportunities further. Staff supervision improved on the second day of inspection, when staff sat with children throughout snack, supporting good social interaction and language development.

**This area for improvement has been met.**

## Previous area for improvement 3

To support the effective development of the service and improve children's experiences, the provider should ensure effective quality assurance processes are developed.

This should include, but is not limited to:

- a) developing clear and effective plans to maintain and improve the service; and
- b) ensuring effective systems are in place to monitor and improve staff practice, quality of children's play and learning experiences and the service as a whole.

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, the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

**This area for improvement was made on 27 March 2023.**

## Action taken since then

Effective quality assurance processes were developing well. The manager had a clear and effective plan in place which was supporting improvements and outcomes for staff and children. Staff practice was observed informally and was supporting developments such as the quality of children's play and learning experiences. The manager now plans to document monitoring outcomes.

**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](http://www.careinspectorate.com).

## Detailed evaluations

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