

Oakbank Kids Club Day Care of Children

Oakbank Primary School
Viewlands Road West
Perth
PH1 1NA

Telephone: 01738 477 576

Type of inspection:
Unannounced

Completed on:
12 February 2026

Service provided by:
Perth & Kinross Council

Service provider number:
SP2003003370

Service no:
CS2003051103

About the service

Oakbank Kids Club provides a daycare of children service in Perth. The service is registered to provide a care service to a maximum of 45 children at any one time, of primary and secondary school age to 14 years. The service operates from the dining hall within the premises of Oakbank Primary School. During term time, children attend from Oakbank Primary School and during in-service and holidays, children may attend from a variety of areas.

Children have access to a large dining hall, toilets, gym hall, and the school playground. The service is situated in a residential area of Oakbank, close to schools, parks, and public transport.

About the inspection

This was an unannounced inspection which took place on 11 February 2026 between 09:20 and 17:00. Feedback was shared with the service on 12 February 2026. This 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 and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. To inform our evaluation we:

- spoke/spent time with 30 young people using the service
- received seven completed questionnaires from families using the service
- spoke with six staff and the manager
- assessed core assurances, including the physical environment
- observed practice and daily life
- 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 Leadership and Children are supported to achieve.

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, families, and staff contributed meaningfully to developing the service's vision and values.
- Quality assurance processes should be strengthened to ensure they are clear, robust, and used consistently to drive sustained improvement.
- Policies and procedures should be followed to ensure children's safety and wellbeing are consistently maintained.
- Positive friendships and warm interactions were a notable strength and contributed to high quality play experiences.
- Children were supported to make choices, express their views and influence their play and learning.
- Personal plans should be reviewed and developed to guide staff more effectively in meeting children's individual needs.
- Transitions should be enhanced to ensure all children experience well planned, high quality care and support.

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

Quality Indicator: Leadership and management of staff and resources

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

A shared vision and values had been developed in consultation with children, families, and staff. These reflected the service's aspirations for children to be happy, healthy, and confident. One parent told us, "They have a strong ethos on the child's rights and voice." Children's involvement in shaping the vision demonstrated that they were meaningfully included in service improvements.

Self-evaluation was at an early stage and was beginning to support staff to identify strengths and areas for development. The service had introduced the Quality Improvement Framework for the Early Learning and Childcare Sector. This had helped staff to recognise the need for improved systems to gather and use children's interests and skills to inform planning. Observations of practice enabled the leadership team to identify areas requiring improvement. Plans to introduce peer observations were positive and would further support reflective practice and strengthen the quality of children's experiences. This showed that enhancing children's play and learning remained central to improvement planning.

Improvement priorities had been identified at a pace appropriate to the needs of the service. Staff were empowered to contribute to improvement processes, creating priorities that were meaningful to them. Families had been consulted and their contributions had influenced aspects of the service. A range of tools existed for engaging families; however, these were not used consistently. One parent commented, "They provide great materials for parents to look at to learn more about the kids club." Others reported mixed experiences regarding communication and connections with staff. Floor books demonstrated how children's views informed developments, though these were not consistently updated. Ensuring regular floor book updates and consultations with families would help maintain their voices at the heart of planning.

Quality assurance processes required further development to ensure they were robust and consistently implemented. While some audits were in place, these lacked clarity about whether actions had been taken. For example, monthly questionnaires for families had not been issued, and there was limited evidence that additional support needs reviews had taken place. Establishing timely, action-oriented quality assurance processes would support sustainable change and improved outcomes. (See area for improvement one)

Children's safety was maintained through mostly effective registration procedures. We discussed instances where children were expected but had not attended, and the associated processes. The service should ensure these procedures are followed consistently and without delay. This would support staff in confidently knowing that children were safe. (See area for improvement two)

Clear processes were in place to support new staff. Induction procedures and an online Padlet helped ensure new staff were familiar with key aspects of the provision. Regular observations of practice and team meetings supported staff to identify strengths and areas for development. These approaches recognised the importance of ensuring high quality experiences for children.

Areas for improvement

1. To ensure that children experience consistently positive outcomes, the provider should implement clear and robust quality assurance processes.

This should include, but is not limited to:

- setting clear expectations and timelines for audits and reviews
- ensuring systems include action tracking and evidence of completion
- supporting staff to understand and carry out quality assurance responsibilities
- using information from audits and family consultations to drive improvements.

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

'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

2. To ensure children's safety and wellbeing are maintained, the provider should ensure that policies and procedures are understood and actioned.

This should include, but is not limited to:

- ensuring registration and non-attendance procedures are understood and followed without delay
- developing staff awareness and confidence within the service policies and procedures.

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

'If I go missing, people take urgent action, including looking for me and liaising with the police, other agencies and people who are important to me' (HSCS 3.23).

Children play and learn 4 - Good

Quality Indicator: 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.

Most children appeared confident, settled, and purposeful in their play. They were able to lead their own experiences, and overall were engaged and had choice in how they spent their time at the club. This supported freedom, ownership, and opportunities for children to use their imagination and creativity.

A broad range of play spaces were available to meet children's needs and interests. This included small-world resources, construction, arts and crafts, board games, and books appropriate to different ages and stages. For example, children using the Minecraft blocks created stories that encouraged them to develop thinking skills in fun and meaningful ways. This contributed to children developing skills for life within a playful, stimulating environment.

Staff joined children in a variety of activities, such as drawing, games and role play, including imaginative scenarios like hairdressing. Interactions were warm and caring, and staff took time to talk with children about their interests and ideas. At times, play was enhanced through high quality staff engagement. For example, staff supported children to organise games in the gym hall, offering suggestions while recognising and respecting children's choices and ownership of their play. This enabled children to make decisions, express themselves and feel valued.

There were missed opportunities to further support meaningful engagement in play. Some children were observed becoming disengaged without staff noticing. While staff were actively involved at activity tables, their focus on specific areas reduced their overall awareness of the room. As a result, opportunities for timely support were limited and some disengagement went unrecognised.

Planning was child centred and informed by children's interests. Children were enthusiastic and motivated to take part in planned experiences. For example, children discussed with staff the circus tricks they wished to try during a themed afternoon. One parent noted, "As a working parent it is wonderful when your child is happy and comfortable in after school care and wants to be there." A yearly holiday programme was developed in collaboration with other clubs. This supported a balance of planned and responsive opportunities and recognised children as partners in leading their play.

Staff were responsive in the moment, listening to children and providing resources to extend interests. For example, when children asked to play snakes and ladders, staff offered a choice between a tabletop game and the larger floor version. Children chose the floor game, which was promptly provided, and staff joined in their play. This supported children's autonomy and upheld their role as leaders in their play.

The setting had developed positive links with the local community, which enhanced children's experiences. Visits from local groups, including St Johnstone footballers and cricketers, offered opportunities for children to try new physical activities and develop an awareness of sports and teamwork. These partnerships enriched the quality of children's play and supported their sense of connection to the wider community.

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.

Children experienced warm and caring interactions from staff, which supported them to feel secure and develop trusting relationships. Most children appeared confident approaching staff and engaged in relaxed, friendly conversations. Feedback from parents reflected these positive relationships, with one stating, "[Staff] is a superstar, friendly, professional, really knows the kids, listens and genuinely cares." This demonstrated that staff had begun to build meaningful connections with children and families.

Children's friendships were a notable strength within the setting. New children were welcomed and invited to join in games, and older children acted as positive role models for their younger peers, helping to promote a sense of belonging. Children spoke enthusiastically about seeing friends from other clubs. This demonstrated that peer relationships contributed positively to children's overall wellbeing.

Spaces were available for children to rest and relax, either alone or with friends. Children were observed reading, chatting, and taking part in quieter activities. This helped recognise children as individuals and supported their emotional wellbeing.

Personal plans were in place and provided a foundation for gathering information about children's needs. However, the quality of information within the plans was inconsistent and did not reliably identify children's individual needs or clearly outline how these needs should be met. This created gaps in both the accuracy of the plans and staff understanding of children's specific health and wellbeing requirements. Personal plans should be strengthened to ensure information is current, relevant, and used effectively to guide staff practice. This would support staff to meet children's needs more consistently. (See area for improvement one)

All About Me documents complemented personal plans and enabled children to share their interests and preferences, supporting a more child centred approach. The manager advised that these were being further developed to increase children's participation, such as enabling them to identify their own support strategies or personal goals. This would help children understand their needs and meaningfully contribute to their own planning.

Mealtimes were calm, sociable experiences. Children could choose where to sit, which encouraged natural friendships and meaningful interactions. Staff sat alongside children, modelled positive social behaviours, and contributed to warm, engaging conversations centred on children's interests. However, not all children were aware when snack was available. We observed children reporting that they were hungry and did not know snack had been open. We suggested that staff consider how they communicate snack availability and explore options such as having fruit accessible throughout the session. This would promote children's choice and support them to regulate their own needs.

Transitions into the setting were not consistently well supported. As a result, some children experienced uncertainty, affecting the quality of their transition. Staff should consider how they develop relationships and get to know children who attend from different services and settings. This would include ensuring key information is communicated and recognised to support children's wellbeing. While children were pleased to see staff they knew, greeting them warmly with hugs and smiles, staff transitions, such as the end of a shift, were not always explained to children. The service recognised the need to develop more consistent opportunities for family involvement, alongside building staff confidence in forming relationships with families. This would support positive outcomes for children and ensure families felt valued. The manager had already begun reflecting on how this could be improved. Strengthening transition processes would help children feel valued and maintain secure relationships. (See area for improvement two)

Areas for improvement

1. To ensure children's health and wellbeing needs are fully understood and met consistently, personal plans should be further developed. This would ensure they provide accurate, up to date and comprehensive information about each child's individual needs.

This should include, but is not limited to:

- clearly identifying children's health, wellbeing, and support needs
- outlining how staff will meet these effectively in practice.

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

2. To ensure children's needs, routines and individual circumstances are effectively understood and shared, the provider should improve how transitions into and within the setting are planned and supported. This should include during the in-service and holiday provision.

This should include, but is not limited to:

- developing methods to support children, families and staff build positive relationships
- ensuring effective information processes are in place to meet all children's needs
- consider continuity of care and support to secure children's wellbeing.

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

'I can build a trusting relationship with the person supporting and caring for me in a way that we both feel comfortable with' (HSCS 3.8) and 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

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	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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