

# Rooftop ELC Day Care of Children

Rooftop Early Learning & Childcare  
39 The Olympia  
Town Centre, East Kilbride  
GLASGOW  
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Telephone: 01355 222 066

**Type of inspection:**  
Unannounced

**Completed on:**  
25 February 2026

**Service provided by:**  
South Lanarkshire Council

**Service provider number:**  
SP2003003481

**Service no:**  
CS2020379019

## About the service

Rooftop ELC is registered to provide care to a maximum of 114 children, of those 114 none are aged under 2 years and no more than 10 are aged 2 to 3 years. Care is provided from a converted property within The Hub EK shopping centre, located within the town centre area of East Kilbride. The service is close to shops, schools, transport routes and other amenities. Children were accommodated within two playrooms that led directly to a secure garden.

## About the inspection

This was an unannounced inspection which took place on Tuesday 24 and Wednesday 25 February 2026 between 08:00 and 17:00. Feedback was given on Wednesday 25 February 2026. 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:

- spoke with six people using the service and seven families
- spoke with 10 staff and management
- 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, 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**

- The service had worked hard to address the requirement and areas for improvement from the last inspection. Monitoring processes, staff deployment and recruitment were robust and being monitored on a regular basis.
- The service environment had improved. Cosy, stimulating spaces were available for children to and were helping to support their interests and individual needs.
- Children were able to flow between indoors and outdoors all day as part of their play and learning. Deployment of staff had been reviewed and was beginning to enhance children's opportunities to explore in more depth, engage in risky play and build creativity and curiosity both indoors and outdoors.
- Staff had created a warm and welcoming space for children. Staff were consistent in their practice and nurturing in their interactions when supporting individual children's needs.

**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 team were aligned with the service aims, vision and values of nurture, partnership working, respect and fun. Care was provided in a warm and welcoming setting.

Children and families were consulted as part of the service reviews and improvement planning. The current improvement plan was focused on raising awareness of children's rights, introducing digital technology and developing extended opportunities to support creativity in children's play. The service had placed children's learning through play at the centre of improvement planning. This approach was leading to improved outcomes for children and increased parental participation.

The service had committed to an appropriate pace of change which was helping to sustain long term improvements at the service. Staff training was regular and included a focus on areas such as tracking and monitoring, science, technology, engineering and mathematics (STEM) sessions as well as child protection. Learnings were shared with the wider team which had led to improved outcomes for children. For example, because of participation in additional support needs training staff told us they had "Increased confidence and knowledge in supporting children".

Quality assurance systems such as monitoring and mentoring staff had supported consistency in practice and the development of a shared vision for delivering quality care and learning. Evidence and reflections both individual and across rooms had assisted the team to identify and embed strengths and begin progressing actions identified as areas for improvement.

The staff had worked hard to address the requirement and areas for improvement from the last inspection. Skills and confidence had increased, and this was helping them know what was important to meet the needs of children. The team had embraced the journey of well-informed change and had taken responsibility for it.

We discussed next steps that would continue to support knowledge and learning across the wider team. Staff were onboard with improvements underway, and one staff member told us, "I have only been at Rooftop ELC for a short time, I already feel well settled and part of the team. I am excited to continue my journey here, supporting both staff and families to achieve positive outcomes".

Staff were safely recruited and they understood their responsibilities within the team. Induction programmes were personalised to meet needs. A staff member told us, "My induction and mentoring were clear and supported. I have provided suggestions to management for what can be added into the induction pack which have since been added". There were processes for mentoring and supporting staff. Mentors were clear about their roles and responsibilities, and they had written information they could refer to. Together these approaches supported quality outcomes for all children.

**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.

Play spaces had been reviewed and improvements made ensured spaces were easy to access, children had the ability to flow freely and cosy spaces were included. This helped to promote the delivery of quality play experiences. Rooms offered a variety of experiences such as art and crafts, books, puppets, snack and meals area, large climbing frame, sensory area, construction equipment and imaginative play resources. Children moved between areas with confidence, interest and purpose.

The service was taking positive steps to monitor and continue to increase children's opportunities to be curious in their play. The 2-3 room were developing heuristic play through a sensory focused and child led approach. Staff were consistent in their practice and interactions when supporting individual children's needs during this play.

Children were having fun, experiencing joy and mostly engaged in quality play and learning experiences both indoors and outdoors. Many children were actively involved in leading their own play and learning. We discussed children's rights which linked to the current focus staff were leading related to children's right to their name.

Children were able to flow between indoors and outdoors all day as part of their play and learning. Deployment of staff had been reviewed to enable this, and it was leading to better play experiences for children that had elements of depth, richness and creativity. For example, children had been involved in developing and tending to a garden outdoors. Throughout the year they had grown potatoes and sunflowers and bulbs had already been planted for the coming Springtime.

The outdoor area was well used all day by children from all rooms in all weather. There was water play, a mud kitchen, digging and planting bulbs, potatoes and carrots were buried in the sand to dig and explore. There was an obstacle course made from crates and planks of wood, a scooter track with safety helmets and large-scale building opportunities with wooden blocks, diggers and wheelbarrows. Staff supported children's interests and extended learning. For example, when outdoors a group of children engaged with a staff member to make pretend tea and food in the outdoor kitchen. Children were following each other's imaginative play scenarios, and the staff member knew when to observe and when to take part in children's play to extend and develop learning.

Staff were at various stages of using observations effectively to recognise and extend children's knowledge, understanding, skills and achievements. Monitoring and mentoring activities were helping staff develop their skills and as a result, most children were able to progress at their own pace.

Overall, children were at the centre of planning. Staff were working to ensure responsive planning was part of their focus in supporting children's play and learning. Best practice guidance to monitor and maintain the provision of core elements that support children's continuous learning and development was in place.

## 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 fully understood the role they played in keeping children safe. Systems in place were helping this such as safe sleep and mealtime procedures and the management and administration of medication. Child protection training had also taken place. As a result, we were confident they would respond correctly if concerned about a child.

The service had plans in place to improve the lunchtime experience in the 3-5 room and we agreed that was needed. At times the lunch experience was task driven and there were missed opportunities to promote life skills with children like cutting and pouring and the development social skills such as chatting with staff and other children. However, this had already been identified as part of the service quality assurance monitoring. Evidence shared highlighted the changes planned. This included ensuring children had a relaxed and supportive experience that took place at a pace suitable for their individual needs. We were satisfied that the service had identified what needed to improve, a suitable timeframe to commence change and were able to demonstrate they had the capacity to successfully implement that change.

Staff had created a welcoming environment. Feedback from a family reflected this. One parent said they felt staff were, "Approachable, kind and warm in their interactions with my children and myself as a parent" and another said staff were, "Very sensitive in their approaches to supporting the morning transition. I feel the team have a brilliant attitude".

There was a focus on the development of personal planning to bring consistency in children's plans. Minor points noted within these at inspection had already been identified by management as part of monitoring activities and staff were working to address these. Overall, children's care and learning routines were mostly individualised and delivered with kindness and compassion. Continued focus by management to monitor and mentor best practice would support staff skills and knowledge to be attuned to all children's individualised learning.

Children were well cared for and nurtured. A commitment to parental partnership was supported in a variety of ways such as parents group meetings, home link bags, stay and play sessions and a nurture and attachment group. A parent told us, "I am happy with the communication at the service. The manager is approachable. My child has recently joined, and I feel they are well supported by staff during this time".

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

### Requirements

#### Requirement 1

By 28 February 2025, the provider must ensure there are robust medication procedures in place to support children's health, safety and wellbeing. To do this, the provider must, at a minimum:

- (a) ensure management and staff are aware of all medication stored within the service
- (b) ensure all documentation is signed and complete where required and all health plans are in date
- (c) ensure robust monitoring systems are put in place and maintained.

This is to comply with Regulation 4(1)(a)(Welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11).

This is to ensure care and support is consistent with the updated good practice document, "Management of medication in daycare of children and childminding services."

**This requirement was made on 15 January 2025.**

#### Action taken on previous requirement

Since the last inspection the service had taken several steps to ensure robust monitoring systems were put in place and maintained. This meant robust medication procedures were in place to support children's health, safety and wellbeing. This included ensuring management and staff were aware of all medication stored within the service and ensuring all documentation was signed and complete where required and all health plans were in date.

**Met - within timescales**

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

### Areas for improvement

#### Previous area for improvement 1

To fully support creativity, choice and imagination in play and learning, resources and play spaces should be reviewed and replenished to ensure children can access a wide range and variety of good quality resources. There should be more cosy, comfortable spaces and increased opportunities for free-flow play between the indoor and outdoor environments for all children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "As a child, I can direct my own play and activities in a way that I choose and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity" (HSCS 2.27) and "As a child, I play outdoors every day and regularly explore a natural environment." (HSCS 1.32).

**This area for improvement was made on 15 January 2025.**

#### Action taken since then

Play spaces had been reviewed and replenished. Children had access to a wide range and variety of good quality resources. There were more cosy, comfortable spaces and all-day opportunities for free-flow play between the indoor and outdoor environments for all children. This was helping to support creativity, choice and imagination in play and learning.

This area for improvement was addressed.

#### Previous area for improvement 2

To ensure children's safety, to be in line with safe recruitment practices and to comply with individual staff and management responsibilities, the provider should ensure there are systems in place to ensure staff have applied to be registered with the relevant regulatory bodies within the required timescales.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes." (HSCS 3.14).

**This area for improvement was made on 15 January 2025.**

#### Action taken since then

Systems were in place to ensure staff had applied to be registered with the relevant regulatory bodies within the required timescales. These systems were aligned with safe recruitment practices. Individual staff and management compliance with their responsibilities ensured children's safety.

This area for improvement was addressed.

### Previous area for improvement 3

To support children's care, support needs and wellbeing and to enable children to access all areas available to them more freely, the provider should deploy staff more effectively across the setting throughout the day.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: "My care and support is consistent and stable because people work together well" (HSCS 3.19) and "My needs are met by the right number of people" (HSCS 3.15).

**This area for improvement was made on 15 January 2025.**

#### Action taken since then

Children were able to flow between play spaces, rooms and outdoors during the inspection. Staff were supportive of children's movement around spaces. Staff deployment supported the management of this during inspection and systems were in place to monitor and support.

This area for improvement was addressed.

## 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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