

Drakies Out of School Club Day Care of Children

Drakies Primary School
Drumossie Avenue
Inverness
IV2 3SG

Telephone: 07876 542 621

Type of inspection:
Unannounced

Completed on:
26 February 2026

Service provided by:
CALA Out of School Care

Service provider number:
SP2010011111

Service no:
CS2010278924

About the service

Drakies Out of School Club is a day care of children service located in Drakies Primary School in the Drakies area of the city of Inverness.

The service is registered to provide a care service for a maximum of 26 primary school aged children during term time. The service is situated in a residential area near parks, shops and other amenities. Children are cared for in a room used by Drakies Primary School during school hours. They also have access to a large secure enclosed outdoor area.

About the inspection

This was an unannounced inspection which took place on Tuesday 24 February, between 14:30 and 17:45, and Wednesday 25 February 2026, between 14:30 and 16:30. This 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, complaints information, information submitted by the service and intelligence gathered throughout the inspection year. To inform our evaluation we:

- spoke/spent time with children using the service
- received five completed questionnaires from families/carers of children, and no completed questionnaires were received from staff/relatives and carers.
- spoke with staff and the management team
- 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, no improvements were identified relating to core assurances.

Key messages

- Children experienced warm, compassionate interactions from staff which supported positive relationships and gave children the message that they mattered and were valued.
- There were limited resources available to provide opportunities for open ended, imaginative play or for children to experience challenge and be creative.
- Snack was a sociable, relaxed time with opportunities for children to be involved and to develop independence skills.
- The service should now work to close gaps identified in quality assurance, which led to some medical details not corresponding across recorded personal planning information.
- An area for improvement remains in place in relation to developing quality assurance processes to support continuous improvement within the service.
- While children had been enabled by staff to have some say in the activities on offer, there was scope to increase the basic daily provision of areas and resources.
- Families who responded to our online survey told us they appreciated the friendly and approachable staff team who welcomed them into the service, and who had developed supportive and caring relationships with their children.

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 thrive and develop in quality spaces	3 - Satisfactory / Adequate
Children play and learn	3 - Satisfactory / Adequate
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 just outweighed the weaknesses.

Leadership and management of staff and resources

The service had begun to reflect on its vision, values and aims. Children had taken part in an activity to explore their views and ideas in relation to the service vision, values and aims. The manager recognised that involving children and families in reviewing these would help ensure the service reflects their aspirations. This would support more meaningful engagement with children's rights, needs, interests and preferences.

Some steps in improvement were evident, such as reflecting children's ideas and interests in the provision of appropriate indoor resources. Overall, quality assurance, monitoring and self-evaluation processes were not yet robust enough to support continuous improvement. Systems for self-evaluation and monitoring remained at an early stage of development. While some changes had been documented, self-evaluation did not consistently identify what was working well or where further development was needed. This meant the impact of improvements on children's experiences and outcomes was not clearly evidenced. Inaccuracies in medication records highlighted gaps in quality assurance, with some details not corresponding across written documents. Timescales for reviewing medication were unclear, with planned review dates not aligning with the required three month cycle. As a result we have made an area for improvement.

(See area for improvement 1).

Some support and supervision arrangements for staff were in place. While some staff needs, such as training had been identified, these were not always followed up. It was not evident how staff understanding of their roles and responsibilities was being assessed effectively, through support and supervision or other reflective processes. There was scope to improve monitoring of staff practice, particularly where this could support skill development and strengthen consistency across the team. Staff told us that they needed more time for tasks such as planning, evaluating resources and participating in self evaluation. Providing this time could strengthen reflective practice and help embed best practice guidance.

While there were some emerging improvements, the service now needs to strengthen its quality assurance and monitoring processes to support sustained improvement and ensure positive changes are embedded. An area for improvement made at a previous inspection has not been met and remains in place.

(See section, What the service has done to meet any areas for improvement we made at or since the last inspection).

Areas for improvement

1.

To support children's safety, health and wellbeing, the provider should ensure that staff are knowledgeable and competent in relation to providing care and support that reflects best practice guidance, Management of medicines in daycare of children and childminding services, and apply this in practice.

This should include but is not limited to:

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

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

'I have confidence in people because they are trained, competent and skilled.' (HSCS 3.14)

Children thrive and develop in quality spaces 3 - Satisfactory / Adequate

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

Children experience high quality spaces

Children benefitted from a service that recognised the importance of spending time outdoors for overall wellbeing. Children could free-flow between indoor and outdoor areas for most of the session. Increased use of walkie talkies would strengthen monitoring of children's movement between areas. When safe access to the outdoor area was temporarily compromised by workmen on site, staff confidently carried out a risk assessment which included the children staying indoors for a short time. As soon as staff assessed that it was safe to do so, they enabled children to safely access the outdoor area

Children's outdoor play was limited by the resources available to them which, during inspection, comprised of some footballs and a set of walkie talkies. While the service had identified this as an improvement priority, a lack of available storage had continued to delay progress. This limited opportunities for creativity, imagination and challenge in children's outdoor play. As a result, we have reviewed and amended a previous area for improvement in relation to enabling children access to a range of developmentally appropriate resources to include the outdoor area.

(See area for improvement 1).

Children had been enabled by staff to have some say in the activities on offer. For example, older children had requested a table on which to set up a homework club. The indoor playroom was used throughout the day by the school. As a result, indoor spaces were set up each day. Staff set up some basic areas and resources which reflected children's current interests. They told us that they responded to children's requests for other toys and materials during sessions.

However, resources provided were not stimulating or suitable for meeting the developmental needs of older children. There was scope to increase the basic daily provision of areas and resources. For example, while blankets and cushions were provided they were left in a bag rather than arranged to create cosy, homely spaces for children to relax. Some basic provision such as access to books was not available during inspection.

As a result, an area for improvement previously made remains in place.

(See section, What the service has done to meet any areas for improvement we made at or since the last inspection, and area for improvement 1).

Children's health and wellbeing benefitted from established routines for handwashing at key times, such as before eating. We suggested that effective handwashing could be further enhanced by increasing the consistency of supervision. Other infection prevention and control measures, such as wiping tables before and after snack, supported children to be safe and healthy. Being involved in such routines supported the development of lifelong skills, such as learning about the importance of good hygiene.

Areas for improvement

1.

To ensure children have access to a range of developmentally appropriate resources which reflect their interests, encourage creativity and allow them to develop lifelong skills, the provider and manager should review and improve opportunities for play and learning indoors and outdoors. This should include but is not limited to providing suitable resources and materials to effectively engage and challenge children's play, learning and interests.

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

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.' (HSCS 1.25); and

'As a child, my social skills, confidence, self-esteem and creativity are developed through the balance of organised and freely chosen extended play, including using open ended and natural materials.' (HSCS 1.31).

Children play and learn 3 - Satisfactory / Adequate

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

Playing, learning and developing

Children were generally engaged in activities of their choice. Their development and interests were supported by staff who spent time interacting and conversing with them. For example, a member of staff responded sensitively to a child's comments and questions about animals, helping to enrich the child's knowledge and understanding. Positive relationships and interactions were evident across all age groups. Staff told us they aimed to create a family feel within the service. This ethos was reflected in children who appeared settled and calm, demonstrating that they felt valued and their views listened to.

Planning for activities was child-led and responsive to some of their interests and choices. There were some play opportunities that enabled children to engage creatively. For older children, these needed to be developed to provide challenge and to motivate them to explore their own ideas. The service was in the

early stages of implementing the use of floorbooks to document children's ideas and some activities. There was scope to develop this further to include achievements, successes and learning.

Staff maximised children's access free-flow play between the playroom and a large, enclosed outdoor area. The variety of play opportunities in the outdoor area was limited. During our inspection children played with footballs and walkie talkies. There were no large loose parts or other open ended resources available to encourage communication, creativity and problem solving skills.

(See section, What the service has done to meet any areas for improvement we made at or since the last inspection).

The service should now consider how they inspire creativity and imagination through an enabling environment.

Children are supported to achieve 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.

Nurturing care and support

Children experienced compassionate, warm interactions from staff. Children had clearly developed strong bonds with staff and quickly relaxed into their time in the service.

Children were supported to develop independence and ownership of some aspects of their out of school care. For example, they had created "passports" which they used as a visual check-in on arrival, and to indicate when they had accessed snack. This routine enabled children to confidently manage simple routines for themselves, strengthening their decision making skills, and sense of responsibility within the setting.

Families were welcomed into the service when collecting their children, creating a warm and inviting environment that supported the sharing of information with staff. The introduction of a digital platform was at an early stage of implementation. Staff had begun to use it to share children's successes and achievements with families. We suggested that the service consider how informal information shared by families could also be recorded in personal plans. This could help to build a more comprehensive picture of each child's strengths and support needs.

Personal plans contained basic information which was sufficient to document children's ongoing needs. Strategies to support children's needs were not always recorded in a clear or detailed way. This had the potential to limit how well staff could respond at the right time to enable children to reach their full potential. Personal planning could be further strengthened through consistent use of the SHANARRI (safe, healthy, active, nurtured, respected, responsible and achieving) wellbeing indicators to assess and plan for children's overall wellbeing, and to underpin conversations with families about strengths and support needs.

We found inconsistencies in how some medical information was recorded across personal planning documents. This had the potential to compromise children's health and care. When we highlighted this to the manager, action was taken immediately to rectify this situation with families. We have added an

additional part to the existing area for improvement under Leadership and management of staff and resources in relation to developing robust quality assurance processes.

(See section, Leadership)

A recently implemented routine was supporting children to choose when they had snack. This meant they could continue to enjoy uninterrupted play until they chose to eat. Snack was a sociable, relaxed time with opportunities for children to be involved and to develop independence skills. Staff engaged in pleasant, sociable chat answering questions on a way which enhanced children's knowledge understanding.

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 ensure children have access to a range of developmentally appropriate resources which reflect their interests, encourage creativity and allow them to develop lifelong skills, the provider and manager should review and improve opportunities for play and learning indoors. This should include but is not limited to:

- a) providing suitable resources and materials to effectively engage and challenge children's play, learning and interests.

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

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.' (HSCS 1.25); and

'As a child, my social skills, confidence, self-esteem and creativity are developed through the balance of organised and freely chosen extended play, including using open ended and natural materials.' (HSCS 1.31).

This area for improvement was made on 29 August 2024.

Action taken since then

Some resources and areas provided reflected children's current interests. Older children had requested a table for setting up a homework club. This led to some spending much of their time on screens. The provision of playdough and mark-making materials interested some children, particularly younger ones. Although photographs showed children participating in a range of creative activities, creativity and problem solving were not actively promoted through daily play experiences. A lack of loose parts and open ended

resources meant that this type of activity was not fostered. As a result, children, particularly older children, had reduced opportunities to be challenged appropriately for their developmental stage.

We acknowledged the challenges of setting up daily in a room used by the primary school during school hours.

(See section, Children thrive and develop in quality spaces).

Limited progress had been made towards providing developmentally appropriate resources which reflected children's interests, encouraged creativity and supported the development of lifelong skills. This meant that there was not always sufficient challenge in children's play, leading to a lack of motivation and curiosity to follow interests.

This area for improvement has not been met. We have reworded this area for improvement to reflect the need to review and improve opportunities for play and learning outdoors as well as indoors.

(See section, Children thrive and develop in quality spaces).

Previous area for improvement 2

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) implementing clear and effective plans to develop and improve the service; and
- b) ensuring effective systems are in place to monitor and improve the quality of children's 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, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

This area for improvement was made on 29 August 2024.

Action taken since then

Some improvements had been identified and implemented to enhance children's experiences, including progress in gathering children's ideas and involving them in shaping activities. Not all planned changes had been taken forward, and the evaluation of those that had been implemented was limited. This meant the service could not yet demonstrate consistent or measurable impacts on children's experiences.

Early steps had also been taken to develop a system of self evaluation, but this remained insufficiently developed to effectively assess practice or evaluate the impact of changes (see section, Leadership). Overall, systems for monitoring and improvement did not consistently identify what was working well or where further development was required, meaning sustained improvement had not yet been achieved.

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 thrive and develop in quality spaces	3 - Satisfactory / Adequate
Children experience high quality spaces	3 - Satisfactory / Adequate
Children play and learn	3 - Satisfactory / Adequate
Playing, learning and developing	3 - Satisfactory / Adequate
Children are supported to achieve	4 - Good
Nurturing care and support	4 - Good

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