Seton House Nursery
Day Care of Children

3 Seton Terrace
Dennistoun
Glasgow
G31 2HU

Telephone: 01415 501 587

Type of inspection:
Unannounced

Completed on:
24 June 2026

Service provided by:
Ms Christina Ritchie

Service provider number:
SP2003001173

Service no:
CS2003005654

About the service

Seton House Nursery is registered to provide a care service for 54 children at any one time. Of the 54 children registered, no more than 28 children should be aged under two years. There were 18 children using the service at the time of inspection.

The nursery is based in a three-storey townhouse in the Denniston area of Glasgow. Children are accommodated across three play areas with some areas made up of multiple rooms. Children also have access to two small outdoor areas. The service is near Glasgow city centre, local amenities and public transport.

About the inspection

This was an unannounced inspection which took place on 23 and 24 June 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 children
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Good progress had been made in having a stable staff team, providing more consistent care for children.
- Children benefited from caring relationships with staff and engaging play and learning opportunities that supported their development.
- Quality assurance systems were improving but were not yet robust enough to consistently monitor children's care, outcomes and staff practice.
- The service needs to make improvements in medication management, personal plans, health records and safe sleep practices.
- The priority for the service is to strengthen care planning, health and safety systems and monitoring processes to ensure children's needs are consistently met and risks are minimised.

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 thrive and develop in quality spaces	4 - Good
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 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 service benefited from a committed management team who had worked together to strengthen leadership arrangements and support positive outcomes for children. Since the previous inspection, the management team had further embedded the service's vision, values and aims and had consulted with staff and families to ensure these reflected the needs and aspirations of those using the service. This helped create a shared understanding of the service's direction and priorities.

The skill set of the management team complimented each other, bringing a range of skills and knowledge to the team. They were all contributing positively to the day to day running of the service. It was important for the management team to ensure that they collaborated well to ensure that they brought their skills together for a shared approach to ensure positive outcomes for children and families. They demonstrated a reflective approach and had considered the different levels of confidence and experience within the staff team when supporting self-evaluation activities. As a result, staff were increasingly involved in identifying strengths and areas for further development.

A quality assurance calendar was in place and had supported monitoring activities throughout the year. This had resulted in positive oversight in several important areas, including professional registration, accidents and incidents and observations of staff practice. These processes helped staff identify issues and take appropriate action when required, contributing to children's health, safety and wellbeing. While progress was good, quality assurance systems were not yet fully embedded across all aspects of the service. We found that some monitoring processes lacked consistency and were at an early stage of development. For example, auditing of personal plans was not yet sufficiently robust to ensure all children's needs, wishes and outcomes were consistently recorded and reviewed, this included having oversight of children's medical needs.

The management team recognised these areas for development and demonstrated a willingness to continue building on the progress already achieved. They had a clear understanding of the service's strengths and were beginning to develop better approaches to self-evaluation and continuous improvement. We could see that positive change had taken place since the previous inspection and that the team were committed to driving further improvement. There had been support from the local authority and this had impacted positively in building staff skills.

Appropriate procedures were in place to support the safe recruitment of staff, and the national induction resources were used to help new staff develop the knowledge, skills and values required for their role.

Progress had been made, and children benefited from a service that was becoming increasingly reflective and improvement focused. Further development of quality assurance and self-evaluation processes would support the service to achieve more consistent and sustainable improvements.

Quality indicator: Staff skills, knowledge, values and deployment

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 service had made positive progress in developing a more stable and consistent staff team since the previous inspection. This had contributed to a positive ethos across the setting, where staff worked collaboratively and demonstrated a commitment to providing nurturing care and support for children. As a result, children benefited from more predictable routines and secure relationships with familiar adults who knew them well.

Staff were becoming more confident in their roles and responsibilities and demonstrated a good understanding of the needs of the children they supported. We observed positive and respectful interactions between staff and children. Staff responded warmly to children's cues and helped them feel valued, supported and included. Children appeared comfortable in the company of staff and confidently approached them for reassurance, support and engagement in play experiences.

The staff team demonstrated a willingness to learn and develop their practice. Several staff had attended training opportunities and were able to describe how this had influenced their work with children. Management had taken steps to discuss training needs, professional goals and aspirations with individual staff members. This had helped identify areas for further development and ensured that professional learning was linked to improving outcomes for children. Where there had been a targeted focus on training and development, we found evidence that this had strengthened practice and improved children's experiences.

Staffing arrangements were generally working well. The service employed sufficient staff to meet required ratios and ensure children's needs were met throughout the day. The presence of a supernumerary manager provided additional leadership and support to staff and helped maintain oversight of practice. Staff told us that staffing levels were manageable and enabled them to carry out their responsibilities. This contributed to a calm environment where children received appropriate support and attention.

The increased stability within the workforce had supported greater consistency for children and families. Staff worked well together and demonstrated shared values which reflected the ethos of the service. They spoke positively about their roles and showed a commitment to continuing improvements within the setting.

Although staffing levels met requirements and supported positive outcomes, there were opportunities to further strengthen deployment arrangements. Additional staffing capacity would provide increased flexibility to enable children to access a wider range of experiences, including more fluid access to indoor and outdoor play and opportunities to participate in activities beyond the setting. This would further support children's choice, independence and engagement in high-quality play experiences.

We also identified opportunities to continue developing staff practice. Staff demonstrated increasing confidence and were ready to take on additional responsibilities and challenges within the service. Leaders recognised the value of further training, mentoring and upskilling opportunities to develop practice champions and strengthen leadership at all levels. Staff would also benefit from continued support to ensure that interactions with children remained the primary focus throughout the day. At times, operational tasks had the potential to reduce opportunities for meaningful engagement with children. Strengthening staff presence and role modelling of high-quality interactions would further enhance children's experiences.

Children thrive and develop in quality spaces 4 - Good

Quality indicator: Children experience high quality spaces

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.

Children benefited from a clean, safe and welcoming environment that supported their wellbeing, development and daily experiences. The premises were maintained, and management had taken appropriate steps to ensure that the environment remained safe, comfortable and suitable for the needs of the children attending the service. As a result, children were able to play, learn and relax in spaces that promoted a sense of security and belonging.

The service had made a positive change by relocating the baby room to the ground floor. Management had consulted with parents about this development and had communicated the plans through newsletters and discussions. This demonstrated that the views of families were valued and taken into account when making decisions about the environment. The move had resulted in improved outcomes for children, particularly by addressing previous concerns regarding changing facilities. Younger children now experienced a more suitable and accessible environment that better met their care needs.

A calm and nurturing atmosphere had been created within the baby room. Staff used white noise to support children's relaxation and sleep routines. This helped create smooth transitions between play, rest and care experiences and contributed to children appearing settled, content and secure. The environment supported children's emotional wellbeing and promoted a sense of comfort throughout the day.

Resources were clean, well-maintained and accessible to children. Children were able to independently select resources and engage in play that reflected their interests. The environment promoted choice and supported children's developing independence. While the quality of resources was good, there was scope to further enrich learning experiences through the introduction of more open-ended materials and provocations. This would provide increased opportunities for children to explore, investigate, problem solve and lead their own learning.
The outdoor environment was well-maintained and provided children with daily opportunities for fresh air, physical activity and outdoor learning. Staff recognised the importance of outdoor play and ensured that children accessed the outdoor area every day. Although some improvements to the outdoor space were planned, appropriate measures had been taken to ensure the area remained safe for use. As a result, children continued to benefit from a range of outdoor experiences that supported their health, wellbeing and development.

Systems were in place to support the maintenance and safety of the environment. Risk assessments and maintenance procedures were routinely completed and contributed to keeping children safe. Staff demonstrated a good understanding of risk and described how they involved children in discussions about keeping themselves safe. This supported children to develop confidence, responsibility and an awareness of how to manage risk appropriately during play. We found that risk assessment documentation would benefit from clearer review dates to further strengthen monitoring arrangements and ensure records remained current.

Infection prevention and control measures were implemented effectively throughout the service. The environment was clean and hygienic, and appropriate procedures were followed to reduce the risk of infection. This helped protect children's health and wellbeing and contributed to a safe and comfortable environment.

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.

Children experienced warm, responsive and meaningful play and learning experiences which reflected their interests, preferences and stages of development. Staff had created opportunities that encouraged children to explore, investigate and learn through play. As a result, children were engaged, motivated and confident in their environment.

Children were observed actively participating in a range of experiences that were meaningful to them. Staff recognised the importance of following children's interests and used these interests to shape learning opportunities. This helped ensure that children's play was enjoyable, relevant and supported positive outcomes for their wellbeing, confidence and overall development. Children demonstrated curiosity, concentration and enjoyment as they explored the resources and experiences available to them.

Staff played an important role in supporting children's learning. They interacted warmly with children and naturally extended play experiences through conversations, encouragement and open-ended questioning. This approach helped children develop their thinking skills, problem-solving abilities and confidence in expressing themselves. Staff used everyday interactions effectively to promote learning and support children's progress.

Children benefited from nurturing interactions that supported the development of communication and language skills. Staff used simple language, named objects and modelled conversations throughout daily routines and play experiences. As a result, children were developing their understanding of language and building the foundations for effective communication. Children were observed responding positively to staff interactions and confidently engaging with the people around them.

Children also experienced opportunities to develop their coordination, concentration and understanding of cause and effect. Interactive toys, sensory baskets and supported exploration enabled babies and younger children to investigate their environment and make discoveries independently. These experiences promoted curiosity and supported children's cognitive and physical development.

Children had individual learning journals in place which supported the tracking of their learning and development over time. These provided evidence of children's experiences and progress. However, management had appropriately identified that there were gaps in the consistency of some entries. There was also scope to increase parental involvement in identifying learning goals and contributing to strategies that supported children's development. Strengthening partnership working in this area would help ensure a more holistic understanding of children's achievements and next steps.

The management team had identified planning for children's experiences as a priority for improvement and demonstrated a commitment to developing this aspect of practice. Work had already begun to strengthen observational assessment, and we could see improvements in the quality of observations being recorded. Staff were increasingly reflecting on children's learning and using observations to inform future experiences. This work was at an early stage but demonstrated positive capacity for further growth and development.

There remained opportunities to enhance learning experiences for children through increased access to mark-making and sensory resources. Supporting children to independently choose and access these experiences would further promote creativity, exploration and early communication skills.

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 caring and nurturing relationships with staff who knew them well and demonstrated a genuine commitment to supporting their wellbeing. Positive attachments had been established between children and staff, helping children feel secure, settled and confident within the setting. As a result, children approached staff readily for comfort, reassurance and support and appeared at ease in their environment.

Personal care routines were delivered in a calm and respectful manner. Staff used these everyday experiences as opportunities to provide one-to-one interactions and promote children's emotional wellbeing. Nappy changing routines for younger children were sensitive and unhurried, helping children feel safe and valued. Staff encouraged children to participate in aspects of their personal care, where appropriate, supporting the development of independence, self-help skills and social interaction.

Mealtimes were relaxed, inclusive and provided positive opportunities for children to develop social skills and confidence. Staff sat with children, encouraged conversation and provided support appropriate to children's ages and stages of development. Children were developing feeding skills and learning about social interaction during these experiences. However, there was scope to strengthen food preparation practices, including ensuring that fruit and other foods were prepared in line with current safety guidance to further minimise potential risks to children.

Staff demonstrated a good understanding of children's individual health needs, dietary requirements and routines. Information was generally available to support staff in meeting children's needs and promoting their wellbeing. However, we identified inconsistencies in how key information was recorded and maintained across different documents. In some cases, information relating to allergies and health needs was not consistently updated. This increased the potential risk of staff working from inaccurate information and meant that systems for supporting children's health and wellbeing were not yet fully effective.

Communication with families supported continuity of care and enabled information to be shared between home and the setting. Parents were informed about their children's experiences and daily wellbeing. While positive relationships had been developed, there were opportunities to strengthen engagement further through more regular and meaningful communication, helping families become more actively involved in planning and reviewing their children's care and support.

Staff demonstrated caring approaches to supporting children's rest and sleep routines. Children were settled sensitively and their individual preferences were respected. However, we found inconsistencies in sleep monitoring arrangements, recording systems and staff understanding of current safe sleep practices. This meant that best practice was not yet fully embedded across the service and children's wellbeing could not always be assured through robust monitoring arrangements. The management agreed to re-establish a sleep monitoring sheet to ensure staff accountability in carrying out sleep checks regularly.

Hygiene procedures were generally effective and supported children's health and wellbeing. However, handwashing facilities for babies did not fully promote independent use. Improvements to accessibility would better support children's developing self-care skills while enhancing safety and good hygiene practice.

We found that systems for checking medication and ensuring that it could be safely administered in the case of an emergency were not working effectively for the service. We found that there was expired medication within the building and recording sheets for short term medication did not contain relevant information to make an informed decision to administer medication. There was some inconsistency in the recording of information within a digital platform and paper format. The management team must take a consistent approach to the safe storage and administration of medication (see requirement 1).

Requirements

1. By 31 October 2026, the provider must ensure that the procedures for safely storing and administering medication are safe and robustly monitored.

To do this, the provider must, at a minimum, ensure that:

a) Any expired medication is sent back to parents to dispose of appropriately.
b) Expired medication is replaced before children attend.
c) Recording systems for the administration of medication on a short term basis have sufficient information to administer medication safely.
d) The systems in place to monitor medication are robust and work effectively.

This is to comply with Regulation 4(1)(a) 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 state that: "If I need help with medication, I am able to have as much control as possible" (HSCS 2.23) and "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).

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 that children have a hygienic nappy changing experience, the provider should improve nappy changing facilities.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment" (HSCS 5.24).

This area for improvement was made on 16 April 2026.

Action taken since then

The service had relocated children under two years to the ground floor of the building. There was suitable nappy changing facilities on this floor to suit the needs of the children. They were no longer using the first floor nappy changing facilities. If they choose to open this space, this should only be changing facilities for children over two years.

This area for improvement has been met.

Previous area for improvement 2

To support children's personal planning, wellbeing, learning, and development, the provider should ensure that staff have the knowledge and skills needed to meet each child's needs. This should include, but not be limited to, understanding and applying practice that supports trauma awareness, additional support needs, and children's rights.

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 based on relevant evidence, guidance and best practice" (HSCS 4.11) and "My care and support meets my needs and is right for me" (HSCS 1.19).

This area for improvement was made on 16 April 2026.

Action taken since then

The service was progressing with developing and improving the way it recorded and used the information. The way staff used personal plans to support children's care, play and learning was continuing to develop.

This area for improvement has not been met.

Previous area for improvement 3

To support children's care, play, learning, wellbeing and safety, the provider should make improvement to the staff deployment.

This should include, but not be limited to, ensuring there is enough staff and management across the whole day to meet children's needs, support children to have choice and continuity of care.

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, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This area for improvement was made on 8 January 2025.

Action taken since then

There was better stability within the staff team. The service had retained staff and staff absence had reduced. Staff were better supported by the management team and children's needs were being met. They should continue to monitor this and were actively recruiting for additional staff to support routines and play being more freeflow and beyond the setting.

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.scot

Detailed evaluations

Leadership	4 - Good
Leadership and management of staff and resources	4 - Good
Staff skills, knowledge, values and deployment	4 - Good

Children thrive and develop in quality spaces	4 - Good
Children experience high quality spaces	4 - Good

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

0345 600 9527

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