Chatelherault Nursery School
Day Care of Children

Avon Mill Cottage
(over Old Avon Bridge)
Old Avon Road
Hamilton
ML3 7UH

Telephone: 01698 283 027

Type of inspection:
Unannounced

Completed on:
1 July 2026

Service provided by:
Chatelherault Nursery School Limited

Service provider number:
SP2003001437

Service no:
CS2003006341

About the service

Chatelherault Nursery School is registered to provide a care service to a maximum of 30 children aged from birth to those not yet attending primary school.

The service is provided by Chatelherault Nursery School Limited and operates from a semi-detached property in the Hamilton area of South Lanarkshire. Children have regular access to the secure garden area. The service is close to shops, schools, transport routes and other amenities.

About the inspection

This was an unannounced inspection which took place on Monday 29 and Tuesday 30 June 2026. Feedback was provided on Wednesday 1 July 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 seven people using the service and six families
- Spoke with five 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.

Key messages

- The service had worked hard to address the requirement and areas for improvement from the last inspection. The service provider had further developed management oversight across other areas of the service to support quality outcomes for children and families.
- The provider had developed procedures and systems to ensure children experienced quality facilities that supported them to play outdoors in an environment that was safe and secure.
- 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 care needs.
- Staff knew children's needs and interests well. However, further work was needed to refine and organise systems for personal planning.

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	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 manager of the service was in post and supported by the provider also as a manager of the service. Both were confident in their roles, knew staff and children well and were reflective. Plans were underway to support the direction of service management moving forward. The management team were visible and accessible to support staff, children and families.

Care was provided in a warm and welcoming setting. The team were aligned with the service vision and values. Improvement planning was a focus at the service. Parents agreed, with one telling us, "Improvement plan emailed out and discussion welcomed". Another parent told us, "Feedback from the last inspection has been taken on board and there have been many improvements in this period things I mentioned in the last survey have been actioned".

The current improvement plan was focused on developing staff skills in observation, planning systems and developing leadership skills across the team. Further areas of focus were increasing parental involvement and further enhancing staff knowledge about skill development for children. We agreed that the focus areas would benefit the ongoing improvements at the service. The service had placed children's learning through play at the heart of improvement planning. This approach was leading to improved outcomes for children and increased parental participation.

Quality assurance systems included a focus on areas such as monitoring and mentoring staff. In the documentation we sampled there were some improvements needed such as consistency in entering dates and gaps in care routine forms and planning sheets. We discussed the importance of monitoring these with the manager and they agreed they would address this moving forward. We could see from the documentation sampled that children's significant needs and interests were being supported. However, the manager told us, and we agreed that the documentation being used was in a period of transition to ensure all staff at the service were fully involved in that process. Systems for managing personal planning needed to be refined, organised and clear. (see area for improvement one).

The service had committed to an appropriate pace of change which was helping to sustain long term improvements at the service. A variety of approaches were taken to support staff training such as reflection on professional reading and online training sessions. Training included a risky play session, first aid and child protection. The manager had participated in a test of change project with Care Inspectorate improvement team. Staff told us this had been beneficial and had helped to create an action plan and tasks following the last inspection. They felt this could be applied to other focus areas at the service moving forward, demonstrating a commitment to quality improvements.

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

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 take part in self-evaluation exercises to assess what we do and can do better" and another said, "We have planning sheets where we identify what we could have done better with an experience we set up. We also get monthly questions that helps us reflect as a team".

Staff were safely recruited and they understood their responsibilities within the team. Induction programmes were personalised to meet needs. 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.

Areas for improvement

1. Personal plans must contain a record of current significant needs, interests, progress, next steps and reviews with parents. These should be organised in a way that is accessible and clear to ensure staff can effectively support and secure improved outcomes for children.

This is to ensure that care and support is consistent with the Health and Social Care Standards 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)

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.

The service provided a safe setting for children. There was a secure entry system, staff communicated well between indoor and outdoor spaces. Agency staff were used to cover training, leave and absences to maintain consistency for children in care routines and to keep children safe. Confidential records and information were securely stored.

Risk assessments were in place for tasks and individuals where needed. This was helping to minimise potential risks and to keep children safe from harm. Overall, infection prevention and control procedures were effective in supporting children's health. We discussed and observed infection prevention and control practices such as the use of personal protective equipment (PPE) and the importance of using available storage for resources and equipment.

The service was light, bright and well organised. All areas were well presented. The environment was well-maintained for children. The need for monitoring and addressing regular maintenance of the building, resources and equipment had been considered and was built into quality assurance systems. A staff member told us, "Any potential risks are reported to management straight away. Children are familiar with the purpose of keeping safe at nursery".

Staff had reflected and reviewed spaces taking account of best practice documents. They had considered and created cosy spaces and nooks for children to just be and relax, this helped to create a homely feel at the service.

We observed the layout and resources in the baby room change from day one to day two of the inspection to meet the needs of the age group attending on both days. Staff shared this was important to support children's individual needs and we agreed. We reminded management to monitor and guide staff in the importance of ensuring core provision resources were inviting and set up throughout the day for younger children.

The outdoor play areas had improved since the last inspection. Work had been completed to reclaim part of the garden under the tree line, and this was being used as an art exploration area and a space for children to be creative and use their imagination in play. A small area of the large garden had been cordoned off not for use and another area was used on a restricted basis due to external water issues impacting those areas of the garden. The provider told us there were ongoing communications with external services to resolve the situation and the provider had plans to further enhance the garden when the issues relating to water were resolved.

The provider had developed a detailed process for children accessing the outdoor space safely and staff were clear and proactive in this procedure. A parent told us, "Nursery is safe. Its overall location and locks on doors/ gates make the environment secure. Work has been done to maintain the nursery, and it is a lovely environment for the children". The safety signage on the main gate had fallen off, we alerted the manager to this, and it was re-attached during the inspection.

Children were engaged and had opportunities to learn about the wider world outdoors. Staff recognised children's right to play outdoors every day and spoke of the benefits to individual children. A parent told us, "There is a mud kitchen, trikes, play cars, pirate ship and a playground. Children can look for wildlife and birdwatch. The fire brigade has come nursery, they do fundraising obstacle courses, planting - and lots more". Systems were in place to ensure children had opportunities to be creative, engage in risky play and use the environment to extend their thinking and skills.

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 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, a nurture nook sensory area, block play and imaginative play resources. Children used areas with confidence, interest and purpose.

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 focus areas across the service.

Deployment of staff had been reviewed and 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 were monitoring the growth of four small trees.

The outdoor area was well used across the day by children. There was water play, a mud kitchen, and opportunities for exploring nature. Staff supported children's interests and we observed some learning being extended. For example, children remained engaged while creating flower jars using flowers collected from the garden. One child asked for their creation to be kept safe so they could show their parent later and the staff member respected this. Staff knew when to observe and when to take part in children's play to extend learning.

Children benefitted from some rich outdoor experiences which promoted curiosity and problem-solving. Responsive interactions and access to loose parts resources supported children to be able to lead their own learning and work collaboratively through meaningful play.

There was a mix of skills and experience in the staff team. 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. We discussed the need for staff to be fully involved in both responsive and adult led experiences. Continued focus by management to mentor best practice and provide opportunities for staff to lead learning would support their skills to be attuned to all children's individualised learning.

An awareness of and skills in language, literacy, and numeracy, were developing through a balance of child and adult-led interactions and playful experiences. We observed this coming through naturally during children's play and conversations with each other and staff. This was also observed through opportunities for mark making and development of fine motor skills during play experiences with playdough, block play and in the mud kitchen as children mixed water and mud to create potions.

The service had taken positive steps to work with families to support their understanding of the benefits of play-based learning. This included stay and play sessions. This approach was helping to develop trust and cooperation, which supported children's wellbeing and development.

Children had frequent opportunities to develop their own choices, thinking and skills. For example, consultations were carried out with children who were due to start primary school to decide how they wanted to celebrate their time at nursery. This resulted in a fishing trip, a community outing and a farewell party. Staff listened to children, valued their ideas and use their interests to extend learning opportunities.

Overall, it was clear that staff were in the process of working to place individual children at the centre of planning. Responsive planning was part of their focus in supporting children's play and learning. We discussed the need to ensure child-centred planning and assessment was clear and presented in an easily accessible format. Management agreed and told us this had formed part of a recent focus for moving forward. This helped to demonstrate a commitment to and capacity for improvement.

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, nappy changing procedures and the management and administration of medication.

Child protection training had taken place. We asked the manager to add contact details for relevant local child protection services to their information board and policy document.

We discussed possible strategies to reduce wait times for children during the start of mealtimes. Overall, children experienced positive mealtimes which promoted independence, choice and social interaction. The calm, relaxed and unhurried approach allowed children to enjoy food and drink at their own pace, develop self-help skills and build positive relationships with peers and staff.

Information about local services and initiatives were shared with families providing access to useful information within their community. Stay and play sessions were offered on an ongoing basis to families at a time that aligned with their individual availability. Feedback sheets were available for families to provide suggestions and ideas for further development of that relationship building opportunity.

We could see from documentation sampled that children's significant needs and interests were being supported. The manager told us, and we agreed that the documentation being used was in a period of transition. The service had begun to explore what needed to improve and a suitable timeframe to commence change. However, systems for managing personal planning needed to be refined, organised and clear to ensure outcomes for children were enhanced by the systems and that all staff were involved in the work being undertaken. See area for improvement made in the leadership section of this report.

Younger children's individual needs were supported. Staff were patient and responsive to babies' emotional cues and gestures. Daily routine sheets were detailed, kept up to date and welcomed by families as a useful source of staying close to the details of their child's experiences on any given day.

For older children informal daily discussions with families and children themselves took place. This approach was valued as a central approach to the ethos of the service. Parents agreed and one told us, "Staff are always welcoming and any time I have a question, it is answered. [Management] is always around both visible and present and [staff] are also knowledgeable and informative when asked anything".

Staff had created a welcoming environment. Feedback from a family reflected this. One parent said, "It feels like a home away from home for my children and they feel safe and loved". Staff were respectful of children; praise was meaningful and consistent. Sense of community was important at the service. As a result, children knew about kindness and respect for one another and how to take care of their belongings and resources within the service.

Children were well cared for and nurtured. A commitment to parental partnership through an area identified in the service improvement plan was supported in a variety of ways such as surveys, catch up chats and home link resources. A parent told us, "My child loves going to nursery and has strong positive and nurturing relationships with staff allowing them a great learning experience".

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

Requirements

Requirement 1

By 17 October 2025, the provider must ensure children experience high quality facilities that support children to play outdoors in an environment that is safe and secure. To achieve this, the provider should ensure the gate to the driveway is kept closed.

This is to comply with Regulation 10 (2)(a)(d) (fitness of premises) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My environment is secure and safe' (HSCS 5.17).

This requirement was made on 25 August 2025.

Action taken on previous requirement
The provider had developed a detailed process for children accessing the outdoor space safely and staff were clear and proactive in implementing this procedure. This was helping children experience quality facilities that supported them to play outdoors in an environment that was safe and secure.

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 support the health and wellbeing of children, the manager and staff should ensure that medication is stored and administered safely.

This is to ensure that medicine management practices are consistent with the Care Inspectorate guidance: 'Management of medication in daycare of children and childminding services' (December 2024).

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' (HSCS 4.27).

This area for improvement was made on 25 August 2025.

Action taken since then

The manager and staff had reviewed this procedure to ensure that medication was stored and administered safely to support the health and wellbeing of children. At the time of inspection there were no children due to have medication administered and there was no long-term medication held at the service.

This area for improvement was addressed.

Previous area for improvement 2

Children's health and safety should be supported within an environment where the risk of cross infection is minimised through good hygiene practices. This should include but not be limited to ensuring:

a) Nappy changing facilities are provided separately from staff toilets

b) All areas used by children are clean, hygienic and fit for purpose

c) Staff support effective hand hygiene with children

d) Staff are knowledgeable and competent about appropriate use of aprons and gloves.

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 5.22).

This area for improvement was made on 25 August 2025.

Action taken since then

Children's health and safety was being supported within an environment where the risk of cross infection was minimised through appropriate hygiene practices. Reviews had taken place and staff were supporting effective hand hygiene with children, all areas used by children were clean, hygienic and fit for purpose and temporary arrangements had been made to provide nappy changing facilities separate from the staff toilet.

This area for improvement was addressed.

Previous area for improvement 3

To support high quality outcomes for children and families, the service provider should develop and improve management oversight across all areas of the setting. This should include but is not limited to:

a) Having a robust contingency plan in place to ensure children's needs are met.

b) Ensuring that there is always appropriate and effective leadership of the service, to keep children safe and support their wellbeing

c) Ensuring leaders are clear about their role and responsibility in relation to quality assurances.

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 25 August 2025.

Action taken since then

The service provider had reviewed and improved management oversight across all areas of the setting. Agency staff were now used as a contingency plan to ensure children's needs were met. The manager and provider/manager were supernumerary. This helped to deliver appropriate and effective leadership of the service and to keep children safe and support their wellbeing. The manager and provider manager were both clear about their role and responsibility in relation to quality assurance.

This area for improvement was addressed.

Previous area for improvement 4

To consistently support children, and meet their health and wellbeing needs, the provider should ensure staff are effectively deployed across the setting at all times.

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

This area for improvement was made on 25 August 2025.

Action taken since then

Systems were in place to ensure staff were always effectively deployed across the setting. This was consistent and helped to support children and meet their health and wellbeing needs.

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.scot.

Detailed evaluations

Leadership	4 - Good
Leadership and management of staff and resources	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	4 - Good
Nurturing care and support	4 - Good

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