

Highway Day Nursery Day Care of Children

Northburn Road
Eyemouth
TD14 5AU

Telephone: 01890 751 768

Type of inspection:
Unannounced

Completed on:
18 May 2026

Service provided by:
The Highway Day Nursery

Service provider number:
SP2003002006

Service no:
CS2003009309

About the service

Highway Day Nursery is registered to provide a care service to a maximum of 50 children, aged between 2 years and those attending primary school at any one time. Within this number no more than 16 children will be of school age.

The service is provided from a one storey community building located in a residential area of Eyemouth in the Scottish Borders. There are two playrooms, a kitchen area and toilet facilities. Children also had access to secure garden areas to the front and rear of the property. The service is close to local amenities, schools and green spaces.

About the inspection

This was an unannounced inspection which took place on 12 May 2026 between 09:00 and 17:30 and on the 13 May 2026 between 08:45 and 14:15. Two Inspectors carried out the inspection.

To prepare for the inspection we reviewed information about this service. This included, registration information, information submitted by the service and intelligence gathered since registration.

In making our evaluations of the service we:

- Spoke with children using the service.
- Considered feedback from 15 families through an online questionnaire.
- Considered feedback from seven staff through an online questionnaire.
- Observed practice and daily life.
- Reviewed documents relating to the care of children and the management of the service.

As part of our inspections, we assess core assurances. Core assurances are checks we make to ensure children are safe, the physical environment is well maintained and that a service is operating legally. At the time of this inspection, improvements were identified relating to core assurances. We have reported where improvement is necessary within leadership heading.

Key messages

- The service provided a welcoming environment that promoted children's independence, engagement and sense of belonging, including effective spaces for older children.
- Self-evaluation and quality assurance processes were developing and beginning to improve practice, but needed greater consistency and stronger evidence of impact.
- Safer recruitment practices needed more robust and consistent approaches to ensure effective safeguarding of children.
- Children experienced high-quality, engaging play across indoor, outdoor and forest environments, demonstrating sustained involvement, creativity and strong learning outcomes.
- Planning and assessment approaches were developing but needed greater consistency to fully evidence progression and support children's independence and development.
- Staff provided consistent nurturing care and support, resulting in children feeling safe, confident and emotionally secure.

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	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 3 - Satisfactory / Adequate

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

Quality indicator: Leadership and management of staff and resources

The service had clear, embedded aims, vision and values that effectively informed practice and supported positive outcomes for children and families. The vision of providing a safe, secure and nurturing environment, underpinned by a Christian ethos, was consistently reflected in staff practice and clearly communicated through the handbook and website. Regular review, including family involvement through parent committee meetings, promoted shared ownership and continuous improvement. As a result, children demonstrated a strong sense of belonging, confidence and wellbeing within the setting.

Self-evaluation processes were developing and beginning to support staff reflection, with staff increasingly using the Quality improvement framework for the early learning and childcare sectors (Care Inspectorate and His Majesty's Inspectorate of Education 2025). The team engaged with challenge questions to build a shared understanding of high-quality experiences. This had led to some improvements, including auditing and decluttering spaces. However, self-evaluation practice remained at an early stage, with opportunities to strengthen the consistent use of challenge questions and recording of clear reflective cycles, to better evidence impact and inform next steps.

Quality assurance and monitoring were developing, supported by planned monitoring calendars that were beginning to strengthen oversight. While implementation was not yet fully consistent, these systems were starting to improve the service's ability to track progress and maintain standards. We highlighted opportunities to strengthen practice and reduce reactive responses for example, routinely revisiting medication audits to ensure practice continued to align with best practice. There was also scope to improve organisational systems by streamlining documentation and ensuring records were up to date and accessible, as inconsistencies in filing limited access to information and evidence of progress. Overall, early quality assurance activity was beginning to have a positive impact. With greater consistency and organisation, these systems have potential to support sustained improvement and positive outcomes for children. The previous area for improvement relating to quality assurance processes had been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

The service had an annual improvement plan with clear priorities focused on environments, planning, staff knowledge and family engagement. This was contributing to more purposeful environments, increased staff confidence and more engaging experiences for children and their families. Planning and observations were developing with an aim to support meaningful next steps, and improved tracking systems had raised awareness of personal plan updates, although support strategies needed further development. Early use of improvement approaches, such as the 'plan, do, study, act' cycle, had strengthened areas of practice, including floorbook planning, though evaluation and impact recording were not yet consistent. Overall, progress was evident, with further opportunities to strengthen reflective practice, embed quality assurance and ensure sustained, measurable outcomes for children.

The service had a comprehensive set of policies supporting safe, consistent practice and positive outcomes for children, with staff demonstrating a clear understanding in their day-to-day work. However, policy management was not fully effective, with inconsistencies in review dates, updated versions and accessibility resulting in outdated paper copies, alongside updated electronic versions. Strengthening these processes would improve organisational effectiveness, ensure access to current guidance and support a more consistent, high-quality approach to care and learning.

Safer recruitment practices were inconsistent, with gaps in staff records, including missing references. Reliance on informal knowledge of staff did not provide sufficient assurance of suitability, limiting robust safeguarding. Strengthening and consistently applying recruitment procedures, including obtaining and recording appropriate references, would improve governance and better protect children. The previous area for improvement relating to safer recruitment processes had not been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Induction processes were established within the service, with staff confirming they received guidance from senior leaders and opportunities to review policies and procedures. Ongoing support and review helped staff settle into their roles, contributing to confidence in practice. Professional learning was supported through appraisal, training and leadership opportunities, positively impacting staff confidence and practice quality. The previous area for improvement relating to induction and supervision had been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Children thrive and develop in quality spaces 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.

Quality indicator: Children experience high quality spaces

The service had made clear progress in improving the quality of the environment, with spaces that were welcoming, better organised and appropriately resourced, supporting children to feel safe, secure and engaged. One family commented, "Great indoor and outdoor space". Children demonstrated a strong sense of ownership, confidently navigating the setting and accessing a wide range of purposeful, open-ended resources that promoted independence, creativity and sustained play.

Indoor and outdoor environments were thoughtfully developed, with free flow access enhancing choice and self-directed learning. Improvements to organisation, reduced clutter and more intentional use of resources contributed to a calm, purposeful atmosphere where children were actively involved in their play. The previous area for improvement relating to indoor/outdoor spaces to be free from clutter to support effective infection prevention control had been met. (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

The after school provision had been developed to offer appropriate space for older children, supporting age-appropriate play and a sense of belonging. Families and children spoke positively about the dedicated area and access to shared spaces, which promoted choice, social interaction and belonging. One family commented, "The staff do a really good job of providing the care required, as well as giving the older children space to play independently and to pursue interests and projects they are interested in".

Moving forward the service could further develop the environment for school aged children, to better promote independent access to resources. This would enhance choice and ensure the environment continued to meet their needs and preferences.

Staff had made positive progress in infection prevention and control, through improved organisation and decluttering, contributing to generally safe environments. However, a concern identified in the cleanliness of the small playroom storage unit area was highlighted. Direct guidance was given to leaders to ensure standards were met, after which the area was cleaned and decluttered. Overall, while improvements were evident, stronger leadership oversight and more consistent, proactive monitoring were needed to sustain high hygiene standards and ensure a safe, high-quality environment for children.

Nappy changing facilities had improved since the previous inspection, supporting safer moving and handling practices. However, further evaluation was needed, as some children continued to be lifted with limited opportunities to promote independence. This was discussed with leaders, who agreed to complete a risk assessment and further self-evaluation to better support independence. Infection prevention and control practices had also strengthened. Where exposed wood on the nappy changing unit was not fully wipeable, leaders took prompt action to treat and paint the surface in line with best practice. Overall, improvements had been made, with ongoing review supporting children's independence, safety and wellbeing. The previous area for improvement relating to nappy changing facilities had been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Risk assessments were in place and supported children's safety across a range of experiences, including outings. Staff demonstrated a clear understanding of risk by implementing appropriate measures, contributing to a safe environment. Families expressed confidence in the setting, describing it as well maintained, secure and welcoming, helping children feel safe and comfortable. Overall, effective risk management contributed positively to children's safety and wellbeing within the environment. The previous area for improvement relating to development of policies and risk assessments had been met. (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Children had an increasing influence on their environment and learning, with staff responding positively to their ideas, resulting in more meaningful and engaging play. They confidently initiated and led experiences, demonstrating creativity and a growing sense of agency. While practice was beginning to support responsive planning, further opportunities remained to strengthen outcomes through more consistent involvement of children in decision-making, ensuring their contributions shaped ongoing developments.

The service demonstrated effective systems for securely managing children's information in line with best practice, contributing to a safe and trustworthy environment. Robust storage, including locked cabinets, and well-managed CCTV systems ensured confidentiality and appropriate handling of data. Staff showed a clear understanding of privacy in practice. Overall, strong information management supported children's wellbeing and maintained a high-quality, secure environment.

Children play and learn 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.

Quality indicator: Playing, learning and developing.

Children were engaged, demonstrating sustained concentration in meaningful play. Families shared positive feedback about the wide range of activities, including outdoor play, creative experiences and group activities. One family commented, "They always seems to have such a fun filled and busy time". In the small playroom, staff responded well to children's interests, particularly farm-related learning, supporting imaginative and collaborative play. Skilled interactions extended learning through early literacy and numeracy. In the large playroom, children led their own learning, independently accessing a wide range of resources and engaging in creative experiences such as kite-making and role play. The calm, well-organised environment supported free movement and sustained engagement. Overall, experiences effectively supported children's learning, independence and confidence, resulting in high levels of wellbeing and engagement.

Children experienced rich, engaging outdoor play, demonstrating curiosity, creativity and sustained involvement. Families highlighted the high-quality garden spaces and range of activities. The better organised environment offered varied physical, imaginative and exploratory opportunities linked to children's interests, particularly minibests, supporting early scientific thinking. Children engaged in both collaborative and independent play, promoting problem-solving, teamwork and sensory exploration. Regular forest school sessions further supported child-led learning through complex play, such as shelter building and exploring natural materials. Overall, the outdoor environment effectively supported child-led learning and positive outcomes for children. The previous area for improvement relating to set up of outdoor spaces had been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

In after-school provision, children experienced positive engagement with staff providing warm, meaningful support that promoted inclusion and a strong sense of belonging. A family highlighted that children are given autonomy in how they spend their time, noting that their child was supported to pursue an interest in sewing. This was seen to enhance the child's sense of belonging and strengthen their connection with staff. Children demonstrated developing independence and expressed preferences confidently. Overall, experiences supported wellbeing and engagement. The previous area for improvement relating to developing school aged childcare spaces had been met. (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Staff interactions were a key strength, consistently warm, responsive and attuned to children's needs, promoting high levels of engagement, confidence and wellbeing. Staff used skilled questioning and shared thinking to extend learning, supporting creativity, communication and problem-solving. Children were empowered to lead their play, with staff sensitively scaffolding experiences and supporting inclusion and independence. Overall, these high-quality interactions had a positive impact on children's learning, relationships and sustained involvement.

Children's learning was recorded through paper-based learning stories. Families noted that children's interests, such as construction, were reflected in their 'special books'. Children engaged with these and shared them with others. The quality of observations had improved following training, supporting more relevant and detailed records. Staff identified next steps, and trackers supported identification of learning needs. However, learning stories did not yet clearly demonstrate progression or consistently inform future planning. Overall, approaches were beginning to support learning. Further development was needed to embed a consistent, high-quality observation cycle and clearly evidence outcomes. The previous area for improvement relating to progression in learning had not yet been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Planning systems were developing, with staff using floorbooks to support more responsive, child-led approaches. Staff demonstrated a clear understanding of responsive planning, highlighting that learning was guided by children's interests and choices. This was increasingly evident in practice, with rich and varied experiences linked to children's current interests, including mini beasts and farm themes. These experiences supported engagement, curiosity and meaningful learning. Overall, planning was beginning to have a positive impact on children's learning. Moving forward, more clearly recording the source of children's interests within floorbooks would strengthen evidence of progression and support a deeper understanding of how children's learning develops over time. The previous area improvement relating responsive planning had been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

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.

Quality indicator: Nurturing care and support

Staff consistently demonstrated warm, nurturing and respectful relationships, creating a calm and supportive environment where children felt safe, valued and secure. One family commented, "The level of care nurture and support my child receives from the staff is second to none. I am very confident that my child's is being supported to the highest standard". Staff responded sensitively to children's emotional needs and promoted wellbeing and confidence. As a result, children were emotionally secure and confident, enabling them to engage fully in their learning and development.

Transitions throughout the day were generally well supported, contributing to children's security, independence and wellbeing. Calm routines and effective staff communication enabled smooth movement between experiences. Strong partnership working supported planned transitions, such as preparation for school. However, end-of-day routines were less effective, with unnecessary waiting limiting engagement and continuity of play. Adopting a more flexible, nurturing approach to end of day routines would support outcomes for children and build connections with families.

Approaches to rest and relaxation supported children's wellbeing through flexible, responsive arrangements. While families were not always fully aware of quiet or sensory spaces, staff ensured appropriate facilities were available when needed. Rest opportunities were embedded throughout the day, including calm experiences such as stories on the sofa and relaxation in the hammock. As a result, children were supported to regulate their energy levels and remain settled and engaged in their learning.

Staff demonstrated a clear understanding of child protection procedures, contributing to a safe and supportive environment. They confidently described appropriate responses to concerns, supported by a shared understanding of reporting responsibilities, which promoted consistent practice, vigilance and effective safeguarding of children's wellbeing.

Medication practices had improved, with effective systems in place for safe storage, monitoring and recording. Quality assurance checks supported safe and consistent practice and leaders took prompt action where inconsistencies were identified. Further strengthening was needed through consistent implementation of quality assurance to identify gaps early. Overall, medication procedures supported children's safety and wellbeing. The previous area improvement relating medication had been met. (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Children experienced positive, social mealtimes that supported independence, wellbeing and relationships, with opportunities to self-serve, make choices and engage in meaningful conversation. Families spoke positively about the quality and variety of food. In after school provision, snack times promoted independence, with further opportunities to enhance outcomes by increasing children's involvement in preparation. Overall, mealtimes supported children's confidence, independence and sense of belonging.

Most families agreed they were involved in developing and reviewing their child's personal plan. Staff demonstrated a clear understanding of children's needs in practice. However, this was not consistently reflected in documentation, with plans and chronologies often lacking clear, updated support strategies and evidence of impact, limiting consistency of care. Strengthening the clarity, accuracy and recording of strategies and outcomes would better support children's wellbeing and development. The previous area improvement relating to support strategies had not yet been met. (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

The service demonstrated strong, inclusive partnerships with families, supporting children's wellbeing and continuity between home and the setting. Staff prioritised relationship building through daily communication and opportunities for involvement such as weekly stay and play sessions, contributing to children feeling secure and supported. We received mixed feedback from families that indicated that current arrangements did not welcome all families into the service. The practice of holding parents at the door during main pick-up times limited opportunities for meaningful connections and relationship building with all families. This was not fully aligned with Care Inspectorate guidance within, "Me, My Family and My Childcare Setting", which emphasises the importance of warm, open and regular engagement with families to support strong partnerships. Overall, while partnerships were a strength, more open and accessible approaches would further enhance relationships and outcomes for children.

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 keep children safe and healthy, the management should ensure that medication is audited, stored and consent reviewed every three months or termly. They should refer to best practice guidance 'Management of medication in day care and childminding services', to ensure the continue to follow best practice guidance for the safe administration and storage of medication.

This is to ensure care and support is consistent with the Health and Social Care standards (HSCS) which state that "Any treatment or intervention that I experience is safe and effective". (HSCS 1.24)

This area for improvement was made on 25 August 2025.

Action taken since then

Medication processes had been strengthened within the service. An overview system supported staff to clearly identify medication held on site and monitor expiry dates. Medication was stored safely and securely in clearly labelled, individual containers, supporting children's safety and wellbeing.

Consent reviews took place termly and leaders had undertaken an audit of medication procedures. This initially identified no areas for improvement. However, we highlighted some minor gaps in practice which leaders took swift action to address.

To further strengthen practice, quality assurance processes should be implemented consistently, to identify and address any gaps at an early stage. Overall, medication procedures supported children's safety and wellbeing.

This area for improvement had been met.

Previous area for improvement 2

To ensure children experience the right care at the right time, the manager and staff should ensure that they proactively work with parents, professionals and outside agencies to develop meaningful support strategies. These should be consistently implemented by all staff. The impact of these strategies should be recorded and regularly evaluated, to ensure that they are having a positive impact and meeting children's needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices'. (HSCS 1.15).

This area for improvement was made on 25 August 2025.

Action taken since then

Most families agreed they were involved in developing and reviewing their child's personal plan. Staff demonstrated a clear understanding of children's needs in practice. However, this was not consistently reflected in documentation, with plans and chronologies often lacking clear, updated support strategies and evidence of impact, limiting consistency of care. Strengthening the clarity, accuracy and recording of strategies and outcomes would better support children's wellbeing and development.

This area for improvement had not been met.

Previous area for improvement 3

To promote high quality experiences for school aged childcare the service should review their indoor provision to include a dedicated space for school aged children. They should ensure they act on children's views when planning resources and play, to promote children's choice and sense of belonging.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me', (HSCS 1.19). 'The premises have been adapted, equipped and furnished to meet my needs and wishes', (HSCS 5.16) and 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices'. (HSCS 5.21)

This area for improvement was made on 25 August 2025.

Action taken since then

The service had developed a dedicated space for after school provision within the main large playroom. Children spoke positively about having their own space to play but also the option to engage in the wider play environment. Children demonstrated developing independence and expressed preferences confidently. Staff responded to children's requests with resources that supported engagement. Moving forward the service could further develop the environment for school aged children, to better promote independent access to resources. Overall, experiences supported wellbeing and engagement.

This area for improvement had been met.

Previous area for improvement 4

The staff team should reflect on and develop their understanding and approach to responsive planning, through exploring best practice guidance such as, realising the ambition. This would lead to opportunities to deepen children's learning and provide play experiences based on children's interests and developmental stages.

This is to ensure 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 'As a child, I can direct my own play and activities in the 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)

This area for improvement was made on 25 August 2025.

Action taken since then

Staff demonstrated a clear shift towards responsive, child-led planning, resulting in highly engaging and meaningful learning experiences.

This area for improvement had been met.

Previous area for improvement 5

To support children's development needs and progression in learning, the manager and staff should develop quality observations and effective assessments to clearly show progression in children's learning and development. The observation cycle should be developed to track children's learning clearly, showing progression in learning through quality observations and developed next steps. Child-led engagement with learning records should be promoted by storing journals at child level, so children can explore them independently and engage with their own learning.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 25 August 2025.

Action taken since then

Children engaged with their 'special books' throughout the session. The quality of observations had improved following training, supporting more relevant and detailed records. Staff identified next steps, and trackers supported identification of learning needs. However, observations and next steps did not yet clearly demonstrate progression or yet consistently inform future planning. Leaders recognised this and had recently delivered training with the staff team. Overall, approaches were beginning to support learning. Further development was needed to embed a consistent, high-quality observation cycle and clearly evidence outcomes

This area for improvement had not been met.

Previous area for improvement 6

To promote high quality facilities the service should ensure indoor and outdoor play areas are free from clutter to maximise space for play and support effective IPC. The manager and staff should review resources, to ensure they are purposeful, used and stored in appropriate areas that support children's engagement and independence.

This is to ensure 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). 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices'. (HSCS 5.21)

This area for improvement was made on 25 August 2025.

Action taken since then

The service had completed audits of the environment and used self-evaluation to review the environment. There was clear and sustained improvement in the organisation and use of resources, resulting in more purposeful and engaging learning environments.

This area for improvement had been met.

Previous area for improvement 7

The service should continue to improve the set-up of the back garden, to ensure that all play spaces are inviting and spark imagination, curiosity and creativity for children's play and learning experiences.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, I can direct my own play and activities in the 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)

This area for improvement was made on 25 August 2025.

Action taken since then

We observed significant improvements to outdoor space set up including the boat, stage, climbing area and small world areas. The space was well set up and children engaged in imaginative play. Outdoor spaces were stimulating, imaginative and well-used, supporting creativity and curiosity.

This area for improvement had been met.

Previous area for improvement 8

To ensure children experience personal care in a welcoming, safe environment, the provider should ensure the nappy changing facilities comply with best practice guidance, and protects children from risk of infection.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I require intimate personal care, there is a suitable area for this, including a sink if needed' (HSCS 5.4), and 'The premises have been adapted, equipped and furnished to meet my needs and wishes'. (HSCS 5.18)

This is to comply with the Care Inspectorate guidance, 'Nappy changing for early learning and childcare settings (excluding childminders) (2023).

This area for improvement was made on 25 August 2025.

Action taken since then

Nappy changing facilities had improved since the previous inspection, with developments in height supporting safer moving and handling practices for staff. However, changes did not fully consider children's independence or infection prevention and control. The raised unit created non-wipeable surfaces, although this was promptly addressed. Ongoing evaluation had not yet been completed and some children required lifting, with no alternative approaches in place to promote independence. This was discussed with leaders, who agreed to complete a risk assessment and further self-evaluation to explore ways to better support children's independence. Overall, improvements had been made

This area for improvement had been met.

Previous area for improvement 9

The service should review their policies, procedures and risk assessments to ensure they reflect best practice guidance and prioritise children's safety. Priority should be given, but not limited to,

- Developing risk assessments for children walking to the service unsupervised from school.
- Developing clear policy and risk assessments for the safe deployment of staff for collecting children from school.
- Developing policies and procedures to ensure staff do not use personal mobile phones on outings.
- Further developing risk assessments for outdoor garden areas.

This is to ensure 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 is provided in a planned and safe way, including if there is an emergency or unexpected event'. (HSCS 4.14)

This area for improvement was made on 25 August 2025.

Action taken since then

The service had a comprehensive range of policies in place to support practice. Clear guidance was in place for specific situations, such as children walking to and from nursery and school, including those doing so independently. Policies outlined staff deployment effectively, and staff applied these in practice by assessing risks and considering appropriate staffing levels. During observations, staff demonstrated an awareness of policy expectations, including the appropriate use of mobile phones during outings, which supported children's safety.

Risk assessments were in place and supported children's safety across a range of experiences, including outdoor spaces and outings. Moving forward embedding consistent reviews of policies and risk assessments would ensure they remained up to date and in line with best practice .

This area for improvement had been met.

Previous area for improvement 10

To ensure children receive a high quality of care and support where there is continuous improvement, the manager should develop quality assurance procedures for consistently auditing and monitoring the service in line with best practice guidance. This should include but not limited to, consistently auditing and monitoring; personal plans, planning, risk assessments, children's play and learning environments and resources, recruitment and induction procedures, staff deployment, SSSC registrations and safe storage and administration of medication.

This is to ensure 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

Quality assurance and moderation processes were developing, with calendars supporting a system for planned monitoring. Key areas of practice had audits carried out and a quality improvement calendar also outlined when areas of practice should be reviewed. Early-stage quality assurance processes were already beginning to impact positively on practice and experiences for children. Strengthening consistency and organisation within these systems would support continued efficient monitoring and sustained positive outcomes.

This area for improvement had been met.

Previous area for improvement 11

The manager should use best practice guidance to support robust and safer recruitment processes within the service, to ensure the safeguarding of children and the development of the staff team. This should include, but not limited to, improving safer recruitment policies and processes.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24), and 'I use a service and organisation that are well led and managed'. (HSCS 4.23)

This area for improvement was made on 25 August 2025.

Action taken since then

Checks such as protecting vulnerable group (PVG) checks had been carried out on all staff. However, there were gaps identified in the recruitment information held for some staff. For example, for some only one reference was available. In addition, for a member of supply staff, no references were sought. While it was recognised that some staff members may be known within the local community, this was not sufficient as a basis for safe recruitment decisions. Robust recruitment procedures should be applied consistently to all staff, to ensure their suitability to work with children could be appropriately verified.

The provider should ensure that appropriate references are obtained and recorded for all staff, in line with safer recruitment expectations and best practice, in order to safeguard children and uphold the quality and integrity of the service.

This area for improvement had not been met.

Previous area for improvement 12

To support children's wellbeing and improve the quality of experiences, the provider should further develop the processes for staff induction and ongoing support and supervision. These processes should support staff to develop their confidence and knowledge, reflect on their practice and plan for their own professional development and learning needs. This should include, but not be limited to, using the guidance: Early Learning and Childcare – National Induction Resource (Scottish Government, 2019).

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), and 'I use a service and organisation that are well led and managed. (HSCS, 4.23)

This area for improvement was made on 25 August 2025.

Action taken since then

Induction processes were established within the service, with staff confirming they received guidance from senior leaders and opportunities to review policies and procedures. Ongoing support and review helped staff settle into their roles, contributing to confidence in practice. Professional learning was well supported through appraisal, training and leadership opportunities, positively impacting staff confidence and practice quality.

This area for improvement had been met.

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	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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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