Broxburn Playgroup
Day Care of Children

Strathbrock Partnership Centre
Community Area
189a West Main Street
Broxburn
EH52 5LH

Telephone: 07734385989

Type of inspection:
Unannounced

Completed on:
29 April 2026

Service provided by:
Management Committee Of Broxburn Playgroup

Service provider number:
SP2003003164

Service no:
CS2003013396

HAPPY TO TRANSLATE

About the service

Broxburn playgroup is a daycare of children service which operates from Strathbrock Partnership Centre. The facilities are on one level with the toilet facilities across the corridor from the room they use. They have access to a small, enclosed play area. The service is located in a residential part of Broxburn, with access to local amenities.

The service is registered to provide a care service to a maximum of 20 children between the age of two years to those not yet attending primary school.

At the time of the inspection 34 children were registered with the service. There is a varied pattern of attendance with morning or afternoon sessions or full days.

About the inspection

This was an unannounced inspection which took place on Tuesday 28 April 2026 between 09:00 and 15:00 and Wednesday 29 April between 08:30 and 11:45. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with several children using the service, and four of their parents/carers.
- we received three responses to our electronic questionnaire
- spoke with three staff and management
- observed practice and how children's routines, play and learning were supported
- reviewed documents.

Key messages

- Children benefited from kind and caring relationships with staff, which met their needs and supported their wellbeing.
- Quality assurance and self-evaluation systems had started to make positive changes that improved outcomes for children.
- To support high-quality play, learning and development, staff should further develop the use of observation to effectively recognise and extend children's learning.
- Planning formats could be more effectively used to support next steps, which enable children to make progress in their development, learning and wellbeing.
- The manager and staff should identify learning and training that will help develop their skills and knowledge.

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	3 - Satisfactory / Adequate
Children are supported to achieve	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

Leadership 3 - Satisfactory / Adequate

We evaluated different parts of this heading as good and satisfactory/adequate, with and overall evaluation of satisfactory/adequate. Several strengths impacted positively on outcomes for children, but there were some aspects which could benefit from improvement.

Quality Indicator: Leadership and management of staff and resources

Staff had reviewed and updated the vision, values and aims of the service. This demonstrated their commitment to provide a good service for children and families. The welcoming ethos meant children and parents felt valued and respected by staff. Parents shared that, "Staff are really nice and caring. It feels like you are leaving your child to a family member."

Self-evaluation and quality assurance processes had been introduced and were at the early stages of supporting improvement. Using guidance and working with others had helped them support change that led to positive outcomes for children. Staff had considered children's experiences as they made changes to the environment, personal planning and planning formats. As a result, children's care and support and learning were better supported by the processes in place. Staff should continue to further embed these and use evaluation to measure and assess the quality of the provision. (See area for improvement 1).

Parents shared that they had developed positive relationships with staff which enabled them to work in partnership. They were involved in planning their child's care and described staff as, "brilliant, great and responsive." While parents felt they were kept updated, staff could consider other ways to promote involvement. We shared a few examples that may increase participation, such as using a voting system to gather opinions to show how their views have contributed to the development of the service.

Quality Indicator: Staff skills, knowledge, values and deployment

The values of the staff team were evident as they interacted with children in positive, kind and caring ways. Parents shared that they liked, "The personal touch she (child) gets from the staff." And "Staff are amazing, caring and very understanding. Compassionate."

Within the staff team there was a mix of skill and experience. The manager had developed links with other settings which had enabled them to make improvements from shared practice. They should continue to develop their learning through use of best practice, national and local guidance.

Staff had mainly completed mandatory training. To develop their skills and knowledge they should identify areas of professional development they want to improve. To support this process, staff had recently completed the national induction. To build individual and team knowledge, the manager should now consider ways this could be achieved. For example, team meetings, one-to-one supervision and appraisals could be used to discuss practice and identify learning. All learning should be evaluated to demonstrate how it is used to improve outcomes for children and families. We made an area for improvement at the last inspection. While some progress has been met, we will update the area for improvement to reflect this and make a new one. (See area for improvement 2).

Children were supervised throughout the day as staff were flexible in their approach. They communicated well with each other which ensured busier times were well managed.

Areas for improvement

1. To improve outcomes for children and families, the manager should continue to develop and embed quality assurance and self-evaluation processes. To support this, they could include but are not limited to:

1. becoming familiar with 'A quality improvement framework for the early learning and childcare sectors: early learning and childcare'

2. identifying training and learning that would help develop skills and knowledge, that would support effective quality assurance.

This is to ensure confidence in the people who support and care for me and 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 a robust and transparent quality assurance process." (HSCS 4.19).

2. To develop the skills and knowledge of the staff team, training and learning should be identified that supports their continued professional development. They should maintain records of the impact of their learning. This could include but not limited to:

1. using best practice guidance, national and local policy, quality frameworks and health and social care standards

2. having opportunities to discuss their practice at team meetings and individual supervision or appraisals.

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).

Children thrive and develop in quality spaces 4 - Good

Quality Indicator: Children experience high quality spaces

We found important strengths within the setting's work, however, some aspects could benefit from improvement.

The setting was well ventilated with plenty of natural light, which created a welcoming atmosphere. Improvements to the layout of the room meant areas were well laid out so children had space to play and explore. This enabled them to choose where they spent their time.

Children could lead their play as resources and activities were easy to access, which enabled them to extend their games. Current interests were supported in both the indoor and outdoor environments. For example, activities relating to mini beasts were in both areas which kept children engaged. Staff should continue to develop the outdoor area. For example, pictures and resources could be displayed to support children's learning and interests.

Risk assessments were in place for the environment. Staff understood their responsibility to keep children safe and carried out safety checks of all play spaces before children arrived. Staff also ensured the door was locked while children used the room, which promoted their safety and prevented anyone entering the room without them knowing.

Effective infection prevention and control approaches contributed to reducing the risk of any potential spread of infection. Staff cleaned surfaces before snack preparation and any spillage was promptly cleared up. Handwashing was consistently embedded at key times, promoting children's health and wellbeing.

Children had daily opportunities for outdoor experiences. They were supported to take a balanced approach to risk during outdoor play, while staff reinforced safe behaviour. Children could take some risk in their play as they used large equipment. We asked the setting to consider the amount of resources provided in the outdoor space, as at times children could not use all areas effectively.

Effective record keeping and secure storage procedures protected children's personal information.

Children play and learn — 3 - Satisfactory / Adequate

Quality Indicator: Playing, learning and developing

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

Children were busy, having fun and were engaged in their play. Staff knew them well and their interactions supported children in their play. Prompts and resources supported children's interests so they could use their imagination, be curious and enjoy learning. Free-flow access to enclosed and secure outdoor spaces promoted children's choice and independence. Children were praised and encouraged in what they were doing and their achievements celebrated.

Staff used questions and prompting well which encouraged children's thinking and helped them revisit learning. For example, children were naming insects they were learning about. Children were developing skills in language, literacy and numeracy as staff talked about numbers, sang songs and supported children to understand concepts. To ensure children can fully benefit from experiences, we asked staff to ensure that resources effectively supported their play. For example, ensuring there was enough water in the water tray for experimentation.

Planning formats had been developed which supported planned and responsive activities. Evaluation had been used to outline what the benefits for children were and identify some next steps. This element of planning could be more effectively used, as it was not always clear how next steps were followed up. Staff should consider how they support, extend and challenge individual children's learning. This should enable children to progress at their own pace. (See area for improvement 1).

Personal learning journals (PLJ's) had been introduced for almost all children. They were at the beginning of telling the child's story of learning and development. While next steps had been identified, they had not been followed up or linked to planning. Staff should continue to develop the use of observation, so the progress in children's learning and achievements is recognised and built on.

Links could be made between planning formats and PLJ's to reflect children's interests and development. Six-monthly reviews could be used to reflect on previous next steps, progress made and agree future ones with parents and carers.

Areas for improvement

1. To ensure children are making progress in learning and development, staff should continue to develop the planning formats in place. They should also continue to develop their skills to record high-quality observations. They should consider:

- When they identify next steps for children's learning, clear links to planning should demonstrate how experiences are provided to extend children's interests, offer challenge and encourage them to reach their potential.

- Staff should further develop their evaluation skills, with more focus on supporting children's specific next steps, to further enhance their continued progression in learning.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "As a child, I have fun as I develop my skills in understanding, thinking, investigation and problem solving, including through imaginative play and storytelling." (HSCS 1.30).

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).

Children are supported to achieve 4 - Good

Quality Indicator: Children are supported to achieve

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.

As staff implemented the values of the service, they were kind, caring and nurturing towards children. We saw that children settled quickly on arrival, as they were warmly welcomed and made to feel safe and secure. Cosy areas were available to promote children's wellbeing and provide comfort if needed. As a result, children experienced a nurturing environment where they felt respected, valued and able to build trusting relationships. Parents told us their children settled really well, as staff were "great" and "brilliant" at supporting this transition.

A rolling snack had been introduced which improved children's experience at mealtimes. Children's participation had increased as they were supported by staff. They were learning life skills and developing independence as they served themselves. Staff sat and chatted with children which promoted the social side of mealtimes. Small changes could further enhance the experience for children. For example, having appropriately sized utensils to make serving themselves easier. Children could also be involved in preparations, such as setting the table.

Personal plans contained relevant information that enabled staff to plan for children's care. Parents and carers shared that they were involved in developing the plans and that staff took on board their views. This supported continuity for children as shared strategies were used. Informal conversations at drop-off and pick-up times supported information sharing and enabled a flexible approach to meet any changing needs. We asked the service to ensure all plans are reviewed six-monthly.

The service had developed positive connections and relationships with families. Settling-in visits provided a starting point, giving families opportunities to become familiar with the environment and staff. They felt valued and welcomed into the setting. The service was considering ways that could increase parental involvement. For example, stay and play opportunities had been offered. Staff should continue to develop and promote ways that enable family engagement.

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

Requirements

Requirement 1

By 31 March 2026, the manager must develop their skills and knowledge to support quality assurance and self-evaluation within the setting. They should be able to guide and support staff in quality assurance. This could include but not limited to:

1. becoming familiar with the quality framework for daycare of children, childminder and school-age childcare

2. identifying training and learning that would help develop skills that would support effective quality assurance

3. becoming familiar with best practice guidance that supports self-evaluation and quality assurance.

This is in order to comply with regulation 7 (2)(c) - Fitness of managers of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 2 June 2025.

Action taken on previous requirement

The manager had implemented processes that supported quality assurance. This had enabled changes to be made that improved the service for children and families. Working alongside other services and using guidance, had supported staff to develop their skills and knowledge to evaluate aspects of the service. This included meal times, the environment and documentation which supported children's health and wellbeing. They should continue to develop the quality assurance processes, so that continuous improvement enhances the service and is sustained.

Met - outwith 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

For children's health, welfare and safety needs to be fully met, the provider should continue to develop children's personal plans. They should include information about:

- the effectiveness of strategies and techniques used to support children
- summary of progress made and 'next steps'
- reviews at least once in every six months, in consultation with children and families.

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 2 June 2025.

Action taken since then

Personal plans were in place and used to support children. Appropriate information was recorded that enabled staff to plan for children's individual needs. Parents and carers contributed to the plans and worked alongside staff to agree strategies that would support their child's care. Information recorded demonstrated children's progress. Staff should continue to develop these to support children's wellbeing.

This area for improvement has been met.

Previous area for improvement 2

For all children to develop and learn at an appropriate pace, staff should be supported to further develop planning.

- They should consider the range of activities provided so children are supported to develop skills through stimulating play opportunities.

- Staff should develop their evaluation skills so they can assess the impact and outcome of activities children participate in. This would enable them to plan experiences, with more focus on supporting children's specific next steps, to further enhance progression in learning.

- They should refer to current national practice guidance to deliver high-quality play and learning experiences. Staff should then apply their training in practice to improve outcomes for children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely extended play, including using open-ended and natural materials." (HSCS 1.31).

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).

This area for improvement was made on 2 June 2025.

Action taken since then

Staff had developed the use of planning formats, which enabled staff to have planned and responsive approaches to children's learning. The use of national and local guidance had supported staff to plan experiences that followed children's interests. Evaluation had been started and used to identify next steps for children's learning. This area could be further strengthened to clearly demonstrate how next steps are used to extend and support children's learning.

We will update this area for improvement to recognise the progress made and incorporate it into a new one in respect of evaluation and assessing children's progress and next steps.

Previous area for improvement 3

To improve children's learning through play by use of questions, promoting creativity and curiosity, staff should continue to improve their interaction skills, so they engage children in high-quality learning experiences.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am supported to achieve my potential in education or employment, if this is right for me." (HSCS 1.27).

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).

This area for improvement was made on 2 June 2025.

Action taken since then

Staff interacted with children in positive ways when supporting their learning. They were down at children's level and used questions well to support children's thinking. This approach helped children to engage in activities, supported communication, language and helped children with their social development.

This area for improvement has been met.

Previous area for improvement 4

To ensure children have access to a range of activities that support their learning and development, staff should improve the planning system in place. It should reflect how children's individual learning needs are being planned for, evaluated and next steps identified.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "As a child, I have fun as I develop my skills in understanding, thinking, investigation and problem solving, including through imaginative play and storytelling." (HSCS 1.30)

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

This area for improvement was made on 2 June 2025.

Action taken since then

Planning formats has supported staff to provide a range of activities that supported children's learning, development and interests. Consultative and responsive planning, along with individual learning journals for children were used to identify progress, consider next steps and extend children's interests. Further work was needed to strengthen how next steps were followed up for individual children.

We will update this area for improvement to reflect the progress made, and incorporate it into a new one, in respect of evaluation and assessing children's progress and next steps.

Previous area for improvement 5

To ensure children are making progress, staff should be supported to develop their skills to record high-quality observations. They should be able to use observations to assess children's progress and identify 'next steps.' This will help plan experiences to extend children's interests and encourage them to reach their potential.

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 2 June 2025.

Action taken since then

Almost all children had learning journals in place. They contained observations about their experiences and learning they had been involved in. This is an area that could be strengthened to recognise children's progress, achievements and inform plans that extend and offer challenge children's learning.

We will update this area for improvement to reflect the progress made, and incorporate it into a new one, in respect of evaluation and assessing children's progress and next steps.

Previous area for improvement 6

To improve outcomes for children and families, the manager should develop quality assurance systems. This should enable them to assess and evaluate all aspects of the service and identify areas for development. This could include, but is not limited to, audits, peer review and monitoring of staff practice.

This is to ensure confidence in the people who support and care for me and 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 a robust and transparent quality assurance processes." (HSCS 4.19).

This area for improvement was made on 2 June 2025.

Action taken since then

Quality assurance processes had been implemented and used to assess aspects of the service. Staff had worked together to make improvements that enabled positive outcomes for children. Staff had been supported to lead on aspects of improvement, and they had reflected on their practice and identified areas for their continued professional development.

This area for improvement has been met.

Previous area for improvement 7

To support partnership working, the manager should consider ways that meaningfully involve parents and carers in the service and contribute to change. As part of this process, they should develop various ways to gather parents, children's and stakeholder's views.

This is to ensure confidence in the people who support and care for me and 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 a robust and transparent quality assurance processes." (HSCS 4.19).

This area for improvement was made on 2 June 2025.

Action taken since then

The service had developed good relationships with families which supported partnership working. Parents were regularly updated about the service, and they had opportunities to participate and share their views.

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	3 - Satisfactory / Adequate
Leadership and management of staff and resources	4 - Good
Staff skills, knowledge, values and deployment	3 - Satisfactory / Adequate

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

Children play and learn	3 - Satisfactory / Adequate
Playing, learning and developing	3 - Satisfactory / Adequate

Children are supported to achieve	4 - Good
Nurturing care and support	4 - Good

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