Millbank Nursery
Day Care of Children

Millbank Primary School
Millbank Crescent
Nairn
IV12 4QB

Telephone: 01667 452 240

Type of inspection:
Unannounced

Completed on:
21 May 2026

Service provided by:
Highland Council

Service provider number:
SP2003001693

Service no:
CS2003013572

About the service

Millbank Primary School Nursery is situated in Nairn and is operated by The Highland Council. The service is registered to provide a care service to a maximum of 24 children aged 3 years to not yet attending primary school.

The nursery is located in Millbank primary school. The accommodation is within one main room with access to an outdoor play area. The outdoor play area contains loose parts and open ended resources, which extend and enrich the children's imaginative play and learning experiences.

About the inspection

This was an unannounced inspection which took place on Tuesday 19 and Wednesday 20 May 2026, with feedback on Thursday 21 May 2026. 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:

- Spent time with children using the service.
- Received completed questionnaires from parents and staff.
- Spoke with staff and management.
- Assessed core assurances, including the physical environment.
- Observed practice and children's experiences.
- 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

• Staff demonstrated kind and caring interactions with children, supporting them to feel safe and secure.

• Most children were engaged and motivated in their play and were having fun with other children.

•Most children's needs were being met through personal planning, however, further detail should be included in support strategies to enable children's needs to be met effectively.

•Work had began to improve the quality of the information on observations/planning and next steps.

•Quality assurance and self evaluation processes were are the early stages of development.

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 play and learn	3 - Satisfactory / Adequate
Children are supported to achieve	3 - Satisfactory / Adequate

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 resources

The service displayed their vision, values and aims on the wall of the nursery, encouraging people's awareness of what to expect from the provision. This practice reflects an understanding of the importance of shared values in shaping high-quality provision. Families had been given opportunities to come in to the setting and give feedback including stay and plays sessions. The deputy head teacher recognised the importance of having a shared vision that reflected the setting and families' aspirations.

Due to the competing demands of inspection and school priorities in order to fully mentor staff and lead the service the provider needs to give more managerial time for the deputy head teacher/senior practitioner to fulfil their roles and responsibilities and mentor staff. The provider should review the management arrangements in place to ensure high quality experiences for children (see area for improvement one)

The service has established quality assurance processes and has adopted more reflective practice; however, this doesn't always meaningfully impact on children's outcomes and experiences. Staff had started to engage in the improvement process. They had begun to develop the playroom as well as the outdoor area. The leadership team spent time with the staff team as they worked, enabling staff to share questions and ideas. There is a formal approach supported by a Quality Assurance Calendar and regular planned meetings with staff. A more consistent structure of setting timescales and reviewing actions is needed. This mean that plans in place for maintaining and improving the service were not fully supported by a robust process, to ensure timely review. As a result, although the Deputy Head Teacher has a process in place to improve and some positive developments underway, the team need to improve the pace of progress as some planned changes were not yet translating into sustained or measurable improvements in practice or children's experiences (See area for improvement two)

Infection prevention and control practice required improvement. We found some infection prevention and control issues which had the potential to impact negatively on children's safety, health and wellbeing. Hand hygiene procedures were not consistently effective, particularly when children returned from outdoor play, increasing the potential for the spread of infection. Furthermore, the toilet, sink area and floor was dirty as well the presence of a noticeable odour in the toilet and nappy-changing area. This demonstrates that infection control measures were not being implemented to an acceptable standard and require sustained improvement, to ensure a safe and hygienic environment for children. (See area for improvement 3)

Staff recruitment processes were robust and fully aligned with safer recruitment guidance, demonstrating a strong commitment to safeguarding. The induction programme was well-structured, effectively introducing new staff to key policies and procedures. Feedback from staff indicated that they felt supported throughout induction and ongoing management guidance, which reflects a positive organisational culture. Overall, these practices significantly contribute to maintaining a safe, competent, and confident workforce.

Areas for improvement

1. To support the effective running of the service, the provider should ensure that the manager allocates time each week to effectively manage, mentor staff and lead the care service provided.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
'I use a service and organisation that are well led and managed'. (HSCS, 4.23)

2. To support children's wellbeing and promote the continued development and improvement of the service, the manager should ensure robust quality assurance systems are in place.

This should include but is not limited to:

a) Regular opportunities for reflection and self-evaluation of practice.

b) Clear and effective plans are in place for maintaining and improving the service.

c) The management team effectively monitors the work of each member of staff and the service as a whole.

d) Regular monitoring of the quality of children's experiences and care.

This is to comply with Regulation 4 (1)(a)(b) (welfare of Users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011(SSI 2011/10).

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)

3. To support children's health and wellbeing, the provider should ensure that effective infection prevention and control practices are in place for children and changes are made to the physical environment:

a) To ensure the toilet and nappy-changing areas are clean, well-ventilated, and free from odours at all times.
b) To ensure robust hand hygiene procedures are embedded in daily practice, including that children are consistently supported and supervised to wash their hands at key times, such as after outdoor play.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
"I experience high quality care and support based on relevant evidence, guidance and best practice". (HSCS 4.11)

This is also to ensure that the premises are consistent with the best practice guidance, Space to Grow.

Children play and learn 3 - Satisfactory / Adequate

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

Quality Indicator: Playing, learning and developing

Some staff supported children in their play, helping them to problem solve and access a variety of learning experiences. Children were supported to develop their language and numeracy skills through conversations with the staff team. We saw children having fun and singing songs during an activity with a member of staff. However, these approaches were not always consistent for all children throughout the day which limited their overall impact on children's progress.

Overall, most children demonstrated positive levels of engagement and motivation, enjoying interactions with their peers and showing a growing ability to play alongside others. While some play experiences successfully stimulated creativity and supported aspects of learning, this was not consistently evident across the service. While staff were reliably warm, positive and this created a nurturing and supportive environment, the quality of interactions did not consistently extend or deepen children's learning. There were occasions where no adults were available to engage with or support children, resulting in reduced involvement and missed learning opportunities. Furthermore, staff positioning did not always enable effective supervision of the whole room, leading to periods where some children were not seen or supported in their play. These missed opportunities to intervene and scaffold learning limited children's ability to remain fully included and to deepen their play. Strengthening the consistency and focus of monitoring arrangements would better support staff to reflect on and develop their practice.

Staff were developing their ability to assess children's learning and use this to inform planning. Effective observations of children's learning and development was also an identified area for improvement. Work was ongoing with staff to develop consistent approaches to both planning and recording observations effectively. However, this was not yet fully embedded in practice. As a result, learning experiences were not consistently well matched to children's individual needs and did not always provide the appropriate level of challenge or support. Consequently, some children were not consistently challenged to extend their learning, while others did not receive the targeted support needed to make strong progress. This meant that children were not always fully supported to achieve their potential in their learning and development. (See area for improvement 1)

Children's opportunities for play and learning were enhanced through strong connections to their own and wider communities. These included trips to the park, library and natural spaces. This supported children to feel part of their community.

Areas for improvement

1. To effectively deliver high quality play and learning experiences, the manager should support staff to access training appropriate to their role and apply the training to their practice.

This should include but is not limited to:

a) How to complete meaningful high quality observations.
b) Reporting and recording children's progress and identifying meaningful next steps.
c) Using best practice guidance to support high quality interactions and play experiences.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
'I experience high quality care and support based on relevant evidence, guidance and best practice'. (HSCS 4.11)

Children are supported to achieve — 3 - Satisfactory / Adequate

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

Quality Indicator: Nurturing care and support

Children experienced warm and nurturing care from all staff members. Children were given praise, reassurance and physical comfort when they needed it and this supported them to feel settled and secure. Most staff worked well together as a team, by communicating and purposefully with one another during transitions and personal care routines.

Most staff spoke knowledgably and confidently about children's individual care needs and what they did to support them. Some children benefited from effective personal planning, with strategies in place to support them in the setting. However, not all personal planning contained up to date information that matched their preferences. There was also a lack of clarity around agreed strategies and allergies/intolerances of children. This resulted in inconsistency in how children were supported, with care not always provided in a timely or coordinated way. (See are for improvement 1)

The service demonstrated effective communication practices through regular meetings, emails, and daily conversations, which supported strong connections with families. Parents were consistently welcomed into the setting during drop-off, and staff engaged positively in conversations, fostering trust and partnership.

Mealtimes were calm, relaxed and well-organised, with thoughtful homely touches, such as the use of tablecloths, helping to create a welcoming and nurturing atmosphere. Children were given opportunities to develop independence skills, collecting their own crockery, pouring drinks and tidying away. Staff were focused on children, supporting them when they needed help. As a result, children benefited from a positive social experience.

Medication was stored securely and administered in line with best practice. We found that staff and management knew their responsibility regarding safe medication administration. This helped keep children safe.

Staff understood their roles and responsibilities to keep children safe and protected from harm. They could confidently tell us how they would respond if they had any child protection concerns. This contributed to keeping children safe.

Areas for improvement

1. To support children's wellbeing, development needs and progress, being effectively met, children's personal plans should be further developed and streamlined.

This should include but is not limited to:

a) All staff are knowledgeable about each child's health and wellbeing needs, and that tailored care and support strategies are provided and used effectively to meet those 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 right for me because it sets out how my needs will be met, as well as my wishes and choices'.
(HSCS 1.15).

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

Children are supported to achieve	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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