Inverarity Pre School Class
Day Care of Children

Inverarity Primary School
Inverarity
Forfar
DD8 2JN

Telephone: 01307494259

Type of inspection:
Unannounced

Completed on:
28 May 2026

Service provided by:
Angus Council

Service provider number:
SP2003000043

Service no:
CS2003015770

About the service

Inverarity Pre School Class provides a daycare of children service in Inverarity. The service is registered to provide a care service to a maximum of 24 children at any one time. Other conditions unique to the service are that the outdoor space has been taken into account when agreeing the maximum number of pre school age children. Children must have access to the outdoor space at all times. In case of extreme weather conditions, children will have access to the gym hall and other areas within the school as well as the pre school rooms. The total number of children registered with the service at the time of the inspection was 19.

Children have access to a large enclosed outdoor space, toilets, indoor facilities, and the school gym hall. The service is situated in a residential area, close to schools, parks, and public transport.

About the inspection

This was an unannounced inspection which took place on 27 May 2026 between 08:45 and 16:40 and 28 May 2026 between 08:50 and 10:10. This 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, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. To inform our evaluation we:

- spoke/spent time with 16 children using the service
- spoke with two families and received three completed questionnaires
- spoke with four staff and the manager
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents.

At the time of this inspection, improvements were identified relating to core assurances. We have reported where improvement is necessary within Leadership.

Key messages

• Leaders had created positive values and were beginning to identify improvements within the service.

• Quality assurance processes should be strengthened to ensure they are clear, robust, and used consistently to support positive outcomes for children.

• Children were happy, engaged and actively involved in play, with staff using skilled interactions to extend learning and respond well to children's interests.

• Opportunities for literacy and numeracy were embedded and the service were working towards achieving the Reading in Schools award.

• Children were settled and confident, supported by warm, nurturing relationships and strong partnerships with families, which promoted a sense of belonging.

• Supervision of children should be improved both within the environment and during mealtimes to support children's safety and wellbeing.

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

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

Leadership 3 - Satisfactory / Adequate

Quality Indicator: Leadership and management of staff and resources

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

The setting had recently revisited its whole-school vision, values and aims to ensure these remained relevant and meaningful. Core values, including kindness, honesty and responsibility, were evident in practice, with staff using consistent language to promote these during interactions with children. This helped to promote high aspirations and support a sense of inclusion and value.

Leaders demonstrated an emerging awareness of strengths and areas for improvement. Quality assurance processes were not yet robust or consistently applied across key areas, including children's progression and mealtimes. For example, although some developments in children's learning had been identified, these had not been consistently followed through. Gaps were noted in children's next steps and timescales between reviews within their online learning journals. As a result, monitoring did not consistently lead to improved outcomes for children.
Concerns were raised regarding the supervision of children both outdoors and during lunchtime, where staff did not always maintain appropriate oversight. This created potential risks to children's safety and wellbeing. The service should further develop its approaches to self-evaluation and monitoring to ensure a more responsive approach to improvement. **(See area for improvement one).**

Systems were in place to audit accidents and incidents; however, medication processes had not been formally audited. This resulted in gaps in children's medical information, including a lack of clear guidance on recognising symptoms and responding to potential allergic reactions. Strengthening these systems would help ensure that children's health needs are fully understood and consistently supported. Audits should be reviewed to ensure children's wellbeing and health needs are met. **(See area for improvement two).**

The setting contributed to a whole-school improvement plan, and staff were involved in progressing identified priorities. Positive approaches were observed, including the development of a literacy-rich environment and the effective use of praise to support children's confidence and emotional wellbeing. The improvement plan did not fully identify all priority areas. Strengthening improvement planning would support more targeted and effective progress.

Self-evaluation processes aligned with national guidance, including the use of Care Inspectorate quality improvement framework challenge questions. Some improvement actions had been implemented and were beginning to support changes in practice. This included incorporating children's voices into learning journals. Clearer evidence of progress and impact could support a more consistent and measurable approach to improvement.

A culture of shared leadership was progressing, with staff undertaking champion roles in areas such as literacy, numeracy, and inclusion. Staff told us they felt confident when contributing ideas and leading aspects of practice. This contributed positively to professional development and children's experiences.

Quality assurance systems did not consistently identify potential infection, prevention and control risks.

Early identification and management of potential hazards, including infection prevention and control concerns, would support the service to ensure any concerns are consistently actioned by the provider. Following feedback, prompt action was taken in response to the identified issues within the geodome. Ongoing reviews of the environment could help the service to ensure that any concerns are effectively managed.

Areas for improvement

1. To ensure children's safety, wellbeing and positive outcomes, the provider should further develop and consistently implement robust quality assurance and self-evaluation processes.

This should include, but is not limited to:

• strengthening monitoring and oversight of key areas such as, mealtimes and supervision of children, both indoors and outdoors [FM1.1], and cleanliness of areas
• ensuring that identified improvements in children's learning and development are consistently followed through, with clear next steps and appropriate review timescales
• using quality assurance findings to drive timely and effective improvements in practice.

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).

2. To ensure children's health needs are fully understood and safely supported, the provider should implement and consistently apply robust auditing and monitoring processes for medication management.

This should include, but is not limited to:

• introducing regular audits of medication systems to identify and address gaps in practice
• ensuring children's medical information is complete, accurate and includes clear guidance on recognising symptoms and responding in an emergency.

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

Children play and learn 4 - Good

Quality Indicator: Playing, learning and developing

We evaluated this quality indicator as **good**, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Children were observed to be happy, engaged and enjoying their play experiences. They interacted positively with one another, collaborating well as they explored and developed their thinking skills. Staff used effective questioning and approaches to extend children's curiosity and imagination, for example during minibeast explorations. A parent commented, "My children enjoy learning outdoors." Staff responded well to children's interests, using resources such as digital technology to support learning. This demonstrated that children's ideas were valued and extended.

Children were actively involved in sustained play, both independently and alongside staff. Staff demonstrated a good understanding of when to engage and when to observe. This supported children to lead their own learning. Staff listened to children's ideas and, overall supported these sensitively. This enabled children to take ownership of their experiences. For example, staff effectively facilitated play and developed critical skills during a den building experience. This could be further enhanced by ensuring all children's voices are consistently heard and supported, particularly those who may be quieter. This would help to promote a fully inclusive environment.

Opportunities to develop literacy and numeracy were embedded across the setting. Books and storytelling resources were readily accessible and used effectively to support children's engagement and enjoyment. Children were observed participating enthusiastically in storytelling experiences, using puppets and real-life objects to bring stories to life. The service were proud of their developments and were working towards achieving the Reading in Schools award. A range of numeracy resources, including measuring tools and number materials, supported children to develop their understanding through play and exploration.

Planning approaches reflected a balance between intentional and responsive learning. Staff reflected on and evaluated children's experiences which informed future learning. Children's interests contributed to the planned activities and enabled them to speak confidently about their learning. For example, one child shared, "We are learning about shapes and numbers." This helped to support positive outcomes for children and develop their ownership within these.

Floor books and online learning journals, highlighted children's experiences. These evidenced children's voices and valued their contributions, with families reporting that they felt included in their children's learning. There was potential to strengthen floor books further by developing clearer links to learning. Next steps within children's online learning journals were identified to support their development. There were inconsistencies with these, for example some children did not have any next steps identified for a significant amount of time. This reduced opportunities for children to make progress and achieve their outcomes. An area for improvement has been identified within Leadership and management of staff and resources to reflect this.

Children are supported to achieve — 3 - Satisfactory / Adequate

Quality Indicator: Nurturing care and support

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

Children were observed to be happy, settled, and confident within the setting. They were keen to share their environment and talk about their favourite play experiences. A parent commented, "My child says they feel safe around staff which is reassuring." This highlighted that children felt secure and valued.

Staff demonstrated a knowledge of children's individual needs and home circumstances, enabling them to provide nurturing and responsive care. Interactions between staff and children were warm, kind, and respectful. Staff engaged at children's level and provided reassurance and comfort when needed, including appropriate physical affection. These approaches supported the development of positive relationships and attachments, helping children to feel a sense of belonging within the service.

Staff supported children to develop an awareness of risk using appropriate strategies, such as encouraging children to assess and manage risks in their play. Approaches such as SIMOA (Safety, Inspect, Monitor, Observe, Act) were used to involve children in making safe choices. This approach promoted children's confidence and independence within a supportive environment.

Staff knew children's preferences and personalities well, and systems such as 'My World' reviews supported communication with families. These were not consistently updated, meaning that children's information may not reflect their current needs. We asked that the service ensure that both 'My World' documentation and core registration information are regularly reviewed and updated in line with legislation. This would further support children's wellbeing.

Arrangements to safeguard children were in place. Staff demonstrated confidence in child protection procedures, supported by regular training and ongoing professional dialogue. This helped to ensure that children were protected from harm and that their wellbeing was promoted. Recording systems for significant events were not fully in place to support staff to identify changes in children's lives, and provide timely, appropriate support. Chronologies should be developed to support staff to identify possible patterns or changes in children's behaviour. This would help to protect children's safety and wellbeing. **(See area for improvement one).**

Mealtime experiences should be improved to ensure they are consistently safe, calm and nurturing. Staff were task focused which impacted on the quality of children's experiences. Engaging in meaningful interactions during lunchtime could enhance children's experiences and promote their wellbeing. **(See area for improvement two).**

Families were warmly welcomed into the service and shared that they felt fully involved and worked in partnership with staff. A variety of approaches ensured that families were kept updated regarding nursery information. Families were invited to join meet and greet sessions where they could discuss policies and share their views to develop the service. They spoke positively about opportunities to be involved in stay and play experiences and valued the time to play with their children. Questionnaires gathered their views and these were actioned through 'you said, we did' posters which were displayed within the cloakroom. As a result, families were valued as active partners within the service.

Areas for improvement

1. To support children's wellbeing and ensure timely and appropriate responses to changes in their lives, the provider should strengthen systems for recording and monitoring significant events.

This should include, but is not limited to:

• developing and maintaining clear chronologies for each child
• ensuring significant events are consistently recorded, tracked and reviewed
• using this information to identify patterns or changes in children's wellbeing and inform appropriate support.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that:

'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18).

2. To ensure mealtimes are safe, calm, and nurturing experiences that support children's wellbeing, the provider should improve how mealtimes are planned and managed.

This should include, but is not limited to:

• creating a calm and organised environment that supports children's comfort
• ensuring staff prioritise meaningful interactions with children during mealtimes rather than task-focused activities.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that:

'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible' (HSCS 1.35), and 'My needs are met by the right number of people' (HSCS 3.15).

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	4 - Good
Playing, learning and developing	4 - Good

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

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