Carriagehill Nursery Green Road
Day Care of Children

12/14 Green Road
Paisley
PA2 9AB

Telephone: 01418 485 900

Type of inspection:
Unannounced

Completed on:
20 May 2026

Service provided by:
Heather Murphy T/A Carriagehill Nursery

Service provider number:
SP2003001028

Service no:
CS2003043988

About the service

Carriagehill Nursery, Green Road is registered to provide a care service to a maximum of 50 children not yet attending primary school at any one time, of whom no more than 10 are aged under two years, no more than 12 are aged two years to under three years and no more than 28 are aged three years to those not yet attending primary school full time. At the time of inspection there were up to 40 children in attendance. The registered provider is Carriagehill Nursery Ltd.

The service has sole use of a building in Paisley, Renfrewshire. Children have access to a large playroom for children over three years, with an area sectioned off for children aged two to under three years. Both areas have direct access to an outdoor play area. There is a separate room for children aged 0-2 years with access to a small, covered deck area. The service is close to shops, schools, transport routes and other amenities.

About the inspection

This was an unannounced inspection which took place on 19 and 20 May 2026.

The inspection was carried out by two inspectors from the Care Inspectorate.

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

In making our evaluations of the service we:

- observed practice and staff interactions with children
- spoke with the provider and staff
- gathered feedback from 13 families and seven staff members through online questionnaires
- reviewed documents
- spoke with some of the children.

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 provided warm, nurturing care, creating a welcoming environment where children were happy, settled and having fun.
- The service should review systems for responding to parental concerns to ensure they are consistently recorded, followed through and resolved effectively.
- Child-led planning was in place and supported children's interests, with clear links to national guidance informing practice.
- Quality assurance processes had progressed and were developing, with scope to further strengthen their impact in driving continuous improvement and improving outcomes for children.
- Personal plans were in place for all children, containing key information that supported their health, safety and wellbeing needs.
- The service should review staff deployment to support sustained engagement, appropriate challenge and meaningful interactions for children.
- The service had reviewed the layout of playrooms and invested in resources to support children's play and learning.
- Management and staff demonstrated a commitment to improvement and should continue to build on this through the service improvement plan.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

Leadership	4 - Good
Children thrive and develop in quality spaces	4 - Good
Children play and learn	4 - Good
Children are supported to achieve	4 - Good

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

Leadership 4 - Good

Quality indicators: Leadership and management of staff and resources.

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

The service had established a vision, values and aims which focused on providing a happy, safe, caring and nurturing environment where children could learn, have fun and feel loved. We could see these values reflected in practice. Staff interactions were warm, caring and respectful. It was suggested that the vision, values and aims are reviewed to ensure they continue to reflect the views of current children, families and staff.

Quality assurance processes were developing. A monitoring calendar had been developed to support these processes. The calendar identified monthly areas of focus and key operational tasks. This supported a more structured approach to monitoring practice, evaluating performance and driving improvement across the service.

The leadership team had begun to monitor practice, including observations of lunchtime routines, care plans, wellbeing plans and children's journals. While these procedures had been introduced, they would benefit from being further embedded, with identified actions for improvement revisited to ensure they are implemented, reviewed and evaluated as part of a continuous improvement cycle.

Accident and incident audits were in place. We suggested the service review processes to ensure it was clear how frequently these were completed. The service had developed a new template on day two of the inspection to support improved recording and monitoring of accidents and incidents, helping to strengthen safety and oversight.

Self-evaluation processes were developing across the service, with families actively involved in shaping change. Feedback from parents was gathered using a "two stars and a wish" approach, which was collated and shared to support reflection and improvement. A recent display for parents to write comments had been positioned at the entrance. This supported ongoing family engagement and involvement in shaping improvements within the service.

We discussed with the service that systems for responding to parental concerns should be strengthened to ensure issues are consistently acknowledged, recorded and followed through to resolution in a timely and transparent way. Clearer processes for monitoring concerns and communicating outcomes would support effective partnership working and help ensure families feel listened to, informed and confident that concerns are appropriately addressed (see area for improvement 1).

Leaders encouraged staff to take responsibility for improvement and contribute ideas, supporting a reflective team culture focused on children's needs. Staff reported increasing confidence in using self-evaluation tools, including challenge questions from the new 'Quality Improvement Framework', and shared that they felt valued, supported and listened to. This supported a positive culture of continuous improvement and helped ensure practice remained focused on improving outcomes for children.

An improvement plan was in place and identified key priorities, including the review of play space layouts, planning processes and the development of floor books. Progress was evident across these areas. Staff audits had been introduced to support reflection and improvement and were at an early stage of implementation. Peer observations and monitoring of play spaces had also commenced and were continuing to develop. These approaches supported ongoing reflection on practice and contributed to improving the quality of children's experiences across the service.

Areas for improvement

1. To support positive outcomes for children the service should further strengthen its systems for responding to parental concerns to ensure that all issues are consistently acknowledged, accurately recorded, and addressed in a timely, transparent, and person-centred manner.

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).

Children thrive and develop in quality spaces — 4 - Good

Quality indicator: Children experience high quality spaces.

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

The service had appropriate arrangements in place to support the safety and security of children. The main entrance was accessed via a doorbell system, while the playroom door operated using a secure keypad entry system. Processes were in place to record and respond to maintenance issues in a timely manner. Most parents agreed children were cared for in a safe, well-maintained environment.

The playrooms were welcoming, comfortable and thoughtfully organised, with spaces and resources reflecting children's ages and stages of development. This provided children with safe, secure and engaging environments to play, learn and develop. Play spaces in all age groups were well defined, supporting children's curiosity, creativity, and imagination. Areas included arts and crafts, sensory experiences such as sand and water, imaginative play and book corners.

The layout of playrooms enabled children to move freely around and resources were displayed at child height, allowing children to make choices about their play. We suggested the service review the spaces within the 2-3 years playroom to maximise available space and enhance children's access to resources and play experiences.

Cosy spaces had been developed in the 3-5 playroom, including soft lighting, cushions and a sofa, providing children with comfortable areas to rest and relax. In the 2-3 playroom, children had access to a den with soft furnishings, supporting opportunities for comfort, calm play and relaxation.

All playrooms had access to dedicated, enclosed garden areas, providing safe and well-managed spaces that supported active play and appropriate challenge. Some outdoor areas included covered spaces, enabling children to access outdoor play and learning experiences in a range of weather conditions. The outdoor environments offered a range of engaging experiences that promoted children's physical development, creativity and curiosity. Children in the 2-5 playrooms enjoyed activities such as painting with water, exploring the mud kitchen and using physical play equipment, while babies participated in singing activities and ball play. These experiences supported children's wellbeing, confidence, physical skills and engagement in learning through play.

Staff had effective systems in place to ensure children were always accounted for, including attendance registers and an outdoor whiteboard to manage free-flow access between indoors and the garden area. These systems supported children's safety, wellbeing and freedom to move confidently between indoor and outdoor learning environments.

Risk assessments were in place including a benefit-risk assessment for outdoor play. These were up to date, regularly reviewed and reflected current practice within the service. Individual risk assessments were also in place for children where required, supporting a personalised approach to safety. Overall, these arrangements supported children's safety and wellbeing while allowing appropriate opportunities for safe exploration and play.

The service was registered with the Information Commissioner's Office, and children's information was stored appropriately. This supported the safe handling, storage, and protection of personal data in line with relevant requirements.

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 happy, confident and engaged in their play. They led their own learning, explored the environment independently and participated in a range of developmentally appropriate experiences that promoted curiosity, creativity and imagination.

Children in the 3-5 playroom engaged enthusiastically in the home corner role playing with pretend food and making "chocolate cakes" using water and clay. Children enjoyed creating models with construction straws, supporting their creativity and imagination. Babies experienced sensory play with natural materials such as wooden and metal objects and textured resources, promoting curiosity and exploration. Children in the 2-3 playroom enjoyed exploring sand and mark making.

On the first day of inspection, staff deployment reduced opportunities for sustained engagement, challenge and meaningful interactions. Some areas and resources were not fully utilised, and visibility across parts of the playroom was limited. We suggested reviewing staff deployment and the layout of play spaces to maximise engagement and supervision. Improvements were evident on the second day of inspection due to an increased number of staff, resulting in greater interaction, engagement and responsiveness to children's play and learning.

Children's play and learning experiences were shared daily with parents on a whiteboard. This kept families informed about activities and supported ongoing communication between the service and home. As a result, parents were kept up to date with their child's learning, helping to strengthen partnership working and continuity of care.

Staff used child-centred approaches to planning, valuing children's right to play and responding to their emerging ideas. Floor books supported this approach, showing clear links to national guidance and capturing photographs, children's comments and their voices. This provided a clear record of learning, including identified next steps and achievements, demonstrating how learning was built upon over time. As a result, children experienced learning that reflected their interests, supported their individual development and enabled them to influence and shape their own learning experiences.

Play and learning were enhanced through regular visits to the local care home, parks and allotment. These experiences provided children with opportunities to interact with the wider community, develop social skills and build relationships across generations. Visits to parks supported physical development and exploration, while time at the allotment encouraged curiosity about nature, growing and the environment. As a result, children developed confidence, communication skills and a stronger understanding of their local community and the world around them.

Children are supported to achieve 4 - Good

Quality indicator: Nurturing care and support.

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

Children experienced warm, nurturing and compassionate care from staff who knew them well and responded sensitively to their individual needs. Strong, trusting relationships between staff, children and families were evident throughout the inspection and contributed to children feeling safe, secure and valued. One parent described staff as "extremely supportive, accommodating and helpful," highlighting the positive relationships developed with families.

Personal care routines were carried out respectfully and sensitively. Staff promoted children's privacy, dignity and choice during nappy changing and other care routines. Children were listened to and their verbal and non-verbal communications were responded to appropriately. One parent commented "The staff's attentive approach and their ability to interpret their non-verbal cues ensure that their individual needs are consistently met, creating a nurturing environment." As a result, children experienced care that supported their emotional wellbeing, confidence and sense of security.

Sleep and rest routines reflected children's individual needs. Staff prepared sleep spaces in advance and used familiar comforters and bedding to support children's established routines. Children were reassured and comforted when required, helping them feel settled and secure during transitions to rest.

Personal plans were in place and contained key information to support children's individual care, learning and development needs. Plans included details about children's interests, strengths, wellbeing, routines and developmental targets. Children's individual targets and strategies were clearly displayed in the playrooms, allowing staff to consistently implement agreed approaches and provide responsive support tailored to each child's needs. This ensured children's needs were clearly identified, consistently supported and reflected in their daily experiences.

Personal journals recorded children's interests and identified experiences and opportunities provided by staff to extend learning and support next steps. Where children required additional support, wellbeing plans were in place which identified individual goals and achievements. As a result, children received care and support that reflected their individual needs, interests and stages of development.

Medication systems were in place and supported children's health and wellbeing. Medication was stored securely, parental consent had been obtained and emergency medication was readily accessible. We identified opportunities to strengthen recording and labelling arrangements to ensure information is fully completed, clearly organised and easily accessible. This would further support safe and consistent administration of medication.

Infection prevention and control practices were generally effective. Children were supported to wash their hands regularly throughout the day and staff promoted good hygiene routines. We suggested the service review some practices, including hand hygiene following nose wiping, storage of mops within playrooms and the use of gloves during snack routines, to ensure procedures continue to reflect current best practice guidance. The service responded promptly and actioned these suggestions on day two of inspection.

A child protection policy was in place. Staff demonstrated a clear understanding of child protection procedures and were confident in describing reporting and responding processes. Child protection training had been completed, supporting staff understanding of their responsibilities. This ensured children were safe and protected.

Partnerships with families was a strength. Parents valued the open and welcoming approach of staff. One parent commented "Staff will always spend time to talk with us about our child and how they have been during the day" and another shared "All staff very approachable, able to discuss any concerns or queries easily".

A range of communication methods supported regular sharing of information about children's care and learning, including a digital app used to provide ongoing updates on care routines such as feeding, sleep and accidents. Daily learning experiences were also shared with families, helping to keep them informed and involved. Some parents identified communication as an area for development and would like further communication, comments included "Better communication" and "communication varies".

Opportunities for families to engage with staff and participate in events strengthened relationships and promoted a strong sense of community. Parents were able to contribute to their child's learning through parents' evenings, where learning journals were reviewed. Daily face-to-face contact at collection times provided regular opportunities for informal discussion about children's experiences and wellbeing. These approaches supported strong, trusting relationships between families and the setting, contributing to consistency of care between home and nursery and positive outcomes for children.

Mealtimes were relaxed and unhurried, providing children with opportunities to develop independence skills such as self-serving food and pouring their own drinks. Allergy procedures were followed appropriately, supporting children's health and safety, and handwashing took place before meals to promote good hygiene practices. We discussed with the service that opportunities for staff to sit with children and extend conversations during lunchtime within the 3-5 playroom were limited at times, as staff were task focused, and suggested the service review this. On the second day of inspection, we observed a positive snack experience, with staff sitting alongside children and engaging them in meaningful conversations, supporting social interaction, language development and a nurturing atmosphere.

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 ensure children have regular experiences which supports their curiosity and creativity, the provider should ensure that resources are accessible and reflect children's current interests and stages of development.

This should include, but is not limited to:

a) Children have opportunities to engage in a range of interesting and stimulating play experiences through a variety of resources.

b) Play spaces are decluttered and organised to extend their play and 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 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 23 April 2025.

Action taken since then

The service had made the required improvements in relation to children's access to resources and play experiences. Children had access a range of well-organised, stimulating, and developmentally appropriate resources that reflected their current interests and stages of development. Play spaces had been decluttered and structured more effectively, supporting children to extend their learning, creativity, and curiosity through self-directed play.

This area for improvement has been met.

Previous area for improvement 2

To support children's experiences and outcomes while at the service, the management team should develop and embed robust quality assurance processes to support continuous improvements.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: '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 23 April 2025.

Action taken since then

The management team had taken steps to develop and implement quality assurance processes to support continuous improvement across the service. A quality assurance calendar had been introduced and some regular monitoring activities had taken place. An improvement plan had been developed and progress was evident in identified areas.

This area for improvement has been met.

Previous area for improvement 3

make appropriate notifications to the Care Inspectorate when certain events take place. Management should refer to good practice guidance, 'Early learning and childcare services: Guidance on records you must keep and notifications you must make. 'To identify events that require them to notify the Care Inspectorate.

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

This area for improvement was made on 23 April 2025.

Action taken since then

The service had appropriate systems in place to ensure that notifications are made to the Care Inspectorate when required.

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.com.

Detailed evaluations

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Leadership and management of staff and resources	4 - Good

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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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