Thrive Childcare and Education Corner House Nursery Falkirk
Day Care of Children

21 St Crispins Place
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Telephone: 01324 633 327

Type of inspection:
Unannounced

Completed on:
22 July 2026

Service provided by:
Thrive Childcare and Education Limited

Service provider number:
SP2003002955

Service no:
CS2003046009

About the service

Thrive Childcare and Education Corner House Nursery Falkirk is registered to provide care to a maximum of 74 children from birth to those not yet attending primary school, with a maximum of 27 children under two years of age in the baby and Tweenie areas, a maximum of 15 children in a toddler room and a maximum of 32 children in pre-school rooms.

Care is provided from a two-storey, detached property close to the town centre of Falkirk. The service is close to shops, transport links and other amenities. The ground floor space includes three playrooms, toilet and nappy changing facilities and outdoor play areas. The first floor space consists of one playroom, toilets, office space, kitchen and staff room.

About the inspection

This was an unannounced inspection which took place on Tuesday 21 July 2026 between 10:00am and 17:30 and Wednesday 22 July between 08:00 and 12:00. We gave feedback to the service at 15:00 on the second day. 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 previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spent time with children in all rooms, and received 14 responses from families who completed our electronic questionnaire
- spoke with staff and members of the leadership team
- observed practice and children's experiences, and how they were supported with their care, play and routines
- reviewed documents.

Key messages

- Children were happy, settled and comfortable as they were cared for in a compassionate, kind and caring way.
- The staff team was more stable, which had increased staff moral and enabled improvement.
- To support continued improvement, quality assurance and self-evaluations should continue to be embedded at all levels.
- The leadership team should build on recent changes to enable improvements to be sustained, and build the skills and knowledge across the staff team.

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

We evaluated this key question as good, where several strengths impacted on positive outcomes for children.

Quality Indicator: Leadership and management of staff and resources

The service had a clear vision, values and aims which had been reviewed with staff, children and families. It supported a shared understanding of what the service wanted to achieve, as more meaningful to those using and working in the service. Staff were beginning to demonstrate how the vision and values were reflected in practice, which promoted a more consistent approach to children's care, play and learning experiences.

Quality assurance and self-evaluation systems had been improved to monitor key aspects of the service. National and local guidance had been used to evaluate key aspects of the service and identified areas for improvement. While this demonstrated a proactive approach to improvement, the process could be further strengthened. For example, ensuring actions were followed up in a timely manner would help improve practice and promote positive outcomes for children. To support sustained improvement, the quality assurance measures should be embedded at all levels. Measuring outcomes from monitoring would ensure the process is meaningful, such as assessing how training had improved the quality of personal plans.

To improve children's experiences, staff had identified changes for individual rooms. For example, adding resources or changing the layout. To strengthen their approach to evaluation, leaders should support staff to assess the impact of changes made. This will help them highlight how changes had enhanced children's experiences, engagement and outcomes.

Children's views were beginning to be gathered and used to influence changes within the service. This supported children to feel listened to and helped them become more involved in shaping their experiences. Staff should follow up how children's ideas were acted on, so the impact of their participation is clear, and children can see that their views make a difference.

Safer recruitment procedures were followed when recruiting staff. Processes were in place to mentor and support new staff, including use of the National Induction Resource. Staff spoke confidently about their mentoring experiences and said this helped them feel supported in their roles. This contributed to staff confidence and helped promote consistency in children's care and learning experiences.

Quality indicator: Staff, skills, knowledge, values and deployment

A more stable and motivated staff team was in place. This helped support warmer relationships, improved teamwork and more consistent care for children. Staff told us they felt more settled, supported and happier in their work. This was beginning to have a positive impact on children's experiences, as staff described a stronger sense of commitment across the team. Staff shared that, "Management are supportive and are helpful." And they appreciated having 'Leaders' that step in and help."

Staff had begun to undertake a range of training which supported them in their roles. Core training, such as First Aid and Child Protection was completed as part of staff induction. This helped staff maintain an awareness of their responsibilities and supported consistent approaches to keeping children safe.

Leaders planned to build capacity within the staff team through training, peer reviews and supporting colleagues. Individual and team knowledge would be enhanced and support more consistent, high-quality experiences for children.

Staff told us they felt more confident to share their interests and identify areas for future learning. As a result, they were beginning to identify areas of practice that would support their professional development, such as completing Bookbug and Makaton training. This demonstrated a positive approach to professional learning as staff were keen to develop in their roles. They could be enabled to further enhance experiences that could support children's communication and language.

The service had started to develop reflective practice following training. Some accounts had been completed, but these did not always identify how training had improved practice or outcomes for children.

Leaders planned to strengthen this by further supporting staff to reflect on the impact of training and professional learning. To help achieve a consistent approach, they should ensure improvements are clearly linked to improved experiences and outcomes for children.

Consistent staff members within rooms helped staff manage planning, expectations and teamwork more effectively. Staff were supported to deploy themselves effectively throughout the day. Members of the leadership team provided support in rooms during busier periods, such as lunchtime. This supported children to experience more predictable routines and helped ensure staff were available to meet children's needs across the day.

Children thrive and develop in quality spaces — 4 - Good

We evaluated this key question as good, where several strengths impacted on positive outcomes for children.

Quality Indicator: Children experience high quality spaces

The setting provided warm, welcoming and inviting spaces which supported children to feel settled, included and valued. Children had designated areas for their personal belongings and photographs of families were displayed across the environment. This helped children to develop a sense of belonging and gave them a clear message that they and their families mattered.

Displays throughout the service celebrated children's achievements and special events. Staff had been empowered to develop and take ownership of their own play spaces. This was helping to create more attractive and responsive environments for children. Overall, children benefited from clean, tidy and well-maintained spaces that supported their wellbeing and promoted positive experiences.

Staff demonstrated a good awareness of children's safety within the environment. They carried out dynamic risk assessments throughout the day and took appropriate action to ensure doors and gates were secure. The use of SIMOA (safety, inspect, monitor, observe and act) supported staff understanding of risk and promoted safer practice. This could be further developed by making risk-benefit approaches more visible and meaningful within children's play spaces. It would help children to begin to recognise, assess and manage risk for themselves.

Infection prevention and control measures (IPC) were effective overall. For example, children were supported to wash their hands before and after eating, and toilets and changing areas were clean and well-maintained. Staff should continue to be mindful of cleaning routines and the use of chemicals when children are present, to ensure children's health and safety is consistently promoted. For example, when cleaning tables, they could spray the solution onto a cloth rather than directly onto the table.

An effective system was in place to report and monitor maintenance, supporting a safe and suitable environment for children. These approaches reflected a good level of practice, with clear strengths and some areas for continued development.

Children play and learn 4 - Good

We evaluated this key question as good, where several strengths impacted on positive outcomes for children.

Quality Indicator: Playing, learning and developing.

Most children were engaged in play and learning opportunities that supported their curiosity, interests and development. Staff were generally positioned at children's level during interactions. This promoted warm engagement and supported children to feel listened to and included. Some play areas would benefit from further development to provide richer, more challenging and open-ended experiences for children. For example, children's play in the garden was limited due to the lack of resources in the mud kitchen. They lost interest as they could not develop their ideas. To promote curiosity, creativity and sustained learning, staff should consider the quality of resources needed to sustain children's interests. Parents shared, "My child enjoys lots of things at nursery particularly playing in the garden and all of the different arts and crafts that they can do at nursery." And "A slightly wider variety of experiences would be beneficial, and also more communication to the parents about them happening."

Opportunities to promote language, literacy and numeracy were available within parts of the environment, including meaningful signs, such as those used at the water station. These experiences supported children to make connections in their play and develop early skills in ways that were relevant to their routines and interests.

Children's experiences were stronger where staff followed their interests and supported them to explore and make choices. However, this was not yet consistent across the setting. Some activities were adult-led, which impacted on children leading their play. At times, children looked to adults to decide what they should do next. Staff should continue to develop their confidence in using open-ended questions and responsive interactions that enable child-led play. This would help children to extend their thinking, sustain engagement and take greater ownership of their learning.

Planning systems were in place across all play areas and were responsive to children's interests at the time. These were more effective in some areas than others. Children's experiences were not meaningfully evaluated which impacted on opportunities to extend their learning and development. Staff would benefit from further support to record significant learning and use this information to plan appropriate next steps. Developing their approach to planning, should support children's progress by offering experiences and challenge that engage them. These opportunities could help children develop a broad range of knowledge and skills for life. We made an area for improvement at the last inspection which was not fully met. We will update it to reflect the progress made and state a new one. (See area for improvement 1).

Observations were shared with families through an online system, which helped parents and carers to be informed about their child's experiences. There was scope to strengthen the quality of observations. The manager planned to support staff to develop their skills, so they captured children's significant learning and achievements. They should be enabled to use this information to improve consistency in planning and enable children to make progress at their own pace. Parents shared that, "We do receive frequent updates and plans as my child develops to the next stages. Staff take on board what our children are interested in and help them explore and develop."

Areas for improvement

1. For all children to develop and learn at an appropriate pace, staff should be supported to further develop planning formats. They should consider the range of activities provided, so children are supported to learn and develop through a balance of spontaneous and planned experiences indoors and outdoors.

Staff should develop:

- their evaluation skills so they can assess the impact and outcome of activities children participate in

- 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).

Children are supported to achieve 4 - Good

We evaluated this key question as good, where several strengths impacted on positive outcomes for children.

Quality Indicator: Nurturing care and support

Children had developed trusting relationships with staff and this supported their emotional wellbeing and sense of security. Staff and children greeted each other warmly, and children were confident to seek help, support and comfort from familiar adults. Staff used positive body language, smiled in their interactions and responded to children's verbal and non-verbal cues. These approaches helped children feel safe, valued and emotionally supported.

Personal plans were in place for children and supported staff to understand their wellbeing needs. Plans were reviewed in consultation with families, which promoted partnership working and enabled continuity of care. A child-centred approach meant children's changing needs were responded to which supported children's individual needs. Parents confirmed that staff "Listen and understand our requests to discuss individual care, play and learning modes and incorporate those requests for the day." And "Development plans are reviewed and updated by me regularly, to ensure that the information in my child's personal plan is up to date and relevant."

Children's privacy and dignity were respected during care routines. Staff asked children sensitively for permission before carrying out personal care, which helped children feel respected, listened to and involved in their own care.

Mealtimes were generally a positive experience for children. Dining areas were welcoming, dietary needs were catered for and this helped children to feel included. Children were supported to make food choices and were encouraged to self-serve where appropriate. Child-sized utensils helped children to develop independence and life skills, including feeding themselves. Staff sat with children and engaged in conversation, which supported positive interactions and social development. Staff should continue to reflect on the pace of the day before mealtimes, including how long children are seated before food is served. This would help children enjoy mealtimes as a nurturing part of the day.

Arrangements for the storage, review and administration of medication supported children's health and safety. Staff ensured medication was accessible if needed and provided an important safeguard for children. While all relevant information was recorded, management had identified greater attention to detail would improve the system. For example, ensuring review dates were in line with guidance and expiry dates are consistently recorded. This would provide stronger assurance that children's healthcare needs were being met safely and consistently.

Opportunities to encourage family involvement had been increased. Their views had been sought, and they were invited to events at the service. For example, parents' evenings, surveys and emails were used to gather their views. Parents told us they felt included as they were asked to contribute to initiatives, such as the new learning tree. They confirmed their "suggestions for some games, which have been used in the garden." The service should continue to build on opportunities that could increase family engagement. This should enable further partnership working, strengthen home links and promote positive relationships.

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

Requirements

Requirement 1

By 30 October 2025, the provider must make proper provision for the health, welfare and safety of children.

To do this, the provider must, at a minimum, ensure that moving forward the management team:

a) Always follow the service child protection policy and procedure.

b) Effectively address any child protection concerns shared by staff and make the appropriate referrals to the lead agencies.

This requirement was made on 10 October 2025.

Action taken on previous requirement

From the records we looked at during the inspection, we were satisfied appropriate procedures were followed to protect children. We have discussed the need to continue to develop recording keeping so that robust systems are in place to show how information is gathered, analysed and used to make decisions.

Met - outwith timescales

Requirement 2

By 31 December 2025, the provider must ensure children have access to facilities when they need them, to ensure their comfort and personal care needs are met.

To do this, the provider must, at a minimum:

a) ensure there are enough nappy changing facilities to meet the needs of children

b) ensure repairs are carried out for plumbing and drainage issues, ensuring toilets are flushing correctly to promote hygiene and support children needs.

This is to comply with regulations 4 (1) (a) (welfare of users) and 10(2) (b) (Fitness of premises) of the Social Care and Social Work Improvement Scotland (Requirements for care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I can easily access a toilet from the rooms I use and can use this when I need to" (HSCS 5.2) and,

"If I require intimate personal care, there is a suitable area for this, including a sink if needed." (HSCS 5.4).

This requirement was made on 5 September 2025.

Action taken on previous requirement

There were enough changing areas to meet the needs of children. The plumbing and drainage issues have been addressed so that toilets were flushing properly.

Met - within 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 the use of children's personal plans. They should include information about;

- children's changing needs and any strategies or techniques used to support them
- ensure meaningful partnership working with parents is used to share information
- ensure reviews with parents and carers are used to discuss children's progress and plan next steps. They should take place at least once in every six months or sooner if needed.

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 5 September 2025.

Action taken since then

Personal plans contained relevant information that was used to support children. They are reviewed with parents, and we could see where children's needs were updated to meet children's changing needs.

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 formats. They should consider the range of activities provided so children are supported to learn and develop through a balance of spontaneous and planned experiences indoors and outdoors.

Staff should develop;

- child-centred planning that is responsive to children's interests
- their evaluation skills so they can assess the impact and outcome of activities children participate in
- 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 5 September 2025.

Action taken since then

Planning formats in place were used to provide a variety of experiences for children. They were not always completed consistently across the service. To make them more meaningful, staff need to develop their skills in evaluation and assessment, so they can identify appropriate next steps to support children's learning and development through breadth and depth of experiences.

This area for improvement is not fully met, so we will update it to reflect the progress made and restate it to address the elements still to be met.

Previous area for improvement 3

The provider should ensure that approaches to quality assurance and self-evaluation are effectively used but not limited to;

- identifying priorities for development
- seeking parents' and carers' views
- involving staff to share their views
- compiling a realistic improvement plan that will support continuous improvement
- using best practice guidance and learning to support change.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states: "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 4 September 2025.

Action taken since then

Approaches to quality assurance and self-evaluation had improved. An action plan had been compiled to address areas for improvement following the inspection. A range of audits, staff support and surveys had supported the improvement journey of the service.

This area for improvement has been met.

Previous area for improvement 4

To promote consistency of care for children, the provider should ensure enough staff need to be employed in numbers to meet their individual needs. There should be a mix of skills, experience and knowledge across the team, to promote high-quality experiences for children.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states: "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 code." (HSCS 3.14).

This area for improvement was made on 5 September 2025.

Action taken since then

There is a stable staff team in place who have been deployed appropriately across the service. Training and learning has helped develop their skills and knowledge.

Plans are in place to provide cover in rooms at busier times, which supported consistency for children.

This area for improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.scot) for details of complaints about the service which have been upheld.

Detailed evaluations

Leadership	4 - Good
Leadership and management of staff and resources	4 - Good
Staff skills, knowledge, values and deployment	4 - Good

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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