Leith Academy Community Nursery
Day Care of Children

Leith Academy
20 Academy Park
Edinburgh
EH6 8JQ

Telephone: 01315 540 606

Type of inspection:
Unannounced

Completed on:
30 April 2026

Service provided by:
City of Edinburgh Council

Service provider number:
SP2003002576

Service no:
CS2004078080

About the service

Leith Academy Community Nursery is registered to provide a day care of children service to a maximum of 20 children aged between six weeks and those not yet attending primary school. At any one time, of those 20 children, no more than 12 are to be aged under two years. At the time of the inspection 12 children were registered with the service.

The service is provided from two rooms in Leith Academy with toilets, changing facilities and a food preparation area. They have direct access to an enclosed outdoor space. The children also have access to a nature garden in the school grounds. The service benefits from good transport links, nearby parks and local amenities.

The service operates during the school term only between the hours of 08:30 and 15:00 Monday to Thursday and 08:30 and 12:30 on Fridays.

The manager is also the manager of Stanwell Nursery School, CS2003015837.

About the inspection

This was an unannounced inspection which took place on 27 April and 29 April 2026 between the hours of 09:00 and 16:15. 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, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with children using the service and gathered feedback from three of their families
- spoke with staff and management
- observed practice and daily life
- assessed core assurances, including the physical environment
- 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, improvements were identified relating to core assurances. We have reported where improvement is necessary under the relevant quality indicators.

Key messages

- The staff team were building positive relationships with each other, children and their families helping to make the service welcoming.
- Self-evaluation was identifying appropriate areas to develop to support children to have positive experiences in the service. Quality assurance processes were not yet effective at ensuring that records were reviewed in line with legislation and best practice guidance.
- The environment was generally fun and engaging for children who enjoyed playing in and outdoors with a variety of resources, supporting them to lead their own learning.
- Children were developing new skills as they enjoyed healthy meals and snacks. Personal planning could be further developed to ensure that children are fully supported to achieve their potential.

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 indicator: 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 shared their vision, values and aims with families when they registered at the service and on their website. Consideration had been given to ensuring that they were written in a way which was easy for children and families to understand. This supported families to have a clear idea of what to expect for their children. Displays in the service supported staff to revisit the values regularly, which helped them to reflect and embed them in their practice. The leadership team supported the values to be embedded into practice through role modelling, feedback on practice and reflections at team meetings. This helped children have positive experiences at the service. Leaders planned to revisit the vision, values and aims with current families and staff helping these to remain meaningful for everyone.

Self-evaluation was purposeful and supported the service to identify appropriate areas for development. The service improvement plan reflected this and was redeveloped to take account of the changes in the staff team. Staff were delegated tasks to ensure that they were all engaged in leading aspects of the improvement plan to develop the service. This helped staff to be meaningfully involved in the ongoing improvement of the service.

Quality assurance processes were in place to monitor the quality of the service. We saw that staff were given clear guidance around expected practice development from monitoring. This supported children have positive experiences in the service. Not all quality assurance systems were effective in ensuring that record keeping was in line with legislation and best practice guidance. For example, medication forms and personal plans were not all reviewed in line with with guidance, to keep the information current and relevant (see area for improvement 1).

The service recognised the importance of involving parents in the planning of children's care and giving feedback on the quality of the provision. They had started to work on finding ways to make it easier for parents to be involved, such as using translation services.

Staff training was offered in line with improvement plans for the service and staff skills development needs. Audits of training helped to ensure everyone was included. The service could further develop their audits to ensure that training has impacted positively on staff knowledge and children's experiences. Staff were encouraged to lead on areas of interest and share their learning from training opportunities and previous experiences. This was supporting the team to build knowledge and skills.

Staff were initially recruited by a central team in the local authority. Service based interviews supported them to recruit staff with values which align with their aims. Recently recruited staff told us they felt very well supported in learning about their new roles. The use of the national induction resources were supporting them to identify any gaps in their knowledge and areas to work on. Staff had time to meet regularly with mentors to develop their plans for skills and knowledge development. These clear mentoring processes were supporting staff to feel confident in their roles.

Areas for improvement

1. To further develop the quality of the service and enhance outcomes for children, the provider should ensure that quality assurance processes are further developed to ensure that these consistently improve practice to keep children safe.

This is to ensure that care and support is consistent with 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 nursery was a welcoming environment for children to attend with space for them to store their belongings. Areas were well planned to allow children to play by themselves and in small groups.

Children's photos were used in displays helping children feel ownership of the space. The service should continue to develop how they reflect children's home languages and cultures as they redecorate the service following the refurbishment.

The service should also continue to enrich the symbols and signs to support effective communication in the service for example storyboarding mealtimes to empower children's independence.

The recent redevelopment of the toilet space had fully addressed the requirement made at a previous inspection. The rooms were bright clean and gave space for children to be supported with personal care and toilet learning. This promoted children's dignity and helped them to feel respected.

Children were able to move freely between the in and outdoors spaces and this empowered them to lead their learning in a way which suited them. The staff team had systems in place to monitor the numbers of children and staff which meant they knew who was present. The team should continue to develop practice around knowing where children are throughout the session, for example, finding ways to monitor who is in the garden, playroom or quiet room to keep children accounted for and safe.

The garden gate had a high lock which staff had to use to allow children, parents or visitors to access the service. The door between the school and nursery was also locked. This all helped to keep the service secure and prevent people being able to access the service unannounced.

Risks were well managed in the service to keep children safe. Staff were facilitating some experiences for children to extend their learning through exploring riskier activities in age appropriate way. The service should continue to develop this to support children to learn new skills in problem solving and decision making.

Used crockery was stored in a basin the playroom's equipment washing sink during lunch due to the limited space in the kitchen area. The service should review their practice around mealtimes to ensure that this always promotes good infection control practice. For example, keeping food equipment separate from

resource cleaning areas.

Staff developed spaces responsively to children's needs ensuring that the spaces were accessible and helped children to access experiences they were interested in.

The children helped with planting and caring for nature in the garden space in the school grounds. This was helping children to develop a respect for nature. The service should continue to develop this for the outdoor space which they have direct access to from the playroom to increase children's access to natural resources. Children accessed their local community to build their knowledge of the area and enrich their experiences. This was planned for times when staffing levels allowed them to keep children safe.

Children's information was stored confidentially in the service in locked cabinets and password protected devices. Where information was on display boards to support staff working with children effectively, these were shielded from people seeing confidential information at a glance.

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.

Core provision provided children with a variety of play experiences. Children enjoyed creative, active, and sensory experiences in and outdoors. Staff added responsive experiences like bubbles and water play which provided lots of fun for the children. They also developed throwing experiences in response to a theme emerging in play. This helped children to stay engaged and feel listened to. The spaces were mostly inviting and children could access them easily throughout the day. However, during the first day more could have been done to ensure that play was accessible and inviting. For example, ensuring mark making areas had pens or pencils to use and that dolls were clean and well presented. This was better on the second day of inspection when all areas were more purposefully set up with provocations and children were more engaged throughout their time at nursery. The service should continue to develop this to ensure that spaces are consistently inviting and providing challenge (see area for improvement 1).

Children experienced warm and friendly relationships with staff who were narrating their experiences helping to develop their vocabulary. Praise was used often to foster children's sense of self worth, for example celebrating children's kindness towards their peers. At times staff used questioning to extend children's thinking and support their understanding. This was not consistent and is an area to develop (see area for improvement 1). Leaders had identified developing staff interactions to support developmentally appropriate questioning in their self evaluations.

Children were mostly busy and engaged during their time at the service. We saw that staff mostly knew when to stand back and allow exploration and for children to solve problems for themselves. However, at busier times some children would have benefited from one to one support to facilitate their engagement. The service responded to this on day two and children were more effectively supported. However, further work was needed to ensure all children are consistently supported according to their individual needs (see area for improvement 1).

Planning systems were in place to support staff to observe children, plan responsively, assess children's progress. This allowed next steps to be intentionally planned to support individual progress and

achievements. Staff valued parents views in planning for children's interests and gathered these informally at drop off and collection times. Observations were taking place and were shared with families, helping them to feel more involved in their child's experiences at the service. Some observations clearly identified children's skills development and progress. Leaders shared how the service planned to continue to work on building the quality of observations and planning for child development systems to ensure that all children had effective plans to support their development. Staff were supported to use plain English in planning documents to support understanding and accessibility. As planning is further developed consideration should be given to ensuring challenge for children who need it. The service should develop clear strategies to show how they will provide the planned experiences for children to help them to evaluate their effectiveness and support children's progress (see area for improvement 1).

Areas for improvement

1. To ensure that children have high-quality play opportunities to support them to have fun, learn and develop. The provider should ensure that the quality of experience is consistent for all children. This should include, but is not limited to:

- ensuring that the environment provides challenge and interest consistently across the day
- strategies support effective communication for all children
- quieter children's need for one to one support is consistently met
- staff interactions develop children's problem solving and thinking skills
- planning for children's development includes clear strategies to support evaluation and progress.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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 to my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27)

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 positive relationships with staff who cared for them. At times we saw staff using hand signing to support some children to engage in play. This was not consistent however. Staff should develop strategies to support effective communication for all children. For example, developing effective strategies for children do not have English as a first language. Strategies should be developed to support staff get to know children quickly to help them to communicate effectively with them (see area for improvement 1 under 'Playing, learning and developing').

Transitions were well managed on the whole with staff responding to children's distress and supporting their emotional wellbeing while separating from their families at drop off times. At times some children were handed around staff for support. Staff should reflect on this and support children through consistent care wherever possible.

Gather time was fun for some children who enjoyed singing and playing games. The service should consider ways to offer this in a less disruptive way for children who were immersed in play. Children's personal care

needs were well met during the nursery day. However, more work could be done to ensure that this is consistently responsive and does not become task led.

Rest and sleeps were offered responsively and in line with safe sleep guidance. Children enjoyed cosy comforting settles and gentle kind support when wakening. Staff were supporting parents with this when children had to be wakened at the end of the session. Children and families benefitted from staff offering a loan of the nursery buggy when a child was not ready to waken at the end of the session.

Children enjoyed healthy snack and meal times, which they accessed on a rolling basis when they were hungry during the session. Children also stayed hydrated as they could independently access water throughout the day. Handwashing before meals was supported by staff and children were independent in choosing foods and serving it, helping to build new skills. Some families asked for information about what children had eaten when they collected their children. Systems to could be further developed to ensure that accurate information can always be shared. Children should consistently be supported to wash hands after meals and after nose blowing to prevent the spread of infection.

Medication records were kept which shared how children's health needs could be met to keep them safe. This included clear information about when and what dose to administer. However, these had not be reviewed in line with guidance meaning that information may not be up to date. The area for improvement from a previous inspection is not fully addressed and is continued in this report (see area for improvement 1 under 'What the service has done to meet any areas for improvement we made at or since the last inspection').

All children had personal plans which shared key information about them as individuals. Where staff worked with other agencies to keep children safe and promote their wellbeing and development, personal plans shared strategies of support which were reviewed at regular meetings. Parents who responded to our questionnaires told us they felt involved in developing the personal plans for their child. For some children, personal plans shared strategies of support. However, this was not consistent for all children and should be further developed. It was not clear what had been shared with families at review meetings. Not all plans had been reviewed with families in line with legislative requirements (see area for improvement 1).

Families told us they felt welcomed into the service and that they had positive relationships with the staff team. One family commented: "I get along with all the staff and they are great when I need a hand with anything with my child". Families told us their children loved attending nursery and that the staff team have the children's best interests at heart. Daily chats and regular newsletters helped families to know what is happening in the service. The families attended regular coffee mornings and stay and play sessions, helping them to feel involved in the service and their child's learning. The service was closed in holiday periods and shared resources in the community which would support families while they were not open. The service was developing resources in different languages to reduce barriers to families feeling involved and informed in the service. The service should continue to monitor families access to ensure that this is effective in reducing barriers to involvement.

Areas for improvement

1. To promote children's overall wellbeing personal planning should be further developed to ensure that all children are supported to achieve their full potential. This should include, but is not limited to:

- reviewing all plans with families in line with legislative requirements
- recording what is shared at review meetings

- ensuring strategies of support are clear to support, effective communication, individual development and effective evaluation.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as my care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.14) and 'My care and support meets my needs and is right for me' (HSCS 1.19)

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

Requirements

Requirement 1

By 20 August 2024 The provider must submit a plan demonstrating how they will improve the nappy changing and toilet area to ensure that staff can keep children safe and prevent the spread of infection.

To do this, the plan, at a minimum, must outline how provider will ensure:

a) that staff have an adult height handwashing sink available in the nappy changing area.
b) that there is enough space for children to be supported with potty and toilet training by staff.
c) that all equipment and surfaces are in good order and can be cleaned effectively.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 states that:
'If I require personal care, there is a suitable area for this, including a sink if needed (HSCS 5.4).' and 'I experience high quality care and support based on relevant evidence, guidance and best practice (HSCS 4.11).

This requirement was made on 14 May 2024.

Action taken on previous requirement
The provider submitted and action plan detailing the work planned to address the improvements needed to the nappy changing and toilet areas within the timescales given. Refurbishment works were completed before the inspection providing children with a safe and respectful environment for personal care. Storage space had been added for cleaning equipment to keep this away from children. A suitable handwashing sink had been installed for staff and a separate sink for cleaning potties had been installed. The refurbishment supported better infection and control practice helping to keep children safe.

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

To support children's medical needs and overall health and wellbeing, the provider should review the recording systems in place for the management of medication. Systems including quality assurance processes must be consistent and effective to ensure children's safety.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 14 May 2024.

Action taken since then

Quality assurance systems were not yet effective in ensuring that recording systems for the management of medication were reviewed in line with guidance to keep children safe.

This area for improvement is not met and will remain in place.

Previous area for improvement 2

To support children's safety and wellbeing, the provider should review the practice and arrangements for children's sleeping to ensure that this is provided in line with current best practice guidance.

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

This area for improvement was made on 14 May 2024.

Action taken since then

Children were offered sleeps responsively in the quiet room. Staff settled them offering cuddles and reassurance. Children slept well on sleep mats with clean bedding helping them to sleep safely in line with best practice.

This area for improvement is 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

Leadership	4 - Good
Leadership and management of staff and resources	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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.