First Class Nursery
Day Care of Children

Former Community Hall
Kirk Lane
Livingston
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Telephone: 01506 411 112

Type of inspection:
Unannounced

Completed on:
4 June 2026

Service provided by:
First Class Nursery Limited

Service provider number:
SP2005007942

Service no:
CS2005112692

About the service

First Class Nursery is in Livingston, West Lothian. They are registered to provide a day care of children service to a maximum of 47 children from birth to five years. A maximum of 18 children are under two years.

Children have access to designated rooms, outdoor spaces and a dining area. The service is close to schools and nurseries, green spaces and can be reached by public transport links.

About the inspection

This was an unannounced inspection which took place on 3 June & 4 June 2026 between 09:30 and 16:45. This 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 and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:
- spoke to and spent time with children using the service.
- spoke with six families and received feedback from six by questionnaire
- received seven completed questionnaires from staff
- spoke with staff and the management team
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents

As part of our inspections, we assess core assurances. Core assurances are checks we make to ensure children are safe, the physical environment is well maintained and that a service is operating legally. At the time of this inspection, no improvements were identified relating to core assurances.

Key messages

• Children experienced warm, nurturing relationships, which helped them to feel safe and secure.
• Children benefited from a stable staff team, which promoted continuity of care and connection.
• Improvements to indoor and outdoor environments enhanced children's engagement, play and wellbeing. Opportunities for outdoor learning supported curiosity and engagement.
• Staff demonstrated some understanding of how children learn and develop. Embedding professional learning would improve consistency in practice.
• Self-evaluation and quality assurance processes were developing using audits and observations. Greater attention to detail and clearer evaluation of impact were required to ensure improvements continued to support positive outcomes for children.
• Staff deployment and daily routines reduced the quality of interactions and play experiences at times, particularly for younger children, limiting opportunities for sustained play, learning and development.
• Children benefitted from a relaxed and sociable mealtime experience, which supported their independence, confidence and development of important life skills.

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

Quality indicator: Leadership and management of staff and resources

The service displayed their vision, values and aims that had been reviewed with children and families. This reflected the aim to provide a fun, nurturing and stimulating environment where children develop as successful learners, confident individuals, responsible citizens and effective contributors.

Children were happy, nurtured and nearly all were engaged. The environment provided some stimulating opportunities which reflected the service vision. This demonstrated that elements of the service aims were beginning to positively impact children's experiences. To ensure this is further embedded, the team should explore ways to make the vision, values and aims more visible throughout children's experiences, interactions and learning.

Self-evaluation was at an early stage with evidence that some progress had been made. For example, evaluating elements of children's experiences linked to staff champion roles. The leadership team recognised varying confidence and understanding in engaging with guidance. They had taken steps to support staff in understanding and using best practice through a range of approaches. Continued focus is required to embed a shared understanding of effective self-evaluation and how this supports improvement.

A range of quality assurance processes had been introduced, including room observations, audit tools and regular team meetings. These provided a basic structure for monitoring practice and provision. Attention to detail was required to ensure quality assurance was having sustained impact on improvements. (See area for improvement 1.)

Improvement priorities were shaped by areas identified at the previous inspection, including refurbishment of some spaces, planning for quality experiences, and strengthening leadership arrangements. The service displayed priorities and some information had been shared with families about the progress. This approach could be strengthened by celebrating achievements, clearer evidence of progress, and measuring the impact on outcomes for children. Strengthening these aspects would help ensure a clear and effective cycle of continuous improvement.

As the service approach the next academic year, improvement planning should be informed by further evaluation of current priorities. This should include clear decisions about what has been sustained or needs to be a continued focus to ensure improvements are fully embedded in practice. Leaders should continue to make greater use of the Care Inspectorate guidance ' A quality improvement framework for the early learning and childcare sectors: early learning and childcare. This should support more rigorous evaluation and strengthen the quality of evidence gathered.

The service benefitted from ongoing support from the local authority, provider and area manager to drive forward change. To support ongoing progress within agreed timescales, they should continue to work partners to develop a clear, coordinated plan for continued support. This will help ensure improvements are purposeful, well-paced and lead to continued positive outcomes for children (see area for improvement 2.)

Staff spoke confidently about their induction experience, highlighting the positive support provided through mentoring and from the wider team. Induction processes were influenced by best practice guidance. This ensured staff had a staged approach to support, encouraged reflections and developed confidence and consistency in practice.

The service had maintained a stable staff team over a number of years, resulting in limited recruitment. The continuity of the team had a positive impact on outcomes for children and families as relationships have been established and maintained. Recruitment processes were in place and nearly all reviewed were completed with detail. We encouraged the service to ensure records are clearly dated to support effective compliance.

Quality indicator: Staff skills, knowledge, values and deployment

Staff demonstrated an understanding of how children learn and develop. This had been supported through professional learning opportunities, including training on schematic play and child development. There was some evidence of this being applied within play spaces and recorded in floor books. The service should focus on embedding professional learning more consistently, developing clearer approaches to measuring how training influences practice and leads to improved experiences for children.

Staff benefitted from opportunities to engage in professional dialogue. Team meetings were used to share information, learning and team reflections. Staff had champion roles and used time during meetings to share progress. This included technology, outdoor learning and play champions. We encouraged the service to continue to evaluate experiences within champion floor books as this was not yet consistent. Strengthening evaluations could support staff to better measure the impact of these approaches on children's experiences.

Staff deployment across most areas of the service was managed effectively and in line with required ratios. This generally supported children to access a range of play experiences. There were times when deployment had an impact on the quality of interactions. For example, In the baby room, younger children required individual care and this reduced staff's availability to support learning and exploration. In the toddler room, care routines such as nappy changing resulted in staff being absent from the playroom for extended periods. This limited opportunities for rich, engaging experiences. We suggested the leadership team look at how this can be better supported so children's experiences are not diminished at times.

Positive practice was observed in relation to staff wellbeing. They benefitted from regular breaks, ensuring time to rest and refresh whilst considering the needs of children at busier times. This approach was reflected across all rooms.

In the pre-school room, there was a balance of experienced practitioners and staff that were being mentored. This supported consistency and development of practice. Leaders should now consider how this effective approach can be extended across all rooms to ensure equity.

Areas for improvement

1. To ensure children experience consistently high-quality care and support, the service should strengthen quality assurance to ensure a measured approach that demonstrates a clear, meaningful impact on practice and provision. This should include, but is not limited to, identifying and addressing gaps in practice, provision and overall standards within the service.

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

2. To ensure children continue to experience consistent, quality care and support, the service should develop and implement a clear, coordinated plan with agreed timescales for improvement. This should outline the specific actions to be taken by the provider, area manager and partners. A structured and collaborative approach will strengthen the pace and consistency of improvement and lead to sustained positive outcomes for children's wellbeing, learning and overall experiences.

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

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.

Quality indicator: Children experience high quality spaces

The environment benefitted from recent improvements that included new flooring, changing facilities, décor and ceilings. The provider was committed to continuing improvements and had a plan for further enhancements. One family commented "It's nice to see the rooms being updated as well as the overall nursery."

Indoor and outdoor spaces were welcoming and met children's needs. The introduction of new equipment had made some enhancement to the environment. Staff spoke positively about the impact this has had on children's engagement and learning. We encouraged the service to reduce the clutter in spaces and suggested they look through a lens of a child to see how the environment looks and feels. Reducing clutter would support ease of cleaning and ensuring practice and provision reflects infection, prevention and control measures.

Staff made use of available resources to create spaces which reflected children's interests. Children spent time exploring the water wall, experimenting with materials and transporting to other spaces. Staff recognised the importance of outdoor play in supporting children's wellbeing, learning and development. We encouraged them to ensure this space was available all day as part of their core provision.

Children's safety was promoted. There were entry systems in place for each room. Doors and gates were secure and families agreed that children were cared for in a safe, secure and well-maintained environment. The use of SIMOA (safe, inspect, monitor, observe, act) supported children's understanding of safety. They told us SIMOA looked after them to keep them safe. We suggested this approach could be further developed to deepen children's awareness and confidence in identifying and managing risks. The service was keen to develop this.

Daily checks of plays spaces were carried out to identify potential risks. The effectiveness of these checks should be strengthened. For example, records were not always accurate or reflected the condition of the environment, indicating a need for greater attention to detail and more robust monitoring.

Children had some opportunities to influence the environment within the pre-school garden. Staff sought children's views and recorded these in floor books. This supported children to feel valued and involved.

Measures were in place to protect children's personal information with files securely stored. There was personal information visible within a playroom. Consideration should be given to maintaining confidentiality at all times and the service should take steps to ensure this.

Children play and learn 4 - Good

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.

Quality indicator: Playing, learning and developing

Children engaged in free flow play both indoors and outdoors across all playrooms. They enjoyed being outdoors in the rain. Staff responded positively to their interests, for example, supporting water play as they transported water between the mud kitchen and outdoor home corner. This contributed to children experiencing enjoyment, being creative and resulted in periods of sustained engagement. Families told us children were involved in a range of opportunities and fun experiences to meet their individual needs and support their development including playing outdoors.

Improvements to the outdoor environment had a positive impact on children's engagement, with staff recognising increased use and enjoyment of this space. Families' comments included "Staff in the baby room have a genuine interest in my child. My child gets to spend a lot of time outdoors when the weather allows.", "Staff are lovely and lots of good activities to keep them busy in the day" and "My child is clearly comfortable and well looked after at nursery. It is good that they get out and about, this is a big positive!"

The use of digital technology to enhance learning is at an early stage. For example, Staff spoke about the use of cameras and iPad's to enhance learning. We encouraged them to develop a deeper understanding of digital technology and how this can be used across all areas of the curriculum to offer challenge and breadth through play.

Spaces were influenced by children's interests. There were opportunities for children to develop skills in literacy, numeracy and language development across the core provision. For example, they enjoyed stories, mark making, counting and imaginative play. We encouraged the service to ensure areas are well resourced at all times to engage children, promote challenge and depth of learning.

Staff had considered the sensory needs of younger children and provided play opportunities. At times, these were well supported. There were occasions when staff availability was reduced due to care routines, which limited children's access to high-quality experiences and sustained play.

There was an awareness of children's emotional wellbeing with resources available to support emotional literacy. Children were not confident about these approaches as they were not yet fully embedded in practice. We encouraged the service to ensure consistent use of these through daily interactions, conversations and routines.

Children were at the heart of planning and staff made some positive progress in ensuring that planning reflected children's interests. Observations were used to inform experiences, and staff spoke about using a consultative approach, supporting children to influence their learning. Embedding the planning cycle should continue to develop as staff's confidence, knowledge and understanding of this approach develops. Staff considered children's next steps within plans and online journals to support progression. They should strengthen their approach to ensure individual next steps are consistently meaningful, reflected in planning and influence the provision.

Online journals recorded some observations of learning. These varied in quality and frequency of what was shared. Some observations were descriptive and did not identify learning, skills developed or progress. Families told us they would like more updates on the learning journal of their child's progress and their routines within the service. The service identified this and had implemented training to promote a consistent approach. We encouraged them to ensure quality assurance is identifying consistency across the team and have clear actions for ongoing support where it is recognised further training is needed.

Children's learning was documented on displays and within floor books. Displays were not always accessible to children, limiting opportunities for them to revisit and reflect on their learning. Increasing accessibility will further support children's engagement and ownership of their learning journey. Floor books captured children's experiences and provided some opportunities for them to revisit learning. The evidence recorded showed the variety of activities and documented children's thoughts. Staff incorporated the wellbeing indicators and children's rights within these books. To further support understanding of these, staff should ensure that language of rights and wellbeing is promoted through interactions and conversations.

Children are supported to achieve — 4 - Good

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.

Quality indicator: Nurturing care and support

Staff were warm, nurturing and caring towards children and this supported positive, trusting relationships to be formed. Children were confident in approaching staff and told us they felt safe and staff helped them. Families said they had a good relationship with staff caring for their child. Comments included "My child is happy going to nursery, they feel safe and comfortable with nursery staff", "room care is great, there are a few things that could be improved on however I feel the room staff are incredible. My child loves coming to nursery" and "The staff in the baby room are excellent, it is clear they know my child and understand their needs". These positive connections contributed to children's feeling of security.

Children and families experienced responsive care which supported wellbeing. Staff demonstrated an understanding of the importance of transitions. In the pre-school room, we observed children and families being supported through transitions at a pace that met their individual needs. This sensitive approach helped children feel secure during periods of change. Some families told us they felt the transition had been managed well. Transitions within the under-three rooms required further development to ensure they were meaningful and consistently meet children's individual needs. Strengthening these processes could further support children's emotional security and continuity of care.

Mealtimes across the service were calm, relaxed and sociable. Staff sat with children, engaged in conversation and enjoyed eating with them. This created a positive lunch time experience. Children were involved in preparing the tables for lunch. They were encouraged to self-serve foods using tongs, promoting independence and choice. We encouraged the service to ensure children are involved in preparing foods at snack time to further develop skills for life. Consideration should be given to ensure that staff do not become task focussed in the preparation for mealtimes as this minimised them being available to support children's learning. A more balanced deployment of staff would ensure children continued to benefit from meaningful interactions during this time.

The service demonstrated a clear awareness of children's dietary requirements. Individual needs were well managed, with clearly labelled food. Some children were able to identify their name and selected their food choice. We encouraged the service to review how they support children who are not yet able to recognise their written name, to ensure they can participate fully and independently in this routine. For example, introducing appropriate visual supports, such as photographs or symbols. This could promote independence and a stronger sense of inclusion.

Medication was appropriately managed, with healthcare plans in place and a staged approach to administering medication where required. We identified that not all records were fully completed. The service should ensure that all required information is documented accurately, including obtaining the necessary signatures. We highlighted that effective quality assurance should be strengthened to ensure that all medication records are routinely monitored, reviewed and fully completed.

Care plans were in place and reviewed. Families agreed they were fully involved in developing and reviewing their child's personal plan. Staff in the pre-school room understood the context of these, including children's routines, family information and what was important to each child, supporting continuity of care. In the under-two provision, current approaches to personal planning should be reviewed to ensure they are meaningful and relevant for younger children. This includes ensuring that what is important to babies is clearly reflected and informs daily care. We suggested how information could be more accessible by developing a clear summary sheet. This would allow all staff to easily access key information and respond quickly to children's individual needs.

Families were welcomed into the service, and positive relationships with staff were evident. Feedback indicated that they felt welcomed and had opportunities to discuss their child's care, play and learning. This was reflected in the positive feedback about the quality of relationships with staff. Some families chose to hand children over at the door to familiar staff, while others spent time within the playrooms. Most staff provided verbal feedback at the end of each session, outlining children's experiences and routines. Some families told us they would like a more detailed hand over and recognised this was not always possible.

The service shared information through newsletters, notice boards and online, providing families with updates about the setting. Some families told us they would like communication to be improved. For example, frequent updates through learning journals and consistency in communication. Enhancing this could support stronger partnerships and connections. We shared this with the service who were introducing a new online system to share learning and communication.

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 further support children to be meaningfully and actively involved in their play and learning, the manager and staff should further develop a balance of spontaneous and planned high-quality play experiences that promotes children's curiosity, extends thinking and consolidates their learning. This should include access to a wide range of high-quality resources.

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 13 June 2025.

Action taken since then
Children had access to a range of new, quality resources that had been added to the playrooms. This supported a balance of spontaneous and planned activities. Planning was influenced by children's interests and staff we're confident to talk about these approaches. The team should now continue to embed this practice. We recognised progress had been made and this area for improvement had been met.

Previous area for improvement 2

The provider should identify an appropriate space for nappy changing facilities in line with best practice guidance. This would ensure that staff can keep children safe and prevent the spread of infection, and maintain children's privacy and dignity.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state 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 area for improvement was made on 13 June 2025.

Action taken since then

The provider had identified an appropriate space for nappy changing facilities and a new changing area had been created. This supported staff to maintain children's privacy and dignity. This area was easily cleaned which minimised the risk of infection. We recognised progress had been made and this area for improvement had been met.

Previous area for improvement 3

To further develop the quality of the service and enhance outcomes for children, the provider should ensure that quality assurance processes, improvement planning and self-evaluation are further developed and embedded. This should include but not limited to:

- reflect on current best practice guidance and national frameworks
- consult with and share outcomes with children and their families
- identify strengths and areas for improvements
- have planned monitoring to ensure progress to support positive outcomes for children and families.

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)

This area for improvement was made on 13 June 2025.

Action taken since then

Progress had been made in relation to quality assurance processes, using a number of audit tools and room observations. There was some evidence of improvement planning displayed on notice boards and shared with families. This could be further developed. We encouraged the service to celebrate the progress made more consistently. Staff used best practice guidance to support self evaluation and this was at an early stage. Some progress had been made and this area for improvement had been met. We made a new area for improvement under quality indicator: Leadership and management of staff and resources in relation to the impact quality assurance had on sustained improvements.

Previous area for improvement 4

To support children's health and wellbeing the provider should ensure that in the absence of the manager that children are cared for by a suitable replacement manager/leader. This should be a leader who is trained, competent and skilled to lead and manage the service, ensuring children's safety and wellbeing needs are met. The staff team should know the roles and responsibilities of the leadership team and along with parents should know who is managing and leading the service each day.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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 13 June 2025.

Action taken since then

Clearer processes were in place to identify who was in charge of the service in the absence of the manager. Staff pictures were displayed at the entrance, and on notice boards so families knew the staff team and wider leadership team. There were pictures put up to show families who was available each day from the leadership team. Staff were more confident about who was leading the service in the absence of the manager. A new deputy Manager was appointed as well as promoted staff within the playrooms. We recognised improvements had been made and this area for improvement had 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

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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