Lawfield Primary School
Day Care of Children

26 Lawfield Road
Mayfield
Dalkeith
EH22 5BB

Telephone: 01312 714 620

Type of inspection:
Announced (short notice)

Completed on:
29 March 2025

Service provided by:
Midlothian Council

Service provider number:
SP2003002602

Service no:
CS2007161439

About the service

Lawfield Primary School Nursery is provided by Midlothian Council and is registered to provide a day care of children service to a maximum of 64 children aged from 3 years to not yet of an age to attend primary school.

The nursery operates from a building set within the grounds of Lawfield Primary School in the Mayfield area of Midlothian. The entrance door is fitted with a secure entry system. The nursery has two playrooms, an entrance foyer and children's toilet facilities, along with its own outdoor play area that children can access directly from the playrooms.

About the inspection

This was an unannounced inspection which took place on 25 and 26 March 2025. The inspection was carried out by one inspector.

During our inspection of the service, Education Scotland were also on site carrying out an inspection of the nursery and primary school. Their inspection findings will be published in a separate report on the Education Scotland website in due course.

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 a small number of children using the service
- gathered feedback from five family members of children using the service
- spoke with staff and management present on the days we visited the service
- observed staff practice and children's experiences
- reviewed documents
- spoke with visiting professionals.

Key messages

- Staff had high aspirations for children and their care and support was having a positive impact on their wellbeing and their time at nursey.

- Personal plans were in place with a range of recorded strategies to support children's individual wellbeing needs.

- Medication recording should be reviewed to ensure information is clear and up to date.

- A strength of the service was the range of opportunities offered to children to support and develop their early skills in language and literacy.

- Improvements within the service were progressing well, they had a well informed plan in place to help them achieve the services expectations and continue to improve the outcomes for children.

- There was a mix of planned and spontaneous experiences which supported children to learn and develop through play.

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

How good is our care, play and learning?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good

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

How good is our care, play and learning? 4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children, and clearly outweighed areas for improvement.

Quality Indicator 1.1: Nurturing care and support

Children experienced responsive and respectful interactions with staff who were consistently kind and caring towards them. Staff knew the children well and most were skilled at identifying children's individual needs and implemented effective strategies tailored to those needs. As a result, children received care and support, which made them feel safe, comfortable and nurtured.

Families had recently been welcomed back into the service. This was supporting children's daily transitions into the setting, along with building connections between staff and families. We are asking that this continues, and staff build on family engagement within the setting. The settling in period was tailored to support individual children's and carers needs.

Personal plans were in place and staff regularly reviewed them with families, discussing progress and agreeing on next steps or support strategies. This meant that staff gathered effective information regarding each child's needs, preferences and identified the right support in collaboration with other agencies. Staff had developed strong links with other professionals to effectively support children and their families. This supported individual children's health and wellbeing.

Snack times were unhurried, and children benefited from the relaxed and homely atmosphere. Independence and self help skills were supported by children collecting and clearing their own plates, choosing what they wanted to eat and pouring their own drinks. Staff should ensure they try and sit at the table with children whilst safely observing snack times. This would ensure staff can meaningfully engage with children during the mealtimes and continue to observe and monitor their safety

Lunch time had been reviewed and staff had worked hard to develop the mealtime experience for children. Lunch was served in the school dining hall. Children had some opportunities to set the tables before lunch, serve themselves salad and vegetables, pour drinks and clear their plates. This experience was a sociable time with staff sitting to support and chat with the children. The service should continue to review mealtimes to ensure all children's needs are being met.

Staff had a good understanding of children's health needs. Staff demonstrated in-depth awareness of their safeguarding responsibilities and knew what protocol to follow if a child protection concern arose. Allergies, intolerances and preferences were displayed within the snack area. Accidents and incidents were recorded and reviewed to analysis particular trends, staff should ensure these were signed and dated. Medication was stored appropriately and paperwork was in place. The service should ensure permission forms include detailed information around children's signs and symptoms and the reason for administering the medication (area for improvement 1).

Quality Indicator 1.3 Play and learning

Play spaces and experiences indoors and outdoors promoted learning and engagement. Children had access to low level storage units, which encouraged them to make choices and decisions of where they wanted to

play. Children could choose to explore resources such as sand, water, blocks, home area, construction and imaginative area with natural resources and materials, paint and playdoh.

Outdoors there were opportunities for risky play and the resources available were appropriate to the children's age and stage of development. Children were having fun with lots to do and explore. Staff should continue to build on the provocations offered to the children to ensure they can test their ideas and develop their own play.

Reviews of the environment were in place and this allowed staff to ensure areas and resources supported play experiences. Staff had worked hard in progressing children's early skills in language and literacy, with the written word evident around the environment. A focus on rhyme and story telling resulted in children experiencing a vocabulary and environment which captured their curiosities. Staff should further develop numeracy within the playrooms to ensure children receive a numerical rich environment.

There were a mix of planned and spontaneous experiences that supported children to learn and develop through play. These were being documented in intentional plans, floor books and responsive planning. Planning had been a focus for the senior team and this work was continuing. Children were confident within the play environment and could direct their own play and freely access a wide range of experiences suitable for their developmental needs.

Children's individual learning is supported by detailed observations. Staff felt confident in writing observations of the children. They were proud of the children's learning journals and were keen to make these documents a reflection on the children's time within the nursery. Leaders were aware that the journals needed reviewed. Inconsistences with the recording of children's individual observations meant some were too detailed, whilst others did not contain enough information. Leaders should monitor these through detailed quality assurance processes and ensure observations are detailed to reflect the learning and development needs of individual children.

Areas for improvement

1. To support children's wellbeing, the service should ensure medication permission forms include detailed information around children's signs and symptoms and the reason for administering the medication.

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

How good is our setting? 4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children, and clearly outweighed areas for improvement.

Quality Indicator 2.2: Children experience high quality facilities

Children were welcomed into a comfortable, homely and inviting setting. The play areas benefitted from natural light and ventilation. The rooms were furnished with good quality furniture suitable for children's developmental age and stage. Homely touches, decoration and child-led displays helped children to feel welcomed and included. It was very hot on the days of inspection, staff should be aware of the temperature of the playrooms and ensure children were comfortable.

Health and wellbeing was promoted through outdoor play experiences. Children had opportunities to free flow between indoors and the outdoor area. The availability of open-ended resources enabled children to engage their imaginations, develop life skills and spark curiosity. As a result, children were engaged, confident and having fun in the environment. We asked the service to be aware that the door between indoors and out is heavy and some children struggled to open it. The service agreed to review this to ensure children were safe.

Although staff promoted handwashing to children, consideration should be given to the deployment of staff to offer supervised hand washing at key points throughout the day. Staff should carry out regular checks of toilets to ensure they were clean and tidy. Further attention should be paid to some of the surfaces within the kitchen areas as these were cluttered and ensure the bins were clean. This would further support children's health and wellbeing.

Staff worked well together to identify and remove risks to children within the setting both indoors and outdoors. Consideration should be given to the loose parts being played with around the fence and staff deployment would help secure some spaces used by children. General risk assessments were in place and regularly reviewed, this helped to keep children safe.

How good is our leadership? 4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children, and clearly outweighed areas for improvement.

Quality Indicator 3.1: Quality assurance and improvement are led well

Leaders had a strong vision for the nursery and high aspirations for the children and families. They had worked hard to ensure the service moved forward and improved outcomes for children and families. Moving forward, the service were keen to focus on family engagement to help form genuine partnership working and develop ideas to improve the service.

It was clear through discussions with the team, observations of practice and review of various documentation that a number of improvements had been made to the service. These included reviewing and updating personal plans to ensure there were clear, concise strategies for individual children. The environment had been reviewed, regular audits carried out which meant children's learning was being progressed.

Self-evaluation was being used effectively by leaders. Staff were beginning to understand the value and importance of evaluating the impact of these changes. This was evident through the evaluation and development of the children's lunchtime experiences. Consideration had been given to planning improvements and learning from the implementation of changes, this included capturing the children's voice. As a result, experiences for children had been improved. Staff should continue with these self-evaluations to make changes that are worthwhile and impactful.

The leadership roles in the nursery included Senior Early Years Practitioners (SEYP's). This position was crucial in helping the service meet their vision, values and aims. To support SEYP's in their role we have asked leaders to ensure that there were clearly defined and discussed expectations of the role and the associated responsibilities for this job. This and additional support from leaders would enable SEYP's to develop autonomy in their role and empower them in decision making. They should assess practice, support

staff and provide good professional role models. It would also enable them to further support the senior team.

How good is our staff team? 4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children, and clearly outweighed areas for improvement.

Quality Indicator 4.3: Staff deployment

There was a range of skills, knowledge and experience among the staff team. Staff shared relevant information with each other, and this ensured transitions for children were tailored to meet their individual needs. Staff communicated with parents when they came into the playroom. As a result, staff and families worked in partnership to ensure the transition from home to nursery was at a pace that was right for the child.

Staff were committed to do their best to support children. They communicated verbally and supported each other throughout the day. Staff were employed in sufficient numbers to supervise children and respond to their needs. This meant that overall, children received nurturing and safe care. However, the complexity of meeting children's individual needs sometimes impacted on quality interactions and some routines of the day for other children. We saw times throughout the day when staff could not always support children's individual play and learning because they were dealing with toileting and nappy changing, accidents or comforting children. Staff absence and intake of more children may start to impact on staff's well-being and ability to support all children. Leaders were aware of this.

The staff had children and families at the heart of what they did. They truly cared for them and wanted to provide a service which ensured that children had the best possible start in life. They should continue to use their training and read best practice publications to help reflect on the quality of the play space and support offered to children and families. SEYP's should begin to develop their leadership skills. They should access training and development opportunities, read and promote best practice guidelines and participate in professional dialogue. This would help to build an ethos of mutual trust and respect throughout the staff team and ensure effective high-quality practice.

Staff breaks were managed well, ensuring minimal disruption to children's activities and routines and supporting staff wellbeing. Team meetings allowed staff to get together and discuss planning, individual children and any concerns or issues. These meetings should be formalised. This would ensure clear roles and responsibilities were delegated to staff and provide opportunities for leadership roles to be assigned. Individual one to one meetings and annual appraisals provided opportunities for staff to discuss professional development needs and their wellbeing. Staff told us that they felt well supported by leaders within the service.

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

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	4 - Good

How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good

How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good

How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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