

Fenton Barns Nursery Day Care of Children

Fenton Barns
North Berwick
EH39 5BW

Telephone: 01620 850 670

Type of inspection:
Unannounced

Completed on:
24 April 2026

Service provided by:
Fenton Barns Nursery Ltd

Service provider number:
SP2011011701

Service no:
CS2011301486

About the service

Fenton Barns Nursery provides care for a maximum of 56 children at any one time aged between three months and primary school entry.

The nursery is a purpose built wooden building on one level. The premises provide playrooms for three age groups, toilets and changing facilities. Each playroom has an all-weather outdoor veranda. There are five outdoor spaces for children to use. One for growing and harvesting fruits and vegetables and four for a wide range of outdoor activities. The nursery is situated in a retail centre in a rural part of East Lothian. It is close to the towns of Dirleton, Gullane and North Berwick.

About the inspection

This was an unannounced inspection which took place on 21 April 2026 between 09:00 and 16:45 and on the 22 April 2026 between 09:00 and 12:45. Two Inspectors carried out the inspection.

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

In making our evaluations of the service we:

- spoke with children and one parent using the service
- considered feedback from six families through an online questionnaire
- considered feedback from four staff through an online questionnaire
- observed practice and daily life
- reviewed documents relating to the care of children and the management of the service.

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

- The service's vision, values and aims were clearly defined and consistently embedded in high quality outdoor learning experiences.
- Self-evaluation was used effectively, with staff and family views informing meaningful ongoing improvements in practice.
- Staff deployment and mentoring of staff was effective, ensuring safe, consistent care and positive outcomes for children.
- Children experienced high quality, child led play in rich indoor and outdoor environments.
- Staff provided consistently warm, nurturing care and demonstrated a strong understanding of children's individual needs, resulting in children feeling safe, secure and emotionally supported.

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	5 - Very Good
Children play and learn	5 - Very Good
Children are supported to achieve	5 - Very Good

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

Leadership 5 - Very Good

We evaluated both quality indicators as very good. We found major strengths in this aspect of the setting's work and identified very few areas for improvement.

Quality indicator: Leadership and management of staff and resources

The service had clearly defined and well embedded vision, values and aims that consistently informed high quality practice. These were clearly shared within improvement plans and reviewed annually to ensure they remained current and reflective of practice. The vision for children to 'learn through play within an outdoor environment that harnesses natural curiosity and confidence' was evident across the setting and in everyday practice. Particularly in the rich outdoor learning experiences where children confidently led their own learning, explored risk safely and developed curiosity and resilience. As a result the Fenton Barns vision and aims were consistently embedded in practice.

Self-evaluation was used effectively to reflect on practice, identify strengths and plan next steps, supporting high-quality care. Staff and family views were central, with purposeful questionnaires informing improvement. One family commented that there were, "so many opportunities to hear parents' views". The service had begun engaging with the shared Quality Improvement Framework for Early Learning and Childcare sectors, exploring it collaboratively during staff meetings to deepen professional dialogue and reflection. Reflective tools, including floor books and targeted action plans, captured staff views, evidenced improvement and shared actions clearly. Staff demonstrated strong reflective practice identifying strengths in nurturing care, responsive planning and outdoor learning, alongside areas for development such as play spaces and experiences. This resulted in meaningful improvement and better outcomes for children.

The service had effective quality assurance arrangements in place. A monthly quality assurance calendar informed by service priorities and self-evaluation action plans supported effective monitoring and evaluation of key areas of practice. Areas previously identified for improvement were revisited to evaluate progress and impact. This systematic approach ensured timely monitoring, effective data gathering, and a clear cycle of continuous improvement. Findings were shared with staff through action plans, promoting a shared understanding of expectations and standards. Overall, monitoring was used effectively to evaluate provision, inform improvement planning and improve outcomes for children and families

The service demonstrated a strong commitment to continuous improvement, supported by a clear annual improvement plan with agreed priorities. Actions were implemented effectively and positively impacted practice and outcomes. This included a shift towards a process over product in learning experiences, strengthened responsive and intentional planning for play and the developing shared approach to learning stories. Staff worked collaboratively through reflection, professional dialogue and regular meetings to review progress, learn from skilled practitioners and build consistency across the service. One family commented, "everyone is friendly, helpful, always looking to improve the child's experience". Improvements such as enhancements to outdoor play spaces, responsive changes to the environment and approaches that supported transitions were clearly informed by children's interests and needs. As a result, children experienced evolving, responsive environments that supported creativity, wellbeing and learning. Clearer systems to evaluate the impact of improvement priorities could further strengthen shared ownership and sustain positive outcomes.

Environmental risk assessments were in place and supported children's safety. Staff demonstrated a clear understanding of their responsibilities and completed daily checks, including of the outdoor environment. Although daily assessments were recorded, significant bird mess was observed on two outdoor resources accessible to children, including the mud kitchen. This was discussed with staff and addressed immediately. The area was beneath an active bird nest, which the service planned to monitor as part of ongoing daily checks.

The service had a comprehensive range of policies to support effective practice and the safe management of staff and resources. Policies were reviewed regularly and updates were clearly communicated to reflect current legislation, best practice and service delivery. One families feedback highlighted a need for clearer communication on illness exclusion, which leaders responded to by agreeing to revisit the policy with staff to ensure a shared and consistent approach. This demonstrated responsive leadership, supporting consistency of practice and improved communication with families.

Leaders demonstrated effective leadership through robust safer recruitment. Well-structured induction processes, supported the development of a skilled and cohesive staff team aligned with the service's values. Induction was informed by the national induction resource, helping staff understand their roles and feel confident and supported in practice. Mentoring arrangements supported new and unqualified staff, contributing positively to professional learning. While work was underway to strengthen mentoring through the development of room seniors, clearer clarification of mentor responsibilities would further improve consistency. Overall, staff felt well supported, positively impacting the quality of care and experiences for children. The previous area for improvement relating to mentoring had been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Quality Indicator: Staff skills, knowledge and deployment

Staff made effective use of professional learning to strengthen skills, knowledge and practice, resulting in positive outcomes for children. Training was well matched to the service ethos and applied confidently in practice, with staff sharing learning purposefully to build consistency across the team. For example, Forest School training led to well planned fire experiences that enhanced children's confidence, risk awareness and engagement in outdoor learning. One family commented, "the staff are clearly well trained and supported with the right values to care for children in a kind inclusive stimulating environment". A wide range of relevant training supported staff knowledge of child development, attachment, inclusion, wellbeing and communication, which was reflected in warm, responsive interactions, sensitive care routines and calm support for emotional regulation and independence. Professional learning was shared through floorbooks, team discussions and meetings, enabling all staff, including new and unqualified practitioners, to benefit and reflect on impact.

All staff were appropriately registered with the Scottish Social Service Council (SSSC) or appropriate professional regulator. This was in line with their roles and responsibilities, supporting safe practice, clear accountability and effective staff deployment. Staff were supported to reflect on their work, identify strengths and receive timely guidance, which strengthened confidence and consistency in practice. As a result, staff felt well supported in their roles, contributing to positive, consistent experiences and outcomes for children. The previous area for improvement relating to professional registration had been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Leaders ensured effective staff deployment, with qualified staff consistently present across all rooms to support safe practice, continuity of care and positive learning experiences. Staffing levels were sufficient to maintain calm routines and minimise disruption, with thoughtful deployment across indoor, outdoor, mealtimes, transitions and sleep to provide responsive support. Arrangements enabled experienced staff to mentor others, strengthening supervision, skill sharing and consistency. Digital systems were used effectively to communicate staffing with families. Overall, deployment supported warm interactions, calm transitions and sustained engagement, ensuring children felt safe, supported and emotionally secure.

Children play and learn 5 - Very Good

We found major strengths in this aspect of the setting's work and identified very few areas for improvement, therefore we evaluated this quality indicator as very good.

Quality indicator: Playing, learning and developing.

Children experienced high-quality, play-based learning which supported positive outcomes in engagement, wellbeing and development. Families told us, "they go on walks, have dinner at the local cafe, they build fires and cook food on them, they have loose parts for building, a sandpit, a shelter for French, the mud kitchen. Lots of outdoor spaces!" and "the range of activities on offer and explored seems very varied and diverse". Children moved freely and purposefully between indoor and outdoor environments, often choosing sustained outdoor play where they engaged in rich physical, imaginative and investigative experiences that supported creativity, problem solving, collaboration and independence.

Across all age groups, children experienced high-quality, play-based learning. In the 0-2 room, they engaged in a range of sensory and physical experiences and were settled, emotionally secure and highly motivated, demonstrating strong relationships with staff and growing confidence to lead their own learning. In the 2-3 room, children confidently accessed physical challenges and managed risks, with practitioners supporting curiosity and emerging independence, resulting in rich and sustained engagement. In the 3-5 room, children demonstrated strong collaboration, creativity and problem-solving through complex, self-directed play, supported by skilful staff interactions that maintained depth and ownership of learning. Overall, meaningful opportunities for challenge, choice and real-life play enhanced children's confidence, communication and social skills, resulting in happy, confident and highly engaged learners with positive outcomes in their development.

Children benefited from predominantly child led routines, freely chosen play with minimal adult imposed structure, which supported engagement and independence. Staff in the 3-5 room reflected openly that they were trialling different routines prior to lunch to see what worked best for the children's needs and learning. We discussed their routines leading up to mealtimes would benefit from further review to better support children's needs, reduce waiting and sustain high quality experiences. Recording these trials within self-evaluation and reviewing what works best would support continuous improvement and ensure routines enhance children's play, learning, experiences and wellbeing. The team had the capacity to take this forward.

Across all rooms, staff interactions were consistently warm, calm and responsive, supporting strong outcomes for children's emotional wellbeing, communication and engagement in learning. Staff sensitively supported emotional regulation through reassurance, affection and gentle guidance, enabling children to feel safe, confident and willing to explore and sustain play. Skilled questioning and timely interventions empowered children to lead their learning, sustain thinking and resolve disagreements calmly and collaboratively. Overall, respectful relationships and meaningful dialogue significantly enhanced children's language and social skills and lead to deep engagement and positive learning.

Planning approaches had been strengthened and demonstrated a clear balance of responsive and intentional support for children's learning. Staff consistently observed play and used this to extend learning, with children's interests effectively informing planning. For example, an interest in dinosaurs led to age-appropriate experiences reflecting strong understanding of developmental needs. Planned learning was relevant and engaging, including exploring how to keep a skeleton warm, creating pinwheels linked to weather, and discussing seasonal changes. Responsive planning was well embedded, with staff extending learning in the moment, such as introducing baby care resources to build on children's interest in caring for teddies, enabling sustained, purposeful play. Planning was a shared responsibility, with all staff contributing observations and reflections, and a clear focus on child-led experiences over adult-directed outcomes. As a result, children experienced high-quality, meaningful play and learning that supported positive outcomes in their development. The previous area for improvement relating to developing planning approaches had been met (see area for improvement in section 'What the service has done to meet any areas for improvement we made at, or since the last inspection').

Observations captured children's engagement in a wide range of play, care routines and interactions, supporting positive learning and wellbeing outcomes. Learning journal entries on a digital platform showed warm, child focused observations linked to previous next steps showing clear evidence of responding to interests. Staff used observations to plan next steps however, next steps often focused on provision or experiences rather than clearly identifying learning or developmental progression for individual children. Leaders agreed that improving the clarity and consistency of next steps to focus on learning and developmental progression would provide a clearer picture of individual children's progress.

Children are supported to achieve 5 - Very Good

We found major strengths in this aspect of the setting's work and identified very few areas for improvement; therefore we evaluated this quality indicator as very good.

Quality indicator: Nurturing care and support

Staff consistently demonstrated warm, nurturing and respectful relationships, supporting children to feel safe, secure and valued. They responded sensitively to children's cues and preferences and showed a strong understanding of individual needs, promoting children's wellbeing and development. Staff frequently checked how children were feeling, responded promptly to distress with cuddles and soothing language which supported children's emotional regulation throughout the day. As a result children clearly felt safe, emotionally secure and confident within.

Staff demonstrated a caring and responsive approach to supporting children's rest and sleep. Staff showed awareness of individual cues and prioritising wellbeing and emotional security. They used effective soothing strategies, including white noise, reassurance and close comfort, and communicated appropriately with families while respecting children's rights to rest through flexible routines. However, practice was not yet fully consistent, as some children were not always ready to rest when expected, highlighting the need for more responsive planning. Outdoor sleeping was used well to support transitions and extend familiar experiences across rooms. Increasing access to comforting resources such as blankets and sleeping bags in the older rooms 'restful ranch' would further enhance choice and independence when children needed a rest. Overall, children felt safe and comforted, with scope to strengthen consistency in meeting individual wellbeing needs.

Children were kept safe from harm, with all staff having completed child protection training and demonstrating clear, confident understanding of their safeguarding responsibilities. They effectively recognised concerns, followed appropriate procedures and were familiar with relevant policies and external agencies. Regular use of case studies during team meetings strengthened reflection, knowledge and consistency in practice. As a result, safeguarding arrangements were robust, ensuring children's wellbeing was prioritised and they were effectively protected.

The service had effective arrangements in place for the safe management of medication, supported by clear procedures, regular audits and well maintained records aligned with best practice. Staff demonstrated a strong understanding of allergen management, with clear care plans and consistent communication with families and the cook to ensure children's health needs were met. Quality assurance processes were used effectively to identify and address improvements. As a result, children's medical needs were managed safely and consistently, reducing risk and ensuring timely, appropriate support.

Mealtimes were well organised and provided calm, inclusive and nurturing experiences that supported children's wellbeing and social development. A nutritious menu prepared by the in house cook was well received by children and one child commented, "yummy that's delicious". Alternatives and additional portions were available to meet individual needs. Staff sat alongside children to model positive interactions and ensure safety. Staff supported choice and inclusion by including the use of outdoor spaces for some children to eat during lunch which enhanced comfort, regulation and ensured mealtimes remained calm and positive experiences. Children were encouraged to develop independence through self-serving drinks, cutlery and snack foods. However, opportunities to extend independence further in older playrooms and involve children regularly in food preparation were not yet fully embedded. Overall, mealtimes effectively promoted relationships and met children's wellbeing needs.

Personal care routines were respectful, child centred and promoted children's dignity and rights. Staff consistently sought consent, explained actions clearly and responded sensitively to children's cues, demonstrating a nurturing and responsive approach. Effective handwashing practices were embedded at key times, supporting strong infection prevention and control. Overall, personal care practices supported children's health, dignity and wellbeing.

Children's wellbeing was well supported through effective personal planning. Plans were developed in partnership with families and clearly reflected children's needs, interests and preferences using the wellbeing indicators. One family commented, "I have always felt able to talk to management and staff about my child and my expectations of her care". Personal plans were updated and reviewed at least every six months. Pastoral logs were mostly used well to record significant information and monitor progress. While pastoral records captured important information, greater clarity in support strategies and more consistent recording of follow up actions would strengthen continuity and ensure approaches remained relevant and effective.

The service developed positive, inclusive relationships with families and actively encouraged engagement through an open and welcoming ethos. One family told us, "there are open days, parent council meetings, the nursery has a very 'open' open door policy". Families were involved in a range of opportunities, including stay and play sessions and parent forums, with feedback used effectively to inform improvement planning and strengthen partnership working. Regular communication was supported through a digital platform and daily interactions. We received mixed feedback from families with some families reported inconsistent communication and others describing the "excellent handovers". While many families reported positive experiences, strengthening the accessibility of communication such as ensuring information boards were visible and accessible to would further enhance partnership working. Overall, positive relationships with families supported children's wellbeing and continuity of care.

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 to reach their full potential, the manager and staff should continue to develop planning approaches that are both intentional and responsive. Planning should be based on what is known about each child's development and current interests, with a particular focus on ensuring that experiences for children aged 0–3 years are led by observation and responsive interactions, rather than pre-planned activities. This would ensure all children experience meaningful and developmentally appropriate play and learning.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me.' (HSCS 1.19)

This area for improvement was made on 29 May 2025.

Action taken since then

Staff consistently responded to children's play in the moment, deepening engagement and sustaining learning. Responsive planning clearly demonstrated how observations were used to extend learning spontaneously, with significant interest such as dinosaurs, carried forward into age appropriate intentional planning, reflecting strong understanding of developmental needs. All staff contributed to planning, and leadership roles in play and learning were evident through floorbook documentation. As a result, children experienced high-quality, child-led and meaningful play that supported positive outcomes in their learning and development.

This area for improvement had been met.

Previous area for improvement 2

To ensure safe and effective staffing, the provider should improve systems to support staff with their Scottish Social Services Council (SSSC) registration. Staff should be registered on the correct part of the register that reflects their role and responsibilities within the service. This will support clear staff deployment, promote accountability and help clarify roles to ensure children are cared for by appropriately registered staff.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 29 May 2025.

Action taken since then

All staff were appropriately registered with the SSSC. Robust quality assurance checks were embedded within recruitment processes to ensure staff were correctly registered for their roles they were employed to carry out.

This area for improvement had been met.

Previous area for improvement 3

The provider should ensure that new and unqualified staff are consistently supported by experienced and qualified mentors. Mentoring should include regular opportunities for in-the-moment guidance, reflection and modelling of high-quality practice. Sufficient time and capacity should be allocated to mentoring roles to promote staff development, build confidence and improve outcomes for children. Strengthening mentoring in this way would help sustain and enhance the positive outcomes already being achieved in children's care, play and learning.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 29 May 2025.

Action taken since then

Mentoring arrangements were in place, with new and unqualified staff supported by leaders, and further improvements underway to strengthen consistency through the increased involvement of room seniors. Mentoring arrangements were well established and had been developed to a level that met the identified area for improvement.

Unqualified staff undertaking practitioner roles were appropriately supported through training, and staffing deployment remained strong, with qualified staff consistently present. As a result, staff were well supported overall, training needs were largely met, and this contributed positively to outcomes for children.

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	5 - Very Good
Leadership and management of staff and resources	5 - Very Good
Staff skills, knowledge, values and deployment	5 - Very Good
Children play and learn	5 - Very Good
Playing, learning and developing	5 - Very Good
Children are supported to achieve	5 - Very Good
Nurturing care and support	5 - Very Good

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