Little Hands Nursery (Condorrat) Limited
Day Care of Children

Jadini
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Telephone: 01236610225

Type of inspection:
Unannounced

Completed on:
26 August 2026

Service provided by:
Little Hands Nursery (Condorrat) Limited

Service provider number:
SP2024000481

Service no:
CS2025000008

About the service

Little Hands Nursery (Condorrat) Limited is registered to provide a service to a maximum of 55 children not yet attending primary school at any one time, of whom no more than 12 are aged under two years; no more than 10 are aged two years to under three years and; no more than 33 are aged three years to those not yet attending primary school full time.
The service is in partnership with North Lanarkshire Council to provide funded placement for children aged two years and children aged three and over.

The nursery is located in a residential area of Condorrat in Cumbernauld. The service operates from a large detached two storey property in a residential area with a secure door entry system. The ground floor has a baby room, staff room/kitchen, toilet and changing facilities. The upper floor has two playrooms, kitchen, toilets and changing facilities. An additional office, toilet, laundry and storage facilities lie adjacent to the nursery building. Children in all the playrooms have direct access to enclosed outdoor play space.

About the inspection

This was an unannounced inspection which took place on 25 August 2026 between 08:30 and 18:30 and on 26 August 2026 between 08:30 and 14:30. The inspection was carried out by two inspectors from the Care Inspectorate.

The service was registered in January 2025. This was the first inspection since registration.
To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered.

To inform our evaluations we:

- spent time with children in the service
- spoke with the staff at the nursery
- received 24 completed questionnaires from parents
- observed practice and children's experiences
- assessed core assurances
- reviewed documents.

As part of our inspections, we assessed 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 within the following quality indicators: 'Leadership and management of staff and resources', 'Play, learning and developing' and 'Nurturing care and support'.

Key messages

- Leadership fostered a kind, collaborative culture where family engagement and shared values shaped practice.
- In order to improve outcomes for children, leaders identified some improvement priorities in self-evaluation, quality assurance, and curriculum planning.
- Almost all children benefitted from nurturing relationships, responsive play-based experiences and high-quality outdoor learning that supported confidence, creativity and wellbeing.
- Leaders should enhance consistency in the quality of learning spaces and play experiences to ensure that all children benefit from a rich and nurturing environment.
- Leaders were in the process of strengthening planning, observations and staff interactions to better extend learning, engagement and developmental progress.
- Strong family partnerships promoted wellbeing, security, belonging and positive outcomes.
- Leaders recognised the importance of reviewing personal planning and medication systems to improve consistency, accountability and support children's overall wellbeing and individual needs.

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.

Leadership within the service demonstrated a commitment to creating a positive and collaborative culture for children, families and staff. Throughout the inspection, there was evidence of an ethos of kindness, teamwork and mutual respect. In almost all interactions observed, staff focussed on respecting children's rights, interests and preferences, while responding sensitively to their individual needs.

Leaders had recently reviewed the vision, values and aims of the service in consultation with staff, ensuring these reflected the aspirations of the setting and the needs of the children and families it supported. The revised values were: included, ambitious, memorable, loving, opportunities, voice, excellence and determined. Together, these formed the phrase 'I am loved', with each value clearly defined to demonstrate how it would be translated into practice. The manager told us they were shared with families, who were invited to contribute their views.

Leaders demonstrated awareness of what was important in meeting the needs of children and families and were beginning to strengthen systems to ensure this was consistently reflected across all aspects of practice. They had undertaken a review of service performance and had identified some key priorities for improvement. These included strengthening self-evaluation processes through increased staff engagement with relevant quality frameworks and guidance. They also planned to support staff to develop their skills in observing children's play, planning learning experiences and tracking children's progress and development. Discussions during the inspection demonstrated that leaders were at the early stages of developing a more robust and systematic approach to self-evaluation (see area for improvement 1). They showed a willingness to reflect on current practice and demonstrated capacity to drive improvement. A positive example of this was the research work undertaken to improve the mealtime experience, which leaders had recognised as an area for development, identifying which initial changes could make a positive impact.

Quality assurance processes were in place but were not yet being implemented consistently across the service. Leaders acknowledged the need to establish more formal systems to monitor practice, evaluate outcomes and measure the impact of improvements on children's experiences (see area for improvement 1). They recognised that developing agreed standards and expectations across all aspects of provision would support greater consistency and accountability. This would help to ensure that all children experienced consistently high-quality care, learning and support regardless of the room they attended or staff supporting them.
Areas identified for review included planning, personal plans, medication management, staff interactions and the learning environment. There was also a need to provide clear guidance and support to staff, documenting agreed actions and strengthening the developing leadership roles within the team.

Recruitment and induction processes were established and reflected safer recruitment principles. Following a period of considerable changes in staffing, leaders recognised the importance of recruiting and retaining a skilled and stable workforce to promote positive outcomes for children. New staff were supported through an induction programme, which adopted the 'Early learning and childcare: national induction resource' (Scottish Government national, 2026). A mentoring system helped new employees understand the nursery values and expectations and develop confidence within their roles. As leadership structures continued to evolve, there was scope to strengthen mentoring arrangements and leadership roles further. This could be achieved through evaluating their effectiveness and ensuring staff received the support required to undertake their responsibilities confidently.

The service demonstrated an understanding of their safeguarding responsibilities with child protection coordinators in place and a clear safeguarding policy. A refresher course on child protection was scheduled and we discussed with the manager the importance of sharing different scenarios with staff and support meaningful conversations around keeping children safe. This would help to ensure that all staff were confident in their roles and responsibilities and understood how to recognise and respond appropriately to any wellbeing or safeguarding issues that may arise.

Areas for improvement

1. To support consistently high-quality outcomes and experiences for children, the service should strengthen leadership and quality assurance arrangements to ensure leaders can effectively evaluate all aspects of service provision, identify strengths and areas for development, and use this information to drive continuous and sustainable improvement.

This should include, but not be limited to:

a) developing an improvement plan informed by current guidance, best practice and self-evaluation activities, with clearly identified priorities, measurable outcomes and realistic timescales for improvement;

b) implementing robust quality assurance processes that effectively monitor practice, evaluate impact on children's experiences and outcomes, and support consistency across the service;

c) establishing a systematic cycle of self-evaluation that involves staff, children and families in identifying strengths, areas for development and meaningful actions for improvement.

This is to ensure that care and support is consistent with the 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.

Overall, children benefitted from a welcoming, safe and nurturing environment that supported their wellbeing, play and development. The premises were generally well-maintained, with appropriate measures in place to help keep children safe. Secure boundaries, safety gates and effective supervision enabled children to move confidently around the setting while minimising risks. Resources and equipment were mostly in good condition and readily accessible, supporting children's independence in play and learning.

Indoor spaces were generally designed to meet the needs of different age groups. In the playroom for children under two, the layout enabled children to move freely, explore independently and access resources at their own pace. Staff responded well to children's verbal and non-verbal communication, supporting them to follow their interests and make choices about their play. Some playrooms provided opportunities for rest and quiet time, contributing positively to children's sense of security and emotional wellbeing.

However, some opportunities were missed to create a stimulating environment for children aged two to three years. We discussed with leaders and staff how resources could be presented in a more inviting and accessible way to encourage curiosity, exploration and sustained engagement. Leaders recognised that children in this room would benefit from a wider range of resources, particularly open-ended materials, to further support choice, creativity and involvement in learning (see area for improvement 1).

Children's views and interests influenced some aspects of the environment. Staff described how they consulted children and responded to their ideas through experiences such as an outdoor ice cream van, a pretend barbecue area and an indoor puppet theatre. These opportunities supported creativity, engagement and a sense of ownership. While positive practice was evident, there was scope to strengthen children's influence on the environment and experiences available to them. A broader range of inclusive and diverse resources would also help to ensure that all children feel represented and valued.

A key strength of the service was outdoor learning. Almost all children benefitted from spacious outdoor environments that supported active play, exploration and learning. The outdoor area for children aged under two years was safe, secure and well equipped with age-appropriate resources and sensory experiences.
The outdoor environment for children aged three to five years was particularly well-developed. Children accessed a wide range of open-ended resources and independently used materials such as boxes and pipes to extend their play. Quiet and secluded areas supported imagination, curiosity and sustained concentration, while staff actively encouraged child-led play.
We discussed with the leaders the need to enhance consistency of quality outdoor play spaces and experiences throughout the service. This would help to ensure that all children benefit from richer outdoor opportunities that better support their curiosity, independence and developmental needs (see area for improvement 1). Leaders advised there were plans to extend garden access and develop a forest area for children aged two to three years.

The nursery environment was generally clean and organised, which supported children's wellbeing. Staff had effective systems in place to maintain cleanliness and hygiene. However, some aspects of the environment needed further attention. We found that some touch points and surfaces would benefit from more consistent cleaning. For example, toilets were generally clean; however, changing facilities could be improved to further support hygiene and infection prevention practices. Sleep arrangements should also be reviewed to ensure sufficient space between sleeping mats, promoting children's comfort, dignity and safety. These improvements would help enhance the overall quality and safety of the environment.

Areas for improvement

1. To ensure all children benefit from nurturing, stimulating and engaging learning environments, leaders should undertake a comprehensive review of the indoor and outdoor play spaces. This should focus on enhancing the consistency of accessibility, presentation and range of resources across the service. This would better support children's curiosity, rest, independence, and play and learning experiences.

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

'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HCS 5.23).

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.

Children experienced a warm and welcoming environment where play was valued as an important part of their learning, development and wellbeing. Across the service, staff generally supported children to engage in experiences that reflected their interests and stages of development. Children were observed making choices about their play, accessing resources independently and exploring with confidence. Most children appeared settled, engaged and motivated throughout the inspection.

In the room for children aged two and below, children's engagement was enhanced by age-appropriate resources that supported sensory exploration, curiosity and early development. Mirrors, sensory materials and cause-and-effect toys encouraged children to investigate, experiment and develop emerging skills. Staff demonstrated a sound understanding of child development and provided experiences that responded well to the needs of the youngest children. As a result, they benefitted from nurturing support and engaged purposefully in play both indoors and outdoors.

The quality of interactions varied across the service, which impacted on the extent to which children were consistently challenged and supported to extend their learning. Positive relationships helped the youngest children to feel safe, secure and confident to explore. For some older children, more intentional interactions and carefully planned activities could further promote deeper thinking and involvement. The consistent use of open-ended questioning and opportunities to build on children's ideas would help extend curiosity, problem-solving and critical thinking skills while supporting children to revisit, consolidate and extend their learning.

Children were central to many aspects of planning, and staff demonstrated a good knowledge of their interests and individual needs. One parent commented: "They know my child very well and can meet [my child's] needs effectively. They are responsive to children's interests and take their lead." Some positive examples of responsive planning were evident for children under two years of age, where observations sampled captured significant learning moments and informed experiences that reflected children's interests and developmental needs.

However, planning systems for children under three were still being developed and did not yet demonstrate breadth, depth or responsiveness. Observations, personal targets and planning required stronger links to support effective tracking of children's progress (see area for improvement 1). In the room for children aged two to five, observations linked to planning were evident, although next steps for learning were not always clearly identified. Leaders had already recognised the need to strengthen observation, tracking and monitoring systems, and this remains an important area for further development (see area for improvement 1).

Areas for improvement

1. To ensure children's learning needs are effectively met, the service should strengthen systems for planning and evaluating responsive and meaningful experiences that build on and extend children's interests, while improving approaches to tracking and monitoring developmental progress. This should include, but is not limited to:

a) developing consistent planning and tracking systems across the service;

b) recording observations of children's significant learning to capture progress and achievements;

c) planning appropriate next steps to support progression in children's learning.

This is to ensure that 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);

and

'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

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

Almost all children were happy, relaxed and settled within the nursery environment. Staff mostly interacted with children in a kind, respectful and responsive manner, recognising and responding sensitively to individual needs. Children confidently sought comfort, reassurance and support from adults, demonstrating that they felt safe, secure and valued. These nurturing relationships contributed positively to children's wellbeing and sense of belonging. One parent commented: "The staff are always friendly and approachable. Nothing is ever too much bother, and I feel my child is cared for and looked after to a high standard."

Leaders recognised the importance of effective transitions and had implemented flexible approaches to support children and families when starting nursery or moving between rooms. However, the quality of care and experiences was not consistently strong across all areas of the service. Children moving from the baby room to the room for children aged two to three years would benefit from greater consistency in interactions, play experiences and mealtime support to help sustain positive outcomes. This would help maintain continuity of care and support children to remain confident, secure and engaged during periods of transition.

Mealtime experiences varied across rooms. In the room for children aged under two years, children enjoyed calm, well-organised lunches where staff promoted choice, independence and social interaction. Meals were nutritious and met individual dietary requirements. Children aged three and above enjoyed an outdoor lunch experience and demonstrated growing independence through self-help skills. Opportunities remained to ensure consistency of high-quality mealtime experiences for all children across the service. For example, for children aged two to three, more purposeful staff engagement during mealtimes would enhance children's social experience of eating together and support independence through age-appropriate self-help skills. We also discussed the need to ensure all children had consistent access to appropriate personal hygiene resources after meals.

Relationships with families were a notable strength. Staff knew children and their families well and had established positive partnerships based on trust, respect and open communication. Families were involved through review meetings, events and ongoing discussions. One parent told us: "We are always updated on any changes to [my child's] care and learning. This is either face to face at pick up, parents' evenings or through the app." Feedback from the care questionnaire was consistently positive and reflected high levels of satisfaction with the care and support provided.

Children requiring additional support benefitted from effective partnership working with external professionals, helping to ensure individual needs were recognised and supported. We encouraged staff to consider developing communication and support profiles further for these children. This would promote consistency across the staff team and ensure all staff understood how best to meet individual children's needs.

While important strengths were evident, some aspects should be improved. Personal planning documentation did not always contain up-to-date or meaningful information reflecting children's current developmental stages, interests, preferences and care needs. Some records contained information that was no longer relevant and did not clearly demonstrate family involvement in the development and review of plans. This reduced the service's ability to demonstrate how care and support were tailored to children's changing needs (see area for improvement 1).
We discussed the need for children's personal targets to be more specific and measurable, clearly identifying what children are learning, how staff will support progress and how outcomes will be reviewed. Staff would also benefit from a more consistent approach to recording discussions with families and maintaining personal planning records.

Medication management systems were in place. We identified opportunities to strengthen their consistency, including storage, recording, administration and auditing processes. Documentation varied across forms, which at times resulted in gaps, duplication and challenges in evidencing the complete medication process. A review and streamlining of existing systems would support greater consistency, reduce duplication and ensure the protocol is in line with 'Management of Medication in Daycare of Children and Childminding Services' guidance (Care Inspectorate, July 2025). This would also strengthen accountability, support a more robust audit trail, improve record keeping and promote the safe management of medication (see area for improvement 2).

Areas for improvement

1. To ensure children experience responsive, consistent and individualised care, the service should strengthen personal planning arrangements to ensure they are robust, meaningful, regularly reviewed and consistently implemented in practice. Personal plans should accurately reflect each child's current needs, interests, preferences, strengths and stages of development, and clearly record agreed support strategies, wellbeing outcomes and the views of children and their families.

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

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

2. To fully support children's health needs, the provider should review and strengthen medication management systems.

This should include, but not be limited to:

a) reviewing and streamlining medication procedures, personal medical plans and recording systems to promote a consistent approach across all rooms and ensure staff understand expectations;

b) medication records completed fully and consistently in line with best practice guidance;

c) medication stored appropriately in line with best practice guidance;

d) implementing regular monitoring and auditing of medication records and storage arrangements to identify and address any errors, omissions or inconsistencies promptly.

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.scot.

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

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