

# Pinkie St. Peter's Primary School Nursery Class

## Day Care of Children

Pinkie St Peters Primary School  
44 Pinkie Road  
Musselburgh  
EH21 7HA

Telephone: 01316 652 024

**Type of inspection:**  
Unannounced

**Completed on:**  
23 February 2024

**Service provided by:**  
East Lothian Council

**Service provider number:**  
SP2003002600

**Service no:**  
CS2003015820

## About the service

Pinkie St. Peter's Primary School Nursery is registered to provide a care service to a maximum of 68 children aged from three to those not yet attending primary school at any one time.

The service is located with the primary school, which is situated in a residential area, close to local shops, parks and green spaces. The service had recently moved into a new purpose built building which provides a welcome area, cloakroom, large playroom, raised mezzanine area, toilets, kitchen facilities, family room and direct access to a large outdoor area. Currently the service were not providing spaces for two year olds, however, they did have a separate playroom to support this as the service grows and develops.

## About the inspection

This was an unannounced inspection that took place on 19 February 2024 between 09:00 and 16:15. We returned to the service on 20 February 2024 between 09:00 and 13:00. The inspection was carried out by two inspectors.

To prepare for this inspection we reviewed information about the 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 evaluations we:

- spoke with and observed children using the service
- received written feedback from fifteen families
- spoke with staff and received written feedback from three staff members
- spoke with the manager and the leadership team
- observed practice and children's routines and experiences
- reviewed documents.

## Key messages

- Children experienced kind, caring, warm staff who knew them well and took a genuine interest in them as individuals.
- The service should improve and strengthen their personal planning approach for children.
- The lunchtime experience for children required further improvement.
- Children were engaged in their play and learning and had access to a variety of resources both indoor and outdoors.
- Children experienced a warm, welcoming environment that was filled with natural light, soft colours and quality furnishings, which supported the calm, relaxed atmosphere.
- The service should continue to develop and implement effective quality assurance systems and processes.
- The service should ensure staffing levels are enhanced at busier times of the day to reflect and meet the needs of all children.
- The leadership team had worked in partnership with the staff to build positive working relationships and supported staff wellbeing during this period of significant change.

## 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?	3 - Adequate
How good is our setting?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate

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

## How good is our care, play and learning?

## 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

### Quality Indicator 1.1: Nurturing care and support

Children experienced kind, caring, warm staff who knew them well and took a genuine interest in them as individuals. One parent shared with us, "Fantastic setting, all staff are friendly, helpful and engaging". One staff member told us, "I think its apparent to anyone that walks into the nursery that the staff care about the children in their care and want them to achieve and do well". Children were confident and comfortable within the space. They were approaching adults for support and comfort when required. They were excited to share news and achievements with staff. This clearly indicated that strong relationships had been built. Staff modelled positive relationships with one another, and highlighted that teamwork and strong leadership was a strength of the setting. This all contributed to the positive atmosphere that children experienced.

The service should improve and strengthen their personal planning approach for children. Not all information was up to date, relevant or clear. This meant that personal plans were not being used effectively as working documents to support children's care, play and learning. Individual positive support plans were in place for some children that required additional support. Staff had worked in partnership with external agencies, key professionals and families to gather information to inform the development of these plans. However, this was not consistent for all children that required additional support. We highlighted the importance of using the 'Getting it Right for Every Child' (GIRFEC) toolkit to support staff to view the child and the world around them when logging pastoral information, developing support strategies and measuring the impact of these. This would contribute to children experiencing a child centred personal planning approach that effectively meets their individual needs (**see area for improvement 1**).

Medication was being stored in line with good practice guidance. However, we asked the service to address concerns in relation to the recording and administration of some children's medication. Evidence gathered showed an inconsistency in the dosage of medication that had been prescribed and the dosage that was being administered. This had failed to be captured by the quality assurance processes within the setting. The service was receptive to this feedback and had begun to address this on the second day of the inspection. The service should ensure that quality assurance systems are effective in addressing this area of practice. This would ensure that staff are able to respond safely and efficiently in an emergency. This would contribute to children's health, safety and overall wellbeing. **We have addressed this within an area for improvement in 'Key Question 3: How good is our leadership?'.**

The lunchtime experience for children required further improvement. We recognised that staff were doing their best to support children and we observed some quality interactions during the first part of the lunchtime routine. However, the second part of the lunchtime experience, as primary school children joined the space, became, chaotic, noisy and very rushed. As one child covered their ears and told us, "I don't like the noise". Staff had to continually leave the table to collect additional items such as cutlery, fruit, yoghurts and water, this was disruptive and reduced the quality of the experience for all. The service was aware that this routine required further improvement and was receptive to this feedback. The service planned to continue to work in partnership with the East Lothian Council to explore alternative solutions. This would contribute to children having a positive, nurturing mealtime experience (**see area for improvement 2**).

### Quality Indicator 1.3: Play and learning

Children were engaged in their play and learning, as they extended and followed their own ideas and interests. They had access to a variety of resources both indoor and outdoors. Some staff modelled quality interactions and supported children's play and learning through high level questioning. However, this was not consistent and staff were often mainly focussed on the supervision of children within the environment. This had a negative impact on the opportunity for staff to be at children's height and engage in quality one-to-one uninterrupted interactions. As a result, we did observe some children who appeared lost, as they wandered aimlessly with very little or no interactions for long periods of time. Staff should be supported to strengthen their knowledge and understanding of the importance of quality interactions and the key role they have in supporting children's care, play and learning. **We have addressed this within an area for improvement in 'Key Question 4: How good is our staff team?'.**

The setting had just recently introduced a new planning format that was still in the very early stages of being developed and embedded. This meant that key aspects of the planning cycle still required further development to ensure that planning approaches were effective and responsive to children's interests and life experiences. Communication with families in relation to their children's learning required further development. One parent shared with us, "No feedback is given regarding anything from my child's day at nursery, certainly not involved in any way in my child's learning and development". This was recognised by the service, one staff member told us, "Parental engagement - again this is something the nursery staff are working towards improving". The service should continue to improve and develop a child centred planning approach, which recognises the importance of strong ongoing communication and shared learning with families. This would contribute to children's overall wellbeing and early learning experience (**see area for improvement 3**).

### Areas for improvement

1.

To ensure children experience continuity in their care, play and learning, the manager should develop an effective, personal planning approach. The manager should ensure each child has a personal plan that is consistent with their individual needs, this should include clear detailed support strategies for children that may require additional support. Staff should ensure that these plans inform their daily practice and are followed accurately. This would support children to feel understood and have their needs met by staff that recognise them as unique individuals.

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 ensure children experience meals served in a relaxed, calm, pleasurable and nurturing environment, the provider should further develop the lunchtime routine for children. The environment, location and setting should be well planned and promote a sense of belonging and support social interactions. This would contribute to children's overall health, safety and wellbeing.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible' (HSCS 1.35).

3. Outcomes for children should be improved through supporting staff to implement a child-centred approach to observation, planning and assessment of children's learning through play. Families should be fully informed about their children's progress and achievement, and what they can do to support it. This would contribute to positive outcomes for all.

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

## How good is our setting?

## 4 - Good

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

### Quality Indicator 2.2: Children experience high quality facilities

Children experienced a warm, welcoming environment. Natural light, neutral back drop colours and wooden furnishings supported the calm, relaxed atmosphere. Staff had been working hard to create inviting play spaces and continued to develop these as children settled into their new environment. Ongoing reflective discussions as a staff team had resulted in the continued development of individual play spaces. Staff should now focus on the detail within these spaces to further enhance the experience for children. For example, the quiet area downstairs could be further developed with cosy, soft furnishings and sound absorbing materials to soften the loud echo in this space. This would support children downstairs to have a cosy, small space to retreat to when they are feeling overwhelmed by the large busy space. The service was clearly committed to continuing this good work that had started. This would ensure that spaces reflect the needs and interests of the children.

Children were mostly choosing where they wanted to play and were freely moving between indoors and outdoors. It was positive to see the outdoor area being available to children throughout the inspection. Children had access to a mezzanine area which offered a different play experience and a quieter space to relax or sleep. However, this space was not open consistently and therefore not all children benefited from this area. The restrictions set within this area in relation to the number of children allowed in this space meant that some children were disappointed and were unable to access this area. This required further thought and development. Staff were already aware of this and continued to have reflective discussions around how they best supported children to benefit from this space. This would support children to experience predictability within their environment.

Risk assessments had been developed to support individual children where appropriate. We asked the service to ensure that these were up to date and being used by all staff as meaningful working documents. These should be reviewed and updated as children settle into their new environment, and as and when changes occur. This would support staff to feel confident within the space as they respond to children's individual needs and recognise them as capable, confident learners.

## How good is our leadership?

## 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

### Quality Indicator 3.1: Quality assurance and improvement are led well

The service was clearly committed and had begun to develop a culture of continuous improvement. One staff member told us, "All staff are striving to ensure the best outcomes for our children and families". We recognised that the service had been through a significant period of change. Throughout this time staff had continued to be committed to developing their practice and looking for opportunities to enhance the service. For example, visiting other settings to share good practice and bring this back to the service.

There had been changes to the leadership and staff team within the setting. One staff member shared, "We have a whole new leadership team and feel that we are working as best as we can to achieve the best for our learners". The management and leadership team had worked hard to implement a quality assurance system. Through ongoing self-evaluation and reflective discussions, the service had a clear understanding of where the service was within their improvement journey. However, we still did find gaps in practice that should be addressed by quality assurance and monitoring systems. For example, medication, personal plans, pastoral logs and observations. We acknowledged the service had been through a recent significant change and therefore, now required more time to embed these new processes. This would contribute to positive outcomes for all **(see area for improvement 1)**.

The service acknowledged that further work was required to ensure that children and families views were actively sought to inform the development of the setting. One parent shared with us, "Never been in the actual nursery to see toys/equipment etc other than the tour, not involved with improvements". The service should continue to develop creative ways to encourage family engagement and welcome the views of children and families. This would ensure that these views are used as a starting point for future improvements. This would contribute to children and families feeling valued and confident their views can influence the ongoing improvements within the service **(see area for improvement 1)**.

### Areas for improvement

1. To improve outcomes for all, the manager should ensure that an effective system of quality assurance is developed and implemented to monitor and improve practice. They should actively seek the views of children and families, these should be used to inform future improvements and bring about positive changes to outcomes for all.

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).

## How good is our staff team?

## 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

### Quality Indicator 4.3: Staff deployment

The leadership team had worked in partnership with the staff to build positive working relationships and supported staff wellbeing during this period of significant change. New staff had been supported by the whole team as they settled into their new role. One staff member told us, "A number of new staff have joined our team and feel they are fitting in well". Staff received and participated in regular support and supervision which enabled them to feel empowered. Staff wellbeing had been a recent focus by the leadership team and regular check-ins had been appreciated by staff and supported them to feel valued.

The service had appropriate staffing levels on both days of inspection. Staff shared that they were still developing how they deployed themselves effectively within the space to best meet the needs of children and ensure their safety. This meant that at certain times it felt that staff were focussed on being able to physically see all areas of the playroom and this distracted them from the opportunity to simply 'be' in the space and engage with children. Leadership should continue to support staff with staff deployment decisions and develop their confidence within the new environment. This would enhance children's interactions and overall experiences **(see area for improvement 1)**.

Arrangements for busier times of the day, such as mealtimes were ineffective to ensure staff could fully meet children's needs. For example, staff were continually getting up and down from lunch tables and due to the busy environment, they became task focussed at the latter part of the lunchtime experience. The service should ensure staffing levels are enhanced at busier times of the day to reflect and meet the needs of all children. This would contribute to children safety, wellbeing and overall early learning and childcare experience **(see area for improvement 1)**.

Staff training had predominantly focussed on mandatory training. Staff spoke about aspirations to develop their practice to better support children within the space. For example, some staff spoke about hoping to attend training to further develop their skills, knowledge and understanding of working with children with additional support needs (ASN). One parent told us, "I wish my child could have more attention from someone trained in ASN to help them progress". Moving forward, the service should develop a staff training programme to enhance the skills, knowledge and experience across the team. This would contribute to children being cared for by experienced, skilled staff that can respond to their individual needs **(see area for improvement 2)**.

### Areas for improvement

1. To support all children to experience consistent, quality interactions, the provider should ensure that staff deployment takes into consideration the space, routines and individual needs of children. Where required enhanced staffing levels should support busier times of the day. For example, mealtimes. This would contribute to children's safety, wellbeing and overall early learning experience.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

2. To support children's health and wellbeing, and further develop and strengthen the skills, knowledge and experience of the staff team. The manager should develop a targeted training programme to address any gaps in staff practice. This should take into consideration the findings from this inspection, leadership observations and assessments, along with staff's individual reflections and requests. Developing these skills will lead to positive outcomes and learning for the children in the service.

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).

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

## Detailed evaluations

How good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
1.3 Play and learning	3 - Adequate
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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