

St. Andrew's Nursery Class

Day Care of Children

St. Andrew's Primary School Nursery Class
Eastfield Road
Carrickstone, Cumbernauld
Glasgow
G68 0EB

Telephone: 01236 632 111

Type of inspection:
Unannounced

Completed on:
30 April 2025

Service provided by:
North Lanarkshire Council

Service provider number:
SP2003000237

Service no:
CS2003020175

About the service

St. Andrew's Nursery Class is registered to provide care for a maximum of 50 children from age three to not yet attending primary school. There are currently 48 children registered at the service. The service is part of St. Andrew's Primary School in Cumbernauld.

Care is provided from a detached building which is situated in the grounds of the shared campus of St. Andrew's and Cumbernauld Primary School. The service is situated close to shops, parks, transport links and other amenities.

About the inspection

This was an unannounced inspection which took place on 28 and 29 April 2025. Feedback was provided to the leadership team on 30 April 2025. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. As part of this inspection, we undertook a focus area. We have gathered specific information to help us understand more about how services support children's safety, wellbeing and engagement in their play and learning.

This included reviewing the following aspects:

- Staff deployment
- Safety of the physical environment, indoors and outdoors
- The quality of personal plans and how well children's needs are being met
- Children's engagement with the experiences provided in their setting.

This information will be anonymised and analysed to help inform our future work with services.

In making our evaluations of the service we:

- Spoke with children using the service and received feedback from 12 of their family members
- Spoke with staff and management
- Observed practice and daily life
- Reviewed documents
- Received feedback from two visiting professionals.

Key messages

- Most children were happy, settled and confident in the setting.
- Children experienced warm and kind interactions, supporting them to feel safe and secure.
- Personal plans gathered some information to help meet children's needs. These now needed reviewed to help ensure they contain more meaningful information to reflect children's needs, wishes and choices.
- Children benefited from daily access to outdoor play, supporting their physical development and wellbeing
- More toys and materials were needed across the setting to support high quality play.
- A review of the environment was needed to ensure children experience safe and clean play spaces.
- Children mostly experienced relaxing and sociable mealtimes. Consideration could be given to developing further opportunities to promote children's independence.
- Quality assurance systems should be strengthened to promote positive outcomes for children.
- Staff would benefit from further opportunities to help them develop their knowledge and skills to support them in their role to provide high quality care, play and learning.

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?	3 - Adequate
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.

Most children were happy settled and confident within the setting. They experienced kind and caring interactions, which helped them feel safe and secure. Parents told us "the nursery staff have shown care and compassion to my [child] who can now confidently walk into that nursery" and "my child is happy attending and comes home talking about [their] experiences."

Staff knew children well and were responsive to their needs, which supported their emotional wellbeing, this included providing comfort if they were unsettled. We discussed where more attention could be given to support children's personal care needs. For example, providing support to clean their face after eating and having a more flexible approach to support with intimate care. This would help promote children's overall wellbeing.

Personal plans were in place for children that contained some information to help meet their needs. This included health and medical information and arrangements for emergency contacts. Children with additional support needs had clear plans demonstrating how their needs would be met. Leaders had identified that personal plans needed further developed and were in the early stages of developing targets to support children's learning and development. In addition, more information was needed to help meet children's need's wishes and choices. A requirement was made at the last inspection in relation to developing personal plans, therefore this requirement has been extended.

Children experienced mostly positive and relaxing mealtimes. They enjoyed sitting with peers and chatted with their friendship groups, supporting their social development. One child told us "I love this lunch." Recent improvements by developing a 'rolling' lunch meant children chose to come for their meal when they were ready, which helped minimise disruption to play. However, there was scope for mealtimes to be developed further by providing opportunities to develop independence skills. Leaders agreed to take this forward, which would help provide a consistent approach for children.

Children accessed water easily, which helped ensure they were kept hydrated. Snacks were provided throughout the day, helping ensure children were not hungry. For example, toast and a variety of fruit. To support children's nutritional needs the lunch menu was changed on a three weekly rota. However, some children told us they did not like the lunch option. We discussed with the leaders about the potential to review menus and offer alternative options to help meet children's likes and preferences. Staff should review how they communicate with families sensitively about how well children have eaten, to help ensure they develop positive eating habits.

We reviewed systems in place to support the administration of medication. Medicines were stored appropriately and consent from families was in place. However, more detail was needed to ensure clear signs and symptoms were recorded to ensure there was a clear indication of when medicine needed to be administered. Systems should be developed to monitor the management of medication and ensure medical needs are reviewed with families every three months in line with guidance. An area for improvement was made at the last inspection and has been continued.

Quality indicator: 1.3 Play and learning.

Children benefitted from daily access to outdoors, supporting their overall wellbeing. They enjoyed playing hide 'n' seek and tig. Adults joined in with some games supporting children to have fun. They experienced relaxed routines helping to maximise opportunities for play. This supported children to follow their interest, choices and wishes. Children enjoyed spending time with peers and some had formed positive friendship groups, which supported their social skills. One child told us "I like playing with dinosaurs and playing with my friends."

Children had a variety of play areas to choose from which included, a home area, block-play and construction. Favourites included playdough and mark-making. However, we identified where many areas lacked sufficient toys and materials to support play opportunities. Consideration should be given to providing more high quality toys and materials across the setting to support children's play and learning. This would help stimulate their curiosity, imagination and creativity. Staff, children and families commented about the lack of resources. One child told us , "we need more sand; it's all ran down now" and parents told us they would like 'more toys' and "more activities for the kids."

Approaches to planning had recently been reviewed and staff had received training to support them to apply this in practice. New floor book systems were in place, which supported staff to respond to children's ideas. This was in the early stages and staff should continue to be supported to develop this approach to ensure it promotes high quality play.

Children's play experiences were shared with families through online learning journals. However, many families told us they would like more updates about their child's learning. Leaders acknowledged this was an area that could be improved and had plans to develop the quality of observations of learning. This will help staff record children's progress and identify next steps for learning. Parents told us "It would be good to have more updates on the app about what [my child] is doing in nursery" and "I can't really comment as I don't know much about what they do when in nursery. It is hard to tell as observations are not very regular."

Whilst staff joined in with children's play and supported them to have fun, there were missed opportunities to extend children's learning further. Staff would benefit from further opportunities to develop their skills, to support children's play and learning through high quality interactions.

Children benefitted from opportunities to visit parks and the allotments in the local area. This helped children develop positive connections with their community and supported their overall wellbeing. One parent told us "my [child] loves being outside and [they] really enjoy all the outdoor play and going to the allotment to see at the veg etc."

How good is our setting?**3 - Adequate**

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

Quality indicator: Children experience high quality facilities.

Families were welcomed into the setting, which promoted opportunities to build positive connections with staff and supported children's wellbeing. A spacious entrance offered children an area to store their bags and clothing. Children accessed their belongings and comforters when needed, which helped support their wellbeing.

Children benefitted from a large bright playroom. Recent changes to the layout of play spaces had helped create more space for play, for example, relocating the block play area and creating larger art area.

Whilst some materials met children's interest, for example, playdough, construction and mark making. We discussed that some play materials were not age and stage appropriate and further consideration was needed to increasing the volume, quality and presentation of toys and materials. This would help support children to independently lead their learning and develop their curiosities. This was reflective of what staff and parents told us and is discussed further under quality indicator 1.3 play and learning. One parent commented "the outdoor space is very small and not well resourced."

Some measures were in place to promote children's safety. This included a secure entrance and frequent updating of registers to help ensure children were accounted for. However, we identified where improvements were needed to help ensure children's safety. For example, removal or repairs to broken and worn fence panels and an outdoor shelter. In addition, the service had identified improvements needed to secure an exit gate to the school playground. This could be opened easily and there was the potential for children to leave the outdoor area through the school playground. Whilst staff were aware of the need for supervision of this area, it was difficult for them to always supervise effectively, and further measures were needed to make this safer for children. Leaders took steps to seek advice from their maintenance team before the end of the inspection (see requirement 1).

Some infection control practices promoted a safe environment for children and families, for example, handwashing before meals and general cleaning of surfaces. However, further measures were needed to prevent the potential spread of infection. Most furniture was old and tired, meaning this was difficult to clean. Attention was needed to play areas, toilets and furniture and fixtures (see requirement 1).

Children benefitted from free-flow access to outdoors supporting their play choices. Staff had recently changed the access door to outdoor play by using an alternative exit. However, this was the the process of being reviewed staff should continue to consider what best meets the needs of children. We found that the new access door had limited space and the area needed further development to ensure children's safety and create an appropriate space for them.

Some risk assessments were in place to help staff monitor and check for risks and staff involved children to think about their own safety. However, these needed further developed to include risks identified at this inspection to help keep children safe. An area for improvement was made at the last inspection, which will be continued.

Requirements

1.
By 14 August 2025, the provider must ensure children receive care in a clean, safe and well-maintained environment.

To do this, the provider must, at a minimum:

- a) ensure furnishings and fixtures are well-maintained
- b) ensure all spaces are clean and tidy
- c) address unsafe areas in outdoor spaces.

This is to comply with regulations 4(1)(a) and (b)(welfare of users) and 10(2)(b) and (d)(Fitness of premises) of the Social Care and Social Work Improvement Scotland (Requirements for care Services) Regulations 2011 (SSI 2011/ 210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment (HSCS 5.24).

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 well led.

There had been recent changes within the leadership team of the school and nursery. Staff were in the early stages of establishing clear roles and remits to help support improvements. They should continue to develop these roles and responsibilities to help ensure there is a strong ethos of continuous improvement within the nursery, which lead to positive outcomes for children.

Leaders engaged well throughout the inspection and welcomed discussions to help support improvement. They were committed to driving forward changes to make a difference to children. Leaders had identified many areas for development which reflected our findings throughout the inspection. They welcomed support from the local authority which had contributed to improving aspects of practice. This included, promoting a positive lunch experience, reviewing daily routines and improving approaches to planning.

Approaches to self-evaluation were in the early stages of being developed. Leaders recognised this needed to be strengthened to help ensure it promotes positive outcomes for children. Moving forward, the service should develop further ways to involve children and families in the meaningful development of the setting. Many families told us they did not currently feel involved in this process. Comments included "I don't have any involvement and don't know how I would" and "I haven't been asked on how to develop the service." We shared this with leaders, and they told us about plans in place to help address this. This included involving families with stay and play sessions and improving the quality of information recorded in online journals.

Some auditing and monitoring had led to changes in the environment. For example, organisation of play spaces and improving mealtimes. However, monitoring needed to be more effective and lead to positive changes across the setting. This would help ensure that improvements are embedded and sustained in practice, to help ensure children receive consistently high quality care, play and learning (see area for improvement 1).

Staff were aware of their roles and responsibility to help protect children's wellbeing through child protection procedures. Whilst we were confident that staff were knowledgeable about reporting and recording to relevant agencies to help keep children safe, there was an occasion where information should have reported to the Care Inspectorate. We shared further guidance around this process. We asked the service to update their child protection policy to reflect changes to guidance and reporting procedures.

Areas for improvement

1.

To support children's wellbeing, learning and development, the provider should ensure that quality assurance processes are improved and impact positively on outcomes for children and families. This should include, but is not limited to identifying and prioritising improvements needed and how they will be achieved, and ensuring they monitor the quality of provision across the service.

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) and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

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 service had recently experienced an unsettled period where there had been many changes within the staff team. Whilst most parents agreed that staff were friendly and approachable, many shared concerns that they did not feel there was always enough staff to meet their child's needs. We shared concerns raised with the leadership team and we were satisfied that a more consistent staff team was now in place, which helped ensure continuity of care for children.

Staff breaks were managed well, which helped to ensure minimal impact to children and allowed staff time to refresh and rest. Staff were deployed across different areas, which helped support children's play and ensure their needs were met. However, due to the layout of the play areas and outdoors, some spaces required more close supervision. At times this impacted on the quality of engagement as staff were focused on supervision. Children would benefit from more opportunities from staff being able to engage in play to support their learning.

Staff engaged well during the inspection and we could see they were happy in their role, which contributed to a positive ethos for children and families. They valued the relationships they had with parents and understood how this helped support children's overall wellbeing. Parents told us "I think the staff are all very welcoming and friendly. They're very caring towards my [child] and nothing is ever a bother for them. They genuinely care about [them] and "the staff are very friendly and approachable and my child enjoys attending the nursery."

Staff worked well and communicated effectively together. There was a mix of skills and abilities across the team and they welcomed opportunities for training to support them in their role. Staff spoke confidently about their recent training in the 'Solihull' approach. This provided time for staff to reflect together and improved their understanding to help them respond and provide support for children and families emotional wellbeing.

Staff felt well supported in their role and told us that leaders were approachable. Due to recent changes of leadership roles, opportunities for individual meetings with their manager had been inconsistent. However, plans were in place to provide opportunities for staff to discuss their professional development. Staff should continue to be supported to develop their skills and knowledge to provide high quality care, play and learning.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

In order to safeguard children the staff must follow the correct procedures in the event of a child protection concern. Staff must undertake refresher training to help them understand the importance of their role and responsibilities to safeguard children, management must ensure that updated training has been implemented by 28 June 2019.

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

It also complies with 4(1)(a) - Welfare of users and Regulation 15(b)(1) - Staffing of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This requirement was made on 31 May 2019.

Action taken on previous requirement

Staff received child protection training. This was completed on an annual basis and staff were aware of their roles and responsibilities to help keep children safe. Any concerns were reported to the relevant agencies. We discussed with leaders about ensuring that protection concerns are also shared with the Care Inspectorate through notification reporting. We shared guidance to support with this, which should be reflected in their policy.

Met - outwith timescales

Requirement 2

To ensure that only staff who are registered with the Scottish Social Services Council (SSSC) or another recognised regulatory body, or who are newly recruited and are capable of achieving such registration within six months of commencing in post, may carry out work in the care service in a post for which such registration is required, the provider must put in place an effective SSSC management system by 28 June 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I am confident that people who support and care for me have been appropriately and safely recruited"

(HSCS 4.24).

It also complies with (The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, SSI 2011/210 regulation 9(2)(c) which refers to the provisions of regulations 6(2)(a) and 7(2)(d) whereby any person, who in order to perform the duties for which the person is employed in the care service, is required by any enactment to be registered with any person or body and is not so registered; also regulation 15 - Staffing, and regulation 19 Offences, in particular regulation 19(1) which makes it an offence to contravene or fail to comply with regulation 9(1) together with and the Regulation of Care (Fitness of Employees in relation to Care Services) SSI 2009/118 (Scotland) (No 2) Regulations 2009 as amended by SSI 2009/439 and 2010/443.

This requirement was made on 31 May 2019.

Action taken on previous requirement

All staff were registered with the Scottish Social Services Council (SSSC) or another recognised regulatory body. The provider and manager had effective systems in place to monitor this.

Met - outwith timescales

Requirement 3

The service must ensure that personal plans in place were reviewed and updated at least once in every six months, or when there was significant change. Reflect children's individual care and wellbeing needs. Ensure that experiences on offer supported the needs and interests of individual children through better planning by staff and monitored regularly by senior staff, the service must put in place an effective management system by 2 September 2019.

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

It also complies with Regulation 5(1)(2)(a)(b) - Personal Plans of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This requirement was made on 31 May 2019.

Action taken on previous requirement

The service gathered some information when children joined the service to help meet their needs. For example, health and medical information. However, leaders identified that plans needed to be further developed to help meet children's needs, wishes and choices. These should be reviewed with families at least once every six months, or when there has been any changes to children's needs. Plans were in place to address this, and will be reviewed at the next inspection.

This requirement had not been met and we have agreed an extension until 12 September 2025.

Not met

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 ensure children are fully supported to achieve their full potential staff should continue to develop the use of observations and assessments to identify and plan for children's learning and development.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state "I am supported to achieve my potential in education and employment if this is right for me" (HSCS 1.27).

This area for improvement was made on 31 May 2019.

Action taken since then

Some progress had been made to support staff with their knowledge in observing and recording children's learning. For example, training about recording observations and using developmental trackers to support learning. Staff were in the early stages of applying this in practice and would benefit from further opportunities to support their skills and knowledge. **Therefore, this area for improvement has not been met.**

Previous area for improvement 2

The service should improve their medication procedures in line with current practice guidance. This is to ensure that care and support is consistent with the Health and Social Care Standards, which state "I experience high quality care and support because people have the necessary information and resources". (HSCS 4.27).

This area for improvement was made on 31 May 2019.

Action taken since then

Medication was easily accessible and consent forms were in place to support safe administration. However, more detail was needed to help ensure signs and symptoms were clearly recorded. This should be reviewed by families every three months in line with guidance. Procedures should be developed for auditing medication in the setting to help support children's health and wellbeing. **Therefore, this area for improvement has not been met.**

Previous area for improvement 3

The service should ensure risk assessments were reviewed and updated on an ongoing basis, to reflect current best practice. This is to ensure that care and support is consistent with the Health and Social Care Standards, which state "My environment is secure and safe" (HSCS 5.17).

This area for improvement was made on 31 May 2019.

Action taken since then

Whilst there were some general risk assessments in place to support with daily checks of the environment, we identified where risk assessments could be further developed to include further information about the environment and how risks are managed. **Therefore, this area for improvement has not been met.**

Complaints

Please see Care Inspectorate website (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?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.