

Law Primary School Nursery Day Care of Children

Law Primary School
Haddington Road
North Berwick
EH39 4QZ

Type of inspection:
Unannounced

Completed on:
30 May 2025

Service provided by:
East Lothian Council

Service provider number:
SP2003002600

Service no:
CS2003016988

About the service

Law Primary Nursery Class is registered to provide a care service to a maximum of 120 children from age 3 years to not yet attending primary school at any one time.

The service is provided by the local authority and operates for 48 weeks of the year.

The nursery is attached to Law Primary School, located the costal town of North Berwick, East Lothian. The nursery is located in a purpose built building. Children have access to playrooms, cloakroom area, kitchen/ serving area, toilets and an enclosed garden space. There is also a meeting area, staff and training room.

About the inspection

This was an unannounced inspection which took place on 26 May 2025 between 09:15 and 17:15. 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.

In making our evaluations of the service we:

- spoke with children using the service
- spoke with the senior leadership team
- reviewed online questionnaire feedback from staff and parents
- observed practice and children's experiences
- reviewed documents.

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; and
- 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.

Key messages

- Children were confident in the service and involved in their play and learning.
- The in and outdoor environments should be improved to ensure children consistently experience a safe and exciting environment that captures their curiosity.
- The provider should ensure the maintenance issues are carried out to ensure children are safe.
- The provider should ensure staffing arrangements within the service support strong relationships with children.
- The provider should implement a system for monitoring staff practice and carry out professional development reviews.

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 different parts of this key question as good and adequate, with an overall grade of adequate, where strengths only just outweighed weaknesses.

Quality Indicator 1.1: Nurturing care and support

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

Children were settled and familiar with the daily routine. Some children had developed strong friendships and were content when playing throughout the day. Most staff were caring and respectful, and some had formed close bonds with the children and families. We acknowledge that some staff were new to the service which impacted on how well children knew staff, however interactions between some staff and children were not of a high calibre. Some staff were overly task focused and did not always notice non verbal communication from children. This meant they did not always follow the child's lead or notice their cues.

Senior staff had supported positive changes to meal times for children. Children took part in a relaxed, well paced experience. Staff needed to ensure that the support they provided during lunch was consistent to ensure good supervision. Where possible the leadership team had taken account of parental views on the standard of meals and meal time experiences. Snack times provided children with the opportunities for independence and to develop self-help skills. They served their own food, poured their drinks and tidied up. The area for improvement we made around mealtimes is met.

Children's health, wellbeing and development should be supported by staff who have access to a range of information to help them meet children's needs. We refer to these as personal plans. There were inconsistencies within these plans as they did not always clearly identify support strategies for children that needed them. This meant staff did not always provide continuity and consistency in children's care. The majority of parents who responded to our questionnaire stated they had not been involved in reviewing their child's personal plan. Parents commented "There is no personal plan I'm aware of" and "Staff are so overworked and understaffed that there's been no feedback since December". The area for improvement around personal planning remains and is carried forward into this report (**area for improvement 1**).

Older children who were transitioning to school told us that they had been to visit and were excited about starting school. Transition to primary school had been well arranged and books and information for parents to enable discussion about the move to school had been used to enable children to share their emotions around this move. Although most children knew the routine in the playroom the transitions across the day were not always well supported. This resulted in some children being unsure of what came next or where they should be.

Children's general health and wellbeing was well supported through good procedures for recording and using information about individual allergies or intolerances. Where there were accidents or incidents these had been recorded and information shared with parents.

Medication was stored appropriately and paperwork contained further information around children's signs and symptoms. The service should review how they administered medication to ensure children were treated with respect and dignity.

Across the day there were staff changes and some staff did not know children as well as others. Systems had been developed to ensure that important information was shared in the staff group but at times staff were not observant enough or responding to cues which children gave. To strengthen safeguarding approaches the leadership team agreed to re-visit child protection as part of reflective practice discussions.

Quality Indicator 1.3: Play and learning

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

Most children were confident and keen to explore, investigate and take part in learning opportunities. However, this was not always supported by the resources on offer, the set-up of the playrooms or staff interaction. This meant children were not fully involved in their play and learning.

Children had access to the outdoor area for the majority of the day which provided them with choice of where to play. Some children were busy and used the resources available to them. However, thought needed to be given to the provision of literacy and numeracy indoors and outdoors. Areas for play needed to be attractively presented and resourced in a way to promote children's curiosity. Some staff supported children's learning well through discussion but there were many missed opportunities to extend children's learning through thoughtful interactions **(area for improvement 2)**.

The system in place for the planning of play and learning had recently been re-developed. Staff had taken part in an information session to help them understand and implement this new system. While there were examples of how staff had responded to children's interests it was clear that not all staff took responsibility for this. Planning was not being used effectively to support and extend children's learning experiences. Experiences needed to be consistently evaluated in order for staff to identify how learning could be progressed to the 'next step'.

The tracking of children's individual learning had been limited due to the lack of a secure and stable staff team. Staff have not had the time or capacity to record observations or next steps for children. This means that children's individual learning has not been challenged or progressed. Therefore, the area for improvement around supporting children to achieve their potential remains and is carried forward into this report **(area for improvement 3)**.

Areas for improvement

1. To support children's wellbeing, learning and development, the provider should ensure children's personal plans reflect their needs. This should include, but not be limited to, recording children's care and support needs and how these will be met in practice with effective support strategies.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 support children to be meaningfully involved in leading their play and learning, the quality of play experiences should be improved. This should include developing the provision for language, literacy and numeracy and supporting staff to develop their skills in effective questioning. This will help children to extend their thinking and consolidate their learning.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable to my age and stage, which stimulates my natural curiosity, learning and creativity' (HSCS 2.27).

3. To help children to achieve their potential, the service should ensure that an effective cycle of high-quality observations supports and track children's individual learning and development needs. This should include identifying relevant next steps and ensuring they are measurable and achievable.

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

'I am supported to achieve my potential in education and employment if this is right for me' (HSCS 1.27).

How good is our setting?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Quality Indicator 2.2: Children experience high quality facilities

Staff positioned themselves at the entrance of the building, which meant there were systems in place to monitor and supervise children arriving and leaving the setting. The environment had some homely touches, soft furnishings and furniture appropriate for the ages of children. There was enough space for children to play and some moved confidently within play areas available. A parent commented "I think the environment and size of the place does not lend itself to create a warm and nurturing environment or opportunity for staff to provide this to their fullest".

The setting is a large, standalone building with it's own enclosed outdoor play area. The Care Inspectorate had been notified of instances where children's safety and wellbeing had been compromised due to potentially unsafe items being left in children's bags. The service had implemented new procedures for storage of children's belongings to try and mitigate this risk.

Some of the maintenance issues which had a direct impact on children's safety had not been fully addressed. This included making a side gate secure. The internal doors had an additional high handle added, however, the self-closing locks did not always close. We have requested that the provider and manager should carry out any outstanding maintenance issues, including securing the side gate. To ensure children's safety and security while attending the service (**Requirement 1**).

The indoor and outdoor play spaces included some provision of resources that encouraged children to be imaginative and curious about their world. The outdoor area promoted children's health and wellbeing and they accessed the area for the majority of the day. It provided an attractive space for running, climbing and there was a range of wheeled toys. However, some children were bored and did not engage in the environment or the activities on offer. The environment, activities and resources did not always promote sustained or meaningful play experiences for the children. Some staff did not have the enthusiasm or imagination to make the environment a place of wonder and excitement. Staff should be supported to develop opportunities for sustained play and learning that promote fun, choice and confidence (**area for improvement 1**).

Children were encouraged to wash their hands before eating. We did not see children routinely washing

their hands after coming in from outside and have asked that staff monitor this. Some resources need cleaned. Staff needed to ensure that items stored in nappy change and toilet areas were kept in containers which closed properly to ensure that infection prevention and control was effective.

Requirements

1. By 04 August 2025, the provider must ensure children's health, welfare, and safety. To do this, the provider must, at a minimum ensure:

That areas identified through the risk assessment process as posing a risk to children's safety are addressed.

This is to comply with Regulation 4 (1) (a) (Welfare of Users) 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: 'My environment is safe and secure' (HSCS 5.17)

Areas for improvement

1. To further support children's interests, development and learning, the service should continue to develop the environment and play spaces. Staff should evaluate the spaces to ensure the resources on offer provide opportunities that spark curiosity and reflect children's current interests. This will ensure children engage in more purposeful play and learning.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity.' (HSCS 2.2)

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Quality Indicator 3.1: Quality assurance and improvement are led well

An improvement plan was in place and had been created with support from the Local Authority. This addressed key areas for improvement identified during the previous inspection. A floor book provided insights into ongoing improvements which included, children's lunchtime experiences, improvements to personal planning, medication and planning for play. The plan should continue to be reviewed and embedded to support the ongoing health, wellbeing, and safety of the children.

We found leaders and a core group of staff were working hard. Leaders had identified where support was required in quality assurance systems. However, issues with staffing often required the leadership team to be included in the staff ratio to support children. This impacted on the pace and progress of improvements and on children's experiences and outcomes. Staff told us that they welcomed the support that had been

put in place by the Local Authority. However, they were concerned once this was removed the limited amount of improvement that had been made, would not be sustained. Further targeted work was necessary to build on these positives and tackle ongoing challenges. This focused effort would ensure children would benefit from high-quality care and learning, even when facing difficulties like staff changes.

We understand that there has been limited opportunities for staff to meet to discuss what improvements are needed or take part in professional practice discussions. We acknowledge that staff have been attending staff meetings. However, it has not been regular enough to ensure staff were meaningfully involved in changes and improvement targets. Further opportunities should be implemented to provide staff with the time to reflect together, this would allow time for staff to influence change and improve outcomes for children and families.

Parents told us that they were not involved in the service. However, they were welcomed into the service at collection and drop off times, whilst staff provided brief feedback at the end of the session. Further communication was provided through a parent information evening, through the parent council and regular newsletters from the school and the nursery. The service should continue to ensure the views of families lead to service improvement.

We found that opportunities for the children to be included in the service were limited. Planning was at the early stages of being embedded and understood by staff. There were no opportunities for children to influence the pace of the session or have choices apart from basic indoor or outdoor play. No individual observations or tracking was in place, meaning, children were not active participants in their learning (**area for improvement 1**).

Areas for improvement

1. To support children to be meaningfully involved and influence change in the service. The children's voice should be actively sought, recorded and responded to effectively. This would support children to be active participants in their learning and the development of the wider service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable to my age and stage, which stimulates my natural curiosity, learning and creativity.' (HSCS 2.27.)

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 minimum adult to child ratios were met on the day of inspection. However, there have been times when the service was not sufficiently staffed to consistently meet the needs of all children. We found a reliance on supply staff, leaders were included in the ratio's and some core staff doing overtime. There were also times when the setting has had to ensure children's safety and close early due to lack of appropriate staff numbers. This meant that the service did not always fulfil their commitment to provide appropriate funded childcare hours. Parents commented "The nursery has been closed at short notice on a number of occasions" and "Nursery closures due to staffing issues".

The recruitment difficulty and staff capacity to make improvements was a major factor in the quality of service provided. Parents commented "They have lost a lot of staff since the end of last year. Very concerning why so many left at the same time. New starts have also left" and "Sort staffing out and support good staff members". Others stated "The girls who work in the room are amazing and should be fully praised. They deserve the very best for the work they do especially over the past 5 months" and "I have a great relationship with staff. They are mostly wonderful people who care deeply for the children". The provider should assess the current staffing situation and develop a plan to ensure they have permanent staff with the appropriate skills, knowledge and expertise working in the setting. This would improve outcomes for children **(Requirement 1)**.

Interactions between adults and children were positive overall. Parents commented "The staff are lovely and very friendly however it would be better with more consistency" and "My child's key worker is brilliant; so kind and approachable. It is really helpful feeling there is an obvious touch-point for any discussion points relating to my child's day-to-day". Staff were polite to each other, but there was limited interaction between them. They indicated that staffing had been difficult over the past few months and felt that children did not always get the support they needed. One commented "we need more support from management and we really need to get a full core staff as it's been very difficult some days with only a few core staff and mostly supply". Some staff were tired and appeared to lack enthusiasm, and some seemed to have adopted 'a heads down approach', where they only dealt with the children directly around them. At times this meant that children's safety, wellbeing and learning needs were being missed. Staff needed to be more vigilant and aware of what was going on around them **(Requirement 1)**.

Professional development reviews had not been carried out. These should be carried out as a matter of priority to ensure staff have the essential skills, knowledge, and confidence to support their ongoing development needs. In house training had been provided, but the leadership team have found that this was not being pulled through to staff practice. There were many opportunities provided for staff to upskill themselves. This included a range of training options on the learning base provided by the Local Authority and good practice documents which had been shared. Staff meetings and training on inset days, had been developed to address the improvements needed to support better outcomes for children. In order for staff practice to improve, there must be a clear and consistent process for monitoring and supervising staff. This would assist in identifying areas of strength and any training needed to support improvement **(Requirement 1)**.

Staff reported feeling supported by the quality and excellence lead (QEL) with the early years team provided by the Local Authority. They commented "QEL been amazing at checking in with us all individually and is genuinely interested in how we are all" and "QEL asks every morning how we are but I feel once they leaves it will go back to how it was before where your just left to get on with it no matter how you feel". This indicated that staff staff's wellbeing and morale was mixed. The service should continue to engage staff in helping build solution focused approaches to challenges that they identify.

Requirements

1. By 04 August 2025, to ensure that children's care and support needs are met, the provider must ensure staffing arrangements are effective to meet the needs of all children in the service. To do this, the provider must, at a minimum:

a) Assess the current staffing situation and develop a plan to ensure they have consistent staff with the appropriate skills, knowledge and expertise working in the setting.

b) Professional development reviews should be undertaken to ensure staff have a clear understanding of their roles and responsibilities to ensure consistent and effective high-quality practice.

This is in order to comply with section 7(1)(a) of the Health and Care (Staffing)(Scotland) Act 2019.

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

'My needs are met by the right number of people' (HSCS 3.15).

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's wellbeing, learning and development, the provider should ensure children's personal plans reflect their needs. This should include, but not be limited to, recording children's care and support needs and how these will be met in practice with effective support strategies.

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

This area for improvement was made on 14 November 2024.

Action taken since then

Children's health, wellbeing and development was not always supported by the range of information held within individual personal plans. There were inconsistencies within these plans as they did not always clearly identify support strategies for children that needed them. This meant staff did not always provide continuity and consistency in children's care.

This area for improvement was not met.

Previous area for improvement 2

To support children's health and wellbeing, the service should review the mealtime arrangements and ensure staff provide a well-paced and positive social experience for all children.

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 mealtimes in as relaxed an atmosphere as possible' (HSCS 1.35).

This area for improvement was made on 14 November 2024.

Action taken since then

Improvements had been made to meal times for children. Children took part in a relaxed, well paced experience. Snack times provided children with the opportunities for independence and to develop self-help skills. They served their own food, poured their drinks and tidied up.

This area for improvement is met.

Previous area for improvement 3

To help children to achieve their potential, the service should ensure that an effective cycle of high-quality observations supports and track children's individual learning and development needs. This should include identifying relevant next steps and ensuring they are measurable and achievable.

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

'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 14 November 2024.

Action taken since then

The system in place for the planning of play and learning had recently been re-developed. We found that the planning cycle was not being used effectively to support and extend children's learning experiences. Experiences should to be consistently evaluated in order for staff to identify how learning could be progressed to the 'next step'.

The tracking of children's individual learning had been limited due to the lack of a secure and stable staff team. Staff have not had the time or capacity to record observations or next steps for children. This means that children's individual learning has not been challenged or progressed.

This area for improvement is not 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

How good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	4 - Good
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

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