

Blossom Day Nursery Day Care of Children

15 b/c Bath Street Edinburgh **EH15 1EZ**

Telephone: 01316 572 233

Type of inspection:

Unannounced

Completed on:

24 July 2025

Service provided by:

Joan Finlayson trading as Blossom Day Nursery

Service no:

CS2003012071

Service provider number:

SP2003002966



About the service

Blossom Day Nursery provides a day care of children service. The service is registered to provide a care service to a maximum of 22 children at any one time, age from 0 to 8 years, of whom no more than 9 children may be less than 2 years of age. During the inspection there was a maximum of 16 children attending the service each day.

The service is situated in the residential area of Portobello in the city of Edinburgh. The service is close to local amenities including parks, shops, the library and the beach.

The accommodation comprises of one large playroom for older children with direct access to the enclosed garden. The main area of the garden is located above street level and is accessed via a ramp. The youngest children and babies have their own playroom, which includes a small outdoor area. There are toilet and nappy changing facilities, a cloakroom and an office space within the building.

About the inspection

This was an unannounced inspection which took place on Monday 21 July 2025 between 13:55 and 17:55 and Tuesday 22 July 2025 between 08:50 and 17:20.

The inspection was carried out by two inspectors from the Care Inspectorate.

This service was subject to an Improvement Notice that was issued on 20 March 2025. We carried out monitoring visits on 30 April 2025 and 30 June 2025 and completed a full inspection on 24 July 2025. The improvement had been met. For further details of this enforcement see the service's page on our website at www.careinspectorate.com.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, enforcement 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 and three parents onsite
- received 10 completed online questionnaires from families
- spoke with staff and management
- · observed practice and daily life
- · reviewed documents
- spoke with visiting professionals.

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.

Key messages

- Significant improvements had been made to the decoration and maintenance of the service. As a result, children experienced a safer, welcoming, child centred environment.
- · Children were supported by warm staff who knew them well.
- Outcomes for children and families were positively impacted through improved quality assurance processes, including improvement planning.
- Effective leadership resulted in improvements being made to many aspects of the service.
- To ensure children's care needs were consistently and sensitively met, some aspects of staff deployment needed to improve.
- Improvements were needed to mealtimes to ensure children were effectively supported throughout this daily experience.
- The service should continue to develop and embed a focused and effective approach to developing staff skills, knowledge and competencies.

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?	4 - Good
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. While the strengths had a positive impact, key areas need to improve.

Quality indicator 1.1: Nurturing care and support

Since the last inspection, staff had developed and strengthened their practice in relation to supporting and nurturing children's individual needs. Staff were calm and respectful when engaging with children. For example, they invited children into tasks such as personal care and daily transitions. This supported children to feel valued and included. Overall, the atmosphere in the service was welcoming, calm and supportive. As a result, children were secure and engaged in their daily experiences.

Children's health was promoted as snacks provided by the service were healthy and balanced. Children were hydrated throughout the day as they had consistent access to their own water bottles and drinks at mealtimes. Overall, children ate at their own pace in a safe environment. However, there were some inconsistencies in the quality of mealtimes. For example, while staff were present, they did not always sit with children. On a few occasions they became focused on other tasks related to the mealtimes. As a result, there were gaps in the supervision of older children and missed opportunities to support the social aspects of mealtimes. To ensure children experience consistently positive outcomes, the service should develop the mealtime experience in line with good practice guidance (see area for improvement 1).

Children and families were supported by staff who knew them well and listened to their individual preferences, needs and wishes. When asked what they liked about the service, one parent said, "A very welcoming reception every morning and a good summary of the day at pick up. We love that it's a small team, which means we know everyone, and they're all really warm and caring."

While staff knew children and families well, improvements were needed to children's personal plans and the recording of support. The service had begun to review the approach to personal planning and were beginning to make some changes to the format of personal plans. This enabled staff to gather more relevant information about children and their needs. Further work was needed to ensure personal plans promoted and recorded the holistic needs of all children. This would include ensuring personal plans outline the supports children need and how staff will fulfil these needs. Where children required additional support, the service should ensure effective personal planning approaches support staff to understand and implement tailored strategies. Personal plans should reflect the holistic needs of each child and enable staff to support them to experience consistently positive outcomes (see area for improvement 2).

Children's health and wellbeing was supported as staff were familiar with children's medical and health care needs. Staff were aware of how children may present in the event of a medical need arising. This helped to ensure children were safe and supported. There were effective systems in place for safely storing medication and for reviewing plans with parents. We highlighted a few inconsistency in the health care plans for some children. The manager was receptive to this feedback and agreed to address the issues. Moving forward, the service should continue to strengthen the monitoring systems in place for medication to ensure any issues can be swiftly identified.

Quality indicator 1.3: Play and learning

Overall, children were engaged and happy in their play. Staff supported children's play and learning by showing genuine interest and enthusiasm. For example, at various times throughout the inspection visits staff engaged in role play and games with children. Staff made time for stories and songs through play and as part of daily routines. These experiences promoted close attachments and supported children's communication and language skills.

Some staff narrated children's play, helping them to make sense of their ideas and experiences. For example, in a role play situation the staff member posed questions and made suggestions that enabled the child to engage in a sustained period of meaningful play. At other times, staff missed opportunities to extend learning through meaningful discussions and responsive actions. To further improve play and learning experiences, children would benefit from all staff further developing their skills using effective questioning in learning.

Children's play and learning was promoted as staff provided developmentally appropriate experiences. For example, babies had lots of opportunities to explore sensory materials indoors and outside. The improved experiences and activities available provided children with greater choice. As a result, children were engaged and having fun. One parent said, "The children do many indoor and outdoor activities and I like that my child plays in the garden as much as possible."

The range of open-ended materials had improved. This supported children to be creative and sparked their natural curiosity. For example, children enjoyed exploring dough using bobbins, pinecones and lollipop sticks. Real-life items across the play spaces supported children to develop their play ideas. There were opportunities to enhance the outdoor experiences within the garden and further embed literacy and numeracy opportunities across all play spaces. For example, providing more opportunities for early mark making and providing greater opportunities for children to count and sort through daily experiences. To further build on the improvements, staff should continue to develop experiences to offer greater levels of challenge and intrigue for all children.

Planning approaches related to children's play and learning were developing. Staff planned some experiences based on children's needs and interests. For example, a recent interest in holidays gave children opportunities to talk about their experiences and engage in small world play related to this interest. However, planned experiences and responsive planning should be further developed as at times the experiences were not personalised and lacked depth. The manager had identified this as an area for improvement and was supporting staff to develop their understanding of child development theory and planning for play and learning. Further work to develop and embed meaningful and effective planning approaches for play and learning should continue (see area for improvement 2, in 'What the service has done to meet any areas for improvement we made at or since the last inspection).

Areas for improvement

1. To promote children's wellbeing, the provider should improve mealtime experiences. This should include but not be limited to, ensuring staff consistently sit with children to improve supervision and interactions.

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

2. To support children's wellbeing and development, the provider should ensure personal planning approaches are developed to ensure they set out how children's individual needs will be met.

This should include, but not be limited to, ensuring personal plans:

- are regularly reviewed with children and parents,
- are kept up to date to reflect children's current needs, wishes and choices,
- outline strategies of support to aid children's care, play and learning needs.

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).

How good is our setting?

4 - Good

We evaluated this key question as good as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children's experiences.

Quality indicator 2.2: Children experience high-quality facilities

Outcomes for children had improved because of the significant improvements made to external and internal parts of the service. The provider, with the support of the manager and staff conducted a programme of refurbishment and maintenance. As a result, children were cared for in a safe and comfortable environment. One parent said, "Management has taken on board the feedback from inspections and has made remarkable changes to the environment."

Internal refurbishments included fresh paintwork, new flooring and upgraded toilets and changing areas. These facilities were in a good condition making them easy to clean and maintain. New furniture, soft furnishings, and improved resources supported children's overall wellbeing. Children enjoyed playing with developmentally appropriate toys, resources and materials, which met their needs and preferences. One parent told us, "The nursery setting is small and homely. The nursery itself has undergone a refurbishment which looks great." Overall, children experienced a welcoming, interesting, child centred environment.

Garden areas were organised, repainted, and re-equipped with interesting materials and more natural resources. A new mud kitchen and sand area provided children with opportunities to explore and create. The manager and staff were committed to further enhancing all areas of the environment, including the garden. The ongoing plan for refurbishment and improvement should continue to ensure children experience consistently positive outcomes indoors and outside. For example, the outdoor cabin could be used as a beneficial learning area where children could play, explore, and relax.

The manager and provider had developed effective ongoing maintenance systems. As a result, the service was clean and well-maintained. Staff followed effective cleaning practices, helping to reduce the risk of infection. Checklists and audits supported safety and helped to improve the overall environment. For example, audits considered the cleanliness of the service and the quality of play spaces. Staff worked well together to identify and remove risks to children within the service. For example, staff removed damaged items as needed and tidied areas to prevent injuries. To further embed good practice, the manager should ensure checklists and risk assessments are further developed and reviewed over time to ensure they consistently cover key aspects of safety and wellbeing.

Children's safety was promoted as the building was secure. Staff were vigilant to who was arriving and leaving the service. Staff ensured children were accounted for when moving around the spaces and into the garden areas. Overall, staff practice provided supervision and promoted children's safety. We discussed mealtimes with the manager and highlighted where enhanced support and supervision would be beneficial. The manager was receptive to this feedback (see Key Questions: 'How good is our care, play and learning?' and 'How good is our staffing?'.

How good is our leadership?

4 - Good

We evaluated this key question as good as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children's experiences.

Quality indicator 3.1: Quality assurance and improvement are led well

Since the last inspection, the service had made significant improvements. An Improvement Notice that was issued on 20 March 2025 was met. As a result, outcomes for children were more positive and the quality of the service was improving. For further details of this enforcement see the service's page on our website at www.careinspectorate.com.

The manager and staff team had a clear and positive vision for the service, which focused on enhancing outcomes for children and families. Staff felt supported and listened to, which enhance their commitment in relation to improving the service. With the manager's support, they worked well together to reflect on the strengths of the service and what still needed improve. Strong leadership supported well-informed improvements. One parent said, "The improvements in the nursery recently have been fantastic for the children. Another parent shared, "We are so pleased with the progress the manager has made with Blossom."

The manager and staff were focused on involving parents and children more in shaping the service's vision, values and aims. For example, parents were being actively invited into the service to see the improvements and speak with staff. One parent told us, "The past few months we have been encouraged into the setting more and it's lovely to see the improvements." To promote ongoing improvements, the service should further develop the approaches to engaging parents, children and other stakeholders in the development of the service.

The nursery's improvement plan was clear and focused, which meant improvements were made at the pace required to meet the needs of the service. A detailed and well-informed action plan resulted in children experiencing a safe and comfortable environment. A focus on staff support and development within the improvement plan had enabled staff to enhance their practice and skills. These improvements supported children's wellbeing and promoted staff competencies. Moving forward, to aid continuous improvement, the provider, manager, and staff should continue to evaluate the service using good practice guidance to benchmark quality and inform further improvements.

A sense of ambition for the service was developing as the approach to quality assurance and improvement were led well. The manager was developing an effective and consistent approach to quality assurance. This included audits, checklists, training plans, practice observations, and regular meetings. Many of these processes had a significant impact on continuous improvement. For example, the systems in place to quality assure the environment were overall effective. Moving forward, the provider, manager and staff should review the quality assurance processes in place to embed those that are supporting improvements, while further developing other processes to aid continuous improvement.

How good is our staff team?

3 - Adequate

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

Quality indicator 4.3: Staff deployment

Staff were kind and caring, which contributed to a warm environment for children. Effective arrangements for managing planned and unplanned absences supported children's wellbeing.

The provider had employed additional staff who could cover as needed. This meant children were cared for by familiar adults.

Improvements to the mix of staff skills and experience had a positive impact on outcomes for children. For example, improvements had been made to the quality of play experiences because staff had developed their skills in this area through training and guidance. The manager was aware that staff needed to continue to develop their skills, knowledge and confidence to further improve outcomes. For example, children would benefit from staff further developing their skills in promoting learning and development. To ensure staff have the right skills to consistently meet all children's needs, the service should continue to develop and embed a focused and effective approach to developing staff skills, knowledge and confidence (area for improvement 1).

The guidance and support given to staff was positive and directly improved outcomes for children, families and staff. Staff spoke positively about the guidance and learning they received from the manager and each other. Induction procedures were robust and effective, supporting staff as they settled into their new roles. Staff had developed their knowledge and confidence because of the encouraging and nurturing leadership provided by the manager.

Effective teamwork supported children's care and created a relaxed atmosphere. Staff communicated well with each other throughout the day. For example, as children moved between indoors and outside or when children needed support from additional adults. This impacted positively on the wellbeing of children and staff. However, there were times when staff deployment needed to improve. While staff to child ratios were maintained and many parts of the day were managed well, on a few occasions at busier times of the day deployment was not always led by the needs of the children. For example, there were some children who required one to one support as they settled in or transitioned to different experiences. At these times, the support for children did not always remain consistent. The manager stepped in to support staff during these periods but due to shift patterns this support would not always be available. Also, during some mealtimes for older children staff became task focused. This meant these mealtimes were not always as positive and social as possible. To ensure children experience consistently positive outcomes, the provider and manager should continue to review staff deployment to ensure staffing levels and decision making always reflects the needs of children (see area for improvement 2).

Areas for improvement

1. To ensure children experience consistently positive care and support, the provider should further develop and embed a focused and effective approach to improving staff skills, knowledge and confidence.

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

2. The provider should ensure planning for staff deployment consistently promotes positive outcomes for children. This would include, but not be limited to, ensuring busier times of the day are planned with an outcome-focused approach.

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

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

Requirements

Requirement 1

By 29 July 2024, to promote the wellbeing of children, the provider must ensure that staff receive targeted learning and development opportunities that enable them to develop the skills, knowledge and competencies needed.

To do this the provider must at a minimum:

- a) identify what learning and development is required for individual staff and plan for learning to be undertaken,
- b) ensure any staff with current conditions placed on any professional registrations are supported and monitored in order to enable them to meet these conditions,
- c) implement quality assurance systems to evaluate the effectiveness of learning and development opportunities and ongoing competency of staff.

This is to comply with section 8(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: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This requirement had not been met and we have agreed an extension until 11 July 2025

This requirement was made on 19 April 2024.

Action taken on previous requirement

Staff received targeted learning and development opportunities that enabled them to develop the skills, knowledge and competencies needed. This supported children's overall wellbeing.

The manager conducted staff support meetings, undertook practice observations and developed an audit of previous staff training. Since the last inspection, staff had undertaken a variety of training opportunities in relation to key aspects of children's care. This included child protection, food hygiene, infection control, environmental safety and play and learning. The manager also gave in-house training and advice, which helped staff improve further.

Staff received support to maintain their professional registrations. The manager regularly checked these registrations and made sure new staff joined an appropriate regulatory body within the required time. Children were looked after by staff who were committed to improving their skills and knowledge.

Quality assurance processes to assess the effectiveness of staff learning and development opportunities were in place. The manager used training reflections, team meeting discussions, and practice observations to help evaluate staff practice and plan future learning. For example, during reflective discussions, several long-term staff members felt they would benefit from reviewing parts of the new induction programme to refresh and strengthen their knowledge. The manager provided this opportunity with a whole staff induction session. As a result, staff were more confident and children's care was improving.

The improvements made in relation to this requirement had a positive impact on outcomes for children, families and staff. Moving forward, the service should continue to develop and embed a focused and effective approach to developing staff skills, knowledge and competencies. To support continuous improvement, we have made an area for improvement in relation to staff learning and development. (See area for improvement 1, within 'Key Question 4: How good is our staffing').

Met - within timescales

Requirement 2

By 03 February 2023, the provider must implement robust quality assurance processes covering key areas of practice.

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

- a) implement safety and wellbeing checks for environment,
- b) carry out monitoring of staff practice and deployment,
- c) carry out monitoring of children's care, play and learning experiences,
- d) ensure effective and realistic planning to address any issues found.

This is to comply with Regulations 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, 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This requirement had not been met and we have agreed an extension until 11 July 2025.

This requirement was made on 19 December 2022.

Action taken on previous requirement

Overall, the quality assurance processes covering key areas of practice had developed. This resulted in children, their families and staff experiencing improved outcomes.

Children's safety and wellbeing was promoted through regular checks of the environment, effective maintenance systems and improved staff practice. Significant improvements had been made to how the service promoted children's safety.

The provider and manager used forward planning to assess staffing levels and monitor the staffing needs of the service. The manager had a visual presence in the setting meaning they could monitor deployment and provide guidance and support. However, at times, busier periods of the day and staff decision making in relation to tasks and deployment needed to improve. Therefore, the provider and manager should continue to focus on the quality of staff deployment to ensure children's care is consistently positive (see area for improvement 2 within 'Key question 4: How good is our staffing?').

The quality of children's play and learning experiences had improved because processes to monitor children's care, play, and learning were developing. Playroom audits and practice observations supported improvements to play spaces and children's experiences. Through these quality assurance processes the manager and staff identified improvements and made changes. As a result, children had more opportunities to engage in stimulating play experiences related to their needs and interests. Staff practice observations by the manager supported the monitoring of children's care. For example, the manager conducted observations of mealtimes and personal care. While we found improvements were needed to mealtimes, overall, since the last inspection staff practice had improved as the manager monitored this and provided feedback and quidance to staff.

Overall, effective quality assurance processes were being developed and implemented. We discussed with the manager some areas of quality assurance that should be further developed. For example, in relation to monitoring the effectiveness of personal plans and improving mealtime experiences. During the inspection, the staff and manager were receptive to this feedback and professional discussions, indicating a capacity to make further improvements over time. Moving forward the manager, staff and provider should continually review the processes in place, and embed those that are supporting improvements while further developing other processes that will aid continuous improvement.

Met - within timescales

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 improve outcomes for children in line with current good practice and to support the service to address required improvements, the provider should develop a clear and robust improvement plan.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 19 April 2024.

Action taken since then

Clear and robust improvement plans supported positive changes to be made. A detailed and well-informed action plan for refurbishment had positively impacted on the safety and wellbeing of children. An additional improvement plan related to the requirements and areas for improvement was implemented and updated over time. Through effective improvement planning, the provider, manager and staff had a clearer vision for the service.

This area for improvement has been met.

Previous area for improvement 2

To support the quality of children's play and learning experiences, improved approaches to planning for play and learning should be developed and implemented.

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

This area for improvement was made on 19 December 2022.

Action taken since then

Staff were developing the approach to children's play and learning but further work was needed to improve the quality of planning related to play and learning.

Children's learning, progress and next steps in learning were beginning to be considered, recorded and planned for. Floor books were introduced and the manager supported staff to understand how these could be used to support planning and enable children to record and reflect on their own learning over time. Staff used floor books and an online platform to record observations of children's experiences and learning. Observations of children's learning and development were developing but were inconsistent in quality. They did not always identify significant learning or plan meaningful next steps. As a result, there were missed opportunities to effectively plan for and support children to make progress.

A number of parents said they would like more information on their child's learning and development over time and would welcome more updates to the online platform.

To ensure all children were supported with sufficient levels of learning and challenge, further work was needed to develop the approaches to planning for play and learning

This area for improvement has not been met.

Previous area for improvement 3

To support children's play and learning experiences, the provider should improve the environments and the resources available to children. This would include but not be limited to; ensuring areas are appropriately resourced, developing cosy and comfortable spaces for children to relax and play, adding open-ended materials and ensuring resources reflect children's interests.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: '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) and 'If I experience care and support in a group, I experience a homely environment and can use a comfortable area with soft furnishings to relax' (HSCS, 5.6).

This area for improvement was made on 19 December 2022.

Action taken since then

As result of improvements made to the environment and resources, children were interested and motivated in their play.

The development of the internal environments made spaces more comfortable and relaxing for children.

Core experiences such as sand, water, crafts, dough, construction, mud kitchens and role-play were available, providing children with greater choice and promoting independence. The introduction of open-end materials helped to promote children's creativity and natural curiosity.

Children experienced a child-centred, welcoming environment, which promoted improved play and learning experiences.

This area for improvement has been met.

Previous area for improvement 4

To support children to experience positive care and support, improvements should be made to the support and guidance provided to staff. This would include but not be limited to developing the approach to staff inductions to ensure they include opportunities to provide guidance, enhance staff knowledge and monitor practice.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14).

This area for improvement was made on 19 December 2022.

Action taken since then

Significant improvements were made to the guidance and support given to staff, particularly by the manager but also to each other as colleagues. Through effective leadership approaches, staff felt motivated to develop their skills and improve outcomes for children.

An improved approach to ongoing support and inductions helped staff enhance their knowledge, while allowing the manager to monitor practice. Inductions were structured and supportive giving staff the opportunity to ask questions, receive guidance and build confidence. As a result, children were experiencing improved levels of care and support.

Some gaps remained in staff skills and knowledge but effective support arrangements were enabling the manager and staff to plan better for ongoing learning and development.

This area for improvement has been met.

Complaints

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

Detailed evaluations

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?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good

How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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