

# Musselburgh Private Nursery Day Care of Children

17-21 Bridge Street  
Musselburgh  
EH21 6AA

Telephone: 01316 532 714

**Type of inspection:**  
Unannounced

**Completed on:**  
15 August 2025

**Service provided by:**  
Musselburgh Private Nursery Ltd

**Service provider number:**  
SP2008009813

**Service no:**  
CS2008177160

## About the service

Musselburgh Private Nursery is an early learning and childcare setting situated in a residential area of Musselburgh, close to local transport links, shops and community services. The setting is registered to provide a care service to a maximum of 56 children from three months to entry to primary school age.

The setting is provided from a one storey property. Each of the three age groups have separate playrooms. Preschool children have direct access to an enclosed rear garden which is shared with all ages.

## About the inspection

This was an unannounced inspection which took place on Tuesday 12 August 2025 between 09:30 and 16:00 and Thursday 14 August 2025 between 09:30 and 14:30. The inspection was carried out by one inspector 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 attending the setting on the day of inspection
- received online questionnaires from 26 families
- spoke with staff, management and provider
- received online questionnaires from eight staff
- observed practice and daily life
- reviewed documents.

## Key messages

- Staff interactions with children were consistently warm, gentle and responsive.
- Children accessed a safe, well maintained and stimulating environment.
- Staff were skilled, mostly deployed effectively and delivered consistent care.
- Families were valued, informed and involved in shaping the setting.
- Leadership was inclusive, reflective and promoted staff development.

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

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

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

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### Quality Indicator 1.1: Nurturing care and support

Staff interactions with children were consistently warm, gentle and responsive. Across all routines, consent, respect and responsiveness were embedded, ensuring children's care was individualised and nurturing. Babies were comforted through cuddles, songs and attention to individual routines, with staff celebrating milestones such as early physical achievements. One staff member noted, "We know the children well and can respond to their individual needs, noticing behavioural changes and why they may happen." Families reported that their children were, "happy, settled and thriving," and described staff as, "caring, attentive and genuinely interested" in their child's wellbeing.

Settling-in routines were flexible and tailored to children and families. Families were welcomed to stay, take breaks away from the playroom and gradually leave their child, helping children to feel secure. Staff reflected on these transitions, explaining, "We have strong bonds with parents and carers. Families trust us and can come to us with any concerns." Babies experienced relaxed, song-filled nappy changes and meals were calm, social occasions, where older children were supported to serve themselves, pour drinks and make choices. Families highlighted this approach, saying it encouraged independence and confidence. One parent commented that staff, "take the time to notice the small things, like when my child learns a new skill or milestone."

Staff understood children's medical and dietary needs, following clear procedures for medication and allergy management. Colour-coded bowls and plates, alongside regularly updated allergy sheets, ensured safety, with staff roles clearly defined. Lunch routines for babies involved a short wait while food cooled, which staff managed well with songs and conversation. The manager acted immediately to refine these routines, ensuring meals were served promptly and children remained engaged.

Personal plans were structured around wellbeing indicators and updated at least every six months, or sooner if circumstances changed. Staff used these plans to inform interactions and support strategies, with families contributing to updates. Individualised support, including strategies to help children manage emotions or challenges, was in place. While strategies were in place, staff were not consistently recording their implementation or the impact on children, which could affect tracking progress and sharing information at meetings. Staff reflected, "Observations are key to seeing how children respond to strategies and next steps, and we are working to make these more purposeful and consistent." As a result, children received support tailored to their needs, helping them feel safe, understood, and able to develop confidence and wellbeing.

Families valued the strong communication, noting that the digital app provided reassurance, particularly for children new to the setting. Staff highlighted their confidence in safeguarding, reporting that training helped them, "know the correct steps to follow if something is disclosed" and to identify signs of abuse or neglect. Sensitive information was handled discreetly and professionally, fostering trust and reinforcing strong partnerships with families.

### Quality Indicator 1.3: Play and Learning

Children benefited from a broad range of stimulating play and learning experiences, both indoors and out, that reflected their interests and curiosity. Staff described planning as responsive, taking the lead from children's ideas while extending learning through discussion, songs, and story-based experiences. One member of staff explained, "Child-led learning is formed from responsive planning. Children's curiosity and existing play are observed and expanded upon." Families reported that their children, "come home full of stories about what they've been doing and learning," particularly appreciating outdoor play, which supported confidence, resilience and a love of nature.

Imaginative and creative play was promoted through real-life materials and loose parts. Children engaged in sustained role play, using stainless steel bowls and natural resources to 'cook' and 'wash dishes,' fostering problem-solving and open-ended exploration. Babies joined in baking activities, such as making blueberry scones. Staff should adapt baby baking experiences to promote independence, for example introducing smaller bowls and spoons so children could participate more easily.

Numeracy and literacy were embedded naturally in everyday routines, for example children counted cereal scoops at snack, sorted bears by colour and size and voted for fruit choices using clipboards. Staff reflected, "We try to make learning meaningful in the moment, responding to what children are interested in and adding small learning opportunities spontaneously." Opportunities to further enhance outdoor literacy and numeracy needed to be developed.

Outdoor learning was a key part of children's daily experiences, with all age groups playing together and engaging in physical challenges, sensory exploration and imaginative play. Babies were supported to take safe risks, older children showed care and nurturing towards younger ones and siblings could play alongside each other. Staff facilitated jumping, balancing and collaborative problem-solving using loose parts and large cardboard boxes. This helped children develop confidence, resilience, social skills and a sense of responsibility for one another.

Staff extended play sensitively, tuning into children's cues. For example, when a child asked for a story about animals, a staff member responded immediately, reading the words and engaging in discussion, which supported literacy, understanding and vocabulary development. Children moved confidently between areas, demonstrating sustained engagement and a strong sense of belonging.

Planning reflected Curriculum for Excellence outcomes while remaining child-centred. Staff incorporated children's ideas into activities and outings, ensuring learning was meaningful, inclusive and personalised. Families valued the range of experiences and responsive staff, while also suggesting that sharing more information about specific learning could help them continue children's learning at home.

## How good is our setting?

**4 - Good**

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

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

Children experienced a clean, safe and well-maintained environment. As part of this inspection, we observed the safety of the outdoor space. It was fully enclosed and secure, providing reassurance that children could play and explore safely while benefiting from freedom of movement. Safety measures, such as gates, minimised risks, while the new gate at the nappy changing area further improved hygiene and safety. Risk

assessments were updated regularly to reflect changes, such as the introduction of a toaster for breakfast, ensuring routines remained safe and effective.

The garden provided varied opportunities for exploration and physical play. Recent improvements, including the addition of gazebos, ensured children were comfortable in sunny weather and showed that family views were acted upon. Families told us they valued the, "inviting and well cared for" environment and said their children, "love the outdoor areas and the freedom to choose what they want to do." Staff also spoke positively about the outdoors, describing it as excellent for role play, literacy, numeracy and safe risky play.

Indoor spaces were thoughtfully arranged to promote choice and independence. Staff reflected on layouts and made changes in response to children's needs, keeping the environment flexible and responsive. Resources were accessible, well presented and included natural and open-ended materials that enhanced play. Displays reflected children's lives and current learning, with family photos and examples of topics creating a sense of belonging. One child sought out their family book to see pictures of their father, demonstrating the security these approaches offered. When staff noticed a child was missing from the book they acted promptly to put this right, valuing each family equally.

Staff and families recognised recent improvements to the environment. Staff told us repairs were now carried out more quickly and that resources supported children's play and learning well, though at times they needed to improvise. They felt confident further investment would continue, noting management kept them informed about planned work. Some areas for improvement had been identified, such as repainting the toddler room and upgrading the staff toilet and children's toilets and changing facilities. These were already planned by the provider, demonstrating a commitment to ongoing development.

The manager showed a proactive approach to sustaining high standards. For example, the manager updated themselves on SIMOA (Safe, Inspect, Monitor, Observe and Act), the Care Inspectorate's friendly elephant mascot that reminds staff and children about keeping safe in settings. Staff were able to watch an introductory video ahead of a team discussion, helping them feel prepared and confident to introduce SIMOA into practice.

## How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

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

The manager and staff team were welcoming and responsive throughout the inspection. They engaged openly in professional discussion, sharing evidence of their practice and reflecting thoughtfully on strengths and areas for improvement. Staff were proactive in providing information and demonstrating daily routines, while the manager ensured requested documentation was made available promptly. Any areas for improvement were addressed immediately, including the temperature and timing of meals being taken into playrooms, updating a child's photo and rectifying a lapse in a staff member's Scottish Social Services Council (SSSC) registration. This collaborative approach supported a thorough and well-informed inspection process and reinforced the team's shared commitment to quality.

Staff demonstrated a strong commitment to continuous improvement and openness to change, contributing to a positive culture across the service. Staff confirmed they were, "fully involved in self-evaluation," with management acting on suggestions and supporting reflective practice. Quality assurance processes were

well established, including audits of personal plans, first aid, infection prevention and control, transitions and the environment. Improvement plans involved staff contributions, with findings and actions shared to ensure a shared understanding of expectations.

The new provider was keen to work closely with staff, listening to ideas and encouraging collaboration, which staff described as enthusiastic, approachable and receptive. This had improved morale and promoted a stronger sense of shared purpose. Recently, the provider held an open day to introduce themselves to families and the wider community. Staff demonstrated their commitment by attending in their own time, some bringing families along, creating a welcoming, informal atmosphere. Families reported feeling informed and reassured by this engagement and staff valued the opportunity to strengthen relationships with families, fostering trust and community connections.

Regular staff and room meetings supported communication, reflection and forward planning. Families had opportunities to provide feedback through events such as open days and graduations and their views were used to inform practice. Families described feeling, "listened to" and "included" in shaping the service, recognising that their suggestions were acted upon and led to, "tangible improvements".

Staff training and professional learning were monitored. Staff engaged in internal meetings, online modules and external training such as Alice Sharp, sharing knowledge to enhance practice. For example, rearranging home corners to encourage interactions demonstrated the practical impact of training. Evaluation of practice was ongoing, including assessment of the environment and staff performance, ensuring continuous improvement.

## How good is our staff team?

**4 - Good**

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### Quality Indicator 4.3: Staff deployment

Staff were caring, competent and knowledgeable, with good teamwork evident across the setting. Roles and responsibilities were clear, supported by rotas and room leaders, and staff adapted effectively to cover absences and support colleagues across rooms. This contributed to smooth transitions for children and ensured that, most of the time, deployment maintained effective supervision and support, with flexibility to meet children's individual needs.

Relevant safer recruitment checks had been completed before staff began their posts, ensuring they were suitable to work with children. Following this, the national induction resource guided staff through the setting's values, policies, and expectations. As a result, staff were well-prepared and confident in their responsibilities from the outset, supporting consistent, safe, and high-quality experiences for children and providing reassurance for families.

During daily routines, staff were deployed to ensure children's safety and engagement. Roles and responsibilities during key activities, such as mealtimes, were clearly defined, and communication within the team was strong. Staff informed each other of movements to maintain supervision, with experienced practitioners supporting colleagues as needed. Outdoor play was well-supervised, with staff actively engaging with children and maintaining clear communication. Flexibility in deployment ensured that breaks and sleep room supervision were covered and staff highlighted that the recent move to operating solely within one setting had strengthened consistency and stability for children as staff were not shared with

another setting.

Families described staff as, "friendly, approachable, and always available for a chat." They highlighted that even during busy periods, there was always someone to support their child and provide information at pick-up, which reassured them about the care provided. However, deployment could have been more effective, particularly in the baby room. For example, during baking and nappy changes, one staff member was temporarily alone with seven children. While children remained settled and safe, this represented an area for improvement in planning and task sequencing to ensure consistent supervision at all times.

There was also scope to strengthen reflective practice and shared learning. Staff suggested reinstating regular observations or peer reviews to ensure all areas consistently offered meaningful learning experiences. They also suggested that shift swaps between playrooms could further broaden staff experience without disrupting children's routines.

Staff reported receiving thorough induction and mentoring, with practical sign-off of daily tasks by mentors. They explained that staffing was flexible to meet children's needs, with extra support provided when required. Staff emphasised strong teamwork, noting that collaborative practice enabled them to meet children's individual needs consistently. Training, including LIFT (Learning is fun together), was applied in practice to improve children's experiences, particularly supporting communication skills for quieter or shy children. Staff told us LIFT helped them use effective language, engage in responsive interactions, provide meaningful feedback and plan learning that develops children's communication and confidence.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	4 - Good
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?	4 - Good
4.3 Staff deployment	4 - Good

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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