

Preschool Academy Day Care of Children

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Type of inspection:
Unannounced

Completed on:
22 August 2025

Service provided by:
Preschool Academy (Scotland) Ltd

Service provider number:
SP2015012437

Service no:
CS2014332769

About the service

Preschool Academy is a day care of children service provided by Preschool Academy (Scotland) Ltd and is located in the Coatbridge area of North Lanarkshire.

The service is delivered in partnership with North Lanarkshire Council and are registered to provide care for up to 59 children from birth to not yet attending primary school. During the inspection, 22 children were attending the setting.

The service is close to shops, transport routes and other amenities. Care is provided from dedicated playrooms for the different age groups. Children also have access to enclosed outdoor spaces.

About the inspection

This was an unannounced inspection which took place on 20 and 21 August 2025 between 09:30 and 17:30. 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 some children using the service
- gathered feedback from 13 family members of children using the service
- spoke with staff and management
- observed staff practice and children's experiences
- reviewed documents.

As part of this inspection we undertook a focus area. We 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

- Staff understood each children's needs and consistently provided responsive, nurturing interactions.
- Management and staff were dedicated to improving the service and had a clear vision for its development.
- Outdoor play spaces had been developed to ensure a wide range of experiences for children.
- Staff were flexible, committed and worked well as a team.
- Staff naturally moved between play areas to meet the needs of the children.
- Quality assurance approaches should be further embedded to support continuous improvement within the service.
- The service should review and develop some of their monitoring systems and processes.

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

Quality indicator 1.1: Nurturing care and support

Children experienced nurturing and responsive interactions that helped to support their emotional wellbeing and resilience. One child told us, "I like the ladies, they give me cuddles". Staff created positive and trusting relationships and knew the children well. They responded appropriately to children's cues to ensure they felt happy, secure, and confident. Parents agreed that their children had strong connections with staff. When talking about staff, parents told us, "my [child] is the best version of [themselves] thanks to the [staff] in this nursery. They have helped grow [their] confidence so much", and "friendly staff and nothing too much trouble".

Staff effectively supported children's emotional wellbeing and safety through sensitive and discreet personal care. They successfully supported sleep routines based on children's individual needs and family wishes, which helped to build positive and trusting relationships. Staff also demonstrated a strong awareness of safety. They supervised children during mealtimes so they were well placed to manage emergencies such as choking. Allergies were managed well and safe sleeping guidance was followed. This approach ensured children felt settled and secure.

Children benefitted from relaxed, sociable and unhurried mealtimes. Staff were knowledgeable about children's routines and dietary needs. Older children's independence and skills for life were promoted through self serving opportunities during 'rolling lunches'. This approach supported children, allowing them to choose when they ate. Whilst the children in the 2-3 could make choices, this was not yet offered to children in the baby room. Consideration should be given to this to ensure that children have alternative choices.

Older children could access water throughout the day, helping them to stay hydrated. The manager should ensure younger children can access water when needed.

Staff worked with other agencies to support children's individual needs. They had developed personal plans which contained specific targets and outcomes for children, which were then shared with parents. We discussed how these could be further developed to ensure parents were involved in their child's care plan. They should be reviewed at least every six months, in line with current legislation.

Medication was stored appropriately and in line with best practice. Medication forms had been developed to ensure all relevant information was recorded to support the safe administration of medication. We discussed where approaches could be further developed to ensure long term medication was regularly reviewed with parents. Overall, staff were knowledgeable about child protection procedures and clearly understood their roles and responsibilities regarding safeguarding concerns. This meant they were well prepared to address any concerns should they arise.

Quality indicator 1.3: Play and learning

Staff effectively supported children's play and learning by balancing planned activities with a flexible, responsive approach to their interests. They also promoted schematic play, a key way children learn through repeated actions. They responded to children's interests by providing further resources when needed. Whilst the service had invested in new resources and furniture this was not always easily accessible for children. We suggested that resources be positioned to support children's choice.

There were some resources which supported children's natural curiosity and imagination. For example, cups and saucers in the house corner. The service agreed this could be further supported. For example adding more materials to the house corner and playdough areas would continue to support and stimulate children's natural curiosity.

The service promoted the development of numeracy and literacy through focus areas such as a writing table. Children could access some books and were supported to explore these by responsive staff. Staff spontaneously sang songs according to the children's cues which further enhanced language development. We discussed how this could be developed further by adding resources to provide a language rich environment. For example, by having books available and opportunities for mark making throughout the setting. This would help children develop skills through activities like exploring books, singing songs, and having natural exposure to numbers and colours.

Staff developed children's thinking during play. They asked questions which helped children think more deeply, make new connections, and build on their existing knowledge. For example whilst playing in the garden, staff asked a child what they could do with the plank of wood. This allowed the child to explore ideas and extend their play.

Using a new planning system, staff reflected on observations of children and created engaging spaces based on their interests. This made learning meaningful and kept children motivated and focused. We discussed where this could be further developed by recording children's voice. This would provide children with a sense of ownership by being active participants in their own development.

Overall, staff's responsive and caring interactions created a secure environment where children felt valued and their thoughts and preferences were prioritised. Children's opportunities to play and learn were enhanced through strong connections within the community. The service had made good use of local space, using local parks, construction work nearby the nursery and the library to support children's knowledge and understanding of the world around them. A parent told us, "[My child] likes to go to park and walks in the woods being able to find different things".

How good is our setting?

4 - Good

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

Quality Indicator 2.2: Children experience high quality facilities.

Since the last inspection the service had developed all playrooms to offer a range of spaces for children to make choices, support their interest and develop their ideas. Children had some opportunity to choose their

play experiences, which allowed them to lead and direct their own learning, indoors and outdoors. Most spaces were interesting and well resourced, promoting curiosity, imagination and a sense of wonder. This included a range of real life, open-ended resources within the role play area, to create a homely feel and promote their problem solving skills. We discussed how this could be further enhanced by adding more resources.

Infection prevention and control (IPC) practices helped to minimise the potential spread of infection, supporting a safe environment for children. Handwashing took place regularly. Nappy changing areas were clean with personal protective equipment (PPE) being stored appropriately. Staff were using toilet areas to store mops and brushes. When this IPC risk was highlighted to the manager they took action and addressed this promptly. Nappy changing facilities for babies did not ensure privacy and dignity. We raised this with the service and were satisfied with the action taken to address this, prior to the completion of the inspection.

Measures were in place to support children's safety. This included secure entry systems, clear boundary fencing, secure gates as well as regular headcounts and communication between staff. We asked the service to make adaptations to the climbing wall to further support children's safety. Plans were immediately made for this, further demonstrating the services commitment to ensuring all children were safe.

Children could access outdoor play by asking a staff member who promptly met their requests and respected their choices. This approach ensured that children had some control over where they wanted to play and they felt listened to.

How good is our leadership?

4 - Good

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

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

The service had carefully reviewed its management structure, which helped to clarify roles and responsibilities throughout the service. Leaders were welcoming and receptive to feedback, and their commitment to continuous improvement was evident in how they responded promptly to suggestions. Staff were actively involved in self-evaluation and used a detailed improvement plan. This helped them identify strengths and areas for improvement in order to support positive outcomes for children.

Through the service improvement plan, training opportunities had been identified for the staff team. This focused on developing staff skills to understand how children learn through play, and improving the outdoor learning facilities. This collaborative approach empowered the team to reflect on its practice, which led to improved outcomes for children and their families.

Whilst some audits and monitoring were in place, to support practice this could be further developed to help identify areas for development. For example, an audit of accidents would support the service to identify trends, such as multiple incidents in the same play area or at a particular time of day. This would allow staff to put preventative measures in place, keeping children safe.

Whilst the service had a clear vision and values statement it was not fully embedded in practice. As many team members were new, we suggested the service review their vision statement with staff, parents and children. This would ensure everyone shares the same goals and provide a consistent experience for all.

Staff shared children's successes and achievements with families through daily interactions, an online app, and learning journals. Parents had some opportunities to be involved in the development of the service. For example they were consulted on what should be grown in the garden. To improve on this, the service should develop its approach to consulting with parents and children. They should make sure these contributions are meaningful and have an impact on the service's development.

Staff had some opportunities to reflect, share their learning and good practice through regular team meetings. This also provided opportunities to contribute towards the development of the service. Staff told us, "I feel supported by my leaders, I feel I can talk to them when needed", and that their views and suggestions mattered.

Staff were encouraged to identify their own training needs through self-evaluation. Leaders planned to create a training calendar with this information. Informal monitoring of staff practice helped leaders identify areas for development. We discussed how this could be further enhanced to ensure children consistently received high-quality care, play, and learning experiences.

When reviewing staff recruitment, we identified some gaps regarding pre-employment checks. Once highlighted, the management team responded appropriately and proportionately. To support safe recruitment, we asked the service to become familiar with the latest guidance, "Safer Recruitment through better recruitment" (Care Inspectorate, 2023), and to update their recruitment process. This would include strengthening record keeping, documenting all relevant information and action taken within staff files (see area for improvement 1).

Areas for improvement

1. To ensure children's safety, the provider should ensure that staff are safely recruited. To do this they should, at a minimum, ensure that appropriate PVG checks are in place for all staff.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I use a service and organisation that are well led and managed" (HSCS 4.23).

How good is our staff team?

4 - Good

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

Quality Indicator 4.3: Staff deployment.

Staff recognised the importance of offering kind, sensitive and respectful interactions. There were sufficient staff to meet the needs of individual children. This meant staff had time to listen, care and respond to children, helping them feel valued and loved. One parent told us, "my child has grown so much over the last year. [They have] found [their] voice and [their] confidence has become stronger. [Their] speech has come on and this is down to the work and passion of the staff. They are so committed and willing to make your child become the best they can be!"

Staff were happy, motivated and focused on children's needs. They worked well together, creating a positive and caring environment. This helped children feel safe and nurtured. There was a good mix of skills,

knowledge and strengths among the staff team across the whole day. As a result, children were supported to explore play and learning at a pace that was right for them, while being supported and encouraged.

Staff maintained positive relationships with parents and kept families well informed through regular updates at drop-off and pick-up times. Additionally, staff had positive relationships within and across teams. This showed us that all staff worked well together across the setting. Staff understood that continuity of care was important for children and communicated well with each other when tasks took them away from their responsibilities. Staff worked well to ensure children were supervised throughout the day and there was minimal disruption to their play. For example, staff breaks and rotas were planned to maximise children's experiences and ensure minimal disruption to children. This supported children's wellbeing.

An induction programme supported new staff at a pace that was right for them. This included being mentored by a designated member of staff and the wider team who shared their skills and knowledge. Not all staff were consistently using the National Induction Resource (NIR). It would be beneficial for all staff to use this resource to ensure a consistent and high-quality approach to practice across the entire team.

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's wellbeing and safety is supported, the provider should make improvements to medication systems. This should include, but not limited to, improving storage of medication and recording systems. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 23 August 2024.

Action taken since then

Children health and wellbeing was supported by a clear medication policy and procedures. Medication was being stored appropriately and inline with best practice. Medication forms had been developed to ensure all relevant information was recorded. We discussed where approaches could be further developed to ensure long term medication was regularly reviewed with parents. We have discussed this further in quality indicator 1.1, nurturing care and support.

This area for improvement has been met.

Previous area for improvement 2

To ensure that children are supported to develop and learn, the manager should make sure that they experience high quality, freely chosen play experiences. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

This area for improvement was made on 23 August 2024.

Action taken since then

The setting was thoughtfully arranged to support child-led play, with accessible and inviting resources that sparked children's curiosity. Staff used a range of open-ended resources that were well-matched to children's interests and developmental stages, leading to high levels of engagement.

Staff were consistently responsive to children's needs throughout the inspection.

This area for improvement has been met.

Previous area for improvement 3

To support children's wellbeing and safety, the provider should ensure quality assurance systems are improved. This should include, but not limited to, improving auditing systems to identify gaps and actions needed. 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).

This area for improvement was made on 23 August 2024.

Action taken since then

Since the last inspection the service had reviewed their quality assurance approaches. This included developing a detailed self-evaluation book linked to the improvement plan and action areas from the last inspection. This was beginning to support continuous development of the service, whilst also helping to build staff confidence through a collaborative approach. While this was a positive step, we discussed where audits could be further developed to ensure self-evaluation becomes embedded and drives meaningful improvement.

This area for improvement been met.

Previous area for improvement 4

To support children's play and learning, development and wellbeing, the provider should ensure staff access training appropriate to their role and apply their training in practice. 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 there are trained, competent and skilled, are able to reflect on there practice and follow their professional and organisational codes (HSCS 3.14).

This area for improvement was made on 23 August 2024.

Action taken since then

Staff accessed a wide range of training, both in-house and through various courses, and they provided feedback on their learning. The service had created a floor book to record this training, and leaders were working to further develop it to show the impact of the training on positive outcomes for children.

Training opportunities were identified through individual staff meetings and discussions, with most courses provided by North Lanarkshire Council. The service planned to set aside a specific budget for staff training and development. The nursery owner was also funding the manager's Bachelor of Arts degree. This showed a clear commitment to ongoing professional growth.

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?	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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