

St. Catherine's Primary School Nursery Day Care of Children

Gracemount Drive Edinburgh EH16 6RN

Telephone: 01316 644 257

Type of inspection:

Unannounced

Completed on:

6 June 2025

Service provided by:

City of Edinburgh Council

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About the service

St. Catherine's Primary School Nursery is registered to provide a care service to a maximum of 20 children aged between 3 years to entry into primary school.

The service is located in the South East of Edinburgh, and is close to shops, parks and local amenities. The service comprises of one playroom, cloakroom, children's toilets and outdoor play area.

About the inspection

This was an unannounced inspection which took place on Wednesday 4 June 2025 between 09:00 and 15:15, and Thursday 5 June between 08:45 and 12:15. 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 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
- received six completed questionnaires from parents and spoke with four parents
- spoke with staff and the management team
- · observed practice and daily life
- · 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;
- 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 having fun while leading their own play and learning.
- Interactions between staff and children were kind, caring and nurturing.
- Staff knew children very well and responded to their individual needs and wishes.
- The staff team were reflective which supported ongoing development.
- Children's health and wellbeing was enhanced through daily access to outdoor play.

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?	5 - Very Good
How good is our setting?	4 - Good
How good is our leadership?	5 - Very 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?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 1.1 Nurturing care and support

Children were happy, confident and having fun. They experienced warm and nurturing care from staff who knew them well and were responsive to their individual needs. This supported children to feel safe and secure. Parents all strongly agreed with the statement 'Overall, I am happy with the care and support my child receives in this service'. Comments we received from parents included, "St Catherine's primary nursery team are doing a brilliant job" and "Staff are always very helpful and friendly, my child loves them".

Children's emotional wellbeing and resilience was supported through positive and trusting relationships with staff. Interactions were calm and responsive, and staff helped children recognise and express their emotions. Positivity and kindness was encouraged in the setting and staff modelled respectful and kind behaviour. We saw this reflected in the interactions between children. For example, we saw children negotiating during play, showing empathy to other children upset, and older children helping younger children. This helped to develop independence, confidence, and self-worth.

Staff had built strong, trusting relationships with families, creating a welcoming and inclusive ethos. Staff took time to engage in meaningful conversations with them, discussing their child's day and individual needs. Families shared positive feedback about their experiences, highlighting the benefits of these strong relationships. Parents told us, "I find the nursery setting very good and inclusivity is very important to them" and "It's an amazing nursery and the staff are great".

Transitions were well planned to support children moving to school. They were supported to spend time in the school setting to help familiarise themselves with the environment. Children from the school spent time in the nursery joining children in play and building relationships. This helped to build children's confidence. Each child's needs were considered, to determine what level of support was required prior to starting school. For children who needed extra support, external services, school staff and families were involved in decision making about the child's future support needs.

Personal plans were created in partnership with parents and reflected children's health, safety and wellbeing needs. Wellbeing indicators were used to identify children's support needs, and staff were skilled in using the information to ensure children were consistently supported. As a result, staff had a shared understanding of children's individual care, play and learning. Children with specific needs had more detailed plans where relevant information about their needs was recorded. These provided clear guidance on strategies and techniques to support and promote consistent care. For example, the use of Up Up and Away, a resource to support children's literacy and learning, and visual identifiers to aid communication.

Systems were in place which ensured the safe management and administration of medication. Medication storage and clear information to meet children's needs including emergency medication and effective procedures were in place to safeguard children.

Mealtimes were relaxed and sociable. Independence and life skills were promoted with opportunities for children to help prepare snack, serve themselves, pour their own drinks and clear their dishes. This created

a sense of responsibility and helped children to feel valued. Staff sat with children during mealtimes encouraging healthy habits and facilitating meaningful discussions. Children with dietary requirements were well catered for, suitable alternative menus were provided and family preferences respected.

Quality Indicator 1.3 Play and learning

Children benefitted from a variety of play and learning opportunities which meant that they could lead their own play and make choices from a range of activities. They were encouraged to explore and use their imagination. For example, the art and craft area was set up with a wide range of materials. Children were creative and had lots of ideas, including designing and making dresses, using paper, card, coloured pens, and sellotape.

Play experiences provided opportunities for children to develop their skills in language, literacy and numeracy as part of daily routines. These included stories and songs. Number cards were displayed on serving dishes at the snack area. This meant they were developing counting skills, problem solving and decision making. Children had a keen interest in numeracy and routinely counted throughout the session, some children were discussing door numbers, and identified and displayed these on the table with large foam numbers.

Staff extended children's learning through effective questioning skills. As a result, children were progressing well. They demonstrated skills in knowing when to step back and when to re-engage to spark curiosity and sustain engagement. For example, one child had been building a road, however, had run out of space. Staff facilitated and supported their idea and helped manage and extend the space. This responsive approach enabled staff to meet children's needs and wishes, supporting their overall wellbeing and progress.

Planning approaches were child led and reflected children's interests and seasonal changes. For example, children told us they had a growing patch in the garden and had made 'Tilty' the scarecrow to stop the birds from eating the seeds. Some children had a keen interest in doctors and babies, and staff were responsive and provided a range of resources for 'bathing babies' in the water tray.

Children's voices were captured within observations, learning journals and floor books. Staff encouraged children to talk about their learning and what they wanted to know more about. This ensured that targets were meaningful to children and that they would be motivated to achieve. To further develop children's knowledge and understanding of technology the use of QR codes had been introduced. This meant they could access their learning journals independently and reflect on experiences and activities they had taken part in.

Progress and achievements were shared with parents through online learning journals. Parents actively contributed by sharing experiences from home which influenced and informed future planning. This demonstrated value and respect for families in achieving a shared outcome.

Strong connections had been established within the local community. Children visited local shops to select and purchase items for snack and they regularly visited a local community hub 'The Mansion House'. This provided hands on opportunities for children to grow their own food and promoted sustainability and nutritious healthy diets.

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

The setting was comfortable and welcoming, with plenty of light and ventilation. The entrance area displayed photographs and information for parents, and children had access to their own space to store their personal items. One parent told us, "This is an excellent environment for, nurture, growing and learning".

Wall displays showcased children's achievements and creativity. Children's artwork and their successes and achievements were displayed around the playroom. This demonstrated that children mattered and provided them with a sense of belonging.

Children had access to a wide range of opportunities to develop their curiosity, imagination and problem solving. For example, core provision of water, sand and dough, home corner, block play, story area and a well-resourced creative area. Staff told us that due to limited space within the playroom they continuously reviewed and adapted areas to ensure children had appropriate space and easy access to all activities.

Infection prevention and control procedures were in place. The environment was clean, and surfaces were regularly wiped down. Staff and children practiced good hand hygiene and routinely washed their hands, for example, before meals and when returning from the garden.

The service did not have a partitioned area within the toilets with appropriate nappy changing, or sufficient space within a cubicle of a child's toilet for a suitable changing unit (see area of improvement 1). The headteacher informed us that discussions were ongoing with the provider to identify ways to improve the toilet facilities with the addition of a nappy changing area in line with best practice guidance.

The outdoor space provided a range of activities and opportunities for the development of physical skills and exploration. For example, learning about their natural environment through planting activities, climbing trees, and a range of loose parts to spark their curiosity and interests. The garden was directly accessed from the playroom, however, due to the heaviness of the door staff needed to facilitate children going between the indoors and outdoors. Children were confident in telling staff when they wanted to go outside and told us, "We go in the garden all day" and "we just tell the teachers and they open the door".

Areas for improvement

1. The provider should identify an appropriate space for nappy changing facilities in line with best practice guidance. This would ensure that staff can keep children safe and prevent the spread of infection, and maintain children's privacy and dignity.

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

'If I require personal care, there is a suitable area for this, including a sink if needed' (HSCS 5.4); and

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

How good is our leadership? 5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 3.1 Quality assurance and improvement are led well

Children and families benefitted from a manager and staff team who were skilled, experienced and committed to the continuous improvement and development of the service. Staff told us that they felt listened to and valued within their role. As a result, children received consistently positive outcomes.

There was a strong sense of community within the nursery, and school staff worked closely with them to support children's development and potential. The service was an integral part of the school community. A shared vision and values created a positive ethos, where children were placed at the centre of the service.

The service recognised the importance of connecting with families to support the life and work of the setting. They respected families' opinions and recognised the value they could bring to the setting. The inclusive environment offered ensured everyone was involved and included in the setting. There were many opportunities for parents to be involved in the life of the service including; Peep, Bookbug and Stay and Play sessions. Staff were passionate about parental engagement and regularly asked parents to share feedback with them to support ongoing development.

The service had an improvement plan in place which included their focus priorities for supporting ongoing improvement. For example, the plan detailed the actions that had been taken to improve numeracy and mathematics, communication and literacy and fine motor skills. This meant children benefitted from learning that was tailored towards their particular needs and choices. The plan was used as a working document and was updated to identify progress made and the impact this had on outcomes and experiences for children.

Quality assurance systems were well organised and supported ongoing improvement. Systems and practices were regularly monitored by the leadership team and reflected upon by the whole team. This supported staff to be reflective practitioners and showed commitment to providing a high quality service to maximise children's outcomes and wellbeing.

Regular meetings gave staff opportunities to talk about any successes and achievements, discuss any individual children's needs or next steps and reflect on practice. Children's learning environments were reviewed regularly by staff who consulted with children, to ensure play and learning areas met their needs and interests. Staff took part in regular training to update their knowledge and skills. These training opportunities developed staff knowledge and skills which had a positive impact on outcomes for children.

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

Children benefitted from a nurturing, caring and dedicated staff team who were warm and responsive in their approach. They worked well together, and were respectful and considerate in their interactions with each other and children in their care. Staff comments included, "It's a very happy place to work and I feel well supported in my role".

Parents' comments were positive in support of staff and they shared, "The staff are professional and communicative" and "Always look out for best interests of my child".

The management team recognised and valued the importance of ensuring that the service was appropriately staffed throughout the day. Staff breaks were planned in a way that minimised the impact on children, while allowing staff to rest and relax.

The staff team brought a mix of experience, knowledge and skills to benefit children's care and learning. These skills helped staff to observe children and appropriately identify how to enhance their development. For less experienced staff, there were opportunities for role modelling and to come together as a team to support professional dialogue and effective practice.

The service had an effective approach to staff training. Staff had completed mandatory training of child protection, food safety and first aid. They were also encouraged to build further skills and knowledge in areas of individual interests.

At transition times of the day, for example, before and after lunch, staff could sometimes become quite task focussed. This included during the preparation of packed lunches and in the tidying up after lunchtime. Staff told us that transitions had been highlighted as an area of improvement, and they were identifying ways to improve these and children's overall positive experiences.

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

The manager should ensure that children are able to explore the indoor and outdoor environment at their own pace.

National Care Standards Early Education and Childcare up to the age of 16 - Standard 3: Health and Wellbeing.

This area for improvement was made on 5 October 2017.

Action taken since then

Children were leading their own play and could choose when to be in the indoor or outdoor environment.

This area of Improvement has been met.

Previous area for improvement 2

The manager should review children's medication held in the nursery to ensure that the relevant information is held to meet children's health and wellbeing needs.

National Care Standards Early Education and Childcare up to the age of 16 - Standard 3: Health and Wellbeing.

This area for improvement was made on 5 October 2017.

Action taken since then

Medication procedures were effective to keep children safe and meet children's health needs in line with best practice guidance.

This area of 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?	5 - Very Good
1.1 Nurturing care and support	5 - Very Good
1.3 Play and learning	5 - Very Good

How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good

How good is our leadership?	5 - Very Good
3.1 Quality assurance and improvement are led well	5 - Very Good

How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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