

Carleton Nursery School Day Care of Children

Bighty Road
Woodside
Glenrothes
KY7 5AS

Telephone: 01592 583 478

Type of inspection:
Unannounced

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Service provided by:
Fife Council

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About the service

Carleton Nursery School is a daycare of children service provided by Fife Council in the Woodside area of Glenrothes, Fife. The service is registered to provide early learning and childcare to a maximum of 110 children at any one time, of which no more than ten children can be under three years old.

The headteacher of the service is also responsible for managing Ladybird Family Nurture Centre in Glenrothes as part of a peripatetic management arrangement.

The service is located in a residential area of the town of Glenrothes. There are a few shops close by as well as local transport links. Children are cared for across five playrooms, one of which is for 'early entrants' who are aged under three years old. The other four playrooms care for children aged around three until they attend primary school. Each playroom has direct access to a large, spacious and well-established outdoor space which is shared between the rooms. There are two nappy changing rooms and two sets of toilets for children to use. Children access the toilets along the main corridor between rooms. There is also a small family room, a kitchen space, laundry room and other space for offices and storage.

About the inspection

This was an unannounced inspection which took place on Tuesday 2 and Wednesday 3 September 2025. 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 and complaints information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spent time with children using the service
- received feedback from their family members
- spoke with staff, including the leadership team
- observed practice and daily life
- reviewed documents
- spoke with one visiting professional.

As part of this inspection, we undertook a focus area. We have gathered specific information to help us understand more about how service supports 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.

Key messages

Children received nurturing, individualised care that promoted their emotional wellbeing.

Staff used tailored strategies and promoted a rights-based approach to support children's development and sense of belonging.

Children's play was valued, with responsive planning supporting learning. Staff promoted literacy, numeracy and wellbeing through child-led play.

The environment was stimulating and well-resourced and all children had regular access to outdoor spaces.

The whole team regularly looked at how the service was working and played a key role in making improvements that made a difference for children and their families.

Staff deployment was flexible and responsive to children's needs. Strong teamwork and communication ensured continuity of care, even during staff absences.

Families felt listened to and involved in shaping the service. Effective communication and feedback systems, including digital tools, helped to build trust and supported continuous improvement.

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?	5 - Very 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 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 across the service consistently experienced nurturing care that was tailored to their individual needs. Staff demonstrated a strong understanding of children's emotional wellbeing, using sensitive and rights-based approaches to create secure attachments and supportive environments. Tailored strategies, including those developed through the pre-start programme, enabled children and families to flourish.

Most families who responded to our MS forms online questionnaire told us they had a positive relationship with staff. Some comments included:

"The staff are lovely. Warm, welcoming and know my child well".

"They always make us feel welcome and are willing to talk. They all seem to know my child very well and are even building a relationship with her younger sister who comes in with me to collect".

Personal Learning Journals (PLJs) were in place for all children, supporting planning and assessment. While some minor inconsistencies were noted in relation to next steps and documentation, the service had already identified these through quality assurance processes and was actively addressing them.

Staff were skilled in recognising when specialist input was needed and worked effectively with external professionals to support children's development. Inclusion and equality were clear priorities, with staff committed to ensuring all children felt valued and respected. We spoke with a nursery nurse from the local health visiting team who told us that this effective joint working was supporting positive outcomes for children and families and provided support for the wider local community.

Mealtimes were relaxed and child-led, promoting independence and choice. Staff demonstrated a strong understanding of healthy eating guidance and supported families through ongoing conversations. Children's emotional wellbeing was very well supported through consistent use of de-escalation techniques and tailored strategies, developed in partnership with families.

Medication procedures were robust, and any anomalies were promptly addressed. Nappy changing was carried out with dignity and respect, reinforcing the service's commitment to positive, respectful care routines.

Safeguarding practices were strong, with staff confident in their roles and responsibilities. Chronologies were used effectively to record significant events and inform next steps.

The service's nurturing ethos was further enhanced by strong community links, including an impactful intergenerational programme.

Quality indicator 1.3: Play and learning

We made an evaluation of good for this key question, where we identified strengths that promoted positive outcomes, and some improvements would maximise children's wellbeing.

Children's right to play was respected across the service, with staff providing positive examples of child-led learning. Most rooms demonstrated strong practice; we asked the service to ensure all rooms provide consistency of experiences for all children.

Learning walls were used effectively to capture children's interests, and responsive planning was in place. Embedding this approach consistently across all rooms was a key focus, with ongoing support to build on the growing confidence of all practitioners.

Children were making good progress in language, literacy, numeracy and health and wellbeing. Staff understood child development and demonstrated a positive commitment to sharing practice to support team development. This included the use of well-resourced learning environments and the introduction of 'sign along' to enhance communication and inclusion for the youngest children.

Observations and significant learning were generally well recorded, with staff showing developing confidence in documenting children's progress. Although next steps in Personal Learning Journals (PLJs) were not consistently evident, the senior leadership team had proactively identified this as an area for improvement and had begun implementing targeted support to strengthen staff skills and consistency.

Staff are beginning to strengthen their use of skilled questioning to deepen children's thinking and engagement. This foundation offered potential for richer learning experiences as practice continued to develop.

Children were well supervised and supported both indoors and outdoors, contributing to a safe and engaging learning environment.

How good is our setting?

4 - Good

We made an evaluation of good for this key question, where we identified strengths that promoted positive outcomes and some improvements would maximise children's wellbeing.

Quality indicator 2.2: Children experience high quality facilities

Children benefitted from thoughtfully organised indoor and outdoor environments that promoted creativity, exploration and imagination. Most playrooms were well-resourced and responsive to children's interests, supporting high-quality experiences. For example, children used open-ended materials such as wooden blocks, fabric and loose parts to create imaginative play, showing prolonged engagement and teamwork. Continued development of resources will help ensure consistency and equity across the service.

Furnishings were generally of a high standard and appropriate for the age and stage of the children. The environment was clean, light and well ventilated. Ventilation and temperature controls were in place, contributing to a comfortable environment throughout the year. Staff made effective use of the building's layout to create warm, welcoming and stimulating spaces. In all rooms, staff had used natural materials and flexible furniture arrangements to support child-led learning.

Risk assessments were robust and regularly reviewed. Children were actively involved in understanding and managing risk through approaches such as SIMOA, which supported their understanding of risk, independence and decision-making. A good example of this was children helping to assess outdoor play areas before use, discussing potential hazards and how to stay safe. Infection prevention and control measures were well embedded, with clutter-free spaces and consistent handwashing routines observed across the setting.

Entry and exit points were secure and well-managed, ensuring children's safety. Confidential information is stored appropriately, in line with best practice guidance. Staff demonstrated awareness of data protection procedures and were able to explain how sensitive information was handled securely.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, where we identified strengths that promoted positive outcomes and some improvements would maximise children's wellbeing.

Quality indicator 3.1: Quality assurance and improvement are led well

The service was actively developing a shared vision and ethos through review of their current vision, values and aims (VVA), supported by meaningful consultation with children, families, staff and partners. This inclusive approach reflects a strong commitment to improving outcomes. For example, feedback was gathered from children and their families on what was important to them, and this was now supporting the creation of the service's values through group discussions.

Clear quality assurance and self-evaluation processes were now in place and beginning to have a positive impact. These systems were well organised, with defined expectations for staff and senior leaders. Staff used reflective tools and peer observations to evaluate practice and share learning. There was scope to extend this approach across all rooms to ensure consistency.

Improvement priorities were relevant and had been shaped by input from children, families and partners. Staff were reflective and engaged in driving forward change, supported by emerging leadership roles that foster a positive learning culture. For instance, room leaders have taken ownership of some aspects of quality assurance, they lead regular team discussions focused on play pedagogy and reflective practice.

Monitoring of staff practice was underway and contributing to improvement, and should now be further embedded to ensure long-term sustainability. Positive examples included the use of focused learning walks and feedback sessions that supported staff development. The use of data to track children's progress was developing well and supported targeted planning. Staff were using this data to identify trends and adapt learning experiences accordingly.

Consultation with families was a strength, and the service was encouraged to continue exploring creative ways to gather and act on feedback. Recent examples include the use of digital surveys and QR codes to gather families' views and opinions. This approach encouraged families to feel valued, included and their views respected.

Children were actively involved in shaping their learning environment and experiences. For example, they participated in planning discussions, voted on activities, and helped evaluate resources through child-friendly feedback tools such as picture charts and floor books.

How good is our staff team?

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 4.3: Staff deployment

Staff demonstrated a strong ability to respond to the complex and varied needs of children and families, to ensure high-quality care and support. This had a clear and positive impact on children's health and wellbeing. For example, staff adapted daily routines to support individual children, using visual supports to reduce anxiety.

Staffing levels and skill mix were effective, with flexibility shown in managing absences to maintain continuity of care. Transitions, including staff breaks, were well managed and did not disrupt children's experiences. In one instance, staff used a visual timetable and consistent key person approach to support smooth transitions during staff changes, helping children feel secure and settled.

Communication among staff was strong, supported by clear systems for sharing important information. This contributed to safe, consistent care and demonstrated effective teamwork. Daily handovers and use of communication books ensured that all staff were informed of children's needs and any updates, promoting continuity and responsiveness.

The large staff team worked very well together. This included working collaboratively to support children during busy periods, such as lunchtime or outdoor transitions. Staff were observed stepping in to assist colleagues without prompting, ensuring children's needs were met promptly and calmly.

Families were provided with clear expectations around communication as the service had developed a communication strategy, and efforts to strengthen digital platforms such as SEESAW were underway in response to parental feedback. For example, staff used SEESAW to share learning stories and photos, which families reported helped them feel more connected to their child's experiences.

Staff felt well supported through supervision, annual reviews and a positive team culture. A structured mentoring programme using the national induction resource (NIR) was in place, with staff reporting a positive impact on their confidence and integration. New staff described how shadowing experienced colleagues and engaging in reflective discussions helped them feel prepared and valued. This approach also fostered confidence and consistency in practice.

Policies aligned with local authority guidance, and the overall approach to staff deployment reflected a commitment to quality, flexibility and child-centred practice. Staff were observed adapting their roles to meet children's emerging needs, such as stepping into play to support emotional regulation or extending learning through spontaneous interactions.

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 meaningfully involve children and families in influencing change in the setting, the provider should ensure that children and families' views are actively sought through effective communication strategies. This should include, but is not limited to, ensuring leaders have positive, trusting, working relationships with children and families.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership" (HSCS 4.7) and "I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve" (HSCS 4.8).

This is to ensure staff skills and knowledge is consistent with the Care Inspectorate document, 'Me, my family and my childcare setting.'

This area for improvement was made on 24 April 2024.

Action taken since then

Leaders have implemented a range of effective communication strategies, including regular feedback sessions, suggestion boxes and family forums. Staff have received training on building positive and trusting relationships with children and families, aligned with the principles in 'Me, my family and my childcare setting'. Children's voices are now more visible in planning and decision-making, with their ideas reflected in activities and environment changes. Families report feeling more involved and valued, with their feedback actively shaping service improvements.

Previous area for improvement 2

To consistently deliver high quality care, play and learning for children and families, the provider should implement inclusive quality assurance and self-evaluation activities that lead to continuous improvement.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 24 April 2024.

Action taken since then

A robust quality assurance framework has been introduced, incorporating regular audits, peer reviews and reflective practice sessions. Staff and families are now actively involved in self-evaluation processes, contributing to a shared culture of continuous improvement. Improvements are tracked and documented, with clear action plans and timelines.

The service has demonstrated measurable improvements in care, play and learning outcomes through these inclusive practices.

Previous area for improvement 3

To enable families to confidently highlight complaints and concerns, the provider should implement robust processes to respond quickly and sensitively to families' views alongside children's needs, rights and choices. This should include, but is not limited to, having a clear overview of complaints and concerns to inform the service's improvement planning and quality assurance processes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "I know how, and can be helped, to make a complaint or raise a concern about my care and support" (HSCS 4.20) and "If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me" (HSCS 4.21).

This area for improvement was made on 24 April 2024.

Action taken since then

A clear and accessible complaints procedure is now in place, with guidance available in multiple formats to support understanding. Staff have been trained to respond to concerns sensitively and promptly, ensuring children's rights and choices are respected.

A complaints log is maintained and regularly reviewed to identify patterns and inform service planning. Families have expressed increased confidence in raising concerns, with feedback indicating that issues are resolved constructively.

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	5 - Very 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?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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