

# Alexander Peden Primary Nursery Class Day Care of Children

West Main Street Harthill Shotts ML7 5TU

Telephone: 01501 826 709

Type of inspection:

Unannounced

Completed on:

3 June 2025

Service provided by:

North Lanarkshire Council

Service no:

CS2003015408

Service provider number:

SP2003000237



# About the service

Alexander Peden Primary Nursery Class is registered to provide care to a maximum of 35 children aged 3 years to those not yet attending primary school.

Care is provided from a large bright playroom situated within the main building of the primary school. Children also have access to an outdoor play area and wider use of the school grounds.

The service is located in a residential area of Harthill, North Lanarkshire and is situated close to shops, transport links and other amenities.

# About the inspection

This was an unannounced which took place on 2 and 3 June 2025 between 09:15 and 16:15. Feedback was provided to the leadership team on 3 June 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 information, information submitted by the service and intelligence gathered since the last inspection.

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.

In making our evaluations of the service we:

- spoke with children using the service and received feedback from five of their family members
- spoke with staff and management
- · observed practice and daily life
- · reviewed documents.

# Key messages

- Children were settled, happy and confident in the setting.
- Children experienced kind and caring interactions, helping them feel safe and secure.
- Improvements to the presentation and quality of toys and materials supported children's play opportunities.
- Play spaces, were clean and tidy, helping create a welcoming space for children.
- Children benefited from daily access to outdoor play.
- Personal plans contained meaningful information to help meet children's needs.
- Staff should continue to review play spaces to further enhance opportunities to develop curiosity, imagination and creativity.
- Quality assurance processes should be further developed to help promote high quality care, play and learning.

# 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 were settled, happy and confident in the setting. They benefitted from kind and caring interactions from staff who were responsive to their needs. One child told us "the teachers are kind and look after us." and a parent told us "everyone has made my child feel welcome since starting nursery this year & all teachers try their best with all children, my [child] always tells me they have had a good day."

Children mostly experienced warm responses from staff when they needed comfort and support. This included offering cuddles, sitting on their knee or reading stories together. This helped children feel loved. Staff offered praise and encouragement during play, which promote children's confidence. We discussed further ways to help recognise and record children's achievements to support their wellbeing. Leaders agreed to take this forward.

All children had personal plans in place that contained important information to help meet their needs. These were linked to 'Getting it right for every child' (GIRFEC) wellbeing indicators. For example, their likes, dislikes and medical information. Families were involved in developing and reviewing targets to support children's development. More detailed plans were in place for children that required additional support and staff worked with external agencies to help ensure meaningful support strategies were in place for children. We discussed the importance clearly recording when plans have been reviewed with families to help ensure updated information is easily accessible for staff.

Children experienced mostly relaxed mealtimes where they sat alongside their peers and staff, helping promote opportunities for language development. Most children ate lunch in the school dining hall. Whilst staff supported children well, at times they were busy as they focused on other tasks and serving food. Plans were in place to create a 'rolling lunch', which would help promote children's independence, choices and preferences. We agreed this would help to avoid unnecessary interruptions to play and would contribute towards a more positive eating experience.

Children had access to water throughout the day to help ensure they were kept hydrated. Children were offered a variety of snacks which met their likes and preferences. This included toast, cereal, rice cakes and fruit. We suggested offering morning snack over a longer period of time, to support children's choices and preferences. This was actioned the next day and staff told us this worked well. This meant children could choose to eat when they were ready, helping ensure they were not hungry.

Systems were in place to support the safe administration of medication. For example, medicines were stored in individual boxes, which were clearly labelled and actions plans were created to ensure signs and symptoms were clearly recorded. We discussed ensuring that paperwork is streamlined to ensure consent paperwork and action plans contain the same information and archiving outdated paperwork to help avoid any confusion. Medicines were stored within the first aid room within the school. We suggested storing rescue medicines, such as inhalers, within nursery to help ensure these are readily accessible to staff when required. We were satisfied this was actioned before the end of the inspection.

## Quality indicator: 1.3 play and learning

Children chose from a wide variety of play materials that met their interests. Favourites included the home area, arts and crafts and outdoors. A relaxed pace of the day supported children to have enough time to have fun and engage in play and learning opportunities. Staff joined in with play helping create fun experiences. Children told us "I just like playing with toys and bikes" and "I like arts and crafts. I am never away from the art area."

Improvements had been made to the layout and storage of materials, which stimulated children's play ideas. In addition, visual prompts supported children to make choices and identify where to find and put away play materials. We discussed where some play spaces could be enhanced further by adding more loose parts and real materials. For example, home area, water play and craft area. This would promote children's curiosity, creativity and imagination.

Children benefited from free flow access to outdoors which supported their physical development and overall wellbeing. Children were able to transport materials to follow their interest. Staff had plans to develop outdoor play spaces further to include more opportunities for open-ended play with loose parts. This would help provide further opportunities for challenge and exploration. Parents told us "my child loves the free play environment and is always outside, and "there is always access to outdoors my [child] loves being outdoors."

Children accessed many opportunities to learn about science, technology and maths. For example, through transporting water to water plants, making a water way for cars and exploring in the mud kitchen. Some staff role modelled the use of mathematical language, helping children develop mathematical concepts. This included, colour matching, recognising shapes and counting. Opportunities to promote literacy skills were available in a variety of ways. For example, children created large drawings with chalk outdoors and experimented with mark making materials.

Children had meaningful opportunities to care for their environment and learn about growing plants and vegetables. This supported them to develop an appreciation for nature. One child told us "look at the plants. They are growing. I fed them, they are perfect." One parent commented "my [child] absolutely loves doing the garden and they get to plant flowers etc and look after the garden." We discussed where children would benefit from more extended periods playing in the 'wellbeing wood', which children sometimes called the 'fairy garden'. Staff told us about plans in place to develop this further.

There was a mix of intentional and responsive planning to help provide experiences for children. Whilst staff mostly responded to children's play ideas, we discussed where they could consider developing approaches to responsive planning, to help promote further opportunities for children to lead their own learning. Leaders agreed and acknowledged that staff would benefit from further opportunities to develop their skills and reflect together to promote high quality play and learning. Children's experiences were shared with families through an online platform. This could now be further developed to include more examples responsive play and individual learning.

# 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.

Children were cared for in an open-plan playroom with direct access to outdoors. Since the last inspection, the environment had been improved. Children benefited from play spaces that were bright, clean and well ventilated.

Improvements had been made to the setting by refreshing paintwork, wall displays and creating additional storage for outdoor clothing. This created a welcoming space for families and children. The inclusion of soft furnishings helped create cosy spaces for children to rest and relax, supporting their wellbeing. For example, a wooden arch with cushions and blankets. We discussed where cosy spaces could be further developed in outdoor spaces.

Improvements to toilet facilities provided children with appropriate toilets, which supported children to feel safe and comfortable, helping to develop good bowel and bladder health. In addition, separate nappy changing facilities had been installed, which promoted children's privacy and dignity. Further plans were in place to replace the flooring throughout the service and install a new kitchen area. This would contribute to a hygienic environment for children.

A variety of measures were in place to help keep children safe. This included a secure entry buzzer system, regular updates to registers and effective supervision. Parents agreed that the service was safe and one told us "the nursery is secure at all times with locked main door. Operated by buzzer system. As far as I can see staff follow all health and safety guidelines and make sure parents are also aware of these rules." We discussed the importance of continuing to review potential risks outdoors as spaces are further developed. For example, adding hooks to the new play sheds to keep doors secure and closing the door on the large shed when not in use. Staff should continue to monitor the perimeters of the outdoor space and external gates to help keep children safe.

Children benefited from access to outdoor play spaces and wider opportunities to use school grounds. This included the gym hall, space for using bikes and the recently developed wellbeing wood. Plans were in place to develop the use of all outdoor spaces, which were supported by members of the community and families. This would create more opportunities to support high quality play and learning.

Staff should continue to monitor and audit play spaces to ensure these meet the needs and preferences of children. As discussed under quality indicator 1.3. further development of spaces would enhance children's exploration, curiosity and imagination.

# 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.

Leaders engaged well throughout the inspection and were committed to improving outcomes for children and families. There had been recent changes within the staff team, which had resulted in adjustments to roles and remits. Leaders were now in the early stages of developing roles and responsibilities to help ensure positive outcomes for children. They were in the process of reviewing aims and values across the nursery and school to help ensure these reflected the aspirations of staff, children and families.

Staff felt valued and supported by the leaders, which resulted in a motivated team who felt valued and respected. They commented "All management staff are very supportive and I feel very comfortable that I could approach them with anything if I had to they will always check in regularly to see how things are going" and "[leaders] are very open and approachable to discuss any of my worries or concerns that I may have. They are very accommodating and go above and beyond for me to ensure that my wellbeing needs are being met."

Staff had individual areas of responsibility, which helped support their professional development of key areas within the nursery. For example, literacy and numeracy. This promoted a shared responsibility to supporting improvement within the service. Staff were encouraged to share their ideas through meetings and end of the day discussions. Plans were in place to introduce more formal one to one meetings with their manager. This would help to provide opportunities to review their learning and development needs.

Children and families had varied opportunities to share their views, and all families that shared feedback told us they felt involved in the service. For example, though a feedback book in the foyer area, adding comments to children's learning wall and regular 'chit chat' meetings. This helped value the views of families and contributed to positive relationships. Families told us "we are always asked how we feel they could improve the service they provide" and "we have chit chat sessions to discuss new ideas for the nursery and if we as parents have any concerns. These sessions are a fantastic way to talk through ideas and put plans in place."

Improvement plans were in the early stages of being developed for the year ahead. Staff and leaders shared their ideas for developing outdoor play areas and also improving children's mealtime experiences. Leaders had identified where they would like to develop approaches to planning, to further support children's ideas and interests.

Some quality assurance processes had been developed and were having a positive impact on improving outcomes for children. For example, audits of play spaces, improved personal plans and development of policies to encourage a consistent approach. We discussed where this could be further developed. This should include more robust auditing of accident and incidents and developing approaches to self-evaluation. We signposted leaders to best practice guidance available on the HUB area of the Care Inspectorate website, which will to help support their improvement journey. We made a related area for improvement at the last inspection, which has been repeated.

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# 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.

There had been significant changes within the last year to the staff team. There was now a consistent staff team in place who had built positive relationships with each other, children and families. Parents told us "the staff are always on hand anytime you need a chat!" and "the nursery has vastly improved over the last 18 months. Having more staff in the nursery has been a key factor."

Staff were enthusiastic and committed to their role. They were eager to develop the service to provide the best possible care for children. Staff worked well as a team and communicated effectively to help ensure staff were deployed to meet the needs of children. This helped create a positive environment for children to play and learn. One parent told us "staff are genuinely dedicated to making our kids feel safe happy and helping them thrive. They encourage them to develop new skills as well as building their confidence."

There was a mix of skills and abilities amongst the staff team, and they benefitted from regular opportunities to have staff meetings to share ideas, plan and reflect on the day. This helped to ensure a consistent approach for children. staff had been supported to settle into their role by leaders. We discussed where approaches to induction and mentoring could be strengthened for new staff, to support them to reflect on their practice and provide opportunities for guidance and support.

Overall, staff worked well together to benefit children in their care. Staff communicated well with each other and had a flexible approach to ensure staff breaks did not disrupt children's play. Plans were in place to recruit additional staff, which would help staff to have more time for planning, training and leadership responsibilities. This would also help enhance play opportunities for children. For example, to make more use of the wider community and provide more individualise support.

Staff had taken part in some training to support them in their role. For example, play on pedals, numeracy and child protection. They would now benefit from further opportunities to reflect as a team and participate in more training opportunities. The service hoped to secure opportunities for outdoor training which would h support their improvements plans. This would support staff to continue to develop their skills to provide high-quality play experiences for children.

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 support children's wellbeing and development, the manager should review personal plans to ensure they set out how their individual needs will be met, as well as their wishes and choices.

This should include, but not be limited to, ensuring that personal plans are regularly reviewed with children and parents and that meaningful next steps and strategies are identified to reflect children's current needs, wishes and choices.

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).

This area for improvement was made on 11 March 2024.

#### Action taken since then

Personal plans were in place for all children. Staff had improved the format of plans to ensure meaningful information was recorded to help meet children's needs. Plans were reviewed with families and they were involved in creating targets and next steps for children. We suggested ensuring review dates are more clearly recorded within all sections of personal plans. Therefore, this area for improvement has been met.

## Previous area for improvement 2

To ensure children's health needs are met the provider should review medication systems in line with quidance, to ensure paperwork contains sufficient information to administer medicines safely.

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) and 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 11 March 2024.

#### Action taken since then

Staff had developed medication systems to help ensure action plans were in place that contained sufficient information to support staff to administer children's medication safely. This included clearly recorded signs and symptoms in action plans. We suggested that information is streamlined to ensure consent paperwork reflects action plans and also that archiving out of date paperwork would help avoid any confusion. Therefore, this area for improvement has been met.

## Previous area for improvement 3

The provider should ensure that children receive care in well looked after and well maintained premises.

This should include, but is not limited to, improving the quality of furnishings, fixtures, toys and materials.

This is to ensure that care and support is consistent with the Health and Social Care Standard's (HSCS) That states: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

This area for improvement was made on 11 March 2024.

#### Action taken since then

Improvements had been made to the setting by refreshing decor, replacing old and worn toys and materials and adding new soft furnishings. This contributed to a welcoming environment for children. In addition,

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plans were in place for replacing flooring throughout the playroom. **Therefore, this area for improvement** has been met.

## Previous area for improvement 4

To ensure that children's health and dignity are supported, the provider should ensure children have access to hygienic, private nappy changing and toilet facilities, this should include repairing ventilation and creating separate changing facilities with access to child sized toilets.

This is to ensure that care and support is consistent with the Health and Social Care Standard's (HSCS) That states: 'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected' (HSCS 1.4), and 'If I require intimate personal care, there is a suitable area for this, including a sink if needed' (HSCS 5.4).

This area for improvement was made on 11 March 2024.

#### Action taken since then

Children had access to a clean and well-ventilated nappy changing room, which helped promote their dignity and privacy. Toilet facilities had been replaced with child sized toilets. **Therefore, this area for improvement has been met**.

## Previous area for improvement 5

To ensure that quality assurance processes impact positively on outcomes for children, they should be developed to become more robust, helping to identify and prioritise improvements needed.

This should include, but is not limited to, creating systems for auditing and monitoring of practice.

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 11 March 2024.

#### Action taken since then

The service were in the early stages of developing roles and remits with plans going forward to strengthen quality assurance. They have actioned many items since last inspection, for example, improving planning, auditing play spaces and replacing resources. They should continue to develop approaches to quality assurance with a focus on monitoring and auditing to help improve outcomes for children. **Therefore, this area for improvement has not been met and will be continued.** 

# 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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