

Castlebay Primary Nursery Day Care of Children

Castlebay Children's Centre
Castlebay
Isle of Barra
HS9 5XL

Telephone: 01871 810 983

Type of inspection:
Unannounced

Completed on:
3 June 2025

Service provided by:
Comhairle nan Eilean Siar

Service provider number:
SP2003002104

Service no:
CS2005106314

About the service

Castlebay Primary Nursery is a day care of children service and is registered to provide care to a maximum of 37 children from the age of two years to primary school age. The service is on the island of Barra.

Parents have a choice of placing children in Gaelic Medium or English Medium in the centre. The service provides pre-school education in partnership with Comhairle nan Eilean Siar.

Children receive care in a purpose-built children's centre which is on the opposite side of the road to the school. They have access to two playrooms, children's toilet area and a dedicated kitchen.

About the inspection

This was an unannounced inspection which took place on 2 and 3 June 2025. The inspection was carried out by two inspectors from the Care Inspectorate. There were 25 children present on the first day of our inspection and 27 on the second day. 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:

- received electronic feedback from four families who used the service
- spoke with staff and management
- 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.

Key messages

- Children were generally happy, confident, and well supported by caring staff.
- Children participated in a variety of play experiences and particularly enjoyed outdoor play.
- Children benefited from consistent care from a core staff team.
- Outings in the community developed children's social skills and sense of identity.
- Some environmental changes were needed to promote a safe and hygienic environment for children.
- Limited protected management time impacted on how quality assurance and improvements were taken forward.
- Staff needed more training to ensure that they had the skills to meet a diverse range of children's needs.

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?	3 - Adequate
How good is our setting?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate

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

How good is our care, play and learning?

3 - Adequate

We evaluated different parts of this key question as adequate and good with an overall grade of adequate. Strengths outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Children were happy, settled and confident whilst at nursery. They had developed positive friendships with peers and interacted kindly with each other. Older children were buddies for younger which enhanced children's wellbeing and provided opportunities for children to be responsible and develop social skills.

Overall staff were warm and caring towards children. They responded to their individual needs and provided comfort and support. On occasion staff could have been more responsive to meet children's individual needs and choices. For example, sometimes staff interrupted children's play, encouraging them to join adult-led activities, resulting in a few children becoming restless. This meant that at times children were not able to make their own choices.

Staff had recorded written observations to help them evaluate and respond to the different behaviours children displayed. Some language used to describe children's behaviours were not as nurturing as they could have been. The information gathered was also not evaluated in a way that supported positive strategies being developed to meet children's needs. This highlighted the need for staff to undertake training around meeting children's individual support needs. We asked the manager to review all written observations of children and use their findings to support staff development. We have made an area for improvement in relation to this under the staff deployment section of this report.

Each child had a personal plan which contained information that supported staff to respond to their needs. For example, plans included details about children's medical conditions and family members. Staff regularly reviewed this information with parents and carers which ensured information was accurate to reflect children's changing needs. Where needed, children were supported by other external agencies such as health visitors and speech and language therapists. We found that staff had developed very positive relationships with these services and worked in collaboration to provide consistent support to children.

Staff were aware of children's health and medical conditions. Where medication was required, this was stored, administered and recorded safely with parents' consent. We advised staff to ensure that spacers to support the administration of inhalers were stored in the same way as medication and washed regularly. This will help to minimise the risk of cross contamination which could impact on children's health.

Children mostly experienced a sociable lunchtime. They enjoyed sitting together with their friends in the school dining hall where they engaged in lots of chatter. Children were developing independence skills as they selected their lunch and tidied their tray. Meals provided were nutritious to support children's health.

Some children became restless and upset over lunchtime. When children had finished their meal they were asked to wait for other children to finish before leaving the table. Whilst we acknowledge that this was a positive step in supporting children to learn social skills, the extended wait caused some children to become upset and frustrated. The manager should consider ways to support children's wellbeing over lunchtime.

Quality indicator 1.3: Play and learning

Children participated in a variety of play experiences that they enjoyed. Particular favourites included playing in the sand and mud kitchen and looking after the land snails. Parents who provided feedback to us commented positively about the play opportunities their children had. Some of their comments demonstrated the range of experiences on offer to children. One parent said, "Outdoor play, water play, fine motor skills. When they are older they will be able to take part in swimming, forest class and going to the garden centre." Another parent added, "There is a range of arts and crafts, imaginative play, outdoor learning etc which enables my child to develop a range of skills whilst doing activities that they enjoy."

At times children would have benefitted from less adult directed activities and more opportunities to make their own decisions about their play and learning. Children's play was sometimes interrupted for them to participate in larger group activities. Children should be supported to make more choices during play to ensure that they can develop their ideas, skills and learning.

Children particularly enjoyed playing and learning outdoors. Staff supported this interest by being available to children and by providing a wide range of resources outdoors that promoted children's curiosity. Outside children had many opportunities to be creative, use their imagination and problem solve using natural, open ended materials. They spent lots of time in the mud kitchen and imaginatively pretended to make cakes using natural materials. Children also enjoyed the freedom of being able to run, balance and cycle which developed their physical skills and promoted their health and wellbeing.

Children had good opportunities to play and learn in their local community. They benefitted from visits to places such as the beach, woods, the community garden, a local croft and shops. Being part of and involved in the local community was important to the service and to children and families. Engaging children in their local community at an early age helps to develop a sense of identity and emotional security.

Each child had an online learning journal which recorded the types of activities and experiences they had been involved in. Although journals were updated regularly, they tended to include a description of children's experiences, rather than containing detail about their learning, achievements and further support needed. In order to secure children's progress and plan for their individual stages of development, approaches to recording and planning children's learning could be further developed. We suggested to the management team incorporating learning journals into their regular monitoring tasks. This would help them to identify where staff needed more support to extend children's learning.

How good is our setting?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Quality indicator 2.2: Children experience high quality facilities

The service operated from Barra Children's Centre, with secure access to the Sgoil Àraich via a buzzer entry system and a visitor sign-in protocol. These measures effectively contributed to maintaining a safe and controlled environment for children.

Indoor playrooms were clean, bright, and well-maintained, with ample natural light and ventilation. Room temperatures were consistently comfortable, supporting a safe and comfortable environment for children to receive care.

The environment was thoughtfully arranged to support independence and curiosity, with a wide range of high-quality, age-appropriate resources that reflected children's interests and developmental stages. This enabled children to make choices during free-play opportunities, fostering a sense of ownership and inclusion.

Some environmental concerns were identified in the children's toilets and changing areas. Rusted taps and non-functional or dusty extractor fans presented potential risks to children's health. These issues, if unaddressed, could compromise the overall safety and wellbeing of children. The manager was advised and agreed to incorporate fan checks into daily routines and ensure regular maintenance. By identifying and responding to maintenance issues within these areas, the sanitary conditions and air quality could be improved. This will support the health and safety of children.

Children benefited from direct access to outdoor play from their playrooms, which supported their physical health and emotional wellbeing. Parental feedback strongly endorsed this aspect of the provision, with comments such as, "I really love that the children are very often outdoors" and "Constant opportunities offered to play outdoors. Regular walks in local area, trips to beach and woods." These experiences enriched children's learning and built connections within their local environment.

A safety assessment of the garden area confirmed that some protective measures, such as secure perimeter fencing, were in place. However, further improvements were needed to address potential blind spots and the placement of resources that could enable children to climb over gates and fences. These concerns were discussed with the management team and local authority support staff, and a commitment to address them was secured. We were satisfied that appropriate action would be taken to safeguard and protect children.

While some risk assessments were in place, they did not consistently reflect the individual needs and developmental stages of all children. Strengthening these assessments will help to ensure that staff can mitigate potential risks and be responsive to children's needs in practice. This will ensure that all children are accounted for and protected.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Quality indicator 3.1: Quality assurance and improvement are led well

The manager demonstrated strong engagement throughout the inspection and welcomed professional dialogue to support continuous improvement. We were assured of their commitment to get things right for children and families.

The service's vision, values, and aims had recently been reviewed in consultation with children, staff, and families. This inclusive approach ensured that the ethos remained relevant and reflective of its intention. This promoted a shared understanding and commitment to what was important to everyone.

Families reported feeling actively involved in the life of the service through initiatives such as stay-and-play sessions and parent meetings. At the time of the inspection, drop-off and collection routines occurred in the cloakroom area. We discussed with staff the potential benefits of enabling families to enter the play environment. This could further strengthen relationships, promote a sense of belonging, and enhance children's emotional security.

A structured annual quality assurance calendar was in place and the manager had involved staff in evaluating some quality indicators. However, the lack of protected management time limited the progression of this. This impacted on the consistency of quality assurance processes, including the monitoring of children's learning, development and environment.

The manager was transparent about the challenges faced in leading improvement, particularly in relation to time spent covering staff absences in playrooms. As a result, key processes such as auditing learning journals, tracking observations and planning were delayed or inconsistently implemented. This led to gaps in the monitoring of children's progress, effecting the quality of individualised support children needed to flourish. We have made an area for improvement in relation to developing approaches to quality assurance to consistently secure positive outcomes for children. (see area for improvement 1)

Staff demonstrated a sound understanding of their responsibilities in safeguarding children. Child protection procedures were generally well understood and implemented but the policy required revision to reflect accurate leadership roles. The named child protection coordinator should be updated to include the manager and early years support officer, rather than the head of school, who is not the registered manager and is only available during term time. We were satisfied that the provider would action this change. This would ensure that staff had clear procedures to follow should they have to raise any concerns in relation to children's health, welfare and safety.

There was an instance where a notifiable event was not reported to the Care Inspectorate. We provided further guidance on notification requirements. Timely and accurate reporting of such events is essential to maintaining transparency and ensuring the safety and wellbeing of children and families.

Areas for improvement

1. To ensure that children receive consistently positive outcomes, the manager and staff should develop their approach to quality assurance that leads to improvement. This should include, but is not limited to, evaluating and responding to the quality of children's facilities, safety and progress in learning and development.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19)

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Quality indicator 4.3: Staff deployment

During the inspection, staffing levels were found to be appropriate and aligned with regulatory requirements. This ensured that overall children's care and supervision needs were met. The appointment of new, qualified staff since the previous inspection had strengthened the teams capacity and contributed to positive outcomes for children. Parental feedback corroborated this, with comments indicating high levels of satisfaction regarding staff-to-child ratios. Some of their comments included, "never feel that my child's needs have not been met" and "ratios always met."

We asked management to strengthen staff deployment at key transition points such as snack and lunch time. More supervision at these times would enhance children's safety. Staff demonstrated professional engagement and a commitment to their roles, fostering a positive and supportive environment for children and families. Their positive relationships with parents were evident and played a key role in promoting children's emotional security and wellbeing. Feedback from parents highlighted staff responsiveness and approachability. Some of their comments included, "Staff know my child well and respond well to their needs. They have a clear bond with staff" and "I find the staff very friendly and approachable. I feel confident and comfortable leaving my child in their care."

Staff had accessed training and development opportunities, which had positively influenced their practice. For example, bookbug training had enhanced storytelling and child protection contributed to safeguarding of children. To ensure positive outcomes for all children, particularly those with additional support needs, we recommended that further training was needed. This will support the setting in delivering inclusive, high-quality care. (see area for improvement 1)

Staff had the opportunity to discuss their work with a member of management. These discussions were recorded in formal supervision notes. Staff had positively identified development goals and some of these had been addressed. Others needed to be more clearly aligned with training to promote new learning and in turn secure positive outcomes for children.

Areas for improvement

1.
To ensure that all children receive inclusive and responsive care and support, staff should undertake learning and implement a nurturing approach in relation to meeting children's varying needs.

This should include but is not limited to, developing a better understanding of how to respond to children's emotions and behaviours, developing a strengths based approach to recording observations of children's behaviour and using information gathered to develop strategies that support meeting children's needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that : "I am treated as an individual by people who respect my needs, choices and wishes." (HSCS 1.6)

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 health, welfare and safety needs the manager and staff should ensure individualised personal plans are sufficiently detailed to include but not be limited to identified next steps in learning and strategies to support individual children.

They should ensure plans are relevant and updated at least every six months or before if required along with children and parents' views.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state 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 12 September 2024.

Action taken since then

Each child had an individual personal plan that detailed their individual needs and these were updated regularly. We have therefore concluded that this area for improvement has been met.

Previous area for improvement 2

To minimise the risk of infection spreading the manager should ensure that at a minimum; a) Snack dishes are washed hygienically in the kitchen area. b) Staff monitor and support children to wash their hands routinely and effectively.

This area for improvement was made on 12 September 2024.

Action taken since then

We noted snack dishes being washed safely in a separate kitchen and observed appropriate handwashing procedures being carried out. We have therefore concluded that this area for improvement has been met.

Previous area for improvement 3

The provider should at a minimum:

- a) Ensure that there are, at all times, staff present that have the skills to meet the care, welfare, support and safety needs of children.
- b) Address the balance of qualified and unqualified workers.

This area for improvement was made on 12 September 2024.

Action taken since then

Since the last inspection, more staff had been recruited to the service. They had a range of qualifications, knowledge and skills. This meant that overall, staff were able to respond to children's needs. We have therefore concluded that 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?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
1.3 Play and learning	4 - Good

How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate

How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate

How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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