

Lybster Primary School Nursery Day Care of Children

Lybster Primary School
Main Street
Lybster
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Telephone: 01593 721 224

Type of inspection:
Unannounced

Completed on:
26 September 2025

Service provided by:
Highland Council

Service provider number:
SP2003001693

Service no:
CS2003017239

About the service

Lybster Primary School Nursery is registered to provide a care service to a maximum of 23 children, from the age of two years to those not yet attending primary school. The nursery is operated by The Highland Council. The head teacher is the registered manager of the nursery and is responsible for more than one school. The nursery operates term time only.

The service operates from a playroom within Lybster Primary School. There is also an enclosed outdoor play area which contains a range of loose parts and open-ended resources which extend and enrich the children's imaginative play and learning experiences.

About the inspection

This was an unannounced inspection which took place on Wednesday 24 September and Thursday 25 September 2025. Feedback was provided to the manager and representatives from The Highland Council on Friday 26 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 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 and two of their family representatives
- spoke with staff and management
- observed practice and daily life
- assessed core assurances, including the physical environment
- reviewed documents
- spoke with one visiting professional
- reviewed online feedback received from one family.

As part of our inspections, we assess core assurances. Core assurances are checks we make to ensure children are safe, the physical environment is well maintained and that a service is operating legally. At the time of this inspection, improvements were identified relating to core assurances. We have reported where improvement is necessary within the leadership section of this report.

During this inspection 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 demonstrated kind and caring interactions with children, supporting them to feel safe and secure.
- Parents were complimentary of the staff team.
- Most children were engaged and motivated in their play and were having fun with other children.
- Quality assurance and supervision systems had not been maintained, contributing to inconsistent practice and a slow pace of change.
- Children did not consistently receive high-quality care, play and learning experiences due to variability in staff practice and deployment.
- Staff deployment remains an area for improvement, particularly during key routines and transitions, which affected both safety and the quality of experiences.
- Personal planning was not used consistently or effectively to support children's individual wellbeing.

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

Leadership	2 - Weak
Children play and learn	3 - Satisfactory / Adequate
Children are supported to achieve	3 - Satisfactory / Adequate

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

Leadership 2 - Weak

We evaluated different parts of this heading as weak and satisfactory/adequate with an overall evaluation of weak. There were some strengths but these were compromised by important weaknesses.

Quality Indicator: Leadership and management of staff and resources

Leadership arrangements did not consistently support high-quality experiences for children. Due to competing demands across the service and limited capacity, the resources allocated to support the management of the service were insufficient to fulfil the leadership responsibilities. As a result, the service lacked effective leadership and children did not benefit from a well-managed service. The provider must review current arrangements to ensure leadership capacity is sufficient to drive improvement. (See Requirement 1)

Team meetings were at an early stage of development and showed potential to support staff reflection and improvement. They took place fortnightly and provided time for staff to come together and reflect. Most staff participated and contributed to agreeing agenda items. Meetings were formally recorded, with actions reviewed and evaluated at the beginning of the following session. However, as the process was still in its early stages, it was too soon to assess how meaningful the meetings had been in driving improvements in the quality of care, play and learning.

Processes to support self-evaluation and improvement were at an early stage and not yet embedded enough to drive sustained change. The setting had introduced some approaches, including the development of an action plan following the previous inspection and the use of floor books to support reflection and planning. While these steps showed initial progress, they were not yet regular or robust enough to secure meaningful improvements. To support more reflective practice and better outcomes for children, self-evaluation needed to be more firmly embedded.

Children's experiences were supported by the service's efforts to involve families throughout the year. Using questionnaires and digital platforms, staff gathered parents views. This helped shape aspects of the service and encouraged a shared approach to supporting children's time in nursery.

There was insufficient capacity to support continuous improvement. Quality assurance processes in place at the last inspection had not been maintained and the absence of formal staff supervision limited opportunities for reflection and accountability. This contributed to inconsistent practice and a slow pace of change. Three previously identified areas for improvement remain unmet. A requirement has now been made in relation to quality assurance and a new area for improvement has been identified around staff knowledge in planning, assessment and high-quality interactions. Prompt and effective action is needed to accelerate improvement and secure positive outcomes for children and families. This had been identified at the last inspection and the previous area for improvement is now a requirement. (See Requirement 2)

Quality Indicator: Staff skills, knowledge, values and deployment

Staff demonstrated varying levels of effectiveness in supporting children's learning. A few staff used their knowledge well to support learning, such as encouraging mark-making, counting during routines and exploring shapes. However, this was not consistent and some staff were less attuned to children's cues. As a result, a few children did not always receive timely support.

Children were beginning to benefit from staff using positive behaviour approaches. Staff had recently completed training on this and a few staff were beginning to implement their learning into practice, resulting in some positive outcomes for children. This practice was not yet embedded across the team and there was scope to revisit and strengthen training to build confidence and ensure consistent use of strategies in daily interactions.

Support and supervision for staff was ineffective, as the manager did not provide sufficient structured guidance to help staff improve the quality of their interactions with children. This contributed to inconsistent practice, resulting in variability in the quality of care, play and learning experiences children received.

Staff reported feeling more supported, with wellbeing breaks and time off the floor contributing to improved morale. These changes were at an early stage but were beginning to positively impact children's experiences. Team communication had improved, with walkie-talkies being used effectively to support coordination. Staff alerted each other when moving between areas, which promoted improved teamwork.

Staff deployment was not consistently meeting the needs of all children. Since the last inspection deployment had improved in some areas, particularly in supporting free-flow play, enabling children to make choices and move freely. However, development was not always effective during key routines, such as snack and mealtimes, and supervision was variable. This had potential to compromise children's safety. On occasions staff were task orientated, this was particularly noticeable when children played outside and during busier times of the day. As a result, staff did not always pick up on cues from children for support or interaction. This impacted on play experiences and care needs. Staff deployment was identified as an area for improvement at our last inspection and remains unmet. (See Area for improvement 3 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

Requirements

1. By 23 February 2026 the provider must ensure positive outcomes for the children using the service. To achieve this, sufficient time and resources must be allocated to ensure the leadership role is carried out effectively.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

2. By 23 February 2026 the provider must ensure improved outcomes for children and practice by implementing effective systems of quality assurance.

To do this the provider must, at a minimum, ensure:

- a) regular and effective support and supervision for all staff is implemented
- b) clear and effective plans are in place for maintaining and improving the service
- c) the management team effectively monitors the work of each member of staff and the service as a whole.

This is to comply with Regulation 4 (1)(a)(b) (welfare of Users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/10).

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).

Children play and learn 3 - Satisfactory / Adequate

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

Quality Indicator: Playing, learning and developing

Overall, most children were engaged and motivated in their play and were having fun with other children. We heard them laughing together as they participated in a variety of play experiences, including active, energetic play outdoors. This stimulated their natural curiosity, learning and creativity. On occasions some children in the nursery were disengaged and would have benefitted from more adult interaction to enable them to feel included.

Since the last inspection children had greater freedom to move indoors and outdoors promoting choice and independence, delays in accessing outdoor play on the first day of the inspection led to restlessness for some children. This was better managed on the second day of the inspection, where children transitioned at a pace that was right for them. The service should ensure that transitions continue to be well organised.

Children were developing some early literacy skills through play experiences. Activities such as, painting and sensory play with water and sand supported fine motor control and mark-making, helping to build early writing skills. Children showed enjoyment and curiosity as they scooped, poured and mixed in the water tray. While some singing and storytelling was observed, it was minimal and did not contribute meaningfully to language development or create a rich, playful learning environment.

Children's experiences benefitted from some skilled staff interactions, supporting them to develop their skills through play. On occasion, staff extended learning such as, encouraging shape recognition and incorporating counting into daily routines. These moments contributed positively to early numeracy development. However, staff did not always respond to children's cues to extend their play experiences. They were not consistently positioned at children's level, which limited the quality of interactions and reduced opportunities for sustained shared thinking. (See Area for improvement 1)

Planning approaches did not yet support depth and breadth in all children's learning. Additionally, the quality of learning observations within children's learning journeys were inconsistent. They did not always detail the individual learning or skills that were being developed. This made it difficult to track children's progress and identify where additional support or challenge was needed. (See Area for improvement 1)

Areas for improvement

1. To ensure children benefit from personalised and enriching experiences, which support their learning and development. The provider should support staff to develop their skills in engaging, responsive interactions that promote curiosity and creativity.

This should include but is not limited to:

- a) upskilling staff to ensure interactions with children are consistently high quality
- b) strengthening planning processes to ensure they are child-led, flexible and informed by high-quality observations
- c) embedding a consistent approach to observation and assessment that clearly identifies children's progress and informs meaningful next steps.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

Children are supported to achieve 3 - Satisfactory / Adequate

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

Quality Indicator: Nurturing care and support

Children benefitted from a warm and welcoming environment where staff interactions were caring and responsive. Staff were kind, helping children to feel safe and settled. Appropriate comfort and reassurance was offered, supporting wellbeing. Staff did not always respond to children's cues or attempts to initiate interaction. This resulted in missed opportunities for engagement and limited children's ability to feel fully supported. Parents we spoke with were very complimentary of the staff team and highlighted their nurturing approaches as a key strength.

Staff had begun to implement positive behaviour strategies, which was a promising development. Some children had started to respond well, showing early signs of emotional regulation and connection. The service should continue to embed these approaches to strengthen relationships and support children's emotional development.

Staff had taken proactive steps to engage external agencies in supporting children's individual needs. This collaborative approach had begun to enhance the quality of care, with input from visiting professionals contributing to more tailored support. As a result, children were better positioned to benefit from specialist expertise, promoting improved outcomes in their wellbeing and development.

Children's individual wellbeing did not consistently benefit from the effective use of personal planning. For example, there were no clear strategies of support in place for some children. Where strategies had been identified these were not always followed by all staff, leading to inconsistency in the support children received. This was a previous area for improvement and remains unmet. (See Area for improvement 1 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

Snack and lunchtime routines offered opportunities for independence. Children were encouraged to self-serve, take on responsibilities and build confidence. The use of snack helpers was a positive feature. During mealtimes staff practice was inconsistent. On several occasions, staff were task-focused and did not sit with children or engage meaningfully, limiting social interaction and emotional connection. Supervision during eating was not always effective, posing potential risks to children safety and wellbeing. Drinking water was available throughout the day, encouraging children to stay hydrated.

Staff recognised that strong connections supported children's wellbeing. Establishing good working relationships with parents was important to them. Parents felt included and well-informed about their child's time at nursery through regular use of digital platforms and daily communication. Sharing updates, photos and messages helped build positive links between home and nursery, allowing families to feel connected and engaged in their child's 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

To support positive outcomes for children, the provider should ensure that personal planning enables each child to receive appropriate care and support to meet their needs; and

- a) Ensure personal plans set out children's current needs and how they will be met.
- b) Ensure all staff are aware of and understand the information within the personal plans and use this to effectively meet each child's needs.
- c) Ensure staff are competent in completing chronologies and use these to take appropriate action to support children and their families.

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 30 May 2025.

Action taken since then

To support positive outcomes for children, further work is needed to ensure that personal planning enables each child to receive appropriate care and support. Personal plans did not consistently reflect children's current needs or clearly set out how these will be met. Not all staff demonstrated a clear understanding of the information detailed within the personal plans and did not always use recorded strategies effectively to meet individual needs. This had potential to compromise continuity and consistency in care.

This area for improvement has not been met and remains in place.

Previous area for improvement 2

To support positive and improved outcomes for children and families, the provider should ensure effective quality assurance systems are fully embedded into practice.

This should include but not be limited to:

- a) regular opportunities for reflection and self-evaluation of practice
- b) regular monitoring of staff practice to identify good quality skills and practice as well as training needs
- c) regular monitoring of the quality of children's experiences
- d) identifying measurable impacts that will benefit children's experiences and outcomes.

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 30 May 2025.

Action taken since then

There was insufficient capacity within the service to support and drive improvement. The service had not yet embedded or sustained effective quality assurance systems to support positive and improved outcomes for children and families. Although some initial steps had been taken, such as introducing self-evaluation, these were in the early stages and had not yet led to improved outcomes. The pace of change was far too slow and quality assurance processes had not been maintained. This area for improvement has therefore been upgraded to a requirement to ensure that robust, well-supported and sustained quality assurance systems are implemented to drive timely and meaningful improvements in outcomes for children and families.

This area for improvement has not been met and has been upgraded to a requirement.

Previous area for improvement 3

To ensure children are safe and receive high quality experiences at all times the provider and manager should as a minimum, review and make appropriate changes to staff deployment, to improve experiences for children.

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 they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 30 May 2025.

Action taken since then

Some changes had been made to staff deployment; however, gaps remained, particularly in ensuring effective supervision during mealtimes and transitions. These gaps continued to impact the quality and consistency of children's experiences and their safety.

This area for improvement has not been met and remains in place.

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

Leadership	2 - Weak
Leadership and management of staff and resources	2 - Weak
Staff skills, knowledge, values and deployment	3 - Satisfactory / Adequate

Children play and learn	3 - Satisfactory / Adequate
Playing, learning and developing	3 - Satisfactory / Adequate

Children are supported to achieve	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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