

# Keiss Primary School Nursery Day Care of Children

Keiss Primary School  
High Street  
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Wick  
KW1 4XB

Telephone: 07555 127 821

**Type of inspection:**  
Unannounced

**Completed on:**  
23 September 2025

**Service provided by:**  
Highland Council

**Service provider number:**  
SP2003001693

**Service no:**  
CS2003017221

## About the service

Keiss Primary School Nursery is registered to provide a service to a maximum of 15 children, aged from two years to those not yet attending primary school. The service 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 service operates term time only.

Keiss Primary School Nursery is located within Keiss Primary School in Keiss, Caithness. It has its own separate entrance. The premises consists of a playroom, with direct access to an enclosed outdoor play area.

## About the inspection

This was an unannounced inspection which took place on Monday 22 September 2025 and Tuesday 23 September 2025. Feedback was provided to the manager and representatives from The Highland Council on Tuesday 23 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
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents
- reviewed online feedback from two families.

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

- Children were generally nurtured and supported throughout their day.
- Families spoke positively about the staff team.
- Children's individual wellbeing did not consistently benefit from the use of personal planning.
- Children had opportunities to lead their play and learning and were able to free flow between indoor and outdoor areas.
- Children's play experiences supported some aspects of their learning and development.
- Staff interactions were not consistently purposeful or engaging to extend children's learning.
- Planning approaches within the service did not consistently reflect children's age and stage of development.
- Responses to concerns in relation to service delivery were ineffectively managed.
- The service did not demonstrate sufficient capacity to improve outcomes for children.

## 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 made an evaluation of weak for this quality indicator, as there were some strengths but these were compromised by important weaknesses.

**Quality Indicator: Leadership and management of staff and resources**

The service did not demonstrate sufficient capacity to improve outcomes for children. Key priorities identified at the last inspection such as, planning and developing a high-quality learning environment were affected by staffing challenges last year. These issues were acknowledged and carried forward into the settings improvement priorities for this academic year. However, actions taken had not yet led to measurable improvements and the pace of change in the setting was far too slow. This did not secure positive outcomes for children and meant the effectiveness of care and learning experiences for children were compromised. (See Requirement 1)

Self-evaluation was ineffective and was not yet driving forward improvement in the setting. Staff told us they were not involved in the process, although plans were in place to introduce opportunities for staff to come together to reflect on practice. As this was not in place at the time of the inspection, it meant staff were not consistently supported to reflect on or engage with best practice. As a result, opportunities to enhance outcomes for children were missed. (See Requirement 1)

Children's experiences and staff practice were observed by leaders. Some positive impacts were noted, particularly in identifying areas for improvement. This work was at the early stages so was not yet impacting on improving children's experiences.

Support and supervision for staff was ineffective, which limited their ability to reflect and improve practice and deliver high-quality outcomes for children. The absence of structured guidance contributed to the inconsistency in the quality of staff interactions. As a result, children experienced variability in the quality of their care, play and learning experiences. (See Requirement 1)

Safeguarding concerns were not consistently acted upon due to ineffective quality assurance processes. There was no clear system to monitor or evaluate safeguarding procedures to ensure timely and appropriate actions. As a result, children were potentially placed at risk. This was identified as an area for improvement at our last inspection and remains unmet. (See area for improvement 1 under 'What the service has done to meet any requirements made at or since the last inspection?')

Children and families had some opportunities to be involved and influence change within the setting. Children had choice in where they played on a daily basis. Parents were given opportunities to be involved in service developments. For example, parents told us they were asked for feedback through the use of digital platforms, this led to some improvements to children's experiences to promote their dignity. However, there was no clear monitoring of changes to ensure improvements were sustained. There was also occasions where feedback was not consistently acted upon. As a result, important opportunities to improve outcomes through strong partnerships with families were missed.

Responses to concerns in relation to service delivery were ineffectively managed. The provider failed to follow its own procedures and did not take appropriate action when concerns were raised. The lack of response meant children's wellbeing was not prioritised and safeguarding arrangements were ineffective. The absence of timely and transparent action, undermined the confidence of families and compromised the trust placed in the service to protect and promote positive outcomes for children. (See Requirement 1)

## Requirements

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

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

- a) the leadership team effectively monitors the work of each member of staff and the service as a whole
- b) clear and effective plans are in place for maintaining and improving the service
- c) internal procedures and policies are consistently followed to ensure accountability and high standards of care
- d) effective self-evaluation processes are implemented to identify strengths, areas for development, and inform continuous improvement.

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

Children had opportunities to lead their play and learning and were able to free flow between indoor and outdoor areas. Play experiences supported some aspects of their learning and development. Most children were happy and engaged in play. They participated in some play experiences that effectively promoted sensory exploration and imaginative engagement, encouraging curiosity and fine motor skills.

Not all children experienced play that was sufficiently responsive to their individual interests or developmental needs. A few children required more support to engage meaningfully in play. As a result, children did not always develop key skills through play.

Staff interactions were not consistently purposeful or sufficiently engaging to support high-quality learning. Staff occasionally used developmentally appropriate questions to enhance children's experiences and were observed engaging with them at their level. For example, they joined in role play activities, which encouraged creativity and supported emerging communication skills. However, engagement with children often focused on routine tasks and did not consistently extend play and learning. For example, during car play, staff did not introduce mathematical language, missing an opportunity to support early numeracy and thinking skills. As a result, children did not consistently experience rich and meaningful learning opportunities. (See Area for improvement 1)

Staff created joyful and responsive moments through spontaneous singing and reading stories to individuals, which supported children's language development and emotional connection. These experiences were engaging and helped build positive relationships. Children would benefit from more frequent opportunities for singing and storytelling to further support early language development.

Outdoor play effectively supported children's physical development with ample space for movement and exploration in the outdoor garden. They enjoyed climbing, balancing and splashing in puddles. This contributed positively to their wellbeing and fun they had while playing outdoors. The outdoor space provided limited opportunities to support literacy and numeracy. For example, children showed interest in mark making outdoors and made requests for materials to extend their play. Staff did not respond to this request, impacting on children's ability to develop early writing through play.

Staff used some provocations and invitations to engage children in play, including painting with cars and sensory experiences with rice. This supported children's creativity and exploration through play. Planning within the service did not consistently reflect children's age and stage of development. While staff were mostly responsive to children's immediate interests, planned experiences often lacked depth, challenge or relevance to individual learning needs. This resulted in missed opportunities to support progression and ensure that activities were developmentally appropriate and engaging. (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) ensuring a consistent approach to the quality of staff interactions
- 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 were nurtured by warm and caring staff who demonstrated kindness and patience in their interactions. This contributed to a relaxed and supportive atmosphere, where most children were happy and settled. We observed staff offering praise, physical comfort and reassurance, which helped foster positive and trusting relationships. However, there were occasions when staff did not consistently respond to children's emotional cues, resulting in some children not receiving timely support.

Staff demonstrated a basic understanding of most children's individual needs, which supported some aspects of their social development. Some parents expressed that staff knew their children well and were making good progress in their social development. One parent highlighted increased confidence and improvements in their child's social communication as a positive aspect of the service. They felt this contributed positively to their child's overall experience. However, the use of personal planning did not consistently enhance individual children's wellbeing. For example, some children did not have any identified strategies for support in place and staff did not always have sufficient knowledge and information to support individualised care and support. This limited staff's ability to respond effectively to children's needs and had the potential to compromise continuity and consistency in care. (See Area for improvement 1)

Where strategies had been identified these were not always developmentally appropriate. In particular, strategies used to support separation from caregivers were not always suitable or sensitive to children's developmental stage, limiting the effectiveness of emotional support. (See Area for improvement 1)

Snack time was a positive sociable experience, with homely touches such as, real crockery and tablecloths contributing to a welcoming atmosphere. Children were encouraged to be snack helpers, promoting independence and confidence. Lunchtime was more task-focused, with fewer opportunities for social interaction and independence.

Communication with families was positive. Families were warmly welcomed into the setting, and staff were seen to build positive relationships. Handovers at the beginning and end of the day were sometimes limited. Strengthening these interactions would enhance parental engagement and ensure families are fully informed about their child day.

### Areas for improvement

1. To support children's wellbeing, the provider should ensure each child receives appropriate care and support and their needs are met.

This should include but is not limited to:

- a) ensuring staff are supported to develop their knowledge and understanding of child development and emotional wellbeing
- b) staff use developmentally appropriate strategies to support children's emotional needs
- c) ensuring strategies of support for individual children are developed and implemented by staff



d) ensuring personal plans reflect children's current needs

e) ensuring all staff are knowledgeable and understand the information within the personal plans and use this to effectively meet each child's needs.

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).

## 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 improve outcomes for children, effective and robust quality assurance processes should be implemented.

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

- a) regular, effective and focused monitoring is carried out across the setting
- b) robust audits are developed and implemented and any actions are addressed promptly.

This is to ensure that care and support is in line with the Health and Social Care Standards (HSCS) which state: '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 17 April 2024.**

#### Action taken since then

Effective and robust quality assurance processes had not been implemented. There was no regular or focused monitoring being carried out across the setting and structured audits were not in place. As a result, children's outcomes were compromised.

**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](http://www.careinspectorate.com).

## Detailed evaluations

Leadership	2 - Weak
Leadership and management of staff and resources	2 - Weak
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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