

## B.A.S.I.C. and Corner House Nursery Day Care of Children

13 East King Street  
Helensburgh  
G84 7QQ

Telephone: 01436 679 666

**Type of inspection:**  
Unannounced

**Completed on:**  
4 November 2025

**Service provided by:**  
BASIC, a Scottish Charitable  
Incorporated Organisation

**Service provider number:**  
SP2015012609

**Service no:**  
CS2015342265

## About the service

B.A.S.I.C and Corner House Nursery is operated by BASIC, a Scottish Charitable Incorporated Organisation.

The service is registered to provide a day care of children service to a maximum of 70 children.

- Of those 70 no more than 20 are aged 2 to those not yet of an age to attend primary school.
- Of those 70 no more than 50 are of an age to attend school.

When both nursery and out of school care children are present the service may care for a maximum of 8 children aged from 2 years to not yet attending primary school and 30 children from those registered to attend primary school up to 13 years of age.

At the time of inspection, 22 children were in attendance.

The service is based within a two-storey detached villa with an outdoor play area in Helensburgh town centre. The accommodation currently consists of two playrooms downstairs for the youngest children and four playrooms upstairs for the out of school care children.

## About the inspection

This was an unannounced inspection which took place on 27 and 28 October 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
- gathered feedback from families through online questionnaires
- spoke with staff
- spoke with the chairperson of the board
- observed practice and daily life
- reviewed documents
- assessed core assurances, including the physical environment.

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 leadership, children play and learn, and children are supported to achieve.

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.

## Key messages

- The manager and lead practitioners are committed to improvement, reflective in their approach, and eager to use our feedback to enhance the service.
- Staff interactions were kind, caring, and responsive to children.
- Children in the nursery experienced stimulating, child-centred environments with balanced routines that promoted independence and creativity.
- Out-of-school care requires more support to align with the service's vision and values, and to provide age-appropriate, interest-led experiences.
- Staff would benefit from training opportunities for example child development, schematic play and trauma-informed practice.
- Policies and risk assessments require updating to meet current guidance and legislation.

## 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	3 - Satisfactory / Adequate
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 3 - Satisfactory / Adequate

### Leadership and management of staff and resources

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

During the inspection, it was evident that the manager and lead practitioners were passionate and motivated, striving to deliver a service that meets the needs of children and families. The management team demonstrated a reflective approach and acknowledged that the service is on a journey of improvement. They expressed appreciation for the inspection process and its findings. The manager and lead practitioners showed a strong capacity for change and intend to use our feedback to support their ongoing improvement efforts.

We also discussed roles and responsibilities within the leadership team, including the board members as the providers of the service. To strengthen leadership as a collective, we suggest that the provider and manager liaise more frequently moving forward. Introducing a robust monitoring calendar will support this process and help drive sustained improvement across the service.

The recently revised vision, values, and aims reflect a strong commitment to providing high-quality learning experiences within a safe, inclusive, and nurturing environment where every child was valued, respected, and treated as an individual. The team had worked collaboratively to develop key words that capture the ethos of the service. While we observed elements of these key messages within the early years, the out-of-school care service requires further support and guidance to fully meet these expectations. We agree with the service that involving out-of-school care children and families in developing shared values would be an important next step. The service plan to create a Children's Charter, which would provide a clear framework for promoting children's rights and embedding the service's values in daily practice. This approach would help ensure consistency across the setting and lead to improved experiences and outcomes for children and families.

We observed some examples of leadership within the staff team. For example, staff had lead roles in literacy development through initiatives such as Bookbug, and in promoting citizenship by creating opportunities for children to visit the local care home. These visits supported children to understand the importance of respecting and supporting others. These initiatives demonstrated that leadership responsibilities could enrich practice and benefit children's experiences. However, not all staff currently had the same opportunities. Staff in the out-of-school care service would benefit from having defined areas of responsibility. Some staff also shared that they would like more development opportunities, particularly in child development and trauma-informed practice. By encouraging leadership at all levels, the service could create a culture where staff feel included, empowered, and valued. We encourage the provider, manager and lead practitioners to progress with staff appraisals, as this would provide an opportunity to discuss individual strengths and areas for development. This would support targeted professional learning, build leadership capacity across the team, and lead to improved outcomes for children and families.

Self-evaluation for improvement was at an early stage, with the manager and lead practitioners engaging in informal discussions to identify strengths and areas for development. While these conversations were valuable, a fully embedded, systematic approach to self-evaluation was not yet in place. The nursery improvement plan currently focuses on literacy and children's rights, and we could see these were developing. Recently, the nursery had benefited from support provided by the Local Authority on early years developments, including guidance on creating high-quality learning environments and implementing responsive planning for children. These supports were helping staff to reflect on practice and begin to embed more structured approaches to improvement. However, it was less clear what the focus was for the out of school care children. Through our observations and discussions with the manager and lead practitioners we observed differences in pace and progress, with each setting at a different stage in the improvement journey. We would suggest that the provider, manager and lead practitioners develop a formal self-evaluation framework aligned with national guidance, involving all staff, children and families. This would ensure a shared understanding of priorities, promote consistency across settings, and support continuous improvement through regular reflection and evidence-based planning. (See area for improvement 1).

All staff within the service had been safely recruited. The induction process was informal, with staff sharing that they felt welcomed into the service. We asked the manager to devise an Absence of Manager policy to support the service on the manager's non-working days. This was actioned before the end of the inspection, setting out roles and responsibilities for staff and ensuring continuity of leadership when the manager was not present. This proactive approach would help support consistency in decision-making and provide staff with confidence in who to approach for guidance.

## Areas for improvement

1. To support continued best outcomes for children and families. The provider should develop and implement robust quality assurance systems. This should include but not limited to:

1. Formal monitoring of staff practice and engagement.
2. Monitoring of children's play and learning experiences.
3. Documenting and evaluating play and learning as a whole team approach.
4. Updating and developing policies and procedures to include best practice guidance and legislation.

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

### Playing, learning and developing

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

Staff within the early years setting showed an understanding of the importance of play and worked collaboratively to create a stimulating environment designed through the eyes of a child. They had recently introduced new planning approaches that focused on engagement, interaction, and child-centred learning.

As a result, children experienced quality play, learning, and development opportunities. The daily routine was well balanced, providing structured activities alongside free-flow play. This supported children to make independent choices about where to play and what experiences to engage in, promoting confidence and autonomy.

Staff interactions were purposeful and responsive. They enriched children's play through support and guidance while recognising when to step back, enabling children to build on their own ideas. This contributed to positive outcomes in children's engagement, creativity, and decision-making.

We suggested that the provider and management incorporate further training to strengthen staff knowledge of child development, for example, schematic play and training for working with children under three. This would enhance staff capabilities to meet the developmental needs of all children effectively.

Our observations showed that most children in the out-of-school care setting were happy, relaxed, and confidently moved between the spaces available to them. Staff provided a range of planned experiences to engage children, such as creating models using recycled materials. Each room was prepared by staff prior to the children's arrival, and children's ideas were gathered using whiteboards, with staff making efforts to follow through on these suggestions. We have suggested to the service that it would be beneficial to involve children in this process, as their views and experiences can provide insight and help shape improvements that reflect their needs and preferences. This approach promotes inclusion and ensures that children feel respected and heard within the service.

Many of the experiences observed were adult-led. For example, the art area had limited colour choices set by staff. Opportunities available to children were not always age- and stage-appropriate or reflective of their interests. This limited children's ability to fully influence their play and learning experiences.

As a result, children's opportunities for choice, creativity, and independence were reduced. To improve outcomes, we suggested that staff include children and families more meaningfully in the planning process. This would ensure experiences were responsive to children's interests, developmental stages, and individual needs, promoting greater engagement and enjoyment. (See area for improvement 1).

We observed nursery children to be engaged during outdoor play. They had fun creating potions and inventing their own forms of transport, pretending to plan exciting days out. Similarly, some out-of-school care children were observed enjoying time at a local park, playing football and making use of the freedom and space available.

Through these experiences, children developed social, emotional, and physical skills, supporting their overall wellbeing and confidence.

During discussions, some older children expressed feelings of boredom. This indicated that the experiences provided were not consistently meeting the needs and interests of all age groups. We suggested that staff explore fresh and innovative ways to engage older children. This would help their sense of inclusion, promote sustained interest, and enhance opportunities for choice and challenge. We recommend that the provider and manager review and reflect on the current environment, with particular attention to carrying out a thorough deep clean and reducing clutter. This will help enhance hygiene and safety, while creating a more welcoming and stimulating space for children to play, learn, and develop.

## Areas for improvement

1. To support best outcomes for children in quality play and learning the provider should review the current planning cycle along with developing provocations and reflecting on how they document children's progress and achievements.

This should include, but not be limited to, high quality observations, meaningful next steps, and evidence of progression in learning.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable to my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27) and 'My care and support meets my needs and is right for me' (HSCS 1.19).

## Children are supported to achieve 3 - Satisfactory / Adequate

### Nurturing care and support

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

Our observations showed that the manager, lead practitioners, and staff had formed positive relationships with most children and families. Staff were kind, caring, and responsive in their interactions. Families told us "The staff are all friendly and approachable and genuinely care about the children in their care." And "Staff are always welcoming and friendly and I feel that they know my child well." Levels of staff engagement and experience varied across settings, with some staff still developing confidence and skills.

In the nursery, children had defined key workers, which we observed to be supportive and effective in promoting continuity of care and strong attachments. Consideration should now be given to introducing a similar approach for out-of-school care children and families. This would help strengthen relationships and support children during transitions from school to the care setting.

We discussed with the manager ways to support dysregulated children and highlighted the importance of building stronger working relationships with other agencies to enhance support. At times, staff successfully helped children recognise and regulate their emotions during play, contributing positively to their wellbeing.

However, not all staff were confident in this area, meaning children were not always appropriately supported at the right time. This limited opportunities for children to develop emotional resilience and self-regulation skills. We suggested that the provider support staff and children by providing training in trauma-informed practice. This would lead to more consistent and skilled responses to children's emotional needs, promoting a nurturing environment where all children feel safe, understood, and supported.

Personal care routines were carried out sensitively, protecting children's dignity. We observed that children in the nursery had their personal care items appropriately stored, which supported privacy and respect. We suggested that a new changing station for children under three be purchased, as the current one was not in line with best practice guidance. This would promote safer and more hygienic care routines, and ensure compliance with national standards, contributing to improved health and wellbeing outcomes for younger children.



We found that the nursery followed the Local Authority's three-week menu, which met the standards set out in the Setting the Table guidance. We asked the manager to review the updated version of the guidance to ensure continued alignment with best practice. This would support children to access healthy and nutritious snacks in line with best practice.

Nursery children's wellbeing was supported through personal planning. Staff worked with families to gather information and set personal targets. Families told us "I feel involved in this but could be updated more in real time, some updates are quite late but I appreciate this is not always possible." We suggested plans be reviewed regularly and include next steps, family views, and input from other agencies where needed.

We identified gaps for out-of-school care children. While we do not expect the same level of detail, a robust plan is still required. We suggest consideration of new ways to engage families and stronger systems for recording information, such as chronologies and dialogue with professionals. (See area for improvement 1).

Nursery staff used digital platforms like Learning Journals to share children's learning and experiences, which was helpful for families who do not often attend the service. We suggested using a similar approach for out-of-school care.

The manager acknowledged previous challenges in engaging families but was open to gathering views from current children and families on how to move forward. Families told us "Some more information at handover of what the children have actually been doing would be good. And staff could be better at introducing themselves. I don't think anyone has told us their name since we started using the service." And "Overall I am very happy with the care my child is receiving at BASIC. I strongly recommend the nursery any day." This tells us that while families value the care provided, there are areas for improvement in communication and relationship-building.

A review of policies and procedures for child protection, administration of medicine, and incidents/accidents showed gaps and did not align with current guidance. We suggested that the provider and manager seek support from the Local Authority to adopt their existing policies. This would help ensure consistency, compliance, and alignment with best practice. (See area for improvement 2).

Risk assessments were in place, but some were simple tick lists and others, while more detailed, still lacked depth in evaluating actual risks to children. Strengthening these would improve safety and support better decision-making.

## Areas for improvement

1. To ensure children receive appropriate care and support and their health, welfare and safety needs are met the provider must, at a minimum:

- a) Ensure personal plans set out children's current health, play and learning needs including strategies and next steps 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 personal plans are regularly reviewed and updated in partnership with parents to reflect children's current needs.

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).

2. To ensure children are safeguarded and protected from harm. The provider must, at a minimum:

- a) Ensure all staff including management have current child protection training.
- b) Ensure the manager and staff are knowledgeable and understand the reporting, responding, and recording of child protection concerns.
- c) Ensure the manager implements a robust recording system that is clear and concise to follow, track and understand when reporting, responding, and recording child protection concerns.
- d) Ensure policies, procedures and guidance is updated and in line with current guidance and legislation.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying, and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20); and 'If I might harm myself or others, I know that people have a duty to protect me and others, which may involve contacting relevant agencies' (HSCS 3.25).

## 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	3 - Satisfactory / Adequate
Leadership and management of staff and resources	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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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

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