

# Sandwick Junior High School Nursery Day Care of Children

Sandwick Junior High School  
Sandwick  
Shetland  
ZE2 9HH

Telephone: 01595 745 320

**Type of inspection:**  
Unannounced

**Completed on:**  
24 November 2025

**Service provided by:**  
Shetland Islands Council

**Service provider number:**  
SP2003002063

**Service no:**  
CS2003016122

## About the service

Sandwick Junior High Nursery School is registered with the Care Inspectorate to provide a care service to a maximum of 28 children aged from three years to attending primary school. The nursery may care for a maximum of 24 children aged from three years to not yet attending primary school and an out of school care service to a maximum of 16 children attending primary school. When the out of school care children are present a maximum of 12 children aged from three years to not yet attending primary school may be present. During the inspection, the out of school club was not operating.

The service operates from within Sandwick Junior High School. Located in the village of Sandwick which is situated on the south mainland of Shetland. The children have direct access from the playroom to an enclosed outdoor play area and are close to the leisure centre and community garden.

## About the inspection

This was an unannounced follow-up inspection which took place on 24 November 2025 between 09:45 and 13:15. The inspection was carried out by one inspector from the Care Inspectorate.

The inspection focused on the requirement and areas for improvement made during the previous inspection which was completed on 19 September 2025. We evaluated how the service had addressed these to improve outcomes for children. During this follow-up inspection, we increased the evaluation for quality indicator Nurturing care and support to satisfactory/adequate.

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
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- The service had made progress in meeting the requirement and one area for improvement made at our previous inspection. More time is needed for other areas of improvement to be embedded in practice.
- Staff had a clear understanding of children's medical needs and medication was stored safely and in line with guidance.
- Quality assurance processes were being developed and were beginning to have a positive impact on children's outcomes.
- Staff felt well-supported by the manager and were encouraged to engage in professional dialogue to drive improvement.

## 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

Children are supported to achieve	3 - Satisfactory / Adequate
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Further details on the particular areas inspected are provided at the end of this report.

Children are supported to achieve

3 - Satisfactory / Adequate

Improvements to the safe storage and administration of medication resulted in improved outcomes for children and the requirement being met (see section - What the service has done to meet any requirements we made at or since the last inspection at the end of this report).

Improvements to children's personal plans resulted in improved outcomes for children and the area for improvement being met (see section What the service has done to meet any areas for improvement we made at or since the last inspection at the end of this report).

As a result of the improvements and positive impact these were having on outcomes for children, we have re-graded this quality indicator upwards from weak to adequate/satisfactory.

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 10 November 2025, the provider must ensure that children's medical needs are safely and effectively met to protect their health and wellbeing.

To achieve this, the provider must ensure:

- a) There are clear, safe and effective medication management procedures in place prior to children who require medication starting at the service. This includes written protocols for storage, administration and recording of medication.
- b) Staff must receive appropriate training and demonstrate competence in the safe handling, administration and documentation of medication.
- c) Each child requiring medication must have a detailed and regularly updated individual healthcare plan.

These plans must be developed in partnership with parents/carers and relevant health professionals and actively used to guide care and treatment.

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

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "Any treatment or intervention that I experience is safe and effective" (HSCS 1.24).

This requirement was made on 3 November 2025.

#### Action taken on previous requirement

Children's health and welfare was promoted by the safe storage, recording and administration of medication. Medication policy and procedures had been reviewed and linked to national guidance and clear medication management procedures were now in place. Core staff had attended relevant training and were familiar with children's allergies and medical needs. Improved written formats meant that children's health plans now contained the information needed to keep children safe and well. Health plans were regularly reviewed and updated with parents/carers, supporting the ongoing safety and welfare of children.

**Met - within timescales**

## 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

The provider should develop children's personal plans and support staff to use this information effectively to meet children's health, welfare and safety needs. To do this, the provider should, at a minimum, ensure:

- a) personal plans set out children's current needs and how they will be met
- b) personal plans contain appropriate strategies for support, including clear actions and timescales for review
- c) personal plans are regularly reviewed and updated in partnership with 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 3 November 2025.**

#### Action taken since then

Children's personal plans had been reviewed and an improved format had been introduced. Each child had a personal plan which had been developed collaboratively with families. Clear protocols were in place to guide staff on the information to record and the scheduling of review dates. Plans contained relevant and up-to-date information that supported children's care. Where additional support was required, care and support plans included strategies to guide staff in meeting children's individual needs effectively.

**This area for improvement has been met.**

## Previous area for improvement 2

The provider should develop the skills and knowledge of the staff team in relation to recording significant events and incidents in children's lives.

Chronologies should be used to keep records and document how children are supported through significant events and life changes and identify where additional supports may be needed from other agencies.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which state that: "My care and support meet my needs and is right for me" (HSCS 1.19).

**This area for improvement was made on 3 November 2025.**

### Action taken since then

Chronologies were beginning to be routinely used to record significant events in children's lives. These included any follow-up actions needed to support children and families. Management advised training was planned to further develop the skills and knowledge of the staff team. We acknowledged progress and encouraged the service to continue with the improvements made.

**This area for improvement has not been met.**

## Previous area for improvement 3

To support children's learning and development, the provider should ensure children experience high quality play and learning relevant to their age and stage of development. This should include but is not limited to:

- a) planning processes are effective to promote children's learning
- b) staff demonstrate an understanding of child development and how to use spontaneous play to support children's learning
- c) observation and assessment of children's learning identify and promotes their progress.

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 have fun as I develop my skills in understanding, thinking and investigation, and problem solving, including through imaginative play and storytelling" (HSCS 1.30).

**This area for improvement was made on 3 November 2025.**

### Action taken since then

A new planning process had been implemented and was in the early stages of development. This included responsive and intentional learning experiences. Staff spoke positively about this and commented, "It's much clearer and easier to use". The staff team was using a range of national guidance to develop their practice and regular staff meetings provided opportunities to discuss observations of learning and appropriate next steps. Management were supporting staff with observation techniques to plan experiences that followed children's interests to enhance and extend learning. The layout of the playroom had been reviewed and reorganised. Other areas of the playroom such as the story corner, role play and construction areas had been reorganised and worked well to support children's learning and development.

More time is needed to fully embed processes to fully impact on children's experiences. We acknowledged progress and encouraged the service to continue with the improvements made.

**This area for improvement has not been met.**

#### Previous area for improvement 4

In order to ensure a safe environment for children, the provider, manager and staff should further develop systems for identifying potential hazards and take prompt action to address these.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "My environment is secure and safe" (HSCS 5.19).

**This area for improvement was made on 3 November 2025.**

#### Action taken since then

Playroom spaces were clean, well-furnished and supported children's independence. Staff were aware of factors which raise the potential risk of children leaving the environment. The Care Inspectorate SIMOA (Safe, Inspect, Monitor, Observe, Act) campaign had been introduced to support practice. Children's safety was supported by the risk assessments which were in place. These had been recently reviewed and a new outdoor risk assessment had been created. Children were beginning to take part in discussion and record information to assess if the outdoor space was safe for play before being used. Environmental audits had identified actions required and management advised work to address these was planned.

We acknowledged progress and encouraged the service to continue with the improvements made.

**This area for improvement has not been met.**

#### Previous area for improvement 5

To ensure that outcomes for children and families continuously improve, the provider and manager should develop robust and effective quality assurance processes. This should include but is not limited to, self-evaluation and planning for improvement, carrying out audits of children's information and personal plans, medication and children's chronologies and monitoring staff practice.

This is to ensure that children's 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 3 November 2025.**

#### Action taken since then

The manager discussed quality assurance measures which had been put in place. This included an action plan of key priorities identified at the previous inspection and a quality assurance calendar which included audits of medication, children's chronologies and personal plans. These were in the early stages of implementation and were beginning to improve outcomes for children. More time was needed to fully embed quality assurance processes to fully impact on children's experiences.

We acknowledged progress and encouraged the service to continue with the improvements made.

**This area for improvement has not been met.**

## Previous area for improvement 6

To meet the care and learning needs of all children, the provider should ensure effective supervision and quality engagement for all children across the day.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "People have time to support and care for me and to speak with me" (HSCS 3.16).

**This area for improvement was made on 3 November 2025.**

### Action taken since then

The manager advised that the service continued to experience staff absences and staffing shortages. Consistent supply staff were in place to support continuity while recruitment processes remained ongoing. Staffing levels were sufficient to effectively support children during snack and lunchtimes. However, staff deployment was not fully assessed at this inspection.

**This area for improvement has not 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](http://www.careinspectorate.com)



## Detailed evaluations

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

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