

# Erskine Community Nursery - Bargarran Day Care of Children

Bargarran Hut  
Bargarran Square  
Erskine  
PA8 6BS

Telephone: 07961 121 789

**Type of inspection:**  
Unannounced

**Completed on:**  
19 November 2025

**Service provided by:**  
Erskine Community Nursery, a SCIO

**Service provider number:**  
SP2014012369

**Service no:**  
CS2014332202

## About the service

Erskine Community Nursery - Bargarran may provide a care service to a maximum of 20 children three years to those not yet attending primary school. At the time of inspection there were up to eight children in attendance. It is provided by a Board of Trustees, and has charitable status. The service is in partnership with Renfrewshire Council. to provide Early Learning and Childcare.

Children have access to one main playroom, with a sectioned off kitchen area, and secure outdoor play area. The service is close to shops, schools, transport routes, and other amenities.

## About the inspection

This was an unannounced inspection which took place on 18 and 19 November 2025 between the hours of 08:30 and 15:00. The inspection was carried out by one inspector 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 five families through online questionnaires
- Spoke with staff and management
- Observed practice and daily life
- Assessed core assurances, including the physical environment
- Reviewed documents

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, no improvements were identified relating to the core assurances.

As part of this inspection, we also 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; and
- Children's engagement with the experiences provided in their service.

This information will be anonymised and analysed to help inform our future work with services.

## Key messages

- Children are happy, confident, and well cared for, with staff providing warm, nurturing, and responsive support tailored to individual needs.
- Staff interactions with each other, families, and children are respectful and collaborative.
- Staff effectively capture children's voices through observations and discussions, ensuring experiences reflect their interests.
- Effective questioning supported children to extend their thinking.
- Management and staff were committed to the continued development of the service 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	4 - Good
Children play and learn	4 - Good
Children are supported to achieve	4 - Good

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

## Leadership 4 - Good

### Leadership and management of staff and resources

The service had recently refreshed its vision, values and aims in collaboration with families, ensuring these were clearly reflected in practice. Leaders and staff had demonstrated a strong commitment to creating a safe, welcoming and nurturing environment that respected individuality and promoted learning. Collaborative discussions had shaped both short and long term goals, fostering a partnership approach to improvement.

Self-evaluation was at an early stage following a period of change, including the appointment of a new management team. Staff had felt listened to and supported, which contributed to a positive culture of improvement. An improvement plan had been in place with a clear focus on literacy and numeracy. This was informed by consultation with staff, children and families through mind maps, questionnaires and self-evaluation activities.

The management team and staff had shown a strong commitment to continuous improvement, reflected in their proactive response to staffing changes and the appointment of a new senior leader. By beginning to engage with best practice guidance and self-evaluation tools, the team was creating a reflective, improvement focused culture. We suggested continuing to develop and embed a systematic and robust process of self-evaluation against best practice guidance and the new quality improvement framework for ELC. This would support the setting to achieve measurable outcomes of improvement, helping children to reach their full potential.

Staff had been supported in their roles through regular opportunities for informal and formal discussions with their manager, which had helped them feel valued and encouraged professional development. Training opportunities had been evident in practice, including Makaton, First Aid, Child Protection and Touch Therapy. These initiatives had enhanced inclusive communication and supported children's health and wellbeing. For example, "Makaton Mondays" had been introduced, enabling children and staff to learn new signs together, simplifying communication and promoting inclusion.

Staff had been using the key messages from the Care Inspectorate's safety campaign, 'Keeping Children Safe - Look, Think, Act' (SIMOA) in a meaningful way with children. Children learned about their rights and wellbeing through creative approaches linked to the SIMOA elephant character to reinforce safety messages. One child had shared, "This is SIMOA, he keeps us safe in nursery. He tells us no running feet in the nursery." These strategies had helped children make meaningful connections and develop awareness of their rights and responsibilities.

Quality assurance systems, including a monitoring calendar and risk assessments had been introduced to ensure systematic evaluation of practice. These processes had been aligned with national guidance, including 'Realising the Ambition: Being Me' and the 'Quality improvement framework for early learning and childcare sectors.'

Recruitment procedures had been robust, including PVG checks and references. Induction programmes had supported new staff to understand their roles and responsibilities, and the involvement of a parents in interviews had reinforced the service's commitment to values based recruitment. All staff had been appropriately registered with the Scottish Social Services Council (SSSC), reflecting adherence to professional standards. The induction process could have been strengthened further by fully utilising the 'Early Learning and Childcare: National Induction Resource.'

The leadership and staff team had been welcoming and open to feedback during the inspection, demonstrating a strong commitment to ongoing improvement and high quality experiences for children. Throughout the inspection, the manager was visible, approachable and supportive to staff, children and families.

## Children play and learn 4 - Good

### Playing, learning and developing

Children had ownership of their play and were fully engaged throughout the inspection. They had fun and participated in a wide range of experiences indoors and outdoors, leading their own learning with staff offering appropriate support when needed. Staff had used effective language strategies, including open-ended questioning, commenting and revisiting earlier learning, to extend children's thinking and vocabulary. For example, during construction play, staff had introduced mathematical language such as size and shape and posed challenge questions to support problem-solving and clarify ideas. These approaches had made learning meaningful and appropriately challenging.

The environment had been well planned and engaging, promoting play, learning and wellbeing. Spaces had been thoughtfully arranged with cosy areas for relaxation and social interaction, creative zones for arts and crafts, and imaginative play resources. Children moved freely between these areas, supporting independence and enabling them to lead their own learning. Regular outdoor play had enhanced experiences, with staff using radios and visual prompts to ensure safety and supervision. Children had enjoyed activities such as running, exploring the mud kitchen and reading outdoors, which supported physical development and wellbeing.

Resources in the outdoor area could have been strengthened, as the garden remained a work in progress requiring further input. Despite this, staff were responsive to children's invitations to play, ensuring the pace of the day was led by the children. Observations included spontaneous play with peers and planned experiences such as storytelling, emergent writing, and mark-making. Staff followed children's interests and ideas when planning activities, which positively impacted choice and engagement.

Staff had used a variety of activities to create a sense of wonder, offering praise and encouragement that helped children recognise achievements and feel pride. Planning processes were child-centred, using mind maps and consultations to capture children's voices. Requested activities such as crafts, animals and water play had been incorporated into daily experiences. Observations informed planning, supporting children to progress in the learning and achieve their identified next steps. Local authority tracking procedures had been used to assess learning and skill development, and improvements in recording and evaluating plans were evident. Children's experiences were documented in well-presented floor books, capturing their voices and learning journeys. While planning and evaluation were still developing, these improvements had already made a positive impact on children's learning.

## Children are supported to achieve

### 4 - Good

#### Nurturing care and support

Children's emotional wellbeing was supported by responsive and intuitive staff. Relationships that staff had developed with children were strong and based on the principles of nurturing care. Staff had known children in their care well and had shared the benefit of working in a more intimate setting, which had allowed them to become familiar with all children.

Children's voices had been actively gathered and valued during the session. Staff had responded positively to children's requests, such as initiating the 'feelings jars' activity, demonstrating that children's ideas had influenced planning and practice. Through this activity, children had developed emotional literacy by identifying feelings and associating them with colours for example, "yellow is happy". Each child had been invited to share their feelings individually, fostering confidence and communication skills. Responses had included "Happy, making pictures for my baby's birthday," "Loved, because I am playing with my friends," and "Calm, because we did yoga." These insights had highlighted positive wellbeing, social connections and areas for further support, such as addressing fears. Children's feelings had been acknowledged and respected.

Care routines within the setting were flexible and responsive to individual needs and preferences. Staff had made effective use of "All About Me" profiles to gather detailed information about each child, enabling personalised care that promoted comfort and dignity. Observations confirmed that staff consistently demonstrated a respectful approach to personal care, ensuring privacy and supporting emotional wellbeing. This practice contributed positively to children's sense of security and trust.

Mealtimes were calm, unhurried and had provided opportunities for social interaction and independence. Fresh water was available throughout the day, and staff had created a nurturing environment, role modelling social behaviour and encouraging natural conversation. Children were able to choose between packed lunches and hot meals. While improvements had been noted, some children had experienced lengthy waiting periods. We acknowledged that on day 2 the experience for children had improved. Further opportunities for independence, such as self-serving and cutting food, had been identified as next steps.

Transitions and daily routines had been carefully managed to minimise disruption. Staff had used consistent routines, songs and clear communication to help children understand what was happening next. Families had described improvements in their child's confidence and social skills since joining the setting, showing that thoughtful planning had supported continuity and stability.

Staff understood the importance of individualised transitions and had worked closely with families to ensure these were at a pace suited to each child. Parents had praised the care provided, stating, "It's obvious how much the staff care for each and every child; my son is thriving since starting here." Staff had also developed strong connections with families through events such as literacy stay-and-play sessions, which parents had described as "fab" and "loved the stay and play." Continuing to involve families in shaping future events would support further strengthening of relationships.

Personal plans had been updated to promote the Getting it Right for Every Child (GIRFEC) wellbeing indicators, which are safe, healthy, achieving, nurtured, active, respected, responsible, and included. These indicators supported a structured six-week settling-in process, incorporating the voices of children, families, and key workers. Staff demonstrated strong knowledge of individual children and communicated effectively;

however, more consistent recording of strategies every six months has been encouraged to ensure next steps are clearly identified and evaluated. The management team has plans to streamline paperwork to make this process more efficient.

Procedures for medication administration were in place, although no children currently required medication. Templates for administration of medication were in place. Further refinements were advised, including the addition of review dates and recording any refusals. The introduction of the quality assurance calendar will help to strengthen practice in this area.

## 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 a plan to address the environmental issues that we have identified.

**This area for improvement was made on 15 March 2016.**

#### Action taken since then

The service secured funding for refurbishment funding and therefore improvements have been met both indoors and outdoors.

#### Previous area for improvement 2

The service should further develop quality assurance processes to support the on-going developments in line with current best practice

**This area for improvement was made on 15 March 2016.**

#### Action taken since then

A new leadership team had now supported self evaluation, putting in place a detailed quality assurance calendar. Best practice documents such as 'How good is our early learning and childcare' have been used to support this process. Additionally, staff have become more involved in the process.

## 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	4 - Good
Leadership and management of staff and resources	4 - Good
Children play and learn	4 - Good
Playing, learning and developing	4 - Good
Children are supported to achieve	4 - Good
Nurturing care and support	4 - Good

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