

Crown Primary Nursery Class Day Care of Children

Crown Primary School
Kingsmills Road
Inverness
IV2 3JT

Telephone: 01463 233879

Type of inspection:
Unannounced

Completed on:
4 December 2025

Service provided by:
Highland Council

Service provider number:
SP2003001693

Service no:
CS2003017195

About the service

Crown Primary Nursery Class is registered to provide a care service to a maximum of 64 children at any one time aged three years to not yet attending primary school. The service is provided by the local authority and operates in term time only.

The nursery is attached to Crown Primary School, located in the centre of Inverness. Children are accommodated in a purpose-built area, located within a church that borders the school grounds. They have access to a large playroom, canteen servery, toilets and an enclosed garden space which leads directly into the school playground.

About the inspection

This was an unannounced inspection which took place on 2, 3 and 4 December 2025. This 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 and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spent time with children using the service and spoke to three of their parents/carers
- received 13 completed questionnaires from parents/carers and six from staff
- spoke with staff and the management team
- observed practice and children's experiences
- 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 core assurances.

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

- Processes for quality assurance were in place and had led to change, these should now be developed until they are fully embedded in practice.
- Children's safety and wellbeing was promoted as staff were recruited safely.
- Children were well settled, confident and having fun during their time at nursery.
- At most times children's learning and understanding was supported through staff interactions.
- Children's wellbeing was supported through kind, nurturing interactions with staff, leading to them feeling safe and secure.
- Children were cared for in an inviting and comfortable environment supporting them to feel valued.

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 thrive and develop in quality spaces	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

Quality Indicator: Leadership and management of staff and resources

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

The manager worked with families, children, and staff to develop a shared vision, values, and aims. These were reflected in the ethos of the setting, including values such as kindness and respect. This created a shared understanding of expectations and positively influenced practice.

Quality assurance processes were in place and leading to improvements. For example, an audit of accidents resulted in changes to the layout and reminders for children to stay safe. However, some issues were not identified through audits, such as review times for medication records. The manager and staff should ensure audits are embedded and consistently highlight gaps in practice or areas for improvement.

Children benefitted from an improved pace of change. An outstanding requirement and an area for improvement had been met, which positively impacted children's experiences. Planned changes focused on children's play and learning. However, some evaluations of these changes were more focused on completing actions rather than assessing their impact. Future evaluations should measure the effect on children's experiences.

Staff were involved in evaluating the service using best practice guidance. This helped them feel confident in making suggestions and discussing improvements. Improvement plans prioritised children's learning through play. When assessing the impact of change, the manager and staff should focus on outcomes for children rather than task completion.

Most parents felt involved in developing the service, although some did not. Examples of involvement included comments such as: "The Google classroom allows us to get involved as we wish and interact as we wish" and "I think any suggestions would be taken on board." We discussed with the manager the importance of ensuring all parents have equitable opportunities to contribute. The manager agreed to review current systems and consider improvements.

We acknowledged the hard work of the manager and staff team in achieving progress since the last inspection. There was a strong ethos of continuous improvement, which positively influenced staff morale and, in turn, children's experiences.

Children's safety and wellbeing was promoted as managers recognised the importance of safe recruitment processes and staff retention. Although there had been recent changes, the current staff team was consistent, supporting strong relationships with families and a consistent approach. All staff were appropriately registered with professional bodies and aware of their responsibilities to maintain their registration. Opportunities for staff to share ideas and experiences supported their development and enhanced children's experiences.

Children thrive and develop in quality spaces**4 - Good****Quality Indicator: Children experience high quality spaces**

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Children experienced a welcoming and comfortable environment that conveyed they were valued. Since the last inspection, the layout had been changed to create a more homely feel, using fabric panels, soft furnishings, and rugs. The room was organised into clear zones, supporting children's choice to play individually or in groups. There was ample space for children's play including quieter areas for rest or activities such as storytelling. Children had space to store personal belongings and artwork, helping them feel included and respected. Recent improvements, such as replacing windows and enabling temperature control, supported the health and wellbeing of children and staff.

Staff recognised the importance of daily outdoor play for children's health and wellbeing. Children were able to access the outdoor area throughout the day. Here children could participate in more active, physical play as well as reading in the playhouse or mark making. In addition, the larger school playground was accessed for planned activities such as pedal play.

Children's safety was promoted through a well-maintained and secure environment. Staff considered how children used spaces when changing the layout and resources. Risk assessments supported staff and children to reduce hazards. Children were involved in daily outdoor checks, promoting their awareness of safety. Children were kept safe as staff had a good awareness of where individual children were and communicated well to ensure effective supervision and support.

At some points during the day some of the areas in the room became cluttered. This had the potential to limit children's play as well as cause trips or falls. The manager agreed to monitor this to reduce any impact.

Children's health was promoted as effective infection prevention and control measures were in place. These included regular cleaning of surfaces and handwashing for staff and children. We noted that toilets were occasionally untidy, for example, with overflowing paper towels or unflushed toilets. The manager agreed to introduce regular checks of this area.

Staff had observed how children used the spaces when planning activities and the layout of the environment. This meant children were able to influence changes and were confident in their use of spaces and resources. Resources generally reflected children's interests and were arranged at different heights to support access and inclusion.

Children's artwork was displayed, promoting their sense of achievement and confidence. We suggested more prominent labelling to support environmental print and literacy development. Resources reflecting diverse cultures had been sourced but were not yet available. Plans were in place to introduce these in the new term, and this should be prioritised to support children's understanding of different cultures, traditions, and families.

Children and families' privacy was promoted through secure storage of information in line with current

guidelines. Policies such as a confidentiality policy were in place to promote staff and parent understanding of this.

Children play and learn 4 – Good

Quality Indicator: Playing, learning and developing

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Children's engagement was promoted as staff understood how children develop, learn, and progress. They had appropriate expectations of children's behaviour and abilities, which supported them in providing play experiences which engaged most children. Activities included outdoor physical play, art and mark-making, sensory play, and imaginative play. At times, some children were less engaged. The manager agreed to monitor this to identify where additional support or interventions may be needed.

Children were able to follow their interests through a balance of adult and child led activities. This included opportunities such as storytelling, yoga, construction and model making. Staff took opportunities to support children's development of skills in numeracy, literacy and language. This was mainly through their interactions and responses to children's interests. For example, when children showed an interest in exercise the staff member supported them in this, encouraging them to count and using positional language. Digital technology such as a smart board were accessible to children. More could have been made of these opportunities for children to deepen their learning, for example, more challenge in the activities on the smart board.

The manager and staff recognised the importance of families in children's learning and development. Most families agreed they were invited to discuss their child's experiences and learning, although some said this happened only "sometimes". Two parents noted recent improvements. Posts on the digital platform shared information about children's experiences, but these could better highlight learning. Home links were being developed, with requests for parents to share their child's experiences. The manager should continue with planned developments and ensure equitable opportunities for all families.

Children experienced an enabling environment, supporting them to lead their play and learning. Children were mostly engaged in their activities but some would benefit from more challenge in the resources available. Children were comfortable in the routines and confident in moving around the space and accessing resources. Children gathered for "Together times" at different points in the day; we discussed with the manager the importance of minimising any disruption to engagement during these times.

Children's confidence and self-esteem were supported through kind and encouraging interactions from staff. At times, these interactions extended learning, for example, by using numerical language and encouraging children to think and wonder. However, the quality of interactions was not consistent across the day, leading to missed opportunities to extend learning.

Children were supported to form positive peer relationships. Staff reminded children to be kind and used certificates to acknowledge considerate and helpful behaviour, promoting respect and social skills.

Children influenced planning through discussions with staff which were recorded in floorbooks. These demonstrated staff knowledge and understanding on how to encourage children's participation. Staff understood children's stages of learning and development, which supported general planning for children's

learning. The setting of individual learning goals were in the early stages and not yet fully embedded. Staff undertook observations to identify interests and achievements, but these did not consistently capture children's learning. Staff are developing skills in planning for individual learning through observations and goal setting.

Children are supported to achieve 4 - Good

Quality Indicator: Nurturing care and support

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Children's wellbeing was supported through nurturing relationships with staff and families. Most parents agreed they had positive relationships with staff; only one parent disagreed. Staff were already working to minimise barriers to building relationships. Children were confident and happy to invite staff into their play or seek reassurance and comfort.

Children's safety was promoted as they were encouraged to consider their own safety and act responsibly with peers and resources. This could be more consistent during staff interventions, for example, allowing children time to consider safer options for play.

Children's wellbeing was promoted during transitions when they started nursery. This routine was now flexible to support children and families at this time. Transitions throughout the day had been considered, such as lunch time, to best support positive experiences for children. Improvement could be made in some transitions to minimise any disruption to children's engagement. For example, when some children prepared to go home, play for all children stopped. The manager agreed to review these routines.

Children's attachments were supported during staff absence through the use of familiar relief staff, promoting continuity of care. This promoted a continuity of care. Staff were respectful of children, promoting their privacy and dignity when supporting with personal care. Consistency in routines such as mealtimes and personal care provided children with a sense of safety and security.

Children enjoyed mealtimes which were relaxed and unhurried. The food offered was nutritious and took account of any dietary restrictions or allergies. Fresh water was available throughout the day, although staff could remind children to access this to keep hydrated. Children were often able to develop self-help skills, such as pouring drinks and serving food at snack time. Opportunities for independence could be more consistent, for example, always allowing children to spread butter or help prepare snacks.

Children's health and wellbeing were supported through personal plans, which were in place for all children and regularly reviewed with parents. This ensured that information was up-to-date and supported staff in identifying children's individual needs. Parents told us they found staff approachable and supportive when discussing their child's needs. Detail of how staff will provide the support was not consistent within the children's plans and did not reflect staff knowledge. We discussed the importance of detailing agreed strategies of support to promote a continuity of care.

The manager and staff recognised the importance of family connections. Opportunities for involvement included stay-and-play sessions, termly informal chats with the manager, and invitations to outings and events. Uptake of these opportunities was not currently monitored. We discussed the benefits of tracking participation to identify barriers and ensure equitable opportunities for all parents.

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

Requirements

Requirement 1

By 30 May 2024, to ensure the health and welfare of children and staff, the provider must, at a minimum:

- a) maintain a comfortable temperature in the setting.

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.

This is in order to be consistent with Health and Social Care Standards (HSCS), which state that:

'My environment has plenty of natural light and fresh air, and the lighting, ventilation and heating can be adjusted to meet my needs and wishes' (HSCS 5.21).

The timescale for this has been extended to 28 February 2025.

This requirement was made on 8 March 2024.

Action taken on previous requirement

During the inspection the playroom was at a comfortable temperature for children and staff. New windows had been installed enabling staff to provide ventilation should the room be too warm or stuffy. Heating within the nappy changing room had been repaired and the staff could now control this to provide a comfortable environment.

Met - outwith 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

To ensure all children experience an environment which is welcoming and homely, the management team and staff should review and improve the layout of the environment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'If I experience care and support in a group, I experience a homely environment and can use a comfortable area with soft furnishings to relax.' (HSCS 5.6).

This area for improvement was made on 8 March 2024.

Action taken since then

The layout of the playrooms had changed significantly since the last inspection. Comfortable chairs and sofas as well as rugs and cushions had been added to provide areas for children to relax and participate in quieter activities such as storytelling. Fabric had been used to create areas where the ceiling was lower further promoting a welcoming and homely environment. All staff had been involved in the planning and implementing the changes and were reflecting on how well the space supported children's play.

This area for improvement has 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.

Detailed evaluations

Leadership	4 - Good
Leadership and management of staff and resources	4 - Good
Children thrive and develop in quality spaces	4 - Good
Children experience high quality spaces	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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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