

Raigmore Primary School Nursery Day Care of Children

Raigmore Primary
King Duncan's Road
Inverness
IV2 3UG

Telephone: 01463 234 971

Type of inspection:
Announced (short notice)

Completed on:
19 November 2025

Service provided by:
Highland Council

Service provider number:
SP2003001693

Service no:
CS2003017260

About the service

Raigmore Primary School Nursery is a day care of children service situated in the Raigmore area of the city of Inverness.

The service is registered to provide a care service for a maximum of 54 children aged three years, to not yet attending primary school. At the time of our inspection, 25 children were registered with the service.

The service is situated in a residential area near shops, wooded walks and other amenities. The children are cared for in a purpose-built playroom with access to a fully enclosed outdoor area. A second building opposite the main nursery building houses a catering kitchen from where children have lunch. This playroom will also be used for daily activities and play as numbers of children registered to attend the service increase.

About the inspection

This was a follow up inspection which took place on 17 October 2025, between 12:00 and 17:00, 18 November, between 08:45 and 17:15, and 19 November 2025, between 09:00 and 11:00. 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, 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

- Children's play and learning experiences were benefitting from improvements to the environment and range of resources available.
- Most children were motivated and engaged, enjoying activities which promoted a variety of skills, such as fine motor skills.
- Children were cared for by staff who responded to them with warmth and compassion, promoting a nurturing ethos.
- Staff and leadership teams worked collaboratively to address areas identified for development at the previous inspection, resulting in early progress beginning to positively impact children's experiences and outcomes.

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

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

Leadership 3 - Satisfactory / Adequate

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

Leadership and management of staff and resources

We assessed and evaluated a requirement in place since 30 October 2024 (see section, Outstanding requirements, requirement 2). This was in relation to ensuring that there are robust quality assurance processes and systems in place to monitor progress in making improvements, and ensuring that these are sustained.

The service had developed a clear action plan. They had used this effectively, ensuring improvements remained focused on meeting requirements and areas for improvement identified at previous inspections. This meant that there had been some positive impacts on children's experiences and outcomes as a result. For example, children's lunch time experience was a calmer, more child-centred time of the day.

Some areas identified in this requirement had not yet been fully implemented (see section, Outstanding requirements). As a result we made an area for improvement in relation to these aspects.

(See area for improvement 1).

Areas for improvement

1.

To support high quality experiences for children and positive impacts outcomes for children, the provider should implement effective monitoring of staff practice to maintain standards and identify areas for improvement.

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

'I use a service and organisation that are well led and managed' (HSCS 4.23).

Children play and learn 3 - Satisfactory / Adequate

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

Playing, learning and developing

Since our last inspection, improvements to the environment and resources in play areas had led to a more varied and engaging learning environment. There was a balance of planned and responsive experiences which were mainly child-led, both indoors and outdoors. This supported children to explore through play, to develop creativity and independence. Most children were motivated and engaged, enjoying activities which promoted a variety of skills, such as fine motor skills. As a result children played more purposefully for longer periods and had fun while exploring learning through play.

Children's play was supported by some quality staff interactions. Staff often joined children, playing down at their level. This led to some joyful moments and enabled staff to provide some individual support and challenge. However, skilled approaches such as wondering, commenting, and explaining were not yet used consistently to foster curiosity and enrich learning. The service had recognised that this was an area for development. Appropriate staff training had been identified and was scheduled to take place shortly after this inspection. Developing staff knowledge and skills to respond to individual interests and needs through high-quality interactions was previously included in an area for improvement (see section, Outstanding Areas for Improvement). We have now made a new area for improvement to maintain this focus.

(See area for improvement 1).

A range of play provocations supported children's interests and curiosities in both indoor and outdoor areas, promoting purposeful engagement. For example, props were provided to encourage children to retell a story they had enjoyed, supporting language and literacy development. The mud kitchen was thoughtfully resourced to reflect a current interest in water. This offered opportunities for numeracy through items such as weighing scales and containers of various sizes. Strengthening staff interactions during these experiences would further deepen learning, particularly in numeracy. As children's interests evolved throughout the day, staff were not always responsive in extending these in the moment. For example, play with playdough developed into making birthday cakes and candles, inspired by a child's celebration. This was not built upon to enhance creativity and imagination. The service should now consider they could be more responsive to emerging interests to enrich and extend children's ideas and thinking.

Opportunities for children to be involved in planning and reflecting on play and learning activities were at an early stage. Children were beginning to contribute to floorbooks by adding drawings. Observations generally captured children's skills and learning. Where next steps for learning had been identified these were not always appropriate or achievable. Staff were being supported to develop the use of floor books as part of the ongoing development of planning and observation processes.

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 ensuring a consistent approach to the quality of staff interactions.

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 requirements we made at or since the last inspection

Requirements

Requirement 1

By 21 February 2025, the provider must ensure each child receives appropriate care and support and their needs are met. To do this, the provider must, at a minimum:

- a) Ensure personal plans set out children's current needs 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 comply with Regulation 5(1)(2) – (Personal plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, 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 requirement was made on 30 October 2024.

Action taken on previous requirement

Children's care and support was benefitting from personal planning information being reviewed within timescales and updated regularly with their families. Information gathered informally from families was also recorded and supplemented personal plans. Staff explained that they had used inclusive methods, such as writing down parents' feedback to support parents with limited written English. We suggested that the service apply similar approaches when gathering information for children's personal plans to help strengthen parental involvement in planning. Updates were dated and initialled, which helped colleagues identify the right person to approach for further details. This helped staff to understand individual needs and to support children well.

A range of actions had been implemented to ensure children's care and support needs were addressed effectively through personal planning. A system was in place to monitor personal planning information and feedback given to staff where gaps needed to be addressed. Staff recognised when information in personal plans indicated to collaborate with other professionals to meet individual needs effectively. For example, proactive collaboration with professionals led to an enhanced transition being put into place.

Children's care and support benefitted from staff who knew them well and understood their individual needs. Staff demonstrated this by using appropriate support strategies. For example, one child was enabled to join a group activity because staff sensitively provided the necessary support. Staff also applied a range of strategies to promote language and communication, showing they could identify and implement effective approaches. We recommended refining this further by identifying and applying specific strategies for individual children. This would enable staff to deliver more targeted support and promote consistent progress.

Met - within timescales

Requirement 2

By 21 February 2025, the provider must ensure that there are robust quality assurance processes and systems in place to monitor progress in making improvements, and ensuring that these are sustained. To do this the provider must at a minimum ensure:

- a) Clear and effective plans are in place for maintaining and improving the service.
- b) The manager effectively monitors the work of each member of staff and the service as a whole.

This is in order to comply with Regulation 3 and Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure care and support is consistent with the Health and Social Care Standards, 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 requirement was made on 30 October 2024.

Action taken on previous requirement

The service had developed and implemented a number of quality assurance systems to monitor improvements. For example, monitoring of children's personal plans identified where there were gaps and inconsistencies in the quality of the information recorded to support children's care. This system meant that staff received individualised feedback enabling them to address the issues identified effectively. A strong focus on the action plan was driving improvements and supporting self-evaluation. We suggested that the service might consider how staff could be included in moderating their work. This could promote staff skills and understanding by learning from each other.

Some quality assurance systems were at an early stage and require more time to embed and evaluate for sustained impact on children's outcomes. Some informal monitoring of staff practice had taken place, allowing immediate feedback to resolve issues quickly, but this did not support long-term skill development. We suggested formal staff practice monitoring with a specific focus, such as quality interactions, should be implemented. This could provide specific feedback that develops staff knowledge, understanding, and skills. Quality assurance of this process could identify strengths and areas for improvement, leading to positive impacts on children's experiences and outcomes.

The first part of the requirement has been met. **A new area for improvement has been made to address the remaining aspect (see section, Leadership).**

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

To support the safety, health and wellbeing of children, the service needs to ensure that staff have the right knowledge, understanding and skills to manage the administration of medication effectively.

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

'I experience high quality care and support because people have the necessary information and resources.'

(4.27)

This area for improvement was made on 30 April 2025.

Action taken since then

We were unable to fully assess this area for improvement at this inspection, as there were no children currently receiving medication whilst attending ELC.

The paperwork to support administration and management of medication, including best practice guidance, was available and accessible to staff. This meant that should there be a change in children's medical circumstances, the service was ready to support and respond appropriately.

A protocol was in place for a child with an identified medical need. The protocol provided clear information about the role of staff in monitoring the child's health and wellbeing during their time in ELC. This included what actions to take if they became concerned. Staff understood their role in following the protocol meaning that the identified need could be appropriately met.

This area for improvement has not been assessed and remains in place.

Previous area for improvement 2

To support children's health and wellbeing, the provider should ensure that children experience a calm, relaxed environment while eating.

This should include but is not limited to taking steps to reduce noise levels due to the acoustics of the building where children eat lunch.

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

"I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible." (HSCS 1.35)

This area for improvement was made on 30 April 2025.

Action taken since then

Overall, we found that children's lunch time experience was calmer and quieter than at our previous inspection. There was a process in place to manage the transition between eating and returning to the main playroom. This enabled children to engage in a variety of play experiences for a short time before returning to the main playroom.

The manager had been advised by the local authority that the building construction meant that it was not suitable for consideration for noise dampening systems to alleviate noise. As a result the service had opted to use furnishings to try to reduce noise. In addition, staff supported children attentively and promoted a calm lunch time experience. These measures provided some improvement in noise levels during lunch time and meant that children's lunch time experiences benefitted as a result.

This area for improvement has been met.

Previous area for improvement 3

To support children's health and wellbeing, the provider should ensure that the environment is free from intrusive smells.

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

"My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells." (HSCS 5.18)

This area for improvement was made on 30 April 2025.

Action taken since then

Children's health and wellbeing was supported by the absence of intrusive unpleasant smells in the setting. Systems in place to monitor areas where obtrusive smells could be a potential issue. For example, there was a daily routine of opening the window in the nappy changing room. Staff monitored how often the nappy bins were emptied. They were able to request extra bin collections if necessary. These steps contributed to a pleasant, hygienic environment for children.

This area for improvement has been met.

Previous area for improvement 4

To enable children to receive high quality play, learning and development opportunities, which support them to reach their full potential, the manager and staff should as a minimum ensure:

- a) All children experience an environment that is welcoming, well furnished, comfortable, and homely.
- b) Play spaces offer a range of resources and materials to effectively challenge and stimulate children, and reflect their current interests and curiosities, both indoors and outdoors.
- c) Staff have the knowledge and skill to respond to children's individual interests and needs with high quality interactions.

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 for my age and stage, which stimulate my natural curiosity, learning and creativity" (HSCS 2.27).

This area for improvement was made on 30 October 2024.

This area for improvement was made on 30 October 2024.

Action taken since then

Children's care and wellbeing benefitted from improvements to the environment indoors. The playroom was furnished with items that were in good condition. Soft furnishings, which were appealing and clean, gave children the message that they matter. Further homely touches added since our last inspection softened the room and created comfortable, cosy spaces. There was scope to continue to build on this approach, including extending this to the outdoor area.

Overall, children's play, learning and development were benefitting from an improvement to the range and variety of resources and materials available to them. These reflected their current interests and developmental learning stages. Some individual interests had been taken into account. One or two areas, for example, outdoor loose parts play, were responsively developed. This enhanced children's curiosity with puddles and water. As a result, the level of engagement in play was deeper. There was scope to develop this responsive approach to fostering children's curiosity and extending interests across other play areas.

Some quality staff interactions supported children's play and learning. These interactions enhanced play and enabled children to extend their thinking and learning. To develop consistent quality in interactions, the service had scheduled relevant staff training. This was pending at the time of inspection. As this development was at an early stage of implementation, it was too soon to evidence any significant impact on children's experiences and outcomes. We have made a new area for improvement to maintain focus on supporting children to benefit from high quality interactions during play and learning.

This area for improvement has been met and a new area for improvement has been made (see section, Playing, learning and developing).

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	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

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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