

# Little Me Nursery Temple Day Care of Children

6 Spencer Street  
Glasgow  
G13 1DZ

Telephone: 01414340501

**Type of inspection:**  
Unannounced

**Completed on:**  
4 February 2026

**Service provided by:**  
Little Me Nursery Limited

**Service provider number:**  
SP2005007348

**Service no:**  
CS2024000060

## About the service

Little Me Nursery Temple is a day care of children service in a suburban area in Anniesland, in the west end of Glasgow. The early learning and childcare service is in partnership with Glasgow City Council to provide commissioned places for children aged between three and five years and eligible two year olds.

The service can accommodate a maximum of 136 children not yet attending primary school at any one time. No more than 26 children are aged under two years, no more than 50 are aged two years to under three and no more than 60 are aged three years to those not yet attending primary school full time. At the time of our inspection there were a total of 55 children present on the first day and 52 children on the second day.

The accommodation consists of five play environments across three floors. Additionally, children have access to a sensory, soft play and information and communication technology (ICT) environments and a dining area for older children's mealtimes. Children have access to an outdoor play area for physical play and outdoor learning. There are changing and toilet facilities for children and office, catering and staff facilities. The service is close to schools, transport routes, shops and community services.

## About the inspection

This was an unannounced inspection which took place on 3 and 4 February 2026. 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
- reviewed feedback from 23 parents and carers whose children attend the service
- reviewed feedback from seven staff members employed in the service
- spoke with the provider, management and staff
- observed practice and staff interactions with children
- reviewed documents.

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. 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.

**Key messages**

- Effective safeguarding procedures were in place, with management and staff fulfilling their child protection responsibilities.
- Improvements were needed to strengthen the recording of medication administration to support children's health and well-being.
- Effective communication systems were in place to ensure key information was shared with relevant staff and families ahead of room transitions.
- The routine of the day should be reviewed for older children to ensure children's play reflects their choices and interests, indoors and outdoors.
- Personal plans were in place for children and used effectively to support children's individual needs.
- Warm, nurturing relationships supported children's wellbeing.

**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	5 - Very 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

**We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.**

The service's vision, values, and aims were reflected in practice, contributing to a positive and nurturing environment for children. Children were offered a wide range of learning experiences. Staff promoted literacy and numeracy opportunities and the development of children's social, communication and independence skills. We discussed with management that involving children and families in reviewing and developing the vision, values, and aims would enhance their sense of belonging and ownership within the service.

At our previous inspection, we made a requirement to ensure children are safe and protected from harm. Child protection procedures were in place and management and staff had attended training. They were aware of their responsibility to safeguard children in their care and had the ability to recognise when children and families needed support. Child protection files showed that lead safeguarding staff followed appropriate guidance and procedures. Records were being updated to ensure relevant staff had access to necessary safeguarding information. For further information refer to 'Outstanding requirements' section of the report.

The manager was committed to initiate change by involving and recognising the contributions of families and staff. Staff were actively supported and engaged in the settings improvement journey and self evaluation exercises. This collaborative approach supported meaningful self evaluation, helping identify strengths and areas for development. This contributed to leading to improved outcomes for children, including more robust personal plans, responsive planning and enhanced outdoor learning environments.

A children's committee enabled children to share their views and contribute to decisions, such as creating playroom golden rules. We discussed with management the opportunity to extend children's involvement further across the service. This has the potential to strengthen children's sense of respect, inclusion, and belonging.

The service monitored and audited key areas, including accidents and incidents, child protection and infection prevention and control. This supported the identification of improvements and ongoing developments. While children's medication was clearly labelled and stored safely, audits highlighted the need for more robust systems. Continued improvements were needed to the recording of information on administration forms. This included documenting children's symptoms, and ensuring health care plans provided clear guidance for responding to emergencies. Strengthening medication auditing processes has the potential to further support children's health and wellbeing.

Staff were recruited safely in line with safer recruitment guidance. New staff were supported by a mentor who understood their role in guiding and supporting the induction process. A structured induction programme helped new staff develop a clear understanding of their responsibilities and effective practice to meet children's needs. Staff told us they felt confident seeking support from any team member, contributing to a welcoming and collaborative environment.

We observed that in most playrooms staff were deployed effectively and their supervision supported children's safety and wellbeing throughout the day. Staff communicated clearly when leaving the room and worked well as a team. In one playroom, we observed during staff lunch breaks, minimum adult to child ratios were not consistently maintained. This was despite additional staff being available in the service. As a result, supervision and support could have been improved to ensure children's safety and wellbeing. We brought this to the attention of management, who responded promptly by deploying staff to the playroom.

## Children play and learn 4 - Good

### Play, learning and developing

**We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.**

Children were happy, engaged and participating in a variety of experiences. Children told us, "I like the garden and Chase," "We do singing and dancing and stories," "I like coming here and sometimes I get tired," "We were outside this morning. On the swings and playing with friends."

Children demonstrated confidence and independence by leading their own play and learning, supporting their overall development and wellbeing. They had opportunities to develop language, literacy and numeracy skills through activities such as domino games, story sessions and song time. Their curiosity, creativity and imagination were nurtured through sand play, role play and small world play. Babies were also offered opportunities to develop creativity and communication through stories, musical instruments and sensory play.

Improvements had been made to the layout and organisation of outdoor play environments, creating enabling spaces that actively supported children's play and learning. The environment offered opportunities for positive risk taking and challenging play, supporting the development of confidence, resilience, and problem-solving skills. Children were observed to be engaged in physical play using climbing apparatus, swings and wheeled toys. These experiences supported their physical development and movement. Management told us of their plans to continue developing their outdoor spaces, including enhancements to the mud kitchen. We agreed this would further enrich children's play and learning.

Staff were observed engaging positively in play with children, with many interactions reflecting responsiveness and genuine connections that supported children's learning. Some staff would benefit from further developing their interaction skills, particularly in knowing when to engage and when to step back to offer appropriate support and challenge. Providing professional development opportunities has the potential to enhance the quality of interactions and further enrich children's learning experiences.

We observed that older children were brought together for a large group activity. While many remained engaged, some children lost interest and became restless. We also observed that older children were taken outdoors in groups, sometimes for only short periods. Management and staff should review the daily routine to ensure children's play is responsive to their choices and interests, including providing continued and flexible access to outdoor play.

Management and staff had continued to develop their planning processes, with both spontaneous and planned experiences taking place. Children were consulted during planning, helping ensure experiences were tailored to their choices and interests. Children's comments were recorded alongside photos, supporting them to revisit and reflect on their learning. Planning records could be strengthened by including

evaluations of experiences, which would support identifying next steps and promote continued progression and learning.

A digital platform was used to support communication and share information about children's learning and development. Improvements had been made to the quality of observations and documentation, with informed descriptions that showed clear progression in children's learning. Next steps were identified for all children; however, there were inconsistencies in how these were recorded. Some staff recorded clear, meaningful next steps, while others were vague or not well linked to children's learning. Further monitoring and dedicated reflection time would support staff in developing their skills and ensuring next steps are recorded effectively.

## Children are supported to achieve 5 - Very Good

### Nurturing, care and support

**We found major strengths in this aspect of the setting's work and identified very few areas for improvement, therefore we evaluated this quality indicator as very good.**

Children were settled and confident in their environments and had developed friendships which supported children's growth and development. Children's care and learning routines were delivered with kindness and compassion from staff who were warm, nurturing and caring towards children. This supported children to feel safe, secure, and contributed to the positive relationships they had with staff. Parents told us, "The staff are a positive influence in my child. I trust them and believe they truly care about their wellbeing" and "Staff care for my child whole-heartedly and we feel they really know them. This has made transitions much easier."

Staff planned children's transitions in partnership with parents and carers. Effective communication systems ensured key information was shared with relevant staff before transitions took place, supporting children's care, play and learning. Transitions were tailored and adapted to meet the individual needs of children and their families, promoting their wellbeing.

Lunch was a relaxed, sociable and unhurried experience with staff supervising children, contributing to a safe and supportive mealtime experience. Older children had opportunities to make choices and develop independence through self serving food and clearing away their lunch items. Staff demonstrated a clear understanding of children's individual dietary requirements, ensuring meals were appropriate and safe, which supported children's health, safety and wellbeing.

At our previous inspection, we made an area for improvement relating to infection prevention and control during mealtimes for older children. Handwashing facilities for both children and staff had been installed in the dining area, and we observed these being used before lunch. After eating, staff supported older children to have their faces and hands wiped. We discussed with management encouraging all children to wash their hands with soap and running water helps minimise the spread of infection and promotes children's overall health and wellbeing. For further information, refer to the 'Outstanding areas for improvement' section of the report.

All children had access to drinking water throughout the day, supporting their health and hydration.

Personal plans were in place for children and developed in partnership with families and children.

Improvements had been made to the documenting of plans. These were reviewed regularly and contained the information staff needed to support and meet children's individual needs. Targets were identified to promote children's development and wellbeing, and we could see progression.

Staff confidently described children's individual needs and the strategies used to support them. They knew the children well, enabling them to respond effectively to their individual needs and preferences. Staff also collaborated with external professionals, who provided guidance and suggested strategies to further support children. We could see that these strategies had been implemented in practice to meet children's needs.

Management and staff had created a warm and welcoming environment supporting children and their families to feel valued. Families had regular opportunities to discuss their child's care and development both formally and informally. The service had systems in place to support communication both verbally and digitally. This supports fostering positive relationships, involvement and a sense of belonging.

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

### Requirements

#### Requirement 1

By 31 July 2025, the provider must ensure that children are safe and protected from harm. To do this, the provider must, at a minimum:

- a) ensure all management and staff with lead safeguarding responsibilities receive relevant child protection training
- b) ensure management and staff with lead safeguarding responsibilities are competent in reviewing chronologies and child protection records to assess the level of risk to children and any concerns identified are reported to the relevant authorities timeously.

This is to comply with Regulation (4) (1a) 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 states that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

**This requirement was made on 5 March 2025.**

#### Action taken on previous requirement

Management and staff had attended child protection training. Management and staff with lead safeguarding duties were aware of their responsibilities and the procedures for identifying and escalating concerns.

The child protection policy and procedure had been reviewed, updated and shared with staff. They were aware of their responsibility to safeguard children in their care and had the ability to recognise when

children and families needed support.

Child protection files showed that lead safeguarding staff followed appropriate guidance and procedures. Concerns were addressed and reported to relevant authorities in a timely manner. Records were being actively updated to ensure relevant staff had access to necessary safeguarding information.

Audits of child protection files were taking place to support quality assurance and had contributed to improving safeguarding practices.

The requirement had been met.

**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 children's health and wellbeing needs, improvements should be made to the infection, prevention and control procedures for the mealtime experience for older children. Priority should be given to but not limited to the provision of accessible hand wash sinks for children and adults.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that 'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.16).

**This area for improvement was made on 5 March 2025.**

#### Action taken since then

Handwash sinks for both children and adults had been installed within the dining area used for older children's mealtimes. Children and staff were observed using these facilities to wash their hands prior to lunch.

After eating, staff supported older children to have their faces and hands wiped. Encouraging all children to wash their hands with soap and running water helps to minimise the potential spread of infection and promotes children's overall health and well-being.

The area for improvement had 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

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	5 - Very Good
Nurturing care and support	5 - Very Good

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

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

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