

Erskine Community Nursery - St Anne's Day Care of Children

St Anne's Primary School
Park Drive
Erskine
PA8 7AE

Telephone: 07762 722 514

Type of inspection:
Unannounced

Completed on:
3 February 2026

Service provided by:
Erskine Community Nursery, a SCIO

Service provider number:
SP2014012369

Service no:
CS2014332198

About the service

Erskine Community Nursery - St Anne's Centre may provide a care service to a maximum of 18 children aged from 3 years to those not yet attending primary school. At the time of inspection there were up to 13 children in attendance.

The service operates within St Anne's Primary School in Erskine as a Scottish charitable incorporated organisation.

Children have access to one main playroom, where children have direct access to an outdoor enclosed playground. The service is close to shops, schools, transport routes, and other amenities.

About the inspection

This was an unannounced inspection which took place on 2 and 3 February 2026 between the hours of 10:00 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

- The service's vision, values, and aims placed children's rights and wellbeing at the heart of practice.
- Quality assurance and self-evaluation processes should be developed to support continuous improvement of the service.
- The service should consider the resources, equipment and play spaces made available to children to offer sufficient challenge, enable children to develop their imagination and curiosity.
- The manager and staff should consider a more integrated approach to tracking children's progress, supported by a planning format that is individualised and includes a balance of both intentional and responsive planning.
- Children were happy, confident, and having fun. They experienced warm and nurturing care from staff who knew them very well and were responsive to their individual needs.

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
Children are supported to achieve	4 - Good

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

Leadership 3 - Satisfactory / Adequate

Leadership and management of staff and resources

The service's vision, values, and aims placed children's rights and wellbeing at the centre of practice. These aims promoted children's independence, confidence, resilience, curiosity and a sense of being valued. Staff demonstrated a commitment to these principles in their daily interactions. They listened attentively to children's views and ensured their choices influenced the flow of the day. Practitioners promoted independence through meaningful choices, allowing children to lead their own learning.

The service had recently experienced a period of instability, with significant staff changes. The manager demonstrated an emerging capacity for change and a commitment to improving outcomes for children during this time. Following the identification of gaps within the service, several proactive steps were taken to strengthen practice. These included developing more effective auditing processes, creating an accessible induction resource for new staff, and establishing clearer planning expectations. Although these developments provided a foundation for improvement, they are still at an early stage. Continued monitoring and sustained leadership oversight will be necessary to ensure new systems become embedded and achieve the intended impact on children's experiences.

We saw that quality assurance processes were in need of further development, and limited documentation was available during the inspection. This resulted in gaps in the service's ability to evaluate the quality of children's experiences, celebrate improvements, track progress over time, and identify staff development needs. Without clear and regular monitoring, important opportunities to understand what is working well and where further improvement is needed may not be fully realised. Strengthening self-evaluation processes would support continuous improvement. A clear structure for reflection would help enhance staff accountability and promote shared and distributed leadership. Meaningfully involving children and families in self-evaluation would ensure developments reflect their lived experiences and support meaningful change. (see area for improvement 1)

Staff demonstrated a commitment to promoting children's safety and wellbeing by embedding key messages from the Care Inspectorate's 'Keeping Children Safe - Look, Think, Act' (SIMOA) campaign. Children engaged positively with activities linked to the SIMOA elephant character, which supported their understanding of staying safe. Children were observed referring to keeping themselves and others safe during daily experiences, demonstrating emerging awareness of their rights and responsibilities. The service should now review staff deployment during transitions to areas out with the playroom, to support children as they access the toilet area. (see area for improvement 2)

The manager was visible, approachable, and supportive throughout the inspection. Feedback from families reflected the strong relationship by referencing the manager in the following way, "My child sees one of the key workers on our way to school every morning and they run to them shouting their name and runs to them & they greet each other with a hug! Can't ask for more than that".

With a newly formed staff team, there is now an opportunity to build shared understanding, strengthen consistency, and develop collective capacity. Clear induction, regular monitoring, and effective supervision would support staff to understand their roles, meet expectations, and maintain accountability. A collaborative team approach would be essential to ensure improvements are fully implemented and sustained.

Areas for improvement

1. To improve outcomes for children, the provider should develop and implement robust quality assurance systems with a focus on, monitoring children's personal plans, medication, children's experiences, staff practice and evaluating and improving the nursery.

This is to ensure that management and leadership is consistent with the Health and Social Care Standards that state; 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19)

2. The provider should introduce a clear, consistent procedure for escorting children to the toilet area, ensuring safe supervision while maintaining privacy.

This is to ensure that staff supervision is consistent with the Health and Social Care Standards that state; 'My environment is secure and safe' (HSCS 5.17)

Children play and learn 3 - Satisfactory / Adequate

Playing, learning and developing

Children experienced a positive and enabling environment where they were happy, confident, and engaged in their play. They moved freely between areas of the playroom and chose from a variety of experiences, including jigsaws, magnets, and mark making activities. These opportunities supported children to develop early literacy, fine motor skills, and problem-solving abilities. Staff interactions were warm and nurturing, with practitioners using open-ended questioning to extend children's thinking and support their learning.

The quality and range of play experiences across the service were mixed. Indoors, there were some opportunities for children to lead their own learning and express their ideas and imagination, but these opportunities were limited and did not consistently support deeper learning or sustained engagement. Outdoors, staff told us that resources were sparse, and observations showed reduced opportunities for curiosity, creativity, and self-directed play. This restricted the development of important skills such as resilience, independence, and exploration of the natural environment. (see area for improvement 1)

Despite resource limitations, children demonstrated enthusiasm for outdoor learning. On day two, children returned from outdoors, excitedly sharing their muddy play experiences with one another. One child shared "Look at my face, it's all muddy!", highlighting their increased confidence and enjoyment of sensory and natural exploration. These experiences were valuable in promoting physical development, curiosity, and positive attitudes towards outdoor learning. Ensuring regular, well-resourced access to outdoor play would help build on this emerging interest.

Transitions also impacted the quality of children's play. During busier points in the day, such as after lunch, some children would have benefited from increased support from staff to reengage in purposeful play. Strengthening staff responsiveness at these times would help maintain children's engagement, support emotional regulation, and ensure continuity in their learning experiences.

Digital technology was used positively to enhance learning, with children engaging well in interactive and sensory based experiences. Construction and the home corner areas were also popular and supported early social development and cooperative play. To strengthen children's autonomy and independence, the service should consider expanding the range of accessible resources.

Introducing a resource inventory or choice book would allow children to request additional materials stored out of reach to take greater ownership of their play based experiences.

Planning approaches required further development to improve the quality of learning experiences. It was difficult to identify clear progression pathways or individual next steps in children's learning. Planning did not consistently demonstrate how children's interests were being built on, or how learning was being extended over time. To ensure high-quality, purposeful play experiences, planning should be responsive, built on children's ideas, and provide a balance of intentional and child led learning. Staff would benefit from training in planning, observation, and assessment to support confident identification of next steps and improved continuity of learning. (see area for improvement 2)

Children benefited from nurturing relationships and a positive ethos that supported their wellbeing. However, inconsistencies in observations, planning, recording, and resource provision limited the depth of learning and progression for some children. Families shared that communication around learning could be strengthened, with comments such as, "Communication could be improved and a little more structure to my child's development," and "More updates on day-to-day activities, photos or videos etc". Improving communication and planning processes would provide clearer insight into children's learning and support more effective partnership working.

Areas for improvement

1. To support positive outcomes and improve children's play experiences management and staff should:

- Provide children with more challenge, open ended materials and loose parts play, to discover, promote their curiosity and imagination, their sense of wellbeing, wonder and adventure.
- Review the layout of children's play spaces indoors and outdoors with a view to creating more space with better areas and opportunities for children to play and learn, choose resources, and be inspired and creative.

This is to ensure care, play and learning is consistent with the Health and Social Care Standards (HSCS) which states 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 to my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

2. Outcomes for children should be improved through supporting staff to implement a child-centred approach to observation, planning and assessment of children's learning through play. In addition, staff should be supported in developing their understanding of child development and planning cycles.

This is to ensure care and support is consistent with the Health and Social Care Standards 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)

Children are supported to achieve 4 - Good

Children are supported to achieve.

Children were happy, relaxed, and confident as they accessed all areas of the nursery. They engaged positively with their peers and staff and were observed having fun throughout the session.

Warm, nurturing interactions from staff helped children feel secure and reassured, and we saw children approach staff confidently when they needed help or comfort. One parent reflected these positive relationships, sharing "The staff are caring, nurturing and know the children very well".

Warm, nurturing relationships were evident across the setting. Staff provided reassurance, comfort, and praise in ways that supported children to feel safe, respected, and confident. They modelled positive, respectful language and supported children to understand and express their emotions. This helped children to resolve conflicts calmly and develop empathy. As a result, children experienced a secure, predictable environment where they were confident to explore and develop at their own pace. One parent reflected this, saying, "The staff are absolutely fantastic and so kind and grateful with all the kids".

Children's privacy and dignity were always respected. Staff adopted a nurturing and caring approach, delivering personal care in a warm, kind and respectful manner. We observed staff asking children for permission before offering support with personal care, ensuring children felt included in decisions and maintained a sense of control over their routines. All care was carried out promptly and sensitively, contributing to children feeling safe, valued, and emotionally secure within the setting.

Mealtimes were calm, unhurried, and provided valuable opportunities for social interaction and independence. Staff created a nurturing atmosphere by role modelling positive social behaviour and engaging children in natural, relaxed conversation. Staff used language that reflected children's rights, saying, for example, "I trust your judgment" and "go for it". These rights respecting approach supported children to feel valued and empowered. As a result, children appeared relaxed and secure during mealtimes, which contributed to developing their confidence and sense of belonging.

All About Me information and personal plans were being gathered for children currently attending the service. From the documentation sampled, it was not clear how staff planned to support children's individual health, welfare and safety needs, or how this information informed children's play and learning. Almost all personal plans had not been reviewed or updated within the required legislative timescales. While staff demonstrated knowledge of each child through their daily interactions, recorded information did not fully reflect this. Improving the quality and consistency of personal plans would help ensure information is current, meaningful and used to support positive outcomes for all children. (see area for improvement 1)

Children's health and wellbeing was supported, as staff demonstrated strong knowledge of individual care needs. Medication sampled during the inspection was stored correctly, with permissions reviewed recently and in line with best practice guidance. Documentation was accurate, up to date, and clearly reflected each child's health requirements. To maintain consistency and ensure high-quality practice is sustained, we asked that medication procedures continue to be reviewed regularly by the leadership team as part of the service's quality assurance calendar.

Staff shared that they had positive relationships with parents, supported through daily verbal conversations and informal exchanges. Some parent engagement was celebrated within a floor book, which included appreciative comments following the graduation celebration and a community 'Heart Start' session, offering lifesaving training to parents and local community members. To further strengthen partnership working, the service should consider creating more regular and meaningful opportunities for parents to see the play environment, engage with staff, and observe children's learning.

Providing these opportunities would help build parents' confidence in the service, deepen relationships, and promote a more collaborative approach to supporting children's care, learning and development.

Areas for improvement

1. The provider should improve the quality, consistency, and use of personal plans to ensure they fully reflect children's individual health, welfare and safety needs. Personal plans must clearly outline how staff will meet each child's needs and support their play and learning. The service must also ensure that personal plans are reviewed and updated with parents/carers at least every six months, or sooner if a child's needs change, in line with legislative requirements.

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).

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
Children are supported to achieve	4 - Good
Nurturing care and support	4 - Good

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