

# Rephad Nursery Day Care of Children

Rephad Primary School  
Cairnport Road  
Stranraer  
DG9 8BQ

Telephone: 01776 704 195

**Type of inspection:**  
Announced

**Completed on:**  
4 February 2026

**Service provided by:**  
Dumfries & Galloway Council

**Service provider number:**  
SP2003003501

**Service no:**  
CS2003015537

## About the service

Rephad Nursery is located within the grounds of Rephad Primary School in Stranraer.

The service is registered to provide a care service to a maximum of 100 children, not yet of an age to attend primary school at any one time. Of those, no more than 20 are aged 2 to under 3 years. There is currently a temporary condition which states that from 14 August 2025 to 14 August 2026 the service will be provided to a maximum of 60 children not yet of an age to attend primary school, of whom no more than 5 are aged 2 to under 3 years.

## About the inspection

This was an announced inspection which took place alongside Education Scotland between Monday 2 February 2026 and Wednesday 4 February 2026. The inspection was carried out by two early learning and childcare 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:

- spent time with children using the service
- received eight completed questionnaires from families and spoke to parents collecting their children
- assessed core assurances, including the physical environment
- spoke with management and staff
- observed practice and children's experiences
- reviewed documents.

At the time of this inspection, improvements were identified relating to 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. We have reported where improvement is necessary within the heading Children are supported to achieve: Nurturing Care and Support.

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**

- Children were cared for by a kind and caring staff team who supported the development of the whole child.
- Staff were becoming more confident in evaluating their own practice using the new quality framework. Team meetings now followed a structured approach, supporting more reflective, meaningful conversations.
- A quality assurance calendar provided a helpful structure for reviewing key processes and had been effective in identifying areas for improvement. However, this was not yet fully improving outcomes, as staff were still developing confidence in leading improvements.
- Children were having fun, exploring a wide range of indoor and outdoor experiences.
- Interactions were generally warm and responsive, especially with children who communicated easily. Opportunities for two year olds needed closer attention.
- Planning approaches were improving, with floor books showing children's voices influencing learning. However personal learning stories did not consistently show progress or next steps.
- Wider community experiences, like outings, enriched learning. Parental involvement had been identified as an area for improvement, and staff had been working together to introduce a variety of opportunities for parents to be included.
- Children enjoyed healthy meals and snacks and were supported to be independent. Mealtimes were warm and supportive, but not consistently used as rich communication opportunities.

**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	3 - Satisfactory / Adequate

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

## Leadership 4 - Good

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 cared for by a kind, caring staff team who understood the importance of supporting the development of the whole child, and this was reflected in their warm relationships with most children. This was clearly set out in the nursery's Vision, Values and Aims statement, which had recently been reviewed and was on display in the nursery and helped to guide plans for improvement.

Staff were becoming more confident in evaluating their own practice, and had begun using the new quality framework to evaluate children's experiences. Team meetings now followed a helpful structure based on good self-evaluation practices and this supported more reflective conversations. Staff would benefit from further team based reflection on how the vision shapes their everyday practice, helping ensure consistency and shared ownership. We suggested that an appreciative inquiry approach, starting from strengths, would also support more positive and solution-focussed evaluations.

A quality assurance calendar was in place and provided a systematic approach to reviewing key processes such as personal plans and learning journals. While this structure was helpful, it was not yet fully influencing outcomes for children, as staff were still developing confidence in taking ownership of improvement actions. Sustained progress would require the whole team to be actively engaged, particularly given the significant changes experienced over the past year. Accessing further leadership support, such as improvement science training, would strengthen the manager's capacity to lead ongoing change. See area for improvement 1.

The nursery had an improvement plan informed by ongoing quality assurance, self-evaluation and previous inspection findings. We suggested making evidence supporting the setting's improvement journey more visible so that it supports greater involvement from children, families and staff.

Staff had regular opportunities to reflect through huddles and daily reflection sheets. Devolved leadership had begun; however, staff were not consistently following through on responsibilities, often relying on the manager to complete tasks. Strengthening accountability and shifting from problem focused to solution focused thinking would support staff to take a more active leadership role in creating rich, high quality experiences for children.

Induction and support processes were inconsistent, with varied approaches and unclear expectations. Strengthening mentoring arrangements and, where necessary seeking guidance from relevant departments like staffing, would ensure all staff understand their responsibilities. Personal files also required more systematic organisation to ensure compliance and enable effective monitoring.

Staff told us that, "We remain committed to continuing to reflect on and develop our practice by building on training opportunities, sharing good practice as a team and responding to feedback from children and families to further improve the quality of care".

## Areas for improvement

1. The management team should continue to strengthen systems for monitoring and evaluating the impact of staff practice. Robust quality assurance processes should be further embedded to support the service and improve outcomes for children.

To achieve this, the management team should work together to:

- a) Ensure that monitoring of staff practice and the implementation of organisational policies and procedures is carried out regularly, with purposeful and constructive feedback provided to support staff to make and sustain improvements.
- b) Actively involve all stakeholders, including staff, children, and parents, in self-evaluation processes to develop a shared understanding of strengths and priorities for improvement.
- c) Strengthen leadership across the staff team by supporting practitioners to take responsibility for key areas, develop confidence in leading improvements, and contribute meaningfully to ongoing evaluation and change.

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

## Children play and learn 4 - Good

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 having fun as they explored and investigated a range of experiences both indoors and outdoors. Most children were settled and happy on arrival, and clearly enjoyed their play. We saw that children played well together and were engaging in increasingly complex play.

Staff had begun to involve children more in planning activities, such as developing the shop and the opticians.

Children had opportunities to develop early literacy and numeracy skills through rhymes, stories, mark-making and imaginative play. Outdoor learning was well resourced, with children enthusiastically involved in the mud kitchen and exploring natural and loose parts materials. Some children were also exploring scientific ideas, such as magnets, although staff did not always extend these opportunities through discussion or further challenge.

While there were examples of rich learning, staff did not consistently build on children's ideas or extend their thinking. At times, child-led play was interrupted by adult-directed routines such as group times or the daily mile. Reviewing the purpose and timing of these activities would help ensure they support, rather than disrupt, children's engagement. Planning for children who remain beyond core hours should also ensure they receive meaningful learning experiences throughout the day.

Children had access to a wide range of resources, though staff skills in differentiating for age and stage meant that learning was not always extended as fully as possible. Opportunities for two year olds in particular should be carefully considered, and a small, consistent key group may support this. Digital technology should also be developed further to support communication as well as play.

Staff interactions were kind and generally responsive, especially with children who communicated with ease. However, missed opportunities to respond to children's cues limited progress in communication, problem solving and creativity. Some staff were beginning to use higher order, open questions to extend and challenge children's learning, though this is at an early stage. Staff understanding of how children learn, including schemas, was developing.

Planning approaches were improving, and floor books showed that children's voices were increasingly influencing learning. However, children's individual learning stories did not consistently show progress or next steps. Some observations remained descriptive rather than evaluative, which made it more difficult to plan effectively for individual learning. Staff would benefit from further support in assessment and planning so that learning builds more clearly on children's existing skills. See area for improvement 1.

The wider community was being used effectively to enhance children's experiences, and parental involvement had been identified as an area for further development. Staff had introduced several opportunities for parents to be more engaged in the life of the nursery. Parents confirmed this and told us about: "Lots of stay and play available snack and chat also, my husband and grandparents attend these." as well as about trips to the local leisure centre, the library and shops. Children told us about going to see the horses and throwing sticks in the burn at the nearby woods. However, some parents told us that they would like more information about their child, telling us, "I feel like individual updates on our children's achievements would be great, we get a lot of group updates".

## Areas for improvement

1. The manager and staff should continue to strengthen approaches to child-led planning to ensure children experience appropriate levels of challenge, depth and progression in their play and learning. Planning should be closely linked to high-quality observations recorded in children's journals, with meaningful next steps identified. These observations should be routinely monitored to ensure consistency and effectiveness across the staff team.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "My care and support meets my needs and is right for me". (HSCS 1.19); and "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11).

## Children are supported to achieve 3 - Satisfactory / Adequate

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

Children were confident and had developed positive relationships with staff. Transitions into the nursery were generally well-managed, helping children to feel safe and secure. Staff used flexible settling-in arrangements which supported attachment and helped children to make friends. We suggested that a visual timetable would further support some children to understand routines and feel reassured about when their parents would return.

All children had personal care plans, and staff had improved how information linked together, particularly for children with identified additional support needs. However, this was not yet consistent for all children. One page profiles were included in learning stories, and management were continuing to monitor their quality. Plans were stored in a way that limited access, reducing their effectiveness as working documents and

delaying staff responses when information was required quickly. See area for improvement 1.

Information from parents was gathered using the SHANARRI wellbeing indicators, and keyworkers were developing their skills in identifying clear strategies. Individual education plans were in place for some children, although identified approaches were not always used consistently. Some communication and support strategies for individual children were not implemented reliably and individual risk assessments were not always accessible. This limited staff's ability to respond confidently and safely to children's needs.

Risk assessments were available for the nursery overall, and these should now include the additional rooms used for group work. A new targeted language group (TLQ) had begun, and supporting staff to routinely share approaches will help embed language development across the nursery.

Quiet spaces had been created for rest and chill out time, and children were seen using these effectively. However, at busy times these areas were not always well enough supervised, and on occasion children became unsettled without staff noticing. At times, behaviour was dismissed or not addressed, and we observed times when children were handled in ways that did not fully support dignity or independence. Staff would benefit from further training in positive behaviour approaches, co-regulation and emotionally attuned practice.

Visual supports were used inconsistently, and staff should further develop their use of communication aids, such as signing to support children who rely on these methods. This will ensure that a fair, equal and person-centred approach to engaging children is promoted.

Staff had recently completed child protection and first aid training and felt confident in recognising safeguarding concerns. However, written procedures needed to be aligned across policy documents and wall guidance to ensure staff follow the correct steps when reporting concerns.

Infection prevention and control procedures would benefit from improvement. Cleaning practices, in some areas of the nursery would benefit from closer attention to ensure that they are maintained to a high standard. Monitoring focused mainly on recording cleaning rather than checking the quality of the environment. Children's handwashing was inconsistent, and more supervision and encouragement were needed.

Toothbrushing was well managed, and staff supported children respectfully through the routine. More mirrors in the toilets would help children develop independence. Some aspects of personal care, such as face wiping, were not always carried out in a way that maintained children's dignity. Staff would benefit from embedding good practice so that respectful child-centred interactions are consistent.

Medication systems were in place but required tightening. Storage should match what is stated in procedures, and action plans should be individualised, accurate and signed by parents.

A roles and responsibilities document had been developed but did not include expectations around supervision and awareness of where children are. We observed occasions when children sought help but were not noticed. We highlighted the importance of monitoring footwear and keeping play areas tidy to ensure children, and staff, remain safe and avoid potential trip hazards.

Children enjoyed healthy meals and snacks and were encouraged to be independent in serving and pouring their own drinks. They could choose where to sit, and were encouraged to take responsibility for getting mealtimes ready. Mealtimes were warm and supportive but not consistently used as rich opportunities for communication and relationships.

Parents told us, "I feel confident in the fact that my child is well cared for, and that their wellbeing is important to the staff at the nursery" and they liked "the variety of activities on offer, the staff are friendly and caring and know the children well. They are encouraged to try different foods as well as helping to prepare the snacks".

## Areas for improvement

1. To ensure every child receives the right level of care, support and challenge, the service should strengthen the quality and consistency of personal planning. This should include ensuring that high-quality, up-to-date information is understood and used effectively by all staff to support each child's individual needs. In order to achieve this, the service should:

- ensure up to date personal plans are readily accessible to staff so they can be used as effective working documents
- provide consistent support for all children, including those without formally identified additional support needs, by implementing agreed strategies reliably
- ensure staff provide consistent, nurturing and responsive care by understanding and acting on each child's needs, preferences and developmental stage
- monitor the quality of personal plans and the consistency with which they are implemented, ensuring staff practice reflects agreed approaches

Using personal plans well will support children's health, welfare and safety, promote continuity of care, and ensure every child's experiences are tailored, meaningful and enabling.

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); and "My care and support meets my needs and is right for me". (HSCS 1.19).

## 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, welfare and safety needs management and staff should ensure, all information gathered within children's personal plans is used appropriately to support children's individual needs. This includes support strategies for children who require them.

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); and "My care and support meets my needs and is right for me". (HSCS 1.19).

**This area for improvement was made on 20 March 2023.**

#### Action taken since then

Management and staff have continued to develop and improve the format and procedures for personal planning. We noted that there were improvements, in particular for children who had identified additional information support however we found that this was not consistent for all children in the nursery.

Whilst progress has been made on this recommendation, it is not completely met and we have updated the wording on the area for improvement.

#### Previous area for improvement 2

The manager should continue to develop their approaches to child-led planning, to support children to achieve their potential by ensuring appropriate levels of challenge and depth in play and learning. Consideration should be given to how individualisation and children's voice is captured within planning. In addition, planning should be closely linked to observations in children's journals where meaningful next steps should be recorded. These should be monitored to ensure that the quality of written observations is consistent.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "My care and support meets my needs and is right for me". (HSCS 1.19); and "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11).

**This area for improvement was made on 20 March 2023.**

#### Action taken since then

This area for improvement has been partially met. Children's voice is more evident in planning, particularly in floor books. However, more work needs to be done to ensure that all children experience appropriate levels of challenge and depth in their learning. The quality of observations has improved and this needs to be embedded in practice. Plans were in place, but this was not consistent for all children.

More differentiation for children, particularly in relation to development milestones, needs to be taken into consideration when planning.

This area for improvement is carried forward in a different format.

#### Previous area for improvement 3

The management team should continue to develop and implement systems for monitoring and evaluating the impact of staff practice. Robust quality assurance systems should continue to be developed to support the service and improve outcomes for children. In order to achieve this the management team should continue to work together to:

- a) ensure monitoring of staff practice and the implementation of organisational policies and procedures are carried out frequently, and purposeful feedback continues to be provided to support staff to make and sustain improvements
- b) consult with and involve all stakeholders including staff, children, and parents in self-evaluation processes.

This is to ensure that management and leadership is consistent with the Health and Social Care Standards (HSCS) 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 area for improvement was made on 20 March 2023.

## Action taken since then

Progress has been made on this area for improvement and is still at an early stage.

We noted that quality assurance by management is more robust, with management having better oversight, with areas for improvement being identified however they now need to ensure that action is taken and that there is an impact on experiences for children.

Whilst monitoring of staff practice has been happening, this has not yet been fully effective in making change and is not always following recognised procedures, for example in performance management.

This area for improvement will be identified as met however this now needs to be embedded and an area for improvement will be reworded to reflect the improvement.

## 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	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

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

0345 600 9527

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