

Colmonell Early Years Centre Day Care of Children

Colmonell Primary School
Main Street
Colmonell
Girvan
KA26 0RY

Telephone: 01465 716 806

Type of inspection:
Unannounced

Completed on:
13 June 2025

Service provided by:
South Ayrshire Council

Service provider number:
SP2003003269

Service no:
CS2011286392

About the service

South Ayrshire Council is the provider of this service. The nursery is located within the Colmonell Primary School in the village of Colmonell. The primary school head teacher has overall responsibility for the management of the nursery, as well as the responsibility for Ballantrae Primary School and Early Years Centre nearby. The head teacher shares responsibility for the day-to-day running of the nursery with the staff team. The nursery can provide a care service to a maximum of 14 children aged three years and over.

Children were cared for in two rooms within the school. There was one playroom with direct access to toilets and nappy changing facilities. And another quiet room adjacent to this which was set up with resources. There is a small outdoor play space to the rear which is directly accessible from the building, that parents used to access at drop off and pick up times. The early years centre also made use of the school walled garden.

On the day of the inspection visit there were 12 children present and three staff.

About the inspection

This was an unannounced inspection which took place on 12 and 13 June 2025 between 09:30 and 16:00. We gave feedback to the service onsite on 13 June 2025. 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 registration information, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Observed and spoke with children using the service
- Sent out a family questionnaire and received seven responses
- Spoke with three parents face to face
- Sent out staff surveys and received four responses
- Spoke with staff and management
- Observed practice and daily life
- 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.

Key messages

- The early years centre is at the heart of the rural community.
- Children were confident in the service and involved in their play and learning using the resources available to them.
- The indoor and outdoor environments should be improved to ensure children consistently experience a safe and exciting environment that captures their curiosity.
- Further development of observation, planning and tracking would enhance experiences for children.
- Quality assurance processes would benefit from being developed further.

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

How good is our care, play and learning?	3 - Adequate
How good is our setting?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate

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

How good is our care, play and learning?

3 - Adequate

Quality Indicator 1.1: Nurturing care and support

We evaluated this key question as adequate, where strengths just outweighed weaknesses.

Children were cared for by a warm and friendly staff team who knew them and their families well. Relationships were positive, and children were mostly happy, confident, and engaged in their play. Parents spoke highly of the staff, describing them as welcoming and approachable. One parent shared, "Staff know the children extremely well and communicate effectively with families."

While staff were caring, their understanding of nurture principles and child development stages required further development. Some children showed signs of disengagement or challenging behaviour, which were not always responded to in a supportive or developmentally appropriate way. For example, children expressing boredom or frustration were not consistently offered meaningful alternatives or emotional support.

Personal care routines were in place, and staff followed hygiene procedures such as handwashing and cleaning tables. However, the nappy changing area lacked ventilation, and handwashing facilities could be better utilised to support infection prevention.

Mealtimes were sociable and well supervised, but adult led. Opportunities for children to develop independence and make choices were limited. A free-flow snack option could better support children's autonomy and reduce interruptions to play.

Personal plans were in place for all children and included some relevant information. However, plans were not always used effectively to support learning or reflect children's current interests and needs. Observations lacked depth, and next steps were not clearly identified or followed through. Some children's interests, such as baking or painting, were not reflected in the environment or resources available.

Families felt involved and informed, but there was limited evidence of their contributions to learning or planning. Opportunities such as home learning links, shared achievements, or feedback through learning journals were not consistently in place.

Quality Indicator 1.3: Play and learning

We evaluated this key question as adequate, where strengths just outweighed weaknesses.

Children were observed having fun and engaging in play. Staff were caring and committed, and some planning was in place to support children's interests. However, the observation, planning, and tracking cycle was not yet fully effective in enhancing learning outcomes. Opportunities to extend and enrich children's learning were missed, and staff would benefit from further support in understanding how to build on children's ideas and interests (**see area for improvement 1**).

Some children showed curiosity and creativity, such as exploring clay or attempting to role-play baking. However, limited resources and lack of follow-up planning meant these experiences did not lead to deeper learning. For example, children interested in baking lacked access to appropriate tools and props, and

children who showed knowledge of concepts like left and right were not supported to extend this learning further.

While termly planning was in place, it did not reflect national guidance or fully support schematic play. Staff would benefit from using tools such as the South Ayrshire Council planning paperwork and reflective questions to improve their approach.

Language, literacy, and numeracy were not consistently embedded across the environment. Resources and experiences to support these areas were limited, and staff interactions did not always include effective questioning to promote and extend thinking and learning.

Use of the local community had previously enriched children's experiences, but outdoor learning had paused due to storm damage of the local forests. Plans were in place to work with local partners to restore access to forest areas.

Areas for improvement

1. To support children's learning, development and wellbeing, the service should improve how they observe, plan for, and track children's progress. This should include ensuring that observations are meaningful, clearly linked to children's interests and developmental stages, and used to plan experiences that extend learning and support positive outcomes.

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

'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open-ended and natural materials' (HSCS 1.31); and

'I am supported to achieve my potential in education and employment if this is right for me' (HSCS 1.27).

How good is our setting?

3 - Adequate

Quality Indicator 2.2: Children experience high quality facilities

We evaluated this key question as adequate, where strengths just outweighed weaknesses.

The setting had a welcoming and friendly atmosphere. Staff were warm and caring, and parents commented positively on the homely feel, noting that personal touches such as framed photos helped create a cosy environment. Registers, visitor sign-in procedures, and door safety measures were in place and followed consistently.

Children had access to both indoor and outdoor spaces. However, the quality and organisation of these environments varied. Indoors, some areas appeared cluttered and lacked attention to detail. Resources were not always well presented or engaging, which limited opportunities for curiosity, creativity, and meaningful learning. Some children showed signs of disengagement, and staff missed opportunities to extend their play and learning.

While some children were observed enjoying activities such as clay play, the learning potential was not always maximised. In other areas, resources were incomplete or missing, such as in the home corner and art

areas. This limited children's ability to follow their interests and explore through play (**see area for improvement 1**).

Outdoors, children had access to a large space, but some equipment was unsafe or in poor condition. Items were broken, rotting, or held together with temporary fixes. Risk assessments had been completed but did not fully identify or address these hazards. As a result, the outdoor area required immediate attention to ensure it was safe and stimulating. The service and provider submitted evidence that this had been immediately remedied, with further work to be undertaken in the summer holiday period.

Infection prevention and control measures were in place, with handwashing and cleaning routines observed. However, worktops needed to be cleared to support hygiene during snack and food preparation.

Children's information was securely stored using school systems, and appropriate procedures were followed for data protection.

Areas for improvement

1. To support children's creativity, engagement, and learning through play, the provider should improve the range and quality of resources available. This includes ensuring that children have access to a variety of stimulating, open-ended, and age-appropriate materials that promote curiosity, problem-solving, and imaginative play.

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); and

'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open-ended and natural materials' (HSCS 1.31).

How good is our leadership?

3 - Adequate

Quality Indicator 3.1 - Quality assurance and improvements are led well

We evaluated this key question as adequate, where strengths just outweighed weaknesses.

The service had a shared vision and values that were beginning to positively influence practice. These values, such as creativity, kindness, and honesty, were visible in the setting and supported a welcoming ethos. However, there was scope to ensure these values more clearly reflected the principles of early learning and childcare, including nurture and respect.

Some quality assurance processes were in place, including self-evaluation and improvement planning. The centre improvement plan (CIP) had been developed, but it did not yet fully reflect the specific needs of the setting. Staff had not been fully involved in leading self-evaluation, and improvement targets were not always clearly linked to outcomes for children. Monitoring and supervision had taken place, but the impact on children's experiences was limited (**see area for improvement 1**).

Leadership roles were emerging, with some staff beginning to take responsibility for areas such as outdoor play and literacy-rich environments. However, these roles were still developing, and further support was needed to build staff confidence and skills in leading improvement. Appraisals had identified areas for development, but follow-up actions were not always clear or implemented.

Children and families were valued, but there was limited evidence of their involvement in shaping the service. While some feedback had been gathered through questionnaires, there was little evidence of ongoing consultation or how their views influenced change. One parent commented that they did not feel involved in the development of the service.

Accidents and incidents were recorded and audited, and notifications were submitted appropriately.

Areas for improvement

1. To support continuous improvement and ensure positive outcomes for children, the provider should strengthen quality assurance processes. This should include developing a centre improvement plan that reflects the specific needs of the setting, involving staff meaningfully in self-evaluation, and ensuring improvement targets are clearly linked to outcomes for children. Monitoring and supervision should be used more effectively to drive improvements in children's experiences.

This is to ensure that care and support 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); and

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

How good is our staff team?

3 - Adequate

Quality Indicator 4.3 - Staff deployment

We evaluated this key question as adequate, where strengths just outweighed weaknesses.

Staffing levels were sufficient to meet required ratios and support children's care throughout the day. Staff were flexible and worked well together to ensure children's routines were maintained, even during absences. Breaks were planned effectively, and staff communicated well to ensure supervision remained consistent, particularly during busier times.

Children benefitted from continuity of care, with key staff available at drop-off and collection times. This supported positive relationships with families. Parents told us they felt welcomed and informed, with one commenting, "Staff are always available to discuss and there are regular opportunities to stay and get involved with play and learning."

The rural and community-based nature of the setting contributed to strong relationships and familiarity with staff. Families were kept informed of any changes, which supported children's sense of security.

Staff were caring and committed, but there were gaps in confidence and knowledge in delivering high-quality early years experiences. Staff would benefit from further support and training in areas such as

planning, tracking, and creating rich learning environments. Peer support and mentoring systems were not yet fully embedded to support newer or less confident staff (**see area for improvement 1**).

The head teacher recognised the need to build staff confidence and skills. While annual reviews and informal check-ins were in place, a more structured approach to professional development would support improvement. The use of national resources, such as the National Induction Resource (2023) and reflective questions, could help guide staff learning and development.

Although the team worked well together, a clearer focus on high-quality early learning and care was needed. Strengthening staff understanding of curriculum planning and child development would help improve outcomes for children.

Areas for improvement

1. To enhance children's learning experiences and outcomes, the provider should support staff to develop their skills in planning, tracking progress, and creating rich, engaging learning environments. This should include access to relevant training and opportunities for reflection to build confidence and consistency in practice.

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

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

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

How good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
1.3 Play and learning	3 - Adequate
How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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