

Young, Amanda Child Minding

Glenrothes

Type of inspection:
Announced

Completed on:
28 February 2024

Service provided by:
Amanda Young

Service provider number:
SP2003904575

Service no:
CS2003007625

About the service

Amanda Young operates a childminding service from their family home in Glenrothes, Fife. They are registered to provide care to a maximum of six children at any one time under the age of 16, of whom, no more than six will be under 12, of whom, no more than three are not yet attending primary school and of whom, no more than one is under 12 months. The childminder may work with an assistant as stated on the conditions of registration.

The service is close to schools and nurseries, green spaces, local amenities and can be reached by transport links.

Children have access to the living room, kitchen, garden, and toilet facilities on the first floor.

About the inspection

This was an announced inspection which took place on Thursday 25 January 2024 between 12:15 and 14:00 and was continued on Thursday 22 February 2024. 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:

- observed one child play in the service;
- received feedback from one family;
- spoke with the childminder;
- observed practice and daily life;
- reviewed documents.

Key messages

- One child was being minded in the service. They were settled, happy and explored the play space.
- Positive attachments had been formed between the child and the childminder.
- The childminder knew the child's needs and preferences and some age-appropriate toys were available.
- Personal plans should be further developed for children.
- Policies and risk assessment should reflect the service and be reviewed regularly.
- The childminder and assistant should engage in professional development in relation to child protection and first aid.

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

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

Quality indicator 1.1: Nurturing care and support

Children experienced warm and caring approaches from the childminder to support their wellbeing. The childminder showed care through cuddles, comfort and reading the child's cues. It was evident that positive attachments had been formed that supported connection. The childminder knew the children they cared for well and spoke about their individual personalities, interests, and stages of development. One family commented, 'I feel very lucky to have found Amanda, she is very professional in her role and my child has a great relationship with her'. As a result, children received care and support to meet their needs.

The childminder had made some improvements in creating personal plans. However, these were not in place for all children and did not contain important information needed to fully meet children's needs. They recognised plans needed to be further developed. This area for improvement was made at the last inspection and has been restated. This will be reviewed at the next inspection. **(See area for improvement 1).**

Mealtimes were at the child's pace. The childminder understood the child's dietary requirements and offered foods throughout the day to meet their needs. A highchair offered the child a safe place to eat and enjoy foods. Most meals and snacks were provided by families. However, the childminder did offer home cooked foods occasionally. We encouraged them to register as a food premise with the local authority. **(See area for improvement 2).**

Medication records need to be further developed. Clear instructions should be recorded to ensure the management and safe administration of medication to meet children's healthcare needs. Medication should be reviewed in line with guidance. We signposted the service to the Care Inspectorate management of medication in daycare and childminding services. **(See area for improvement 3).**

Quality indicator 1.3: Play and learning

Children's experiences were led by their interest and curiosities as they chose from a selection of toys. They engaged in play throughout the inspection, having fun and including the childminder in their play. The childminder followed the child's preference by staying close and using the opportunity to promote language. For example, the child was engaged in play with small characters, they enjoyed passing these to the childminder and being praised. The childminder kept language simple and appropriate for the age of the child. As a result, the child experienced positive interactions with the childminder.

The pace of the morning was relaxed, which enabled the child to explore. They had access to a range of toys and activities, including trains, large Lego blocks and figures. We encouraged the childminder to look at introducing treasure baskets with natural open-ended resources. This would ensure children had access to resources that engaged their imagination and promoted curiosity through their senses.

The childminder made use of the community to promote children's learning and development. This included regular trips to the 'yard' that housed animals. Children had the opportunity to help care for the animals and learn about nature through play. This meant that children developed an appreciation for living things.

Areas for improvement

1. The childminder should develop the children's care plans to support children's continued health, wellbeing, needs and aspirations.

This is to ensure 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).

2. To ensure children's health and wellbeing is promoted as they enjoy home cooked meals, the childminder should ensure relevant policies and procedures are in place. This should include, but not limited to, notifying relevant authorities, and registering as a food premise.

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 based on relevant evidence, guidance and best practice' (HSCS 4.11).

3. To ensure children's safety and wellbeing the childminder should follow medication guidelines. This should include, but not limited to, obtaining written consent, clear instructions on when to administer medication and establishing a system for reviewing medication.

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 based on relevant evidence, guidance, and best practice (HSCS 4.11).

How good is our setting?

3 - Adequate

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

Quality indicator 2.2 -Children experience high quality facilities

Children had access to the living room, hall area, toilet facilities on the first floor and back garden. Children mainly used the living room when in the service. We encouraged the childminder to carryout daily checks on the spaces children use and record any maintenance issues to be addressed. This would ensure that children experience play spaces that are safe, well maintained, and free from potential hazards.

Children had some floor space in the living room to play. The living room was comfortable, and a large sofa offered space to relax. The childminder had a love for animals and housed reptiles in secure tanks in the living room and upstairs area. Children were able to view these. The childminder had generic risk assessments for these, however, we found they were not specific to the setting. We suggested these should be further developed to clearly reflect the steps taken to minimise any potential risks and detail how they keep children safe around pets.

The childminder had some risk assessments in place. We found these needed to be further developed to ensure they reflected the service and experiences offered to children. The service was undergoing improvement and renovations. This increased the potential of risk to children when accessing areas in the house and garden. For example, the handrail to support safe walking on the stairs needed secured and ongoing work in the garden posed potential risks. We encouraged the childminder to further develop relevant risk assessments for areas and the wider experiences offered to children, for example, when visiting the animals in the yard. This would ensure any potential risks were minimised and promoted children's safety and wellbeing. This area for improvement has been restated and will be reviewed at the next inspection. **(See area for improvement 1.)**

The childminder had some policies in place. However, we found these were not fully reflective of the service. This area for improvement had been identified at the last inspection and has been restated. This will be reviewed at the next inspection. **(See area for improvement 2).**

Areas for improvement

1. Risk assessments should be undertaken for the garden and house in relation to the refurbishment works being undertaken. These areas remain areas for improvement at this inspection and action should be taken to make improvements to support good outcomes for the minded children.

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

'My environment is secure and safe' (HSCS 5.19).

2. To ensure records, plans and policies are properly made and kept in accordance with national and local guidance, the childminder should seek guidance from Care Inspectorate website and should access relevant guidance and good practice materials.

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

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

How good is our leadership?

3 - Adequate

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

Quality indicator 3.1: Quality assurance and improvements are led well

Children experienced a warm and friendly welcome when entering the setting. The childminder had strong connections with families. They worked closely to support children's individual needs. The childminder was aware of the importance of evaluating the service through consultation and using best practice guidance. Due to the ongoing refurbishments within the setting, they had not been able to evidence this had taken place. We encouraged the childminder to refer to the Care Inspectorate guidance 'A quality framework for the daycare of children, childminding and school aged childcare'. **(See area for improvement 1.)**

This will support them in evaluating their service and identify areas of development. This area for improvement has been restated and will be reviewed at the next inspection.

Areas for improvement

1. The childminder should consider ways to encourage feedback about the quality of all aspects of her service from parents. She should then use the feedback to inform her evaluations and make improvements, where necessary.

This is to ensure 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 a robust and transparent quality assurance processes'. (HSCS 4.19).

How good is our staff team?

3 - Adequate

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

Quality indicator 4.3: Staff deployment

The service was operating within their conditions of registration. Staffing levels meant that children received one to one support from the childminder. Children experienced warm, kind, and comforting interactions from the childminder who knew what was important for them. One family commented, 'Amanda is just simply amazing, there is nothing that is ever a problem, and she goes above and beyond'. The childminder worked with an assistant who supported with transporting children to school occasionally. We were not able to speak with the assistant on the days we visited.

The childminder was aware that training in relation to first aid and child protection had not been completed as identified at the last inspection. We encouraged them to complete this. This would refresh knowledge and skills and ensure the information they had was current and following best practice guidance. **(See area for improvement 1.)**

This area for improvement has been restated and will be reviewed at the next inspection.

Areas for improvement

1. The childminder should refresh her knowledge and skill in relation to child protection and first aid.

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

'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm' (HSCS 3.21).

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

Requirements

Requirement 1

To ensure Care Inspectorate has adequate information in order to carry out their role the provider must complete and submit a self-assessment as requested by the regulator. This is to comply with: Public Services Reform (Scotland) Act 2010 Section 53 (6) whereby SCSWIS may at any time require a person providing any social service to supply it with any information relating to the service which it considers necessary or expedient to have for the purposes of its functions under this part.

Timescale for completion: within time frame of next request.

This requirement was made on 5 January 2017.

Action taken on previous requirement Self-assessment not submitted 2019.

This requirement was made on 5 January 2017.

Action taken on previous requirement

This requirement was a historical request, therefore no longer relevant. The Care Inspectorate ask that services now complete annual returns.

Met - outwith 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

The childminder should develop the children's care plans to support children's continued health, wellbeing, needs and aspirations.

This is to ensure 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 area for improvement was made on 24 April 2019.

Action taken since then

Some progress had been made in developing child's plan. However, these needed to be further developed to ensure all relevant information is recorded. This area for improvement will be reviewed at the next inspection.

See quality indicator 1:1 Nurturing care and support in How good is our care, play and learning?

Previous area for improvement 2

The childminder should refresh her knowledge and skill in relation to child protection and first aid.

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

'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm'. (HSCS 3.21).

This area for improvement was made on 24 April 2019.

Action taken since then

The childminder could tell us the steps they would take to ensure children's safety and wellbeing. They recognised training had not been completed and had a plan in place to complete this. This area for improvement has not been met and will be reviewed at the next inspection.

See quality indicator 4:3 Staff deployment in How good is our staff team?

Previous area for improvement 3

To ensure records, plans and policies are properly made and kept in accordance with national and local guidance, the childminder should seek guidance from Care Inspectorate website and should access relevant guidance and good practice materials.

This is in order to comply with: National Care Standard Early Education and Childcare up to the age of 16 - Standard 14 A well-managed service.

This area for improvement was made on 5 July 2017.

Action taken since then

The childminder had some records, plans and policies in place. However, these need to be further developed to ensure they reflect the service. This area for improvement has not been met and will be reviewed at the next inspection.

See quality indicator 2:2 Children experience high quality facilities in How good is our setting?

Previous area for improvement 4

Risk assessments should be undertaken for the garden and house in relation to the refurbishment works being undertaken. These areas remain areas for improvement at this inspection and action should be taken to make improvements to support good outcomes for the minded children.

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

'My environment is secure and safe' (HSCS 5.19).

This area for improvement was made on 5 July 2017.

Action taken since then

The childminder had risk assessment templates to support the operation of the service. However, these need further developed to ensure they reflect the service and the wider experience's children are offered to ensure their safety and wellbeing. This area for improvement has not been met and will be reviewed at the next inspection.

See quality indicator 2:2 Children experience high quality facilities in How good is our setting?

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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.