

# Patrick, Claire Child Minding

Kilmarnock

**Type of inspection:**  
Announced (short notice)

**Completed on:**  
27 March 2024

**Service provided by:**

**Service provider number:**  
SP2009974859

**Service no:**  
CS2009230337

## About the service

The childminder provides a service from their property in a quiet residential area of Stewarton, East Ayrshire. The childminder is registered to provide a care service for a maximum of six children up to 16 years of age. Numbers are inclusive of the childminder's own children.

The service is close to local primary schools, shops, parks and other amenities. The children are cared for in the living/dining area and can use an upstairs bathroom. The part of the premises not to be used is the front garden. The childminder has a pet dog which must not be left unsupervised with minded children at any time.

## About the inspection

This was an announced (short notice) inspection which took place on 22 February 2024 between 10:00 and 12:30. 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:

- MS Form questionnaires issued to parents however no responses were received
- spoke with the childminder
- observed practice and daily life
- reviewed documents.

## Key messages

- Children benefitted from a childminder who knew them well.
- Children could independently select resources of interest to them.
- Children were cared for in a clean, welcoming environment.
- The childminder supported a shared vision for the service and had made improvements since the last inspection.
- The childminder must ensure they are working to their conditions of registration at all times.
- The childminder was committed to their continuous professional development and engaged in training relevant to their role.

## 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?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	4 - Good

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

## How good is our care, play and learning?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

### Quality Indicator 1.1: Nurture, care and support

The childminder met children's care needs through sensitive and considered interactions. For example, the childminder offered reassurance and cuddles when children were upset or tired. These interactions enabled children to feel safe and secure in their relationship with the childminder.

Personal planning was in place for all children and was used to gather information to support children's health, welfare, and safety. Children benefitted from a childminder who knew them well, including their likes, dislikes, and preferences. Positive relationships with parents supported effective communication, consistency and continuity of care for children. The childminder should continue to develop the children's personal plans and ensure that these are reviewed and updated every six months or before, depending on the child's needs. This would enable the childminder to further support children in their learning and development.

Personal care routines supported children's privacy and dignity. The childminder respected children's rights by asking them for permission before a nappy change. Interactions were engaging, warm, and caring, nurtured children's security, and enabled them to develop positive relationships.

The childminder had a medication policy in line with good practice guidance. However, no child needed medication administered. The childminder confirmed that they would follow best practice guidance if this were required.

### Quality Indicator 1.3: Play and Learning

Children had fun as they independently selected resources of interest. The childminder engaged well with the children, supporting them in their play and learning. Strong attachments were evident between the children and the childminder and as a result children were comfortable, confident, and happy.

The childminder implemented resources to support children's interests. For example, the children were interested in cars, bags, prams, and dolls. The childminder incorporated these into children's play experiences which supported children to develop their interests and imagination through play and learning. We discussed with the childminder implementing loose parts and natural materials, this would further challenge children's play and learning experiences.

The childminder involved parents in their child's learning as they shared pictures of children engaging in experiences with them through 'WhatsApp.' This provided opportunities for parents to extend learning at home and enabled them to further discuss these experiences with their child.

Children could choose from a variety of books and enjoyed reading them with the childminder. The childminder supported children and chatted with them during their play experiences, modelling positive use of language and vocabulary. They used mathematical language to support children in arranging resources in

order of size and counting in sequence. This supported to develop their language, literacy, and numeracy skills through play experiences.

## How good is our setting?

### 4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

#### Quality Indicator 2.2: Children experience high quality facilities

Children were cared for in a safe, clean, welcoming, and homely environment that met their needs and interests. They were relaxed and happy in the childminder's home. This contributed to children feeling safe and secure.

The environment had been reviewed and organised since the last inspection to allow children to access resources independently. Children were able to move around freely with space to play. They had ample floor space within the living room area and access to a playroom. They could choose toys or relax on the sofa. As a result, children were supported in making informed choices within the play spaces.

Although the children did not have access to the childminder's garden, they regularly engaged in outdoor play as they visited the local parks and nearby grass areas with the childminder. They took resources with them, such as balls, and were able to engage in physical play as they explored resources at the park. They regularly engaged in outdoor play experiences which supported their wellbeing.

The childminder carried out daily visual safety checks of their home to ensure the safety and wellbeing of the children. Risk assessments were in place, which helped the childminder identify risks within the environment and put measures in place to keep children safe. We discussed reviewing risk assessments with the childminder to ensure they fully reflect the current risks within the play environments, such as the lack of a safety gate at the stairs, as this had been identified as a mitigation within risk assessments.

The childminder followed some appropriate infection prevention control procedures, for example, when changing children. However, we discussed with the childminder supporting children to wash their hands with soap and water before eating and after getting changed. This would support the childminder in limiting any potential spread of infection.

## 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

A shared vision was supported and sustained as the childminder shared their policies and procedures with parents when starting at the service and when these were updated. They regularly updated parents with any changes and engaged in ongoing consultations which supported parents' involvement in the service, enabling them to influence change.

Identified areas for improvement had been considered since the last inspection, and the childminder had developed an improvement plan to support and sustain improvements. They recognised that the outdoor area required refurbishment to make it accessible to children, as they did not use it for outdoor play

experiences due to flooding. These informed improvements would further enhance outdoor play experiences for children.

The childminder actively reflected on their practice, which enabled them to highlight areas for improvement. They had recently identified that parent questionnaires were not effective in supporting improvements within the service, and they were looking at more meaningful ways to gain feedback from parents. This enabled the childminder to ensure parents were meaningfully involved in making informed improvements.

At the time of the inspection, the childminder was in breach of their conditions of registration. This had occurred on certain days due to the number of children attending under school age. The childminder must work within their conditions of registration at all times, which includes a maximum of three children under school age attending the service, and only one of these can be under 12 months. This would ensure all children were kept safe (see requirement 1).

## Requirements

1. By 22 February 2023, the childminder must ensure they are working to their conditions of registration. This should include but not be limited to keeping registers of children attending.

This is to comply with Regulation 4(1)(a) (Welfare of users) of the 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 state that:

'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27); and

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

## How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

### Quality Indicator 4.1: Staff skills, knowledge and values

Children benefitted from a kind and caring approach promoting children's rights. The childminder was warm, kind, and respectful, which helped the children to feel valued, loved, and secure in the setting.

The childminder built strong relationships with children and families and supported children's wellbeing through compassionate and responsive care. This enabled children to feel confident and supported.

The childminder used appropriate opportunities to engage in professional discussions and share practice with other childminders. They attended training and the local toddler group together. They were also part of a local childminding closed group on social media where they could share their knowledge and ideas with others to support them in making improvements and providing better outcomes for children and families.

The childminder was committed to their continuous professional development and engaged in training relevant to their role. They were in the process of completing a childcare qualification and demonstrated a good knowledge and understanding of their recent learning. This enabled them to develop their skills and knowledge and supported children. The childminder kept a log of training completed, reflecting on the impact this would have on the service. This helped the childminder to reflect on their practice, make informed improvements, and enhance the quality of outcomes for children.

## 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 improve the quality of children's experiences, the childminder should ensure that children are meaningfully involved in leading their play and learning through a balance of planned and spontaneous experiences. Children's choice should be promoted, and their learning and development extended through skilful staff interactions.

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, stimulate my natural curiosity, learning and creativity.' (HSCS 2.27)

**This area for improvement was made on 31 March 2023.**

#### Action taken since then

The children had access to a designated playroom which had been decluttered and was now accessible to children. They were able to choose resources of interest to explore and the childminder interacted appropriately to support them in their learning. Therefore, this area for improvement has been met.

#### Previous area for improvement 2

To improve the quality of children's daily experiences, the childminder should ensure that continuous improvement is underpinned by robust monitoring and self-evaluation processes. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I use a service and organisation that are well led and managed.' (HSCS 4.23)

**This area for improvement was made on 31 March 2023.**

#### Action taken since then

The childminder had implemented self-evaluation processes since the last inspection and used these to highlight areas for improvement. They also consulted with parents regarding improvements within the setting and had altered their approach in this to suit the needs of families accessing the service. For

example, they no longer issued questionnaires to parents as these were not providing the childminder with meaningful feedback and were not effective in making improvements within the service. Therefore, this area for improvement has been met.

## Previous area for improvement 3

To ensure children's health and well-being, the provider should ensure that arrangements for the safe management of medication are improved.

This should include, but is not limited to, ensuring written permissions are clear, reviewed regularly and reflect the information provided by the prescribing professional or product information leaflet, ensuring information about administration is easily accessible.

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

'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24)

**This area for improvement was made on 31 March 2023.**

### Action taken since then

A clear policy was in place to ensure the safe administration of medication. Administration of medication forms included relevant information, such as parent's signature and the appropriate storage of medication. The childminder spoke confidently of the procedures for the safe administration of medication and were aware of their roles and responsibilities. Therefore, this area for improvement has 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

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	4 - Good
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	4 - Good
4.1 Staff skills, knowledge and values	4 - Good

## 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](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto: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.