

Cornforth, Pamela Child Minding

Livingston

Type of inspection:
Unannounced

Completed on:
21 March 2024

Service provided by:
Pamela Cornfoth

Service provider number:
SP2004933189

Service no:
CS2004075114

About the service

The childminding service is delivered by Pamela Cornforth from their family home in Livingston, West Lothian. The service can provide an early learning and childcare service to a maximum of six children at any one time, of whom no more than three can be not yet attending primary school and no more than one can be under 12 months.

Children have access to a playroom, kitchen, downstairs toilet and a secure garden area. The service is close to local transport links and amenities such as shops, nurseries and parks.

About the inspection

This was an unannounced inspection which took place on Monday 18 March 2024 between 11:20 and 14:00. The inspection was carried out by an inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with and observed two children using the service
- considered feedback from two parents through an online questionnaire
- spoke with the childminder
- observed practice, documents and daily routines in relation to children's care and the management of the service.

Feedback was given to the childminder by telephone on Thursday 21 March 2024.

Key messages

Children experienced warm and familiar relationships where they felt cared for and valued.

Well-maintained spaces provided children with a comfortable home from home experience.

Children would further benefit from enhanced use of personal planning and monitoring of their progress.

Children's learning would further benefit from the planning of experiences and resources in accordance with individual needs and stages of development.

Best practice documents in early learning and childcare should be used to support the childminder to reflect on, evaluate and improve aspects of the service for children. Specific documents have been highlighted to the childminder however they should not be limited to those.

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?	4 - Good
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: Nurturing care and support

Children were nurtured and supported throughout their daily experience. They were cared for with warmth by a familiar adult who children were confident to seek out. This supported the building of positive relationships where children felt valued. The flow of the day was decided by children's choices and needs, such as mealtimes. These times were unhurried and sociable, allowing children to eat at their own pace. Children had some opportunities to help prepare snacks, improving skills and independence. We did not see this during inspection. To further develop food experiences, the childminder should consider eating with the children for safety as well as modelling social behaviours; and using the document 'Setting the Table: Nutritional guidance and food standards for early years childcare providers in Scotland' (NHS Health Scotland 2018) to support children to develop good nutritional habits.

Children could rest when they wanted to and independently use the toilet when needed. Personal care was carried out in the toilet, offering privacy and dignity to children. Children's individual sleep routines were supported by the childminder in agreement with families. We advised the childminder to review the spaces used for sleep in line with best practice guidance, to ensure the safety and wellbeing of all children using the service. For example, sleeping in a buggy can restrict movement and not allow the child to lie flat.

Children's individual wellbeing could benefit further from the effective use of personal planning. Each child had a personal plan containing contact and permission information, as well as any health or medication needed. Overall, children's needs were known and strategies were being used to support them. Regular online communication with parents kept the childminder up to date and allowed the sharing of information for continuity. Parents confirmed this and felt their children were progressing in the childminder's care. However, personal plans did not reflect the care being given or how children's development was changing. This may result in missed opportunities to celebrate progress or identify further supports needed (see area for improvement 1). We referred the childminder to the document, 'A guide for Providers on Personal Planning: Early Learning and Childcare' (Care Inspectorate 2021).

While there was no medication on site during the inspection, a process was in place to manage this effectively. To further support children's health and medication needs, clear and detailed information should be gathered about each medication. This would contribute to the right care being given at the right time.

Children's welfare was protected through the childminder's knowledge of safeguarding procedures. Moving forward, the safeguarding policy should be updated to reflect the childminder's knowledge. This would provide clarity and guidance when situations arise, as well as informing parents of the safeguarding procedure.

Quality indicator 1.3: Play and learning

Children had fun as they explored opportunities available to them. They had freedom to choose their activities with the childminder offering options and suggestions. Some new experiences were provided such

as planting and growing, to practice new knowledge and skills. Literacy and numeracy development was interwoven into general chat with the children. In addition, opportunities were taken when they arose to model words, count and sing.

Children were engaged in responsible daily tasks such as tidying away their things before bringing more toys out, preparing snack and baking. These opportunities should continue to be developed for all ability levels so children can learn and be independent at various stages. Children's thinking skills were at times being supported as they were asked about their play. To further extend this, more open questions would empower children to problem solve, make decisions and lead their own learning. For example, giving children more opportunities to think for themselves rather than having issues in play solved for them.

Each child had a memory folder showing them at play and engaging in different experiences. We encouraged the childminder to use these more with children to help them reflect on their learning and further plan experiences.

Children's individual development was being assessed and often used to inform activities and experiences. This meant that children's choices and interests were mostly being responded to. However, previously used processes for the planning of learning had halted in recent months. This meant that children's progress was being monitored inconsistently and was not always informing further learning. For example, learning plans were out of date for children; and some progress in children's developments was being captured in a diary, rather than their own learning plan. The childminder should return to a consistent process for monitoring and planning for children's spontaneous and intentional learning. This would further support their individual progress (see area for improvement 2). It would also enable parents to have a clear view of their child's developmental progress so they can compliment at home.

Areas for improvement

1. In order for children to reach their full potential, the childminder should use personal planning to consistently identify, plan for and monitor children's needs and wishes. This should include but not be limited to, specific support strategies used to further aspects of children's development.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state, '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 play and learning opportunities are contributing to their developmental progress, the childminder should consistently plan for spontaneous and intentional learning, according their interests and needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state, 'As a child, my social and physical skills, confidence and self-esteem and creativity are developed through a balance or organised and freely chosen extended play, including using open-ended and natural materials' (HSCS 1.31).

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

The setting was well-furnished, comfortable and homely. Children were cared for in a visibly clean and organised space. They were comfortable and confident moving around in different spaces and were familiar with the layout. There were places to rest and be active in play. Overall, children had the space they needed in a relaxing home from home environment.

The setting and equipment were safe, secure and well-maintained. Safety equipment was provided to support children at different stages. For example, a booster seat supported a child to reach the table comfortably; and toilet aids were available should they be needed. The environment was being continually risk assessed as things changed, such as the weather. Action was then taken to keep children safe. However, accidents and incidents were not being recorded in the service. This increased the risk of parents not being informed about situations. It also limited the monitoring of children's safety and the environment over time. For example, identifying common themes arising which contribute to accidents. We referred the childminder to the document, 'Records childminding services must keep and guidance on notification reporting' (Care Inspectorate 2012).

Infection prevention and control measures were in place to reduce the risk of infection spread for children. For example, separate handtowels were used and handwashing routines took place before food and when coming in from the garden.

The indoor environment was resourced to offer children a variety of play experiences. Children had free access to some resources and could see what was available to them. Further toys were stored elsewhere and used on rotation to offer variety over time. To further empower children, the childminder could consider photographs of resources so they could choose freely from the whole range. Some toys had been laid out for children on the day of inspection. These consisted of small world figures and animals, wooden bricks, some drawing materials and dough. In order to make these more inviting and intriguing for children, the childminder should consider how they could be presented. Inspiration for inspiring spaces can be found in the national guidance document, 'Realising the Ambition' (Scottish Government 2020).

The garden was large and secure, offering different terrains and levels for children to physically explore. Outdoor games were available such as hula hoops, diggers and a play buggy. Some loose parts and real or natural items were used in play. There was potential to extend the range of loose parts indoors and out to provide endless possibilities for children to be creative.

The local community and beyond was used to provide new and varied opportunities. Increased social contact with other adults and children was also a benefit. For example, a music group, walks in local woodlands and visits to the zoo.

How good is our leadership?

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 3.1: Quality assurance and improvements are well led

While the childminder was clear of their role to provide a safe, nurturing and stimulating environment for children to flourish in, improvements were needed to fully achieve this. Moving forward, best practice documents in early learning and childcare should be used to inform and guide service improvements,

ensuring positive outcomes for children. This would help ensure that the childminder is up to date with current practice to effectively and consistently meet children's needs. It would also ensure basic guiding procedures such as service policies were current in their approach. For example, we highlighted two policies which were missing information or had the wrong information. Service policies should guide the childminder in their response to situations, as well as inform parents of what to expect from the service.

Children and families were informally involved to influence change within the setting. Children's daily requests were heard and responded to. This meant they were generally influencing their daily care and activities. Good working relationships had been built with parents. Ongoing discussions between the childminder and parents meant informal information could be shared and opinions sought. Further opportunities for parents to be involved in evaluating aspects of the service in a more formal way should be developed. This would inform the childminder of what is going well and what could be improved from the parents perspective.

Quality assurance, including self-evaluation and improvement plans were not consistently being used and so were not yet leading to continuous improvement. The childminder gave some examples of improvements to car seat safety and support strategies for a specific child, which were initiated by training and self-evaluation. However, the current improvement plan focused on safety and so missed opportunities to reflect on and improve other aspects of the service. For example, mealtimes, resources and personal planning. To further develop the service overall, we referred the childminder to the document, 'A quality framework for daycare of children, childminding and school-aged childcare' (Care Inspectorate 2022). This sets out expectations of what children should expect from a care service and offers challenge questions to help services reflect and evaluate the quality of their provision (see area for improvement 1).

Areas for improvement

1. To ensure children benefit from a service committed to continuous improvement, the childminder should at a minimum:

- develop quality assurance processes to check the quality of the service
- use best practice guidance in early learning and childcare to keep up to date with the sector and benchmark the service against
- carry out regular self-evaluation, including consultation with children and parents.

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

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's wellbeing was supported through compassionate and responsive care. They were listened to and given appropriate responses in accordance with their ages and needs. Interactions were respectful and kind which supported children's self-esteem and confidence. They promoted positive behaviour by role modelling kind words and friendly engagement with the children. Parents were satisfied that their children were cared for in a professional manner.

While the childminder was trained, competent and skilled, there were missed opportunities to reflect on and improve the service inline with the changing approaches in the early learning and childcare sector. This had the potential to impact on aspects of the service such as children's personal planning and play experiences. The childminder demonstrated a willingness to develop their skills and knowledge through ongoing training and professional discussion sessions. Various training had been attended, giving the childminder up to date information and enhanced knowledge in observing learning, self-evaluation and improvement planning for example. Moving forward, we encouraged the childminder to reflect on how the training could impact on practice and plan to make that happen. We discussed how this could help identify future training needs, support improvement and provide consistently positive outcomes for children.

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?	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?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	4 - Good
4.1 Staff skills, knowledge and values	4 - Good

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