

Childminding at the Dysons Child Minding

Muir of Ord

Type of inspection:
Announced (short notice)

Completed on:
7 March 2024

Service provided by:
Natalie Dyson

Service provider number:
SP2023000032

Service no:
CS2023000041

About the service

Childminding at the Dysons is a childminding service provided from a family home in the village of Muir of Ord. The service is situated in a quiet residential area on the edge of the village near the local school and nursery, shops, library and other amenities.

The childminder is registered to provide a care service to a maximum of six children at any one time under the age of 16 years. Numbers are inclusive of children of the childminder's family.

The children are cared for in a living/dining room, kitchen, hallway and downstairs toilet. Children can also access a securely enclosed back garden.

About the inspection

This was an unannounced inspection which took place on Wednesday 6 March 2024, between 09:50 and 14:15. 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:

- reviewed MSForms survey responses from four family members of people using the service
- spoke with the childminder
- observed practice and daily experiences
- reviewed documents.

Key messages

- The childminder provided a warm and welcoming service, helping children feel loved, safe and secure.
- Children attending the service were happy, settled and relaxed in the care of the childminder.
- Children experienced homely, relaxed sociable snack and mealtimes.
- The childminder should now address the gaps in their knowledge of procedure related to addressing child protection concerns.
- To support children's health and wellbeing, identified infection prevention and control measures should now be addressed.
- Children's play, learning and development were supported by activities appropriate to their age and developmental stage.
- Engaging with best practice documents would support effective quality assurance processes and enable the childminder to extend their knowledge and understanding of high quality practice.

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?	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?

4 - Good

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

1.1 Nurturing Support and Care

One young child was being cared for during our inspection. They experienced warm, caring interactions from a childminder who was attentive and responsive. This meant the child was relaxed, felt listened to and valued. Families were encouraged to come into the service at drop off or pick up times. One family told us they felt "always welcome to pop in and collect." This promoted family involvement and regular, informal information sharing which had the potential to positively influence how well children's needs were met.

Children's wellbeing and support benefited from personal plans containing important information, such as, details about their interests, care needs and likes and dislikes. This enabled children's needs to be met well. The childminder spoke with parents regularly about children's individual needs. This approach supported effective communication and consistency of care for children. One parent told us, "(the childminder) gives me a daily diary of the things I need to know - sleep times, nappy changes, snack, general mood." This, and other communication systems in place, supported children to receive the care that was right for them and tailored to their individual needs. The childminder now needs to develop systems to ensure that personal plans are reviewed regularly and shared with parents. This should enable children's care and support to continue to be current, relevant and reflect families wishes.

The minded child experienced relaxed homely, family-like eating experiences. This included the childminder sitting down to eat snack with them. This fostered sociable chat as they ate, adding to the homeliness of eating experiences. The child was too young to be meaningfully involved in snack preparation. Their choices were listened to and respected so that were able to enjoy food they had chosen for snack. A young child was supported to eat safely as the childminder demonstrated a good awareness of the potential for choking when eating. Food was prepared in an appropriate way to minimise the risk of choking. We advised the childminder that only milk and water should be offered to children. We signposted them to the Setting the Table, the NHS national guidance document, providing nutritional guidance for childcare providers.

Children's dignity and privacy were respected during personal care, such as nappy changing. The minded child was happy and relaxed during this established routine, chatting to the childminder throughout.

Children's wellbeing was supported by the childminder's understanding of the importance of quality sleep routines. This included the use of a downstairs bedroom with a travel cot which promoted privacy for a calm, quiet sleep experience. A safe sleeping experience was supported by the childminder making regular checks on the minded child while they slept. This enabled their safety and wellbeing to be monitored effectively.

1.3 Play and Learning

Children were able to choose and self-select books, games and toys. These had been organised so they were accessible to very young children which promoted choice and independence. The minded child was able to follow his own interests and was enabled to explore and play as long as an activity held his engagement.

Children's learning and development was supported by a childminder who showed some awareness and knowledge of developmentally appropriate play. Messy, sensory activities were provided for a young child who became deeply engaged in this experience. This helped promote curiosity and creativity in play.

A young child's language and literacy development was supported by the childminder's use of age appropriate vocabulary and naming things as they played together. Children were able to use toys which incorporated technology enabling them to select songs to listen and sing along with. Mark making opportunities were encouraged. The minded child enjoyed exploring paints, getting his fingers in them and eventually being supported to make handprints. The childminder should now consider ways to increase the use of numeracy in play. For example, counting and looking for numbers in the environment, as well as introducing maths language, such as small, smaller, medium, big, tall, short.

Children's learning and development was beginning to be recorded. Next steps to support children's onward learning and development progress were not yet consistently included in written observations. The childminder had begun to make simple observations, accompanied by a photo, recording the skill a child had achieved or an activity they had enjoyed. These should be shared with parents so they are included in their child's successes and to enable them to support learning and development at home.

Children had regular opportunities to explore their community. Children walked to and from nursery/school pick ups and sometimes played in the play park at the school. Younger children went for walks in nature to see farm animals. They occasionally attended a local toddler group.

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.

Children experienced a warm, welcoming homely environment which was generally clean and comfortably furnished. The French doors leading to the garden were open if children chose to play outdoors which aided indoor ventilation.

Children's indoor play benefitted from a thoughtfully organised living/dining room. The table was pushed back when not in use to provide ample space for floor play. A young child was enjoying this space, running toy vehicles through paper tunnels. The childminder had created a suitable area in her hallway for younger children to access sensory experiences. A variety of toys and materials supported the ages and developmental stages of children attending the service.

Children had regular opportunities to play outdoors and were supported to play outside on request. The childminder told us they facilitated free-flow play when the weather was warm enough to leave doors open. Imaginative and role play were promoted through a mud kitchen and a play house. There was appropriately sized play equipment for younger children which supported opportunities for gross motor skill development. The childminder shared plans to continue the development of the outdoor area. They should consider increasing natural resources over time, indoors and outdoors. This should enable the provision of further opportunities for open-ended, imaginative play to provoke curiosity, and promote creativity and problem solving.

Some infection prevention and control measures supported children's health and wellbeing. Handwashing was carried out at key times. A young child was supported to wash their hands effectively with soap. The childminder outlined their daily and weekly cleaning routines. Further consideration should be given to managing the traffic of children and pets from the garden across the playroom floor. This would be especially important on days when babies and younger toddlers are playing on the floor. Some infection prevention and control practices were not firmly embedded. For example, appropriate PPE for nappy changing and intimate care should include both disposable aprons and gloves. As a result, we made an area for improvement (see area for improvement 1).

Areas for improvement

1. To keep children safe and healthy and to promote their wellbeing, the childminder should improve infection prevention and control measures.

This includes but is not limited to:

- a) appropriate use of PPE for personal care
- b) ensuring effective infection prevention and control measures are in place where pets and children are sharing spaces.

This is to ensure that infection prevention and control practices are consistent with the Public Health Scotland document: "Health protection in children and young people settings, including education."

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 leadership?

3 - Adequate

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

The vision, values and aims reflected the service provided. This meant that families had clear expectations about their children's experiences. The childminder told us they planned to review their vision, values and aims so that these continued to reflect their service as it developed.

The childminder had the potential to go outwith their conditions of registration. This was in relation to where an emergency situation might arise, requiring the children's schools/nursery to close, for example. This had the potential for the childminder needing to care for all the children at one time. When this was highlighted to the childminder, they addressed this issue immediately. We discussed conditions of registration and we were confident that the childminder had a good understanding of how many children they were able to care for at any one time and the reasons for this. The childminder must now ensure that they always maintain their conditions of registration, even when some children are at school or nursery, to ensure children's safety and wellbeing at all times.

The childminder provided opportunities for open, regular communication with families.

These included text messages, observations in profile folders and face to face discussions. This meant that children's play experiences, achievements and other important information was shared with parents through a variety of methods. This helped the childminder to maintain clear and effective communication which supported families to feel valued and respected.

We discussed with the childminder how feedback could be used to meaningfully inform the development of the service, such as identifying and actioning improvements. This would support the childminder to continue to develop good quality experiences and influence positive outcomes for children and families.

The childminder was keen to provide a service that met the needs of children and families well. They were reflective about their service and practice during our conversations. We spoke with the childminder about the benefits of recording changes in practice, as they occurred, as well as the impact these changes have on outcomes for children. This would support a more robust and meaningful approach to continuous improvement.

Some quality assurance processes were in place but were not yet supported by an effective self-evaluation system. We discussed the benefits of using quality audit tools, such as: 'A quality framework for day-care of children, childminding and school-aged childcare' in order to support and develop self-evaluation processes and reflect on the service. The childminder should now use these tools effectively to evaluate the service, identify areas for improvement and demonstrate the impact of improvements on influencing children's outcomes and experiences. As a result, we made an area for improvement (See area for improvement 2) to support this development.

Policies and procedures were in place to help keep children safe and support their health and wellbeing. These were shared with parents prior to starting to attend the childminder's service. These should now be reviewed as part of quality assurance processes. This review should include using best practice documents to help support and inform the childminder in influencing positive outcomes for children.

Areas for improvement

1. To ensure that children's experiences impact positively on their outcomes the childminder should further develop quality assurance processes, including self-evaluation.

This should include but is not limited to:

- a) involving children and families in feedback and using this meaningfully to identify improvements to the service
- b) the childminder becoming familiar with best practice guidance and using this to support them to reflect and plan for continuous improvement.

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

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

The childminder provided a warm and welcoming service, helping children feel loved, safe and secure. The childminder recognised the value and importance of positive relationships with families. They encouraged daily communication through technology and daily informal verbal feedback.

The childminder had attended the necessary core training courses. The childminder was a member of an early learning and childcare organisation which helped them access training, support and resources for their role. They had some gaps in their knowledge of procedure related to addressing child protection concerns. This had the potential to impact on children's protection, safety and wellbeing. We advised the childminder to review their child protection training, policy and procedure to increase professional knowledge of their role and responsibilities. As a result, made an area for improvement (see area for improvement 3).

The childminder was not yet making regular use of best practice documents to shape and inform practice and improvements. Further professional reading would also support and support and extend their knowledge. We discussed with the childminder ways in which she could record her learning and development to be able to recognise the impact on children's experiences.

Parents indicated to us that they were very happy with experiences and care provided to their children. They told us, "I know my child is safe and happy," and that the childminder was "flexible, so helpful and approachable." The childminder now needs to incorporate feedback gathered from families into their self-evaluation process. This will enable them to reflect on what is working well for children and their families, and where further improvements can be made so that children's experiences and outcomes continue to be positively influenced.

Areas for improvement

1. To safeguard children, the childminder should ensure their knowledge of their role and responsibilities in reporting any concerns is accurate. This should include, but is not limited to knowing who to contact in the instance of a child protection concern.

This is to ensure that knowledge and understanding of reporting concerns is consistent with National Guidance for Protection of Children in Scotland 2021, which can be found at:
<https://hub.careinspectorate.com/media/4577/national-guidance-for-child-protection-in-scotland-2021.pdf>

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

Complaints

There have been no complaints upheld prior to this first inspection. Details of any 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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate

How good is our staff team?	3 - Adequate
4.1 Staff skills, knowledge and values	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.