

# Thompson, Michelle

## Child Minding

Bathgate

**Type of inspection:**  
Unannounced

**Completed on:**  
19 April 2024

**Service provided by:**

**Service provider number:**  
SP2007964350

**Service no:**  
CS2007145435

## About the service

Michelle Thompson provides a childminding service from her semi-detached property in the town of Bathgate, West Lothian. The childminder is registered to provide a care service for a maximum of six children up to the age of 16.

The service is close to local amenities, schools and parks. The children are cared for downstairs and use kitchen/diner, living room and have access to a bathroom upstairs in the property. Children also have access to an enclosed garden to the rear of the property.

## About the inspection

This was an unannounced inspection which took place on 17 April 2024 between 11:30 and 13:30. We gave feedback on 19 April 2024 between 14:15 and 15:00. 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- observed the three children present
- received feedback from two parents via an online questionnaire
- spoke with the childminder
- observed practice and daily life
- reviewed documents

## Key messages

- Children experienced genuinely warm, gentle and kind interactions. They had developed strong relationships and attachments with the childminder.
- Children experienced an environment which was homely, comfortable and well maintained.
- Children were well supported by the childminder to wash their hands before eating. Younger children would benefit from washing their hands after nappy changing.
- There were no systems in place to evaluate the quality of the service and identify areas for improvement.
- The childminder had created a warm and welcoming ethos within the service.

## 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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### 1.1 Nurturing care and support

Children experienced kind, caring and nurturing interactions from the childminder. Children had established very strong attachments with the childminder. There were three minded children present on the day of the inspection who were happy, settled and relaxed in the care of the childminder. The childminder was warm and caring in her approach which supported the children to feel nurtured, loved and secure.

Children were cared for by a childminder who knew them and their families well. Effective systems were not in place to ensure the childminder had relevant information recorded about each child and their individual needs. For example, not all children had a personal plan in place. Children would benefit from the childminder reviewing personal plans with families to ensure they support children's rights and meet their changing needs (**see area for improvement one**).

Children brought their own snacks and meals. They sat at the table to eat their which created a positive experience. The childminder supported children to be independent, for example encouraging them to open items, and try new foods. Children experienced warm interactions during snack, including when receiving support with feeding. They were enabled to eat at a pace which was right for them. As a result, they experienced an unhurried and relaxed atmosphere. The childminder should continue to review the lunchtime experience. Consideration should be given to creating a nurturing, family experience.

Children were safe and protected as a result of the childminder's understanding of what to do if they had concerns about a child's health, safety or wellbeing. This contributed to keeping children safe and healthy.

No children required medication at the time of the inspection. The childminder had a medication policy and procedure in place which was in line with Care Inspectorate's best practice guidance 'Management of Medication in Day care and Childminding Services'. This meant that should children require medication, the childminder was well placed to administer medication safely.

### 1.3 Play and learning

Children were observed to be happy and enjoying their time with the childminder. They had opportunities which met their developmental needs, interests, and curiosities. These experiences offered children play and learning which included exploring, being creative, and problem solving. As a result, children were engaged in their play. The childminder responded to children's interests in a meaningful and engaging way. We heard her using effective questioning to extend children's thinking, which supported them to develop problem solving skills.

The childminder was playful in her interactions with the children and there was lots of chatter. She took time to listen, pick up on their nonverbal cues, and used questioning to promote their curiosity and creativity. Her enabling attitude supported the child to explore and shape their play. Children's perspectives were listened to and taken account of. This contributed to children feeling valued and respected.

Language and numeracy skills were supported naturally through conversations. To support children's natural curiosity and inquiry, there was scope for the childminder to introduce more open-ended natural materials and real-life resources. This would extend opportunities for children to be creative and explore innovative ideas.

The childminder captured children's experiences using photographs and shared these with families. This enabled them to be involved in their child's experiences. Observations of children's experiences captured their progress and achievements, these were linked into wellbeing indicators. However, not all children had these records in place. The childminder should continue to develop this to ensure all children are effectively supported in their play and learning (**see area for improvement one**).

The childminder supported the children to build links in their community through going for walks and attending local toddler groups. This enhanced opportunities for play and learning through strong connections to the children's own and wider communities.

#### Areas for improvement

1. To ensure children are supported to reach their full potential, the childminder should develop personal planning which captures children's developmental progress and identify next steps in learning. This is to ensure that children's needs are planned and met. To achieve this, plans should include, but not limited to:

- set out how children's needs will be met
- record how children have progressed
- be put in place within 28 days of a child starting at the service
- be reviewed every six months or more often if the child's needs change
- be shared and updated with children, parents and carers.

**This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'As child, 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).**

## How good is our setting?

## 4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### 2.2 Children experience high quality facilities

Children benefitted from a service that was homely, warm, and welcoming. The childminders home was clean, tidy and well-furnished. There was ample space for children to play, rest and explore. This demonstrated to children that they were valued.

Children were able to direct their own play and activities, accessing age-appropriate resources to support their learning. There was a good selection of resources which captured the children's interests and supported their play and learning experiences. These provided some opportunities for children to develop curiosity, enquiry and problem solving skills.

Good infection control measures were in place to ensure children had access to an environment that was safe and clean. This contributed to children feeling safe and secure. Children were encouraged to wash their hands before mealtimes, however, they did not wash their hands at other key times, such as after nappy changing. We signposted the childminder to up to date infection, prevention and control guidance to support improvement in this area 'Health protection in children and young people settings, including education' (**see area for improvement one**).

The childminder understood the importance of keeping children's personal information secure. They asked families for permission before taking photographs and shared their privacy notice and confidentiality policy with families using the service. The childminder had well organised records in place for children supporting them to maintain confidentiality of information.

### Areas for improvement

1. To support children's health and wellbeing, the childminder should ensure that effective infection prevention and control practices are in place. This should include but not limited to ensuring effective hand washing routines are implemented and established for all children

**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 (2024).**

**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. While the strengths had a positive impact, key areas need to improve.

**3.1 Quality assurance and improvement are led well**

The childminder clearly enjoyed caring for children and had developed positive relationships with parents that supported her to meet children's needs daily. As a result, the childminders practice effectively supported children's care needs. The childminder used daily conversation and technology to build relationships and exchange information. This helped the childminder to get to know children and provide ongoing support. One parent told us, 'I like that I get updated throughout the day on how my child is doing'.

The childminder engaged well with the inspection process. They were welcoming and willing to answer the questions required to support the evaluation of the service. The childminder used her observations and knowledge of the children to plan her day linking with home routines.

Families had some opportunities to give feedback, for example through daily discussions and technology. This helped to build positive relationships and exchange information. Families feedback was welcomed through questionnaires. We suggested further ways to engage and meaningfully involve families in service development.

There were no systems in place to evaluate the quality of the service and identify areas for improvement. We discussed the benefits of using best practice guidance and quality audit tools, such as: 'A quality framework for daycare of children, childminding and school-aged childcare', to reflect on the service and begin to make improvements (**see area for improvement one**).

**Areas for improvement**

1. To improve outcomes for children, self-evaluation should be developed. The childminder should become familiar with best practice guidance and use this to support her to reflect and plan for continuous improvement.

**This is to ensure 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).**

## How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### 4.1 Staff skills, knowledge, and values

The childminder had created a warm and welcoming ethos within the service. Parents valued the childminders supportive manner and, as a result, were able to share information and give feedback daily. This approach enabled responsive care that considered children and families changing needs.

Children were listened and responded to with care, nurture, and compassion. As a result, children had developed strong relationships and attachments with the childminder. They were supported through responsive care where warm, kind interactions helped them to feel valued and secure. Families were very happy with the care and support their child received. Their comments included, 'Michelle is amazing child minder and just has a special way with the kids they just love her', and 'everything is amazing from start to finish. [Child] absolutely adores her 'Chele'.

The childminder was beginning to make use of professional development opportunities. They had identified training courses to attend such as updated child protection. The childminder should now take time to undertake planned professional development, reflect on these and document what they have learned, and how it would impact on the setting and improve outcomes for children.

The childminder was aware of some best practice guidance. They now need to identify more time to become familiar with some of these documents in order to shape and inform their practice. The suggestions made during the inspection would support the childminder to continually improve their practice and ensure children receive high quality interactions and experiences.



## 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

It is recommended that Mrs Thompson develops a method to record the children's developmental achievements and future goals then share the records with parents to ensure the information detailed is maintained, relevant and kept up to date.

This is in order to comply with National Care standards for Early Education and Childcare up to the age of 16

Standard 4.4 Engaging with children.

This area for improvement was made on 7 December 2016.

#### Action taken since then

The childminder had developed methods to record children's developmental achievements.

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

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