

Murray, Joan Child Minding

Kyle

Type of inspection:
Unannounced

Completed on:
11 June 2024

Service provided by:
Joan Murray

Service provider number:
SP2003904748

Service no:
CS2003008083

About the service

Joan Murray provides her childminding service from her home in the small township of Erbusaig near Kyle of Lochalsh in the West Highlands. The minded children make use of the living room, a dedicated playroom, kitchen and toilet area. Children can access an enclosed outdoor play space within the back garden.

The childminder is registered to provide a care service to a maximum of six children at any one time under the age of 16, of whom no more than three are not yet attending primary school and of whom no more than one is under 12 months. Numbers are inclusive of children of the childminder's family.

Other conditions unique to the service are:

The part of the premises not to be used is the first floor.

Overnight service will not be provided.

Minded children cannot be cared for by persons not stated on this registration certificate.

About the inspection

This was an unannounced inspection which took place on 10 June 2024 between 11:00 and 12:30. The inspection was carried out by one inspector from the Care Inspectorate. We provided feedback by telephone to the childminder on 11 June 2024.

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:

- spoke with two children using the service;
- reviewed online questionnaire feedback from six families;
- spoke with the childminder;
- observed practice and daily life; and
- reviewed documents.

Key messages

- Children benefitted from warm and nurturing approaches to their care, which supported them to feel safe and secure.
- Effective systems to support personal planning and the safe administration of medicine need to be developed.
- Children benefitted from access to some resources that reflected their interests and developmental stages.
- Children would benefit from more opportunities to explore, create and problem solve with loose parts and open ended materials.
- There were limited systems in place to evaluate the quality of the service and identify areas for improvement.
- The childminder would benefit from accessing further professional development opportunities including reading guidance and reflecting on their learning.

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?	2 - Weak
How good is our setting?	3 - Adequate
How good is our leadership?	2 - Weak
How good is our staff team?	2 - Weak

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

How good is our care, play and learning?

2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

Quality indicator 1.1: Nurturing care and support

The childminder was caring and kind to the children. Children were nurtured and supported throughout their daily experience. Strong relationships had been formed between the children and the childminder. This resulted in children feeling safe, secure and comfortable in the setting.

Informal communication systems were in place with families. This was done through daily discussions and text messages. This supported continuity of care and included parents in their child's day.

We looked at children's personal plans and found that a previous area for improvement had not been fully met. Where some children did have plans in place, these did not always reflect their individual needs and show how children's needs and wishes would be met. The childminder should also consider how she observes and records children's progress and development. This should include identifying some next steps in learning with links to how she organises play that will challenge children and support their next steps. This would support the childminder to use information about the children to develop strategies to support positive outcomes for children. This was a previous area for improvement and remains unmet.

(See Area for improvement 1 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

Although no children in the service required medication at the time of the inspection, there were ineffective systems in place to support the administration of medicine. For example, there was no clear policy in place for the safe management of medication in the service. This had the potential to put children's safety at risk.

This was a previous area for improvement and remains unmet.

(See Area for improvement 2 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

We observed the sleep arrangements for the children under three. During the inspection there was a baby having a nap in her buggy. We reminded the childminder that all children should be able to sleep on a comfortable flat surface. We directed the childminder to good practice guidance including guidance produced by Scottish Cot Death Trust. This was a previous area for improvement and remains unmet.

(See Area for improvement 1 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

Quality indicator 1.3: Play and learning

The children could access some toys independently supporting them to make choices in their play experiences.

Not all children experienced play that was sufficiently challenging for their stage of development. There was a variety of resources on offer for children, including, small world people and animals, jigsaws and construction toys. Children could access toys and resources independently, supporting them to make choices in their play. However, there were not much opportunities for the child to explore open ended, natural materials or loose parts. This meant that children's play experiences did not offer opportunities for

curiosity, enquiry or problem solving. This was identified at our inspection and the area for improvement made in relation to this will be continued.

(See Area for improvement 3 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

There were limited approaches in place to evaluate children's progress and achievements. The childminder captured children's experiences using photographs and shared these with parents over an online messaging platform. They also shared feedback about daily experiences at pick up and drop off times. This enabled parents and families to be involved in their child's experiences. However, the childminder was not always aware of steps to take to help children progress. We discussed ways in which the childminder could develop this to effectively support children's progress and development.

We saw the childminder facilitating appropriate conversations which encouraged social skills. However, there were limited play experiences to promote early literacy and numeracy skills. For example, the environment did not support children's language, speech and communication development. We noted that throughout our visit, the television was on for extended periods of time and children were not benefiting from this experience. We discussed with the childminder the impact this has on the children's language development and asked the childminder to consider reviewing how long children have access to the television. We signposted the childminder to 'Getting ready to read; guidance for providers and inspectors on supporting early language development' to support their understanding of creating an environment to support children's early language skills. This was a previous area for improvement and remains unmet. **(See Area for improvement 3 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')**

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

Since the last inspection the childminder has made improvements in her back garden. Children had access to outdoor play in the fenced off area in the childminder's back garden. Safety measures were now in place so the garden area is safe and secure. From photographic evidence we could observe children having fun on trikes and playing in the mud kitchen. However, we reminded the childminder to ensure children have access to the outdoors on a daily basis. This would support children to be active and provoke interest or curiosity.

There were some infection prevention and control procedures which supported a safe environment. For example, the childminder's home was clean and tidy. However, the childminder shared that they did not use personal protective equipment when nappy changing or were aware of best practice guidance to support this. This had the potential to increase the risk of the spread of infection. This was a previous area for improvement and remains unmet. **(See Area for improvement 2 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')**

Risk assessments were not in place. We spoke about the importance of risk assessments, that they not only minimise harm but are also a tool to help children recognise and manage their own risk. We suggested that the children should be involved in reviewing the risk assessments for the range of activities and outings they experienced. This would develop their own awareness of managing risk, be responsible and learn about the safety of themselves and others. This would also help them to feel responsible and respected.

(See area for improvement 1).

The childminder had appropriate reporting forms in place to record any accidents and incidents. However, we did not see any completed forms. We discussed with the childminder, the importance of using the systems in place to ensure children are kept safe, their needs are met and families are informed and included in this process.

Areas for improvement

1. To ensure the environment is safe and secure, the childminder should improve the way she assesses risk to minimise hazards.

This is to ensure that care and support is consistent with the 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).

How good is our leadership?

2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

Quality indicator 3.1: Quality assurance and improvement are led well

Quality assurance processes were not in place to ensure important areas of the service were monitored. For example, the systems in place to ensure safe administration of medication, the recording, sharing and review of personal planning were not robust. This did not support positive outcomes for children. This was a previous area for improvement and remains unmet. (See Area for improvement 1 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

There were no systems in place for the childminder to evaluate the quality of the service and identify areas for improvement, the childminder informed us she was focusing on . 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 self-evaluation. This was identified and highlighted at the last two inspections and the area for improvement made in relation to this will be continued.

(See Area for improvement 3 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

The childminder should now submit an action plan to the Care Inspectorate, detailing how they will address the areas for improvements identified within this inspection report. The Care Inspectorate will assess the quality of the action plan and follow this up at the next inspection.

Overall, the pace of change was too slow. At the last inspection we made eight areas for improvement which have not all been met. Only one of these have been met and we have made an additional area for improvement. As a result, children are not experiencing high quality care. The childminder failed to submit an action plan detailing how they planned to address these improvements.

How good is our staff team?**2 - Weak**

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

Quality indicator 4.1: Staff knowledge, skills and values

During the inspection, we saw that the childminder had kind and nurturing interactions with the children. This contributed to them feeling supported in her care. Children presented as secure in the care of the childminder.

The childminder had completed her core training in child protection and first aid. The childminder was aware on what to do if she had a concern although there was no child protection policy in place to support this. We discussed the importance of maintaining policies and procedures and ensure this is shared with parents. Keeping up to date with best current practice guidance will support the childminder to develop her skills to ensure children receive a quality service. **(See area for improvement 1).**

The childminder had limited knowledge of best practice documents and up to date guidance which impacted on her professional knowledge and skills. For example, the childminder demonstrated a limited understanding of their roles and responsibilities for safeguarding children. This had the potential to put children at risk. This in turn impacted on the ongoing development of her service and the quality of children's experiences. Improved use of training and development opportunities would ensure high quality outcomes and experiences for children. We directed the childminder to the Care Inspectorate Hub and The Scottish Childminding Association (SCMA) website where she could access best practice documents and get ideas as to how she could develop her service.

We also directed her to 'My Childminding Journey' and 'Realising the Ambition' as a way of accessing guidance and practice documents to support the ongoing development of the service. This was a previous area for improvement and remains unmet.

(See Area for improvement 7 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

We have also provided the childminder with information on key documents that would support her to improve as detailed under key indicator 3.1. Quality assurance and improvement are led well.

The childminder should now act on the area for improvements discussed during this inspection to further develop and improve her service.

Areas for improvement

1. Policies and procedures should be in place to reflect current good practice, support the childminder with the delivery of the service and to provide parents with clear information about the service.

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 guidance and best practice". (HSCS 4.11)

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

Requirements

Requirement 1

By 24 June 2024, the provider must ensure that children are safe, protected from harm and their wellbeing needs are met. To do this, the provider must access a suitable practical paediatric first aid course.

This is in order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011 (SSI 2011/210) 4(1)(a) - Requirements to make proper provision for the health and welfare of service users.

This is to ensure that 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).

This requirement was made on 16 January 2024.

Action taken on previous requirement

The childminder completed her First Aid course in May 24.

Met - within 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

To support children's health and wellbeing, the childminder should ensure all children have a personal plan that details their individual needs, choices and progress. This information should be used by the childminder to care for and support children effectively. Plans should be reviewed by parents to reflect children's current needs.

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

'My personal plan (sometimes referred to as my 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 16 January 2024.

Action taken since then

The childminder had made some progress in ensuring personal plan information was in place and up to date, to support them to meet children's needs. However, all personal plans were not in place.

This area for improvement has not been met.

Previous area for improvement 2

To ensure children are kept safe, the childminder should review the systems in place to support the safe management of medication.

This should include but is not limited to:

- a) reviewing medication permission forms to ensure all information required is included and follows best practice guidance as stated in the Care Inspectorate publication, 'Management of Medication in Daycare of Children and Childminding Services'; and
- b) implementing a clear policy for the safe storage and administration of medicine which is accessible to families.

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

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

This area for improvement was made on 16 January 2024.

Action taken since then

The children has some paperwork in place, however, there was no policy for the safe storage and administration of medicine.

This area for improvement has been partly met.

Previous area for improvement 3

To support children's development, imagination and creative play, the childminder should develop the experiences available to stimulate and challenge children in their play.

This should include but is not limited to:

- a) developing access to a wider range of resources to support children's creativity and imagination such as increasing access to loose parts, open ended and natural materials;
- b) reviewing how long children have access to the television and the benefits of this for them; and
- c) reflecting on best practice guidance including:

- Realising the Ambition
- Loose Parts Play Toolkit
- Growing my potential: Promoting safe, responsive, nurturing care and learning experiences and environments for babies and young children aged 1 and 2 years
- My World Outdoors.

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

'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

This area for improvement was made on 16 January 2024.

Action taken since then

The childminder has some access to loose parts, open ended and natural materials. However these have not been reflected on best practice.

This area for improvement has not been met.

Previous area for improvement 4

To support children's wellbeing, the childminder should ensure that children are able to rest and sleep in an area that is safe, comfortable and promotes each child's privacy and dignity.

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

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

This area for improvement was made on 16 January 2024.

Action taken since then

The childminder shared that children sometimes slept in buggies which did not take account of best practice guidance, did not provide a comfortable sleep space and posed an element of risk to children sleeping. Through discussions and sharing of information, the childminder has not reviewed practice with regards to where children slept. This would ensure that children sleep in an area that is comfortable, supports their privacy and dignity, and keeps them safe.

This area for improvement has not been met.

Previous area for improvement 5

To ensure children have opportunities to access regular, high quality, outdoor play experiences, the childminder should review and improve arrangements for access to the outdoors.

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

'As a child, I play outdoors every day and regularly explore a natural environment' (HSCS 1.32).

This area for improvement was made on 16 January 2024.

Action taken since then

The childminder has developed her garden area to make it safe and secure for children to play in. Children have access to regular outdoor play in the childminder's back garden.

Previous area for improvement 6

To protect the health, wellbeing and safety of children, the childminder should review and improve the nappy changing practices in the service to ensure they follow best practice guidance as set out within the document 'Infection Prevention and Control in Childcare Settings (Day Care and Childminding Settings)' NHS 2018.

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

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

This area for improvement was made on 16 January 2024.

Action taken since then

The childminder shared that they did not use personal protective equipment when nappy changing or were aware of best practice guidance to support this. This had the potential to increase the risk of the spread of infection.

This area for improvement has not been met.

Previous area for improvement 7

To improve outcomes for children, quality assurance processes should be developed.

This should include but is not limited to ensuring:

- a) important aspects of the service such as personal planning, accident and incident reporting and the safe administration of medication are regularly monitored and carried out in accordance with best practice guidance; and
- b) self-evaluation processes are developed to support the childminder to reflect on practice and identify strengths and areas for further improvement.

This is to ensure that 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); and

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

This area for improvement was made on 16 January 2024.

Action taken since then

Quality assurance processes were not in place to ensure important areas of the service were monitored. For example, the systems in place to ensure safe administration of medication, the recording, sharing and review of personal planning or accident and incident information were not robust.

This area for improvement has not been met.

Previous area for improvement 8

To support children's wellbeing, learning and development, the childminder should further develop her knowledge and skills, and use these to improve the quality of experiences for children. This should include, but is not limited to, accessing best practice guidance and information to support the development of effective child protection procedures.

This is to ensure that care and support is consistent with the Health and Social Care Standard (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); and

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

This area for improvement was made on 16 January 2024.

Action taken since then

The childminder had limited knowledge of best practice documents and up to date guidance which impacted on her professional knowledge and skills. For example, the childminder demonstrated a limited understanding of their roles and responsibilities for safeguarding children. This had the potential to put children at risk..

This area for improvement has not 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.

Detailed evaluations

How good is our care, play and learning?	2 - Weak
1.1 Nurturing care and support	2 - Weak
1.3 Play and learning	2 - Weak
How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	2 - Weak
3.1 Quality assurance and improvement are led well	2 - Weak
How good is our staff team?	2 - Weak
4.1 Staff skills, knowledge and values	2 - Weak

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