

# Nicole Crawford Childminding Service Child Minding

Elgin

**Type of inspection:**  
Unannounced

**Completed on:**  
11 July 2024

**Service provided by:**

**Service provider number:**  
SP2022000232

**Service no:**  
CS2022000348

## About the service

Mrs Crawford is registered to provide a care service to six children at any one time, up to 16 years of age, of whom no more than three are not yet attending primary school and of whom no more than one is under 12 months. Numbers include the children of the childminder's family/household.

The service is situated in a residential area of a town, close to local amenities. Children are cared for in the lounge and dining/play room. A secure garden to the rear of the property is directly accessed from the play room.

## About the inspection

This was an unannounced inspection which took place on 10 July 2024 between 11.45 and 14.30. 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 registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Communicated with three parents;
- Spoke with 2 children
- Spoke with the childminder;
- Observed practice and children's experiences; and
- Reviewed documents.

**Key messages**

The childminder's respectful and caring approaches towards the children helped positive relationships to be established.

Children's overall wellbeing was supported through the personal plan which contained key information about them.

The childminder recognised that children connecting with communities enhanced their skills, confidence and learning opportunities.

Children benefited from being cared for in a comfortable, clean, well furnished and homely environment.

To enhance the delivery of high-quality practice that leads to improved outcomes for all, the childminder should establish a clear ethos of continuous improvement.

The childminder's enabling and responsive attitude was supportive of building children's confidence and promoting their independence.

**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/people and clearly outweighed areas for improvement.

### 1.1 Nurturing care and support

The childminder's respectful and caring approaches towards the children helped positive relationships to be established. Practice by the childminder promoted children's independence and dignity. The school age children were happy, they told us that they had recently returned from an outing, it had been very wet and they were having a rest. The nature of the service provided meant that no sleep routines needed to be accommodated.

Children were having a picnic style packed lunch sitting on a blanket together, it was calm and relaxed. They were looking forward to a treat of hot dogs they had chosen to have due to it being the holidays. The childminder was attentive to the needs of the children during lunch, ensuring that they had water to drink so they remained hydrated. The childminder explained that children usually sat at the large table and bench set in the dining/play room to eat their snacks after school, and any meals during the holidays.

Children's overall wellbeing was supported through the personal plan, which contained key information about them, such as contact details and any health needs such as allergies and medical conditions. Personal plans were not being consistently reviewed with parents and children (where possible) to support continuity of care and development. We discussed this with the childminder (see area for improvement 1). The childminder provided a service primarily to school age children, with only occasional care to pre-school children who were siblings. We suggested that 'about me' forms enabled children to share their interests, likes/dislikes and helped resources and activities to be tailored to suit. Whilst the childminder recorded and shared pertinent information with parents, it was not part of the personal plan. We referred the childminder to guidance on the use of chronologies, that helped with the identification of children's needs and directed action to support children well. Ref: Practice guide to chronologies - [hub.careinspectorate.com](http://hub.careinspectorate.com)

Parents strongly agreed that they had a strong connection with the childminder. They told us that there was good communication and that the childminder kept them well up to date with what was happening.

The childminder had not administered any medication although a consent form was in place for such purposes. We suggested that having a format for the administration of medication readily available would also be beneficial. To ensure that the medication policy aligned with good practice, we referred the childminder to the Care Inspectorate medication guidance. Ref: Management of medication in daycare of children and childminding services - [hub.careinspectorate.com](http://hub.careinspectorate.com)

### 1.3 Play and Learning

Children were actively and meaningfully involved in leading their play and learning through a balance of spontaneous and planned activities. It was a particularly inclement day at the time of our visit. Children had decided to have a movie afternoon with some popcorn and they chose the film they wanted to watch. They had fun using a den building kit to create a structure that they then furnished with blankets and cushions to create a cosy space.

The childminder had recognised that children connecting with communities enhanced their skills, confidence and learning opportunities. Children told us that they often went on outings to the woods and beach during the holidays and often stopped at the play parks on their way back from school in term-time. Children had also visited the library. They often played games in the garden, football and basket ball hoop and the trampoline.

Children's choice and independence was promoted. The play room was equipped with a variety of activities that included board games, books, creative building sets, arts/crafts, drawing materials and activity sheets. Colourful posters promoted respect, numeracy and literacy.

Parents always considered that their child's development was supported through interesting and fun play experiences and their child always had the opportunity to play outdoors.

### Areas for improvement

1. To help ensure that families and children remained central to the personal planning process, the childminder should establish a consistent system of review, a minimum of 6 monthly.

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 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).

'I am fully involved in developing and reviewing my personal plan, which is always available to me'. (HSCS 2.17)

### How good is our setting?

#### 4 - Good

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

Children benefited from being cared for in a comfortable, clean, well furnished and homely environment. It helped to give the message to children that they mattered. Children had ample space for their needs. Plenty of ventilation and natural light contributed to children's psychological wellbeing.

Safety of the children was supported as the childminder followed infection control guidance such as good hand hygiene. Children washed their hands before having their snack. We discussed current infection control guidance with the childminder to support current practice. Ref: Health protection in children and young people settings, including education. The childminder had completed food hygiene training to support safe food practices.

The childminder kept the premises, activities both in the home and outside, under regular review to assess and manage risk. Written risk assessments also helped to support the safety and security of the children. We suggested that a programme of review and a bespoke approach to outings, would help to ensure that risk continued to be assessed and evaluated. Reference: SIMOA keeping children safe practice notes - [hub.careinspectorate.com](http://hub.careinspectorate.com)

The indoor and outdoor play space was structured to take account of children's stages of development and learning. The arrangement of furnishings in the lounge and dining/play room, enabled children to take part in floor play. The large table in the dining area was used for meals and art/craft activities. A sofa and chairs in the lounge area enabled children to rest and recuperate and enjoy quieter activities.

A secure garden was directly accessible from the play room, although children were not outside during our visit due to the weather being very inclement. It enabled children to enjoy active and physical play.

Protection of children's information complied with relevant best practice.

## How good is our leadership?

**3 - Adequate**

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

The childminder had appropriate records that were detailed, well organised and readily accessible. They had clear policies that supported them in running the service and they were shared with parents. We suggested that having a programme of review would help to ensure they reflected the provision of the setting and aligned with good practice guidance.

The childminder recognised the value of working in partnership with parents in a meaningful and supportive way, taking account of their views on a daily basis. Parents told us that they always felt welcomed into the childminder's home and that there was open discussion. Whilst this provided a starting point for improving the quality of the service, self-evaluation was at an early stage of development.

We spoke with the childminder about the benefits of a concise format for recording changes as they occurred and any areas for improvement, it would help to support the process of self evaluation. It could be as result of seeking the views of parents and children, learning from training that informs practice, and implementing best practice guidance. We discussed this with the childminder (see area for improvement 1). Ref: How we support improvement programme and bitesize sessions, and A quality framework for daycare of children, childminding and school-aged childcare - [hub.care@careinspectorate.com](mailto:hub.care@careinspectorate.com)

We also discussed notification reporting to the Care Inspectorate and referred the childminder to the guidance on the Care Inspectorate hub.

## Areas for improvement

1. To enhance the delivery of high-quality practice, that leads to improved outcomes for all, the childminder should establish a clear ethos of continuous improvement.

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

'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership.' (HSCS 4.7); and

'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/people and clearly outweighed areas for improvement.

The childminder had a clear understanding of how children developed and learned. They had completed core training such as first aid, food hygiene and child protection and an induction to childminding, to help improve their knowledge and understanding, and to enhance children's safety and well-being. We discussed the benefits of a reflective journal to record how the childminder had used their learning to improve their practice and children's experiences.

The childminder knew other childminder's in the area and was able to have discussions with them to inform their practice. They were also a member of an organisation that supported Scottish childminders and had sought advice from the local authority childminding officer.

The childminder's enabling and responsive attitude was supportive of building children's confidence and promoting their independence. Their warmth and kindness towards the children helped them to feel valued, loved and secure.

The childminder recognised the importance of children having fun in their play and enabling them to learn and develop.

**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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