

Graham, Louise Child Minding

Glasgow

Type of inspection:
Unannounced

Completed on:
23 July 2024

Service provided by:
Louise Graham

Service provider number:
SP2016988074

Service no:
CS2016347528

About the service

Louise Graham provides a childminding service from her home in a residential area of Bearsden, East Dunbartonshire.

The service is close to local schools, shops and parks. Children are cared for on the ground floor of the property which includes a lounge, conservatory, kitchen area, and enclosed garden area.

The childminder's current registration is:

1. To provide a care service to 6 children under the age of 16yrs of whom no more than 3 are not yet attending primary school and no more than 1 is under 12 months. Numbers are inclusive of children of the childminder's family.

Any other conditions unique to the service:

2. Only those persons named on the certificate of registration may care for children.

3. No overnight service provided.

About the inspection

This was an announced (short notice) inspection which took place on Thursday 10 November 2022 between 11:00 and 13:45. The inspection was carried out by two inspectors 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:

- spoke with people using the service
- gathered feedback via electronic questionnaires from six families
- spoke with the childminder
- observed practice and daily life
- reviewed documents.

Key messages

- Children experienced warm and nurturing care to support their wellbeing.
- There were opportunities for children to engage in activities and experiences that supported literacy and numeracy.
- Children had space to rest and relax.
- The childminder should ensure personal plans are update in line with legislation.

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

Quality indicator 1.1: Nurturing care and support.

Children experienced warm and nurturing care to support their wellbeing. One parent told us 'The childminder is really kind and caring.' We observed children receiving cuddles and reassurance when needed, which showed us that they had formed strong attachments with the childminder. As a result, children were made to feel loved and secure.

The childminder knew individual children very well. Some information about children, such as their likes, dislikes and interests were contained in personal plans and the childminder could tell us how children were being supported. One parent told us, 'We speak regularly and discuss how my daughter is getting on. She makes any changes to care necessary depending on what my daughter needs.' However, some plans had not been updated for some time. The childminder should ensure that plans are updated at least every six months. This will help to ensure children receive the right support at the right time. (See area for improvement 1).

At lunchtime, children were encouraged to be independent. A very young child was encouraged to feed herself, with support when needed. We would encourage the childminder to develop healthy eating habits in children by sitting with them as they eat.

Children's emotional wellbeing was supported through sensitive and safe sleep routines that reflected the needs of children and the wishes of their family. Permission was sought from parents if their child prefers to sleep in a buggy. The childminder understood the importance of rest or sleep and routines reflected children's individual needs. This supported children's overall wellbeing.

No children were being given medication at the time of the inspection, but the childminder had appropriate medication records in place should the need arise.

Quality indicator 1.3: Play and learning.

Children had opportunities to play with a variety of resources in the living space. For example, large trucks and a toy kitchen. Throughout our inspection, the childminder supported a young child to choose from the wide range of resources on offer. The childminder engaged with the child and played with them. As a result, the child was encouraged to use their imagination and have fun.

Children's language development was supported by the childminder through appropriate conversations and role modelling. There were opportunities for children to engage in activities and experiences that supported literacy and numeracy. For example, reading books and counting out their toys. The childminder engaged with children in meaningful conversations to develop their speech and language. This meant that, children were being challenged at an appropriate level.

Children routinely spend time outdoors exploring the local and surrounding community. They attended toddler groups, explored the local parks and visited the library. One parent told us, 'The childminder regularly takes my child to play groups with other toddlers, parks in the local area, soft plays and to a museum outside of Glasgow.' As a result, children were receiving regular fresh air and exercise, which supports their wellbeing, and have a sense of belonging to their local community.

The childminder knew children very well. However, there were limited observations recorded and the planning process was not fully established to identify children's stages of development and next steps. We discussed with childminder how planning processes could be strengthened by evaluating experiences to ensure children are fully supported to achieve their potential.

Areas for improvement

1. To ensure children's health, welfare and safety needs are met the childminder should develop written personal plans for each child in her care. These should be reviewed at least once every six months.

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.'

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.

Quality indicator 2.2: Children experience high quality facilities.

Children were cared for in an environment that was welcoming, comfortable and clean. The home was light and spacious with a calm atmosphere. This resulted in the child being happy and relaxed in the childminder's home, which gave a strong message to children that they matter. The setting was well maintained and clean which kept children safe and protected.

A designated play space had wide variety of toys accessible for children to play. This included a toy kitchen, small world toys and arts and craft materials. These play resources encouraged imagination skills and creativity. A table tennis table was set up in the conservatory for school aged children. Children had space to rest and relax on a large sofa, if they wished. They could also access a large, enclosed garden. This meant that children could access a range of spaces and resources that suited their age and stage of development.

We discussed with the childminder extending the children's access to natural, open-ended materials to stimulate children's curiosity and extend their play. The "Loose Parts Play toolkits" available on the Care Inspectorate Hub could provide some new ideas and suggestions. This will further ensure that children have opportunities to develop their creativity, curiosity, problem solving and imagination.

The service had appropriate infection prevention and control procedures in place to support a safe environment for children and the childminder. Personal Protective Equipment (PPE) was available when required and regular cleaning of equipment and surfaces was in place. Adults and children regularly washed their hands. This helped to keep children safe and healthy.

Basic risk assessments were in place that helped the childminder carry out safety checks within the home and consider hazards within the local community. The childminder should now develop more detailed risk assessments that help identify potential hazards and record any action taken to help reduce risks. This will further ensure that children are kept safe.

The childminder is registered with the Information Commissioner's Office. This showed us that the childminder understood their responsibilities regarding storing and processing personal information.

How good is our leadership?

4 - Good

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

Quality indicator 3.1: Quality and improvement are led well.

The childminder spoke informally with parents during drop-off and collection times. One parent told us, 'We are in regular contact with the childminder and she is always happy to chat.' Messages were also shared via Whatsapp to keep families updated and gain their views. This allowed the childminder to gather informal feedback about their service and make any improvements as suggested.

Children were involved in the development of the service. For example, school aged children had previously completed questionnaires which included their likes and dislikes. This gave a message to children that their voice and ideas matter.

The childminder developed a range of policies and procedures that were shared with parents. This ensured that they knew what to expect from the service. The childminder should continue to review these regularly and amend them in accordance with good practice guidance and frameworks. This would support high quality care based on relevant guidance and best practice.

During the inspection we spoke about how to effectively use the 'quality framework for daycare of children, childminding and school-aged childcare' to evaluate the service. The childminder needs to consider more formal ways to evaluate the service and agreed that this required further development. We encouraged the childminder to continue this journey and shared some examples of how this could be achieved. This should involve parents and children whenever possible. This will support the childminder to reflect on what is working well in their service and what could be improved. This will also ensure children and families continue to have meaningful opportunities to contribute to the development of the service. This was an area for improvement at the last inspection and will be repeated. (See area for improvement 1).

Areas for improvement

1. The childminder should develop and implement an effective system of quality assurance, to monitor and improve all areas of practice and improve outcomes for children. This should include the views of children and their families.

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

'I use a service and organisation that are well led and managed' (HSCS 4.23).

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.

Quality indicator 4.1: Staff skills, knowledge and values.

Children experienced warm, kind, and nurturing care from the childminder. The childminder was responsive to their needs and had formed secure attachments with children. One parent told us, 'the childminder cares a lot about our child and he is excited to see them.' The childminder understood the importance of positive relationships. As a result, children felt valued, loved, and secure.

The childminder placed children and their families at the heart of their work and was committed to supporting children to be happy and confident individuals. One parent told us, 'We are so happy to have found this childminder and think they are a great fit for our daughters needs and development.' The childminder engaged with children in a responsive, and respectful manner which supported their self-esteem and confidence. The childminder promoted positive behaviour by role modelling kind words and friendly engagement with the children.

The childminder was part of a local childminding network. This provided her with a community of support where she could share good practice and ideas with other childminders. This supported the childminder to keep up to date with good practice.

Since the last inspection, the childminder has accessed 'The Hub' on Care inspectorate's website to stay informed of any new guidance and accessed some training, for example, first aid and child protection. We would encourage the childminder to formalise a plan for her training and development in the future. We suggested prioritising training that would support the needs of the children in her care. This will further ensure positive outcomes for children. This was an area for improvement at the last inspection and will be repeated. (See area for improvement 1).

Areas for improvement

1. To support positive outcomes for children, effective use should be made of learning opportunities and best practice guidance to support the childminder to develop their knowledge and skills. The childminder should use their learning from these to develop service.

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).

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

The childminder should continue to develop how she monitors the quality of the service as a whole. For example, the childminder develop her approach to improvement planning system and ensure that she submits self assessments to the Care Inspectorate within set timescales.

National Care Standards Early Education and Childcare up to the age of 16: Standard 13: Improving the service and Standard 14: Well-managed service.

This area for improvement was made on 19 August 2017.

Action taken since then

This area for improvement is not met and will be repeated and rewritten using current guidance. Please see detail under quality indicator 3.1.

Previous area for improvement 2

The childminder should identify her training needs and devise a training plan each year, evaluating the impact any training has had on her own personal development, outcomes for children or the service as a whole.

National Care Standards Early Education and Childcare up to the age of 16: Standard 13: Improving the Service and Standard 14: Well Managed Service.

This area for improvement was made on 19 August 2017.

Action taken since then

This area for improvement is not met and will be repeated and rewritten using current guidance. Please see detail under quality indicator 4.1.

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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