

Watret, Shona Child Minding

Annan

Type of inspection:
Unannounced

Completed on:
11 September 2024

Service provided by:
Shona Watret

Service provider number:
SP2007963784

Service no:
CS2007144078

About the service

Shona Watret is registered as a childminder to provide a service to a maximum 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. Overnight service will not be provided. The parts of the premises not to be used is the lounge and bedrooms.

The service is situated in the town of Annan in Dumfries and Galloway. Minded children are cared for in a dedicated playroom. Children also have access to and use the family kitchen for meals, and the bathroom. Outdoor play is accessible from the playroom. The childminder uses local amenities such as soft play, local walks and parks.

About the inspection

This was an unannounced inspection carried out by one inspector from the Care Inspectorate on Wednesday, 11 September 2024, between 10:30 and 15:15. To prepare for the inspection, we reviewed information about the 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:

- Observed practice and daily life
- Spoke with two children using the service
- Reviewed documents
- Spoke with the childminder
- Looked at six Microsoft forms from parents/carers to gather their views and feedback.

Key messages

- Children received nurturing and respectful care in a bright, warm, and homely environment.
- Children enjoyed high-quality play and learning experiences throughout the day, leading their own play and having fun.
- Children were comfortable in the childminder's home.
- The childminder had a positive outlook on change and improvement. Children and families were at the heart of their service.
- Children benefitted from a dedicated childminder who valued the strong relationships with families.

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?	5 - Very Good
How good is our setting?	5 - Very Good
How good is our leadership?	5 - Very Good
How good is our staff team?	5 - Very Good

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

How good is our care, play and learning?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children; therefore, we evaluated this key question as very good.

Quality indicator 1.1: Nurturing care and support

Children were happy, confident, and settled during the inspection. The childminder was nurturing, caring, and responsive to children's needs. We could see that the children had developed good relationships with the childminder - they approached them for support when needed, involved them in their play, and looked for cuddles and reassurance. Children were confident in the childminder's home and they were keen to share their experiences with us. This told us that they felt secure. A parent told us, "My child has a great relationship with Shona and is always so happy to see her. My child gets great interaction with her friends, is always learning new things."

Personal plans and 'All About Me' booklets were in place for children. These contained key information to help support their health, wellbeing, and safety needs. Plans had been completed in consultation with parents. They supported the childminder to monitor children's development, record achievements, any identify any support needed. Children's individual needs were supported well through the childminder's knowledge and understanding of each child. For example, assisting children who required support when eating lunch, and taking a child for a walk outdoors when they needed to rest. This supported children's wellbeing.

Parents were updated regularly through daily discussions and text message communication. This supported positive links with home whilst ensuring parents were kept up to date about their child's day. The childminder welcomed parents into the service at drop off and collection times. This allowed information to be shared about children's progress, encouraged family participation and helped develop positive relationships. Parents commented about the childminder, "Great communication, friendly approachable and helpful", and "constantly updated, and also she has went through all his files with me to show his development."

Home cooked meals were provided and children washed their hands prior to lunch to minimise the spread of infection. Children very much enjoyed the penne bolognese that was served, with some children asking for more. Mealtimes were relaxed, with the childminder supporting and responding to children's needs and wants. Children were kept hydrated through regular access to water.

Children attending the service during our inspection did not require medication. We found that the childminder knew their responsibility regarding the safe administration of medication and appropriate systems were in place to record information. This helped keep children safe.

Quality Indicator 1.3: Play and learning

Children had free flow access from the playroom to the garden, allowing them the choice to play indoors or outdoors. During our inspection children were observed taking part in an art activity using chalk and stones. They were keen to show the childminder what they had created. The childminder extended children's play by encouraging them to make more patterns and pictures on the stones. One parent told us, "They enjoy doing crafts outside." This meant that children could enjoy activities that were of interest to them.

The childminder told us they planned different activities throughout the week to support children's interests and age and stage of development. For example, children were learning about wild animals, what they eat and where they sleep. Children enjoyed stories and singing songs about animals which supported their interests. The childminder used effective questioning with children to extend their learning, and they modelled positive interactions and engagement to support their emotional wellbeing.

Children could choose from a range of toys and resources. For example, large wheeled vehicles, small world toys, block play, pinecones, leaves, and conkers. The childminder had developed resources and the environment with children's needs and interests in mind, which supported children's development. Sensory based and natural resources supported the children to be naturally curious and develop their imagination.

Children had access to the large garden with varied sizes of water trays and a sand pit which suited children's age and stage of development. Children enjoyed playing with the dry and wet sand experiencing the feeling of it on their hands. We heard lots of giggles and laughter while the children played together and with the childminder. This told us that children were having fun while they learned and developed.

Children had regular opportunities to play and learn in the community. They often went on walks and visited local parks, beaches, and woodlands. This supported them to develop connections with their own community.

How good is our setting?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children; therefore, we evaluated this key question as very good.

Quality indicator 2.2: Children experience high quality facilities

The childminder's home was clean, bright, and homely. The playroom was well ventilated and had plenty of light, and there was ample space for children to play. This made children feel welcome and helped them feel that they mattered.

Suitable infection control measures, including handwashing and cleaning procedures, were in place to minimise the spread of infection. This helped keep children safe.

The playroom was laid out with a wide range of toys that the children were interested in, including sensory toys, building blocks, a selection of jigsaws and board games, and other age-appropriate toys. The childminder had set this up so children could access and choose which toys and games they wanted to play with, ensuring their independence.

Children had daily access to a secure garden that was well planned to consider their interests and stages of development. There was various outdoor toys to play with which included a large slide and climbing apparatus. A parent commented, "Shona has a lot of toys and equipment in her garden and I know she takes them for walks locally whether it be the park, river, train station, shops." This meant that children's health and wellbeing was supported through energetic play.

Outdoor play was supported through trips and outings, such as visits to local parks, woodlands, and soft play. On outings, children accessed a variety of play equipment such as slides, swings, and den building. A parent shared with us, "They play at the park, they walk to the river and feed the ducks, they play in the

woods and even walk to the post office to post a letter. My child absolutely loves this kind of days." This supported children's emotional and physical wellbeing.

Children and families' personal information was securely stored, and the childminder had registered with the Information Commissioner's Office. This helped protect children's and families' privacy.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 3.1 Quality assurance and improvement are led well

The childminder had developed very good relationships with parents. They had gathered feedback from parents through daily communication, questionnaires, and they sought views of parents when children were settling in or leaving the service. This helped the childminder to review and reflect on their service, and identify areas for improvement. We discussed sharing feedback from questionnaires with parents to show parents and children that their voices has been acknowledged and heard. One parent shared, "Shona gave us a sheet to fill with my child on her experience at Shona's. It also asked if there was anything they would like to change or do when they are at Shona's."

Children and families new to the service were issued with a handbook about the childminder's service. This was detailed and informative and gave parents clear information on the service provided. This meant families knew what to expect from the childminder.

The childminder had developed an improvement plan, identifying areas that were working well and areas that needed to improve. To support this, they used current best practice 'A quality framework for daycare of children, childminding and school-aged childcare' (2022). This supported the childminder to be reflective and prioritise areas of development, with a focus on delivering best outcomes for children and families.

The childminder had created policies and procedures that were shared with parents to let them know what to expect from the service. The childminder regularly reviewed and updated these policies in line with best practice guidelines and frameworks. This helped ensure high-quality care based on the latest guidance and best practice.

How good is our staff team?

5 - Very Good

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

4.1 Staff skills, knowledge and values

Children experienced warm, kind, and nurturing care, ensuring they felt valued, loved, and secure. The childminder was responsive to the needs of individual children, had formed secure attachments with children and understood the importance of positive relationships with children and families. One parent told us, "The children learn so much at Shona's. Shona also builds such a beautiful confidence in the children she looks after by making them seen, heard, and valued as individuals."

The childminder was confident in their role and had engaged in various training courses to keep up to date with best practice guidance. Recent training attended was relevant to the childminder's practice, and information had been accessed via the Froebel Trust and the Care Inspectorate hub. As a result, the childminder continued to develop their knowledge, skills, and practice to ensure positive outcomes for children.

A training record detailed the dates and providers of completed training courses. We advised the childminder that continuous professional development could be enhanced by evaluating their training and reflecting on the impact of their learning and development. This would support the childminder in reflecting on what skills, knowledge, and practice they have developed to lead to better outcomes for children.

The childminder had a particularly good understanding of rights-based childcare practices. They understood it was important to empower children and treat them with respect. They demonstrated this when they spoke with children before they provided personal care. For example, after lunch, the childminder asked the children before washing their hands and encouraged them to help do it for themselves, promoting life skills. This ensured children were treated with respect and had their individual needs and preferences met.

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 improvement within the service, the provider should ensure that they:

- a) Review and improve the arrangements for the administration of medication to ensure children's welfare and safety.
- b) Improve the recording of the administration of any medication.
- c) Develop a process to ensure information is shared in blended placements.

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

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

'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18).

This area for improvement was made on 10 November 2023.

Action taken since then

The childminder had made improvements in developing medication policies and procedures. The childminder had knowledge and understanding of their roles and responsibilities.

This area for improvement is met.

Previous area for improvement 2

To ensure infection control measures are effective, the provider should review and improve their practices, in particular hand washing.

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

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

This area for improvement was made on 10 November 2023.

Action taken since then

The children and the childminder washed their hands as and when required.

This area for improvement has been met.

Previous area for improvement 3

The childminder must develop detailed personal plans which clearly identify each child's needs and how these will be met. This should include, but not limited to:

a) Developed in partnership with parents and reviewed and updated in line with legislation at least once in each six month period.

This is to comply with Regulation 4(4)(a) (Welfare of service users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (S.S.I. 2011/210).

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).

This area for improvement was made on 10 November 2023.

Action taken since then

All children had a personal plan in place that clearly detailed children's health, welfare and safety needs. Next steps were identified and linked to planning, evaluation and observation cycles. Plans were created, reviewed and updated with parents in line with current legislation.

This area for improvement has been met.

Previous area for improvement 4

To ensure minded children experience high quality play, the childminder should review and improve the toys, resources and materials, using best practice documents referred to within this report.

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

'As a child, I have fun as I develop my skills in understanding, thinking, investigation and problem solving, including through imaginative play and storytelling' (HSCS 1.30); and

'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 10 November 2023.

Action taken since then

We found that the childminder had made improvements and developed their skills in supporting the children in their care to play and learn through play which is offering challenge and supporting children to reach their full potential.

This area for improvement has been met

Previous area for improvement 5

The childminder must develop a quality assurance process which clearly identifies what the childminder does well and what they will do to improve the quality of the service offered to families. This should include, but not be limited to:

- a) Gathering parents and children's views, where appropriate.
- b) Establishing a self evaluation process.

This is to comply with Regulation 4(4)(a) (Welfare of service users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

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

This area for improvement was made on 10 November 2023.

Action taken since then

The childminder developed robust quality assurance systems to gain the views of family and children. The childminder has developed self evaluations process to support identifying areas for improvements, then monitored and reviewed the impact of the improvements.

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.

Detailed evaluations

How good is our care, play and learning?	5 - Very Good
1.1 Nurturing care and support	5 - Very Good
1.3 Play and learning	5 - Very Good
How good is our setting?	5 - Very Good
2.2 Children experience high quality facilities	5 - Very Good
How good is our leadership?	5 - Very Good
3.1 Quality assurance and improvement are led well	5 - Very Good
How good is our staff team?	5 - Very Good
4.1 Staff skills, knowledge and values	5 - Very Good

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