

Linnette's Childminding service

Child Minding

New Cumnock

Type of inspection:
Unannounced

Completed on:
6 August 2024

Service provided by:
Linnette Park

Service provider number:
SP2023000058

Service no:
CS2023000079

About the service

Linnette's Childminding Service is registered to provide a care service for up to six children at any one time up to 16 years of age:

- of whom no more than six are under 12 years;
- 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 provided from a semi-detached home in a residential area of New Cumnock. The service is close to public transport links, local amenities and parks. Children are cared for in the living room, kitchen/dining area. Outdoors, children have access to a fully enclosed garden.

About the inspection

This was an unannounced inspection which took place on Monday 5 August 2024. 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, registration information, information submitted by the service and intelligence gathered. In making our evaluations of the service we:

- observed children using the service
- received completed electronic questionnaires from five families
- spoke with the childminder
- observed practice and daily life
- reviewed documents

Key messages

- Children benefitted from warm and nurturing care. Children were happy and settled, confidently approaching the childminder for reassurance, comfort and cuddles.
- Children were having fun and engaged in play and learning experiences throughout our visit. We observed children making choices and leading their own play.
- All areas of the childminder's home were clean, bright and well-maintained. Children felt at ease in a homely environment.
- The childminder should develop robust quality assurance processes to ensure required written records are completed in full.
- Children experienced warm and compassionate care. It was clear that the childminder valued the positive relationships they had developed with children and 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?	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

Children benefitted from warm and nurturing care. They were happy and settled, confidently approaching the childminder for reassurance, comfort and cuddles. One parent told us, "Linnette is open, honest and loves the children in her care. Any concerns or questions Linnette has been there every step of the way to make sure she can help in any way she can, going above and beyond." It was clear that positive relationships had been developed through kind and attentive interactions. As a result, children felt safe and secure.

Children experienced an unhurried and sociable mealtime. The childminder sat with the children at the dining table whilst they ate and chatted about their day. Children were supported to make choices around their food and drink preferences. The childminder encouraged them to eat their lunch independently and provided support when required. This helped children to enjoy their lunch in a relaxed, pleasurable and safe environment.

Children's privacy and dignity were respected during personal care. Children were asked if they would like to be changed, out of sight of other children. The childminder cleaned the mat after use and wore gloves to prevent the spread of infection. The childminder did not wear an apron. We advised the childminder that aprons are required when dealing with bodily fluids to prevent the spread of infection. The childminder purchased aprons prior to the end of the inspection.

Children's care and support needs were well planned through flexible settling in sessions. All children had a personal plan in place that had been completed with families and detailed their needs, routines and preferences. One parent told us, "I have a great relationship with my childminder, I feel I can communicate well with her, she keeps me up to date with my child's care and knows my child well." Whilst the childminder knew the children and families well, we asked them to ensure that all plans were signed, reviewed regularly and monitored children's progress. This would help the childminder to update children's next steps once they have been achieved and support children to reach their full potential.

1.3 Play and learning

Children were happy and engaged in play and learning experiences throughout our visit. We observed children making choices and leading their own play, accessing resources that had been provided in easily accessible boxes. These boxes had been chosen based on children's individual interests and stages of development. During our visit children enjoyed playing with sensory toys and selecting books for the childminder to read. Children relaxed on the childminder's knee whilst engaging in stories and singing. One parent told us, "Linnette helps my little one with reading and numbers, singing and dancing letting my child explore different things. I love hearing about the new things they have learned with Linnette from songs to counting more numbers ect." These experiences supported children to develop their numeracy and literacy skills through play.

The childminder was in the early stages of developing picture books to share with children and their families. These contained photographs of experiences that children had enjoyed. We suggested developing ways to include children's voices in their files. This would increase children's ownership of their play and learning. We also advised the childminder to make links between children's interests, experiences, observations and their next steps to effectively monitor their progress.

The childminder regularly updated families through text messages and face-to-face discussions. One parent told us they are "Always welcomed into the house and told about the kids day, what they've been up to and what they're doing over the next few days." As a result, families felt valued and included in their children's play and learning.

Children had regular opportunities to play and learn outside and in their local community. We saw photographs of children enjoying visits to local parks, woodlands and toddler groups. One parent stated, "The kids love their outdoor activities, always exploring & trying new things that Linnette has made for them. Like outdoor hunts, looking for things from a check list, teddy bear picnics, walks, parks, any local activities attended, play activities in the garden and more." This supported children's health, well-being and community connections through active outdoor experiences.

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.

2.2 Children experience high quality facilities

Children felt at ease in a warm and homely environment. They confidently moved around a spacious living room, kitchen/diner and downstairs bathroom. All areas of the childminder's home were clean, bright and well-maintained. As a result children were comfortable and happy.

Resources were stored in plastic boxes which were rotated and easily accessible. This supported children to engage in self-directed play. We suggested providing more opportunities for children to access arts, crafts and open ended resources. This would spark children's curiosity, and support the development of their creativity and problem solving skills.

Children benefitted from regular access to the outdoors. Children had daily opportunities to play in a fully enclosed outdoor space. The garden was well maintained, safe and contained resources suited to children's interests such as football goals, balls and sand. The childminder understood and promoted the importance of outdoor and active play. This promoted positive outcomes for children's health and well-being.

The childminder responsively assessed risk during our inspection and fully understood their responsibility to keep children safe. The childminder had considered all potential hazards within their home, garden and outings, these were recorded in written risk assessments. This ensured any potential risks were minimised and children were protected from harm. We asked the childminder to develop risk assessments for individual children with health or medical conditions. This would ensure that consideration has been given to all aspects of children's health and care needs to keep them safe. The childminder had a positive attitude towards risky play and had completed risk benefit assessments. These detailed the thought that had been given to ensure the benefits of engaging in risky play outweighed and minimise any potential harm. As a result, children were supported to assess their limits in a safe environment.

How good is our leadership?

3 - Adequate

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

3.1 Quality assurance and improvements are led well

The childminder was newly registered and welcomed the inspection process as an opportunity to evaluate their service. They were keen to provide a high quality service for children and families. The childminder began to implement positive changes immediately during the inspection, such as purchasing aprons for personal care and trialling an electronic application to support them with their record keeping. This demonstrated a positive outlook on change and improvement.

Whilst the childminder communicated regularly with parents and knew children and families very well, personal plans were not always signed, dated, implemented and reviewed within the required timescales (see area for improvement 1). The childminder had a clear understanding of children's individual medication requirements and the action required to support their health and well-being. However, they had not obtained written parental permission to administer medication (see area for improvement 2). We signposted the childminder to the Care Inspectorate documents, 'Records childminding services must keep and guidance on notification reporting' and 'Management of medication in daycare of children and childminding services.' We also discussed the benefits of developing robust quality assurance processes. This would support the childminder to ensure required written records are completed in full and reviewed within the necessary timescales

The childminder was in the early stages of their self-evaluation and improvement journey. They had given some consideration to the future direction of their service and chatted informally with children and families to seek their general views. One parent told us, "Linnette is very proactive at adjusting and trying new things to make sure she is providing a good service." Another parent stated, "Linnette asks often for ideas and suggestions and if I have any issues with her service (I have none)." As a result parents felt valued and listened to. We suggested developing meaningful ways to consult with children and families in relation to specific aspects of service development. This would help to seek focussed feedback that could influence improvements. We also advised the childminder to use an evaluative guidance document such as, 'A quality framework for daycare of children, childminding and school-aged childcare,' available on the Care Inspectorate website. This would also help the childminder develop robust self-evaluation processes that centre around improving outcomes for children and families. It was clear to us that the childminder was motivated to provide a quality service with children and families at the heart.

Areas for improvement

1.

The childminder should ensure that all personal plans are implemented within 28 days of a child's start date. Personal plans should be signed and dated by families and reviewed at least every six months with families, or earlier if required.

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).

2. The childminder should ensure that medication consent forms are in place for every child who requires medication. Medication plans and consent forms must be reviewed and updated with families at least every three months.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which state that: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

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.

4.1 Staff skills, knowledge and values

Children experienced warm and compassionate care, this ensured that they felt valued and loved. It was clear that the childminder took pride in the positive relationships they had developed with children and families. One parent told us, "As a family we would be lost without our childminder, never any issues or problems, my kids are always happy to go, even on days they are not in they ask to go to Linnette's." As a result, children had formed strong attachments and families felt included and supported.

As a relatively new childminder, they were developing confidence in their role. The childminder had formed a good knowledge base of best practice guidance through their previous childcare experience, qualifications and relevant training. One parent stated, "Linnettes background, experience and qualifications as well as her loving and caring nature make her an excellent childminder. Her home is safe and welcoming and I have no concerns about the quality of care they receive." The childminder demonstrated a good knowledge and understanding of child protection, infection prevention and control and food hygiene standards during our visit. This ensured that children were safe and protected from harm.

The childminder had continued to develop their knowledge and skills through using the 'Scottish Social Service Council Open Badges.' These are digital learning certificates that can be achieved on the Scottish Social Services Council website. We suggested keeping a record of additional training and professional reading and consider the impact of their learning on their practice. This would support the childminder to use reflection and self-evaluation to identify further beneficial opportunities for their professional development. This would help the childminder to develop a cycle of continuous improvement and enhance positive outcomes for children and families.

The childminder used the Scottish Childminding Association and Care Inspectorate provider emails to keep up to date with changes in best practice. We suggested accessing the Care Inspectorate Hub for further guidance and support. Through our discussions it was clear that the childminder valued children and families. They were motivated and passionate about developing their skills and knowledge to provide a high quality child minding service.

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?	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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