

Black, Sheila Child Minding

Kilmarnock

Type of inspection:
Announced (short notice)

Completed on:
13 September 2024

Service provided by:
Sheila Black

Service provider number:
SP2003901760

Service no:
CS2003003455

About the service

Sheila Black provides a childminding service from their property in the residential area of Kilmarnock. The childminder is registered to provide a care service for a maximum of six children up to 16 years of age. Numbers are inclusive of the childminder's own grandchildren. At the time of our inspection, two children were registered with the service.

The service is close to local primary schools, shops and parks, and other amenities. The children are cared for in the lounge area and have access to a downstairs bathroom and enclosed rear garden.

About the inspection

This was an announced (short notice) inspection which took place on 5 September 2024 between 10:30 and 12:30. 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 since the last inspection. In making our evaluations of the service we:

- spoke with the childminder
- observed practice and daily life
- reviewed documents.

Key messages

- Children experienced warm, nurturing interactions, making them feel safe and secure.
- Children were happy and having fun in the childminder's care.
- Children's plans should be reviewed and updated regularly to reflect their needs.
- The childminder should ensure that appropriate infection prevention and control procedures are followed to prevent the spread of infection.
- The childminder should review and update their policies and procedures to promote and sustain positive outcomes for children.
- The childminder should engage in continuous professional development to enhance opportunities for children.

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

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

How good is our care, play and learning?

3 - Adequate

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

1.1 Nurturing care and support

Children attending the service were happy and relaxed in the care of the childminder. Their needs were met through warm and nurturing interactions. The childminder responded to children's needs using nurturing approaches, such as offering cuddles and reassurance when children were upset. This supported children to feel safe and secure.

The childminder recorded information to support children's health, welfare, and safety needs when they started at the service. Although information was shared verbally between the childminder and parents, such as changes to routines, this was not reflected and updated in the children's personal plans. We discussed with the childminder reviewing children's personal plans with parents at least every six months. This would ensure the childminder had relevant, up-to-date information to support children's needs. We signposted the childminder to the Care Inspectorate's Guide for providers on Personal Planning to support with this (**see area for improvement 1**).

The childminder provided opportunities for children to sit together at mealtimes. However, they did not sit with them. This meant the children frequently left the table whilst eating as they sought the childminder's attention. This limited opportunities for children to engage in a relaxed, sociable experience at mealtimes. We discussed with the childminder sitting at the table with the children to support supervision and a more sociable, relaxed experience and keep children safe.

1.3 Play and Learning

Children were having fun as they could access toys that were of interest to them. For example, children enjoyed playing with coloured blocks and mark making. We asked the childminder to switch the television off when not in use so that children are not distracted from their play experiences.

Children were provided with opportunities to develop their curiosity through play and develop skills for lifelong learning. For example, they took part in baking, planting and growing experiences. They were supported to mix ingredients together and make cakes, and they enjoyed planting vegetables within the childminder's garden. This supported children to develop their literacy and numeracy skills.

There were other opportunities for children to develop their literacy and numeracy skills. For example, through discussions between the childminder and the children, access to a range of books, and the childminder and the children discussed colours through play experiences. This included considering children's ideas and comments and learning from their experiences.

The childminder had recorded observations of children relating to aspects of their learning and development. However, these were not dated, and they were not used to support the children's progress. The childminder should use these observations, along with consultations with parents to support them in providing appropriate learning and development opportunities for children (**see area for improvement 2**).

There were some opportunities to support children in developing their imagination and creativity through play experiences. For example, children pretended to be 'Peppa Pig' characters while exploring the toys and materials. This could be further enhanced by introducing more natural resources and loose part play materials and experiences. Loose parts are materials that can be moved, redesigned, and used in multiple ways. This would further support children's curiosity, imagination, and creativity in play experiences. We signposted the childminder to The Loose Parts Toolkit on the Care Inspectorate's Hub to extend and explore further opportunities.

The childminder offered praise, encouragement, and reassurance throughout play experiences. They shared photographs of children engaged in experiences with parents, which enabled children's achievements to be celebrated as they developed their confidence and independence through play experiences.

Areas for improvement

1. To effectively support children's care and development, personal plans should be developed. Plans should reflect children's current needs and how they will be supported. Plans should be reviewed with parents every six months or sooner if needed. This is to ensure that care and support is consistent with 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. To support children's overall wellbeing, the childminder should use their observations of children to support them to meet their current needs and plan for their individual learning and development. These should be shared with parents and reviewed regularly. 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 meets my needs and is right for me' (HSCS 1.19)

How good is our setting?

3 - Adequate

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

2.2 Children experience high quality facilities

The childminder's home was warm and welcoming with plenty of natural light and ventilation. Children had space to play and relax which supported their overall wellbeing. The indoor space took account of children's developmental stages, and reflected children's current interests and curiosities. For example, children enjoyed building with the coloured bricks and toys, and materials were accessible for them to choose freely.

Children had opportunities to take part in outings within the local community such as visits to the local parks, wooded area and attending the local toddler group. This supported them to build up links within the local community.

The childminder identified and removed some risks to children. For example, they removed toys from the floor to prevent children from tripping and encouraged children to walk indoors while holding pencils. An indoor risk assessment supported the childminder to identify risks and put mitigations in place to keep children safe.

However, they had not carried out risk assessments to identify hazards outdoors or during outings. The childminder should ensure they identify risks within all areas children access; this would support them to put mitigations in place and reduce risks to children (**see area for improvement 1**).

Some infection prevention control procedures were not implemented to keep children safe. For example, although toys and materials were clean and accessible, children were not encouraged to wash their hands before eating, surfaces were not appropriately cleaned with antibacterial spray before mealtimes, and the childminder did not use appropriate personal protective equipment (PPE) when changing children. This increased the risk of infection (**see area for improvement 2**).

Areas for improvement

1.
To keep children safe, the childminder should identify risks in all areas children access and put mitigations in place to reduce those risks. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My environment is secure and safe' (HSCS 5.17)

2. To reduce the possible spread of infection, the childminder should review and improve their approach to infection prevention and control procedures. This should include, but not be limited to, hand hygiene, nappy changing procedures, and the wiping of surfaces to ensure they reflect Health Protection Scotland's guidance, 'Infection Prevention and Control in Childcare Settings (Day Care and Childminding Setting).'

This is to ensure the service complies with the Health and Social Care Standards (HSCS) which states that: "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

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 shared a welcome pack with families when they started at the service, which helped them have clear expectations about how their child's needs would be met. The childminder shared that they were willing to respond to parent's ideas and suggestions to meet individual needs and preferences. This allowed families to influence the care and experiences their children had.

The childminder used daily discussions to support consultations with children and their families on the day-to-day running of the service and the care provided. However, this had not led to any sustained improvements. We discussed with the childminder using a more formal approach to involve parents and develop ways in which they could be supported to evaluate the service. This would allow them to contribute to meaningful improvements, reflecting on what is working well and identifying what could be improved. We signposted the childminder to 'Self Evaluation-your guide' and the Care Inspectorate's 'A Quality Framework for daycare of children, childminding, and school aged childcare' to support with this (**see area for improvement 1**).

The childminder engaged well in the inspection process and was responsive to our suggestions for improvement. However, the pace of change to improve the quality of care, experiences, and overall outcomes for children was slow. To enhance the quality of the care provided, the childminder should prioritise the areas for improvement identified within this report (**see area for improvement 2**).

During the inspection, we noted that the childminder did not have business insurance for transporting children by car. The childminder agreed to stop using their car until the appropriate business insurance was in place. They agreed to address this immediately. Whilst policies and procedures were in place to support the childminder, they had not been reviewed or updated to support their practice. The childminder should review and update their policies to reflect current guidance and practice. This will support them to implement practices of high quality that promote and sustain positive outcomes for children (**see area for improvement 3**).

Areas for improvement

1. To support improvement within the service, the childminder should develop ways to evaluate the service. This would allow them to plan meaningful improvements, reflecting on what is working well and identifying what could be improved. 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 robust and transparent quality assurance processes' (HSCS 4.19).

2. To support positive outcomes for children, the childminder should prioritise the areas for improvement identified within this report and use these to make improvements in practice. This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that:

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

3. To support the childminder's practice, they should ensure that all policies and procedures reflect up to date guidance and best practice. This should include, but not be limited to, ensuring that appropriate insurance is in place for transporting children, and child protection guidance.

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

'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?

3 - Adequate

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

4.1 Staff skills, knowledge and values

The childminder supported children's wellbeing through compassionate and responsive care. They had built relationships with children and families, and their interactions supported children's confidence. As a result,

they positively influenced children's lives as they developed and learned.

The childminder was a member of the Scottish Childminding Association (SCMA). However, they had not used this or any other resources, such as the Care Inspectorate Hub, to maintain their continuous professional development. This included core training such as child protection and first aid. We suggested that the childminder keep abreast of changes in policy and legislation and formally reflect on any training accessed. This would enable them to improve their practice (**see area for improvement 1**).

The childminder had links with other childminders but did not use these opportunities to share good practice. We discussed with the childminder using these opportunities to reflect on and discuss practice. This would enable the childminder to enhance opportunities for children and provide better outcomes.

Areas for improvement

1. The childminder should identify and access suitable training and self directed learning to help them meet children's needs.

This is to ensure care and support is consistent with the Health and Social Care Standard 3.14, which states 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 complete the self-assessment requested by the Care Inspectorate as a means of evaluating the quality of her service and identifying areas for improvement. This will positively contribute to the quality of the service provided to children.

National Care Standards for early education and childcare up to the age of 16 - standard 13: improving the service.

This area for improvement was made on 15 February 2017.

Action taken since then

The childminder had not completed any self-assessment of their service which would positively contribute to the quality of the service provided to children.

Therefore, this area for improvement has not been met and has been reworded and included as part of this inspection.

Previous area for improvement 2

To further develop the quality of the management and leadership of the service, the childminder should complete an action plan following the inspection; to inform the regulator of the actions she will take to address the recommendations made and the timescale for this.

National Care Standards for early education and childcare up to the age of 16 - standard 13: improving the service.

This area for improvement was made on 15 February 2017.

Action taken since then

The childminder did not complete a relevant action plan relating to the previous inspection to inform the regulator of the actions they would take to address recommendations made.

Therefore, this area for improvement has not been met and has been reworded and included as part of this inspection.

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?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
1.3 Play and learning	4 - Good
How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	3 - Adequate
4.1 Staff skills, knowledge and values	3 - Adequate

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