

Jansen, Carina Child Minding

Livingston

Type of inspection:
Unannounced

Completed on:
23 September 2024

Service provided by:

Service provider number:
SP2010978529

Service no:
CS2010251604

About the service

Carina Jansen operates a childminding service from their home in a residential area of Livingston. The childminder is registered to provide a care service to a maximum of six children at any one time under the age of 16 years, of whom no more than six are under the age of 12 years, of whom no more than three are of an age not yet attending primary school and of whom no more than one is less than 12 months.

About the inspection

This was an unannounced inspection which took place on 17 September between 13:25 to 15:25 and 18 September 2024 between 13:00 and 15:00. 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 six children using the service and five of their families completed our questionnaires.
- spoke with the childminder and her family
- observed practice and daily life, and
- reviewed documents.

Key messages

Children were enjoying their time at the service learning new skills and having fun.
 Children benefitted from lots of outdoor play opportunities helping them to stay healthy.
 Children's personal plans could be developed further to show how they are supported to develop.
 Children benefitted from care which was nurturing and kind.
 The childminder could further develop her quality assurance systems to help her to identify changes in best practice guidance and continue to improve children's experiences in the service.

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

Quality indicator 1.1 - Nurturing care and support

Children were relaxed and comfortable with the childminder and her family. They benefitted from kind and caring interactions from the childminder supporting them to feel safe. The childminder knew all the children well and responded positively to their requests for support throughout our visits. Children were given cuddles and reassurance to help them feel loved. The childminder gave clear guidance about expected behaviour towards other children, this was done sensitively and supported children's self esteem.

Each child had a 'record of information' which recorded information to help keep them safe and meet their needs. This information was gathered when they registered at the service and was reviewed with families regularly. The childminder had gathered information about children's medical needs and had shared detailed information with families in the online app about when this had been administered. The childminder should now review and update how she gathers permission to administer any medication in line with current best practice guidance (see area for improvement 1).

The childminder valued building positive relationships with families to help her to provide consistency of care for the children. Parents told us that they had a positive relationship with the childminder who made them feel welcomed and valued. One commented 'Carina is very professional but also friendly. She is very easy to speak to and very accommodating'. Another said 'We have a great relationship.'

Parents told us they were kept well informed about their child's day. One commented 'Carina always keeps us up to date on what they have been up to during the day'. The childminder spoke with families at drop off and collection times and informed parents through updates about their care and wellbeing in her online app.

All of the families felt fully involved in their child's development and personal planning at the service. One commented 'Carina is always celebrating all of (my child's) milestones and achievements with us. She always asks for updates on (their) development as well.' The childminder knew the individual children well and provided activities which would support their individual development. The childminder could further develop how she shares children's achievements and how she plans for their ongoing development (see area for improvement 1).

Children were supported to sleep at times which suited them. When we arrived at the service some children were sleeping in buggies. The childminder checked on them regularly. We shared that current best practice for safe sleeping is on a flat surface. The childminder had reviewed how she provided this on the second day of inspection. Some children were still settled to sleep in a buggy but were then transferred to sleep mats, helping to keep them safe. The childminder should now review her policy in line with best practice guidance to share how she has developed this with families helping to keep children safe (see area for improvement 2).

Children brought packed lunches from home which they ate together supported by the childminder. The childminder provided fruit and a selection of snacks for the children and encouraged them to stay hydrated

throughout our visits. To support children to always have healthy food options the childminder should share current healthy eating guidance with families.

The childminder was clear about her role in protecting children from harm and when she would seek advice or report her concerns to social work or the police.

Quality indicator 1.3 - Play and Learning

Children had access to a variety of play experiences which supported their development. A parent told us '(They) have been on outings to local parks and the farm. (They) have engaged in puzzles, story time, nursery rhymes, arts and crafts and messy play'. The children spent time outside being active regularly, helping them to develop their physical skills. The childminder also made regular use of resources in the community to extend and vary the experiences she provided. These trips included visits to the library, playgroups, woodland walks and a local farm park helping children to build new friendships, learn about their local community and nature.

Indoors the children mainly played in the living room where they could select toys and resources from the cupboards and boxes. The childminder had a variety of age appropriate resources which children were enjoying playing with during our visits. The 'tuff tray' in the living room was on legs bringing it up to table height, this allowed the childminder to provide some opportunities for older children while the babies were supported to have 'tummy time' and activities on the floor. Some of the resources were open ended and supported children to lead their own learning for example some magnetic construction toys and building blocks.

The childminder chatted with children through their play, building on their vocabulary and knowledge. The childminder was helping children to achieve by responding to the ways they played and their current interests. The childminder used praise and encouragement helping children to feel safe as they learned new skills.

Areas for improvement

1. To support children's wellbeing and development the childminder should further enhance personal plans to show how children are supported to develop. This should include, but is not limited to: strategies to support children where needs or next steps are identified, significant changes in children's lives, how children are supported to progress in the service, and detailed information about permissions and protocols for the administration of medications.

This is to ensure I experience high quality care and support that is right for me, and is consistent with the Health and Social Care Standards (HSCS) which state '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 safety and wellbeing, the provider should review the policy, practice and the arrangements for children's sleeping to ensure that this is provided in line with current best practice guidance.

This is to ensure that care and support is consistent 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 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.

Quality Indicator 2.2 - Children experience high quality facilities

Children were cared for in the childminder's home which was comfortable, welcoming and offered them space to play and relax. Having the 'tuff tray' as a table supported children to independently access toys and activities. The 'tuff tray' was also used as a den by the children, who took blankets in to make it a comfortable 'hiding' space. Children's water bottles were available in the living room and children were encouraged to stay hydrated. The children had lunch at the table in the kitchen which had booster seats with safety straps to allow the younger children to eat as part of the group, helping them to feel included.

The garden was fully enclosed helping children to stay safe. Children enjoyed a range of experiences to support their development and children were involved in planting and growing. This promoted a range of development opportunities and supported their health and wellbeing.

The childminders home was well organised to care for young children with a safety gate at the bottom of the stairs, so children were supervised when accessing the upper floor of the house. The childminder risk assessed situations to provide children with a variety of experiences, for example a barefoot walk in local park. The childminder should now develop her risk assessments to show how she is using a 'risk benefits' approach in the service. Including children in this process would support them to learn how to assess risks for themselves and develop new skills.

On the first day of inspection nappy changing was carried out in the kitchen on a wipe-clean mat. This was away from the other children who were playing in the living room maintaining their privacy and dignity. We advised the childminder to change children on the upper floor where there is access to the bathroom sink for handwashing to prevent the spread of infection. On day two of our inspection visit the childminder was changing children on the upper floor. The childminder should continue to review nappy changing practice in line with current infection control guidance to prevent the spread of infection (see area for improvement 1).

The childminder was registered with the information commissioners office (ICO) and was well informed about how to keep records securely and for how long. The childminder had recently installed a video doorbell and should now develop a policy to share with families how this is used in the service.

Areas for improvement

1. To ensure children's health and wellbeing is supported the childminder should review her nappy changing procedures to ensure this is in line with current guidance to prevent the spread of infection.

This is to ensure I experience high quality care and support that is right for me, and is consistent with the Health and Social Care Standards (HSCS) which state 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

How good is our leadership?**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.

Quality Indicator 3.1 - Quality assurance and improvement are led well

The childminder had aims and objectives, policies and procedures which were shared with families. The procedures shared how the service would be operating which gave parents a clear idea of the expected standards of care provided. We spoke about reviewing and updating some of these to bring them in line with current information or best practice guidance, for example how the dog is cared for to keep children safe through vaccinations and updating how sleep and nappy changing is carried out in line with best practice guidance.

The childminder asked children for their views and supported them to make choices. Four out of the five families who gave us feedback felt that they were involved in a meaningful way to develop the service. One commented 'Carina always asks us if we are OK with planned activities.' The childminder could further develop how she gathers and uses feedback to improve her service and find ways to share this with all families to help them all feel involved (see area for improvement 1).

The childminder kept good records of children's accidents in the service and shared these with families in the app. The childminder could audit these to look for any patterns which would support her to develop her practice and keep children safe.

The childminder told us what her strengths were and how she planned to develop the service. This was currently informal and would benefit from being benchmarked against national frameworks and best practice guidance documents to support her to evaluate what is working well and to inform any further improvements (see area for improvement 1).

Areas for improvement

1. To continue to improve outcomes and experiences for children and families, quality assurance processes, including self-evaluation and improvement planning should be further developed. The childminder should become familiar with best practice guidance and use this to support them to reflect and plan for continuous improvement. Consideration should also be given to sharing how they have used feedback from children and their families to improve the service.

This is to ensure I experience high quality care and support that is right for me, and is consistent with the Health and Social Care Standards (HSCS) which state '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 and clearly outweighed areas for improvement.

Quality indicator 4.1 - Staff skills knowledge and values

Children felt valued and loved by the childminder as she cared for them with kindness and genuine affection.

We saw that the childminder responded well when children needed support, she picked up on non-verbal cues for attention and responded to children's needs warmly. This helped them to feel safe and valued. The childminder had built strong relationships with the children and was supporting them well throughout the inspection visits. The childminder's values meant she put children at the heart of all her decisions. She valued the children's opinions and encouraged them to have a voice through their daily activities.

Children were experiencing care which supported them to develop. The childminder was experienced in caring for children and had had undertaken a variety of courses to refresh her knowledge of child development and keeping children safe. This included a course on the Scandinavian approach of 'Hygge' which had supported her to further develop her outdoor play experiences. The childminder was committed to further her knowledge and skills to promote high quality outcomes for children.

The childminder told us she kept up to date with current best practice guidance through her membership at SCMA (Scottish Childminding Association), the Care Inspectorate provider updates and discussions with childminders in her local area who ran a toddler group together. This has helped her to identify and access key training opportunities, for example first aid and Getting it right for every child (GIRFEC). The childminder should keep records of any training attended and evaluate how this has helped her to improve her service.

The childminder should continue to access training and professional reading to support her professional development. For example, recent updates to safer sleep guidance, Infection Prevention and Control measures for all care services, medication guidance and personal planning guidance to further support the development of this in the 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?	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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