

Bonny Kidz Child Minding

Bonnybridge

Type of inspection:
Unannounced

Completed on:
28 October 2024

Service provided by:
Adeline Ramsay

Service provider number:
SP2005953439

Service no:
CS2005110559

About the service

Bonny Kidz is a childminding service provided by Adeline Ramsay. It operates from the family home in Bonnybridge. The service is registered to provide care for a maximum of 10 children up to the age of 16, when the childminder is working with an assistant. No more than eight children should be under 12 years, of whom, no more than six are not yet attending primary and of whom, no more than two are under 12 months. Where the childminder or the assistant is working alone, they may care for a maximum of eight children 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. The service is registered with the local authority to provide funded early learning and childcare.

The service is close to local schools and nurseries, green spaces and other amenities and can be reached by public transport links.

Children have access to a playroom, dining room, enclosed garden to the back of the property and toilet facilities on the ground floor.

About the inspection

This was an unannounced inspection which took place on Tuesday 08 October 2024 between 13:45 and 17:30. We finished the inspection on Wednesday 09 October between 10:00 and 11:15. We gave feedback to the childminder between 13:30 and 14:15. The inspection was carried out by two inspectors from the Care Inspectorate. A third inspector contacted parents for their views.

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 five children using the service and six of their parents/carers. We received one completed electronic questionnaire;
- spoke with the childminder and one assistant;
- observed practice and how children were supported with their routines, play and learning;
- reviewed records and documents.

Key messages

- The childminder demonstrated poor understanding of their legal responsibilities as a registered care service provider, to ensure the safety and well being of children at all times. We took formal enforcement action against the childminder prior to our inspection visit.
- During the inspection we issued a letter of serious concern to the childminder, to require that immediate action be taken to prevent persons not employed in the service accessing service related information and systems.
- Children's safety and well being was compromised as essential records were not in place for all children and personal plans were not well maintained or regularly reviewed.
- Food options for meal and snack times were generally unhealthy and did not follow nutritional guidance for young children.
- Quality assurance and management systems needed to be developed to improve the quality of the service.
- Children experienced kind, caring and respectful interactions with the childminder and assistant.

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?	1 - Unsatisfactory
How good is our setting?	3 - Adequate
How good is our leadership?	1 - Unsatisfactory
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?

1 - Unsatisfactory

We were very concerned about aspects of the care being provided and we evaluated the service as delivering an unsatisfactory level of care for this key question.

Quality indicator 1.1: Nurturing care and support

We evaluated this quality indicator as weak, where there were important weaknesses and priority action is required.

The service gathered information about children through the registration forms and all about me sheets. Children told us they updated their all about me sheets when what was important to them changed. These were displayed on the wall and easily accessible to children.

Registration forms had not been completed by the childminder to include detail about health care needs or how the service planned to support children's needs to be met. Personal plans had not been reviewed with families. The childminder was not aware of their responsibility to review personal planning at least every six months. This meant there could have been gaps in the childminders knowledge of children's needs, and had the potential to compromise children's safety and well being. We highlighted the Care Inspectorate 'Guide for providers on personal planning, Early learning and childcare (2021) and have made a requirement (**see requirement 1**).

Children experienced positive interactions with the childminder and the assistant. communications were respectful and included children in decisions about how they spent their time in the setting. Children told us they were asked for their views on planned events. Families said children enjoyed attending the service. Children had established friendships with their peers and had fun as they played. Parents shared "I'm very happy with the current service provided." And "Children are very happy there."

The service provided a range of meals and snacks throughout the day. Children were offered choices and spoke about foods they enjoyed. The childminder and assistant sat with them, promoting a sociable experience. We found that food and drink choices did not always reflect current guidance and contained high levels of salt and sugar. The service shared they had plans to review their menu options. We highlighted the Scottish Government document (2024) Setting the Table, Nutritional Standards and Practical Guidance for Early Learning and Childcare Providers in Scotland. This will support the childminder to offer children healthier food choices that are nutritious and appropriate for their stage of development (**see area for improvement 1**).

Spaces to support sleep and rest were available. On the day of our visit, no younger children were being minded. The assistant told us how they support children's routines when they need to sleep. Older children had space in the playroom where they could rest and relax with peers and this supported their wellbeing.

Quality indicator 1.2: Children are safe and protected

We were very concerned about aspects of the care being provided and we evaluated the service as delivering an unsatisfactory level of care for this quality indicator.

We found online systems used to communicate with families had been accessed by a person not employed by the service. We had serious concerns that appropriate action had not been taken to keep children's information safe. This presented a risk to children's confidentiality. A letter of serious concern was issued during the inspection, requiring the provider to ensure children's information was only accessible to people employed by the service. In response, the childminder stated that only person's employed by the service had access to children's information. We visited the service Monday 28 October 2024 to follow this up. We reviewed the electronic systems used to gather and share information with families. Following our advice and support, we were satisfied that measures were in place to protect the safe storage of and access to children's information. **(see requirement 2).**

The childminder was registered with Information Commissioner's Office (ICO). They should refer the website for information about storing and processing personal data.

The childminder and assistant had completed child protection training and were due to take part in refresher training. The childminder had a basic understanding of safeguarding, however was not aware of wider issues in relation to their role and responsibilities in child protection. During the inspection visit, the childminder contacted a training provider to request appropriate training covering a breadth of learning to support them to develop their knowledge and understanding about safeguarding, child protection practice and procedures **(see area for improvement 2).**

The service had a child protection policy in place setting out the action they would take if they were concerned for a child's wellbeing. We found the policy did not contain appropriate and sufficient information to reflect all child protection and safeguarding concerns. They must develop their policy to reflect 'National Guidance for Child Protection in Scotland (2021)' **(see requirement 3).**

Quality indicator 1.3: Play and Learning

We evaluated this quality indicator as adequate, where strengths only just outweighed weaknesses.

Children experienced a range of play opportunities to meet their needs and wishes. They told us they liked to dance and sing, take part in craft activities, play on computers and spend time in the back garden. The garden could be accessed from the playroom. Opportunities to explore the garden were limited. The childminder recognised this area needed to be improved to offer children a breadth of learning experiences outdoors. Parents told us that activities available included "Role play, dress up, baking, outdoors, water play, arts and crafts, outings such as soft play, bowling and parks." Overall, we found planning for individual children's experiences was informal and not recorded. This meant that children's developing skills and interests were not being effectively supported and monitored. **(see area for improvement 3).**

The childminder offered activities linked to personal interests and festivals. When we visited, children were preparing resources and choosing foods to celebrate Halloween. Children moved freely between the dining room and designated playroom. They were able to choose from a selection of age-appropriate toys that had been organised on the shelves and tubs at floor level. Older children told us they prefer to play on the switch and the Xbox. Some families told us they would like to see less screen time. We encouraged the childminder to involve children and families in developing a policy to support and manage this.

The childminder made use of the community to offer younger children outdoor experiences. This included visits to shops, cafes, soft play and the local reservoir. Opportunities for older children to engage with their wider community and benefit from learning outdoors was limited. We encouraged the childminder to look at how all children can enjoy the benefits of engaging with nature to support health and wellbeing **(see area for improvement 4).**

Requirements

1. By 29 November 2024 the provider must ensure that all children have a personal plan which sets out how their individual needs will be met, as well as their wishes and choices. To do this, the provider must, at a minimum:

- a) ensure that all staff understand the purpose of personal plans and are familiar with Care Inspectorate guidance 'Guide for Providers on Personal Planning, Early Learning and Childcare;'
- b) ensure that personal plans are written and regularly reviewed with children and families, at least every six months, and when necessary, to ensure that information is up to date to reflect children's current needs, wishes and choices;
- c) ensure consistent, effective recording of important information in all personal plans - including personal information and contact details;
- d) ensure that all personal plans are meaningful, working documents that support children's care and include strategies of support and progress made;

This is to comply with Regulation 5(2)(b)(c) (Personal Plans) 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:

'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. By Monday 14 October 2024, you the provider must ensure that the rights, safety and well being of children is protected. To do this, the provider must, at a minimum;

- a) ensure that persons not employed by the service do not have access to information or records about children or families using the service;
- b) ensure that all service user records and information is confidentially maintained and the systems used to communicate with families using the service cannot be accessed by persons other than yourself and those employed in the service.

This is to ensure that persons not employed in the service do not have contact with families about any matters relating to the provision of the service.

This is in order to comply with Regulation 4(1)(a) Welfare of 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 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) and

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

3. By 29 November 2024 the provider must review and update the child protection policy to reflect the range of factors that could impact on children and raise concerns for their safety and well-being.

This is in order to comply with Regulation 4(1)(a) Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that I have confidence in the people who support and care for me in line with the Health and Social Care Standards (HSCS) which state that

"I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities." (HSCS 3.20).

Areas for improvement

1. To ensure children develop a positive relationship with food and benefit from nutritious healthy meals and snacks, the provider should ensure food options reflect current best practice guidance.

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

"I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning." (HSCS 1.33). And

"I can drink fresh water at all times." (HSCS 1.39).

2. To ensure that children are safe and protected the childminder and assistant should undertake child protection training that gives an insight and provides understanding of factors and experiences that can affect children. They should evaluate the training to demonstrate how their learning will be used in the safeguarding and protection of children.

This is to ensure that I have confidence in the people who support and care for me and is consistent with the Health and Social Care Standards (HSCS) which state that

"I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities." (HSCS 3.20).

3. To support children's learning and development, planning records should be introduced to show the range of play experiences organised for children. They should reflect their interests and be suitable to support their continued progress.

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).

4. To improve experiences and well-being for older children, the childminder should increase the opportunities for them to participate in outdoor learning and benefit from engaging activities provided in the wider community.

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

"I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors." (HSCS 1.25).

How good is our setting?

3 - Adequate

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

Quality indicator 2.2: Children experience high quality facilities

The childminder had a daily check list in place to support with risk assessing the premises. We found this was not designed to be relevant to the childminders service and had not been fully completed. This meant that potential hazards had not been identified and action had not been taken to reduce some risks. For example, we saw that children were able to access the dogs feeding bowls and toys and this could lead to children ingesting dog food or to spread of infection. In addition, the childminder had personal protective equipment available to support with personal care routines, however we found the storage and management of these posed potential risks. We encouraged the childminder to store items safely in line with guidance. They should refer to guidance from Public Health 'health protection in children and young people settings, including education'. Action needed to be taken to record all risks and the actions to be taken to minimise potential risks for children (**see requirement 1**).

Children had access to a designated playroom, dining room and ground floor toilet facilities. Children had a space to store their personal belongings in a shelved unit at the entrance. Spaces were comfortably furnished with sofas and cushions and children enjoyed relaxing in spaces. Children were not able to access the garden due to several potential hazards and this impacted on the opportunities for challenge and risk benefit play (**see area for improvement 1**).

Children were able to make choices from the resources as the playroom had been organised to promote independence. We asked the childminder to consider the number of resources on offer and rotate these to support with organisation based on children's current choices and interests.

Children were confident in carrying out hand hygiene routines. They told us about the importance of washing their hands at key times. The childminder checked with children when they entered the service and before mealtimes they had washed their hands.

Requirements

1. By 29 November 2024, the provider must ensure risk assessments are in place to promote a safe environment for children indoors and outdoors. They should identify the risk and detail what measures are implemented to reduce any potential harm to children.

This is in order to comply with Regulation 4(1)(a) Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that I experience a high quality environment if the organisation provides the premises is consistent with the Health and Social Care Standards (HSCS) which states that

"My environment is secure and safe." (HSCS 5.19).

Areas for improvement

1. To improve children's access to the enclosed garden, the childminder should ensure the area is well maintained and safe for them to play in.

This is to ensure that I experience a high quality environment if the organisation provides the premises is consistent with the Health and Social Care Standards (HSCS) which states that

"My environment is secure and safe." (HSCS 5.19 and

"I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment." (HSCS 5.24).

How good is our leadership?

1 - Unsatisfactory

We were very concerned about aspects of the care being provided and we evaluated the service as delivering an unsatisfactory level of care for this key question.

Quality Indicator 3.1 – Quality assurance and improvement are led well.

We evaluated this quality indicator as adequate, where strengths only just outweighed weaknesses.

While the childminder and assistant worked well together we found that the approach to quality assurance was informal. The childminder was not familiar with national or local guidance that could be used to support self evaluation. We discussed ways self-evaluation could be used to develop the service and encouraged the childminder to use 'A quality framework for daycare of children, childminding and school aged childcare.' This document is designed to support childminders to evaluate their service and to offer high quality care for children. We also signposted the childminder to the bitesize information on the Care Inspectorate Hub about quality assurance to further support this process (**see area for improvement 1**).

Verbal and electronic communication supported information sharing. Families felt involved as they could share their views which informed the care provided. This enabled a flexible approach which met the needs of families. Parents shared "My views and my children's views are always taken into consideration." Other systems such as questionnaires were used, and these were not always effective at gathering views. We suggested exploring other ways to gather opinions about the service. For example, by regularly inviting families into the service and using face to face opportunities to ask about how particular aspects of the service could be improved. Records should be maintained of how parents and children's views have been used to improve the service.

Quality indicator 3.3 Leadership and management of staff and resources

We were very concerned about aspects of the care being provided and we evaluated the service as delivering an unsatisfactory level of care for this quality indicator.

We had serious concerns about the childminder's knowledge and understanding of the regulations and standards that applied to operating a childminding service. This impacted on their ability to take appropriate action to respond to incidents and manage staff. The childminder had failed to notify the Care Inspectorate immediately of serious incidents in the service. As a result, there was potential risk for children using the service. To enable pro-active decision making the childminder must become familiar with the requirements and responsibilities of providing a safe care service **(see requirement 1)**.

While roles and responsibilities had been defined, the childminder did not have a full overview of the service provided. For example, ensuring all information was gathered about children and personal plans reviewed and updated. The childminder should develop more formal systems to ensure staff are supported and understand the expectations of their role. Experiences and outcomes for children would be improved by motivated staff **(see area for improvement 2)**.

Requirements

1. By 29 November 2024 the childminder must become familiar with the regulations and responsibilities of operating a childminding service. This should include;

- a) becoming familiar with the statutory instruments SSI 210;
- b) Becoming familiar with the quality framework for daycare of children, childminder and school-age childcare;
- c) know what records childminding services must keep and when notifications need to be made in line with guidance;
- d) consider their responsibilities outlined in safer recruitment by better recruitment.

This is in order to comply with regulation 7 - Fitness of managers 2(c) a person who does not have the skills, knowledge and experience necessary for managing the care 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) and

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

Areas for improvement

1.

To improve outcomes for children and families, the childminder should develop quality assurance systems. This will enable them to assess and evaluate the quality of the service and identify areas for development. Gathering parents, children's and stakeholder's views should be part of this process.

This is to ensure confidence in the people who support and care for me and is consistent with the Health and Social Care Standards 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).

2. To improve outcomes for children and families the childminder should develop systems to;
 - a) monitor and support staff practice;
 - b) ensure effective record keeping is in place to support positive outcomes for children.

This is to ensure that I have confidence in the people who care for me is consistent with the Health and Social Care Standards (HSCS) which state that;

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 3.14).

How good is our staff team?

3 - Adequate

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

Quality indicator 4.3: Staff deployment

The childminder was supported by two named assistants. Continuity for children was promoted as one assistant worked in the service four days per week. The other worked on an ad hoc basis and had not completed learning for their continued professional development. Due to this, we asked the childminder to consider risks for children, and if the additional assistant should continue to be used or remain named on the certificate of registration. **(see area for improvement 1).**

The childminder and main assistant worked well together and had developed positive relationships with parents and children. This enabled them to support children across the day with picking up and dropping off at nursery, school or home. Parents confirmed that ongoing communications with the childminder and assistant were "face to face, Facebook page, messenger and emails." This helped to promote a child centred approach as information was shared that supported children's routines and promoted continuity of care.

The childminder and assistant had attended some training to keep up to date with current practice. To further promote high quality experiences and better outcomes for children, the childminder should familiarise themselves with, and use the range of best practice guidance which has been highlighted within this report. Learning and development should be recorded and evaluated to enable the childminder to demonstrate continuous learning and how this is being used to improve the service. **(see area for improvement 2).**

Areas for improvement

1.
So that all named assistants have the skills and knowledge to support children to have positive outcomes, the provider should ensure they undertake appropriate training and learning. This should include being aware of best practice guidance and standards that apply to childcare services. The provider should assess their performance to confirm how it has improved their skills and knowledge.

This is to ensure confidence in the people who support and care for me and is consistent with the Health and Social Care Standards 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).

2. To show how their professional development has improved outcomes for children, the childminder and assistant should evaluate their learning. They should reflect on how it has improved their skills and knowledge and been used in practice.

This is to ensure confidence in the people who support and care for me and is consistent with the Health and Social Care Standards 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 requirements we made at or since the last inspection

Requirements

Requirement 1

By Monday 14 October 2024, you the provider must ensure that the rights, safety and well being of children is protected. To do this, the provider must, at a minimum;

- a) ensure that persons not employed by the service do not have access to information or records about children or families using the service;
- b) ensure that all service user records and information is confidentially maintained and the systems used to communicate with families using the service cannot be accessed by persons other than yourself and those employed in the service.

This is to ensure that persons not employed in the service do not have contact with families about any matters relating to the provision of the service.

This is in order to comply with Regulation 4(1)(a) Welfare of 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 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) and

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

This requirement was made on 11 October 2024.

Action taken on previous requirement

Following advice and support, the childminder and assistant had taken action to ensure they were the only ones who had access to children's information. We reviewed the electronic systems used to gather and

share information and were satisfied that measures were in place to protect the safe storage of and access to it.

Met - outwith timescales

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?	1 - Unsatisfactory
1.1 Nurturing care and support	2 - Weak
1.2 Children are safe and protected	1 - Unsatisfactory
1.3 Play and learning	3 - Adequate

How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate

How good is our leadership?	1 - Unsatisfactory
3.1 Quality assurance and improvement are led well	3 - Adequate
3.3 Leadership and management of staff and resources	1 - Unsatisfactory

How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.