

# Blue Bird Childminding Service Child Minding

Glasgow

**Type of inspection:**  
Unannounced

**Completed on:**  
12 December 2024

**Service provided by:**  
Bouchra Ghalem

**Service provider number:**  
SP2019990988

**Service no:**  
CS2019378278

## About the service

The childminder provides their service from their family home, in a second floor flat in the Maryhill area of Glasgow.

The service is registered to provide a care service to a maximum of six children at any one time under the age of 12, 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. The communal back court may only be used by minded children under the childminder's supervision. At the time of our inspection there were two children present.

Children are cared for in the lounge and a bedroom and the accommodation consists of kitchen and toilet facilities. The service is close to schools, transport routes, play parks, shops and community services.

## About the inspection

This was an unannounced inspection which took place on 12 December 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 since the last inspection.

In making our evaluations of the service we:

- spoke with two children using the service
- reviewed feedback from two parents and carers whose children attend the service
- observed practice and the childminders interactions with children
- spoke with the childminder
- reviewed documents.

## Key messages

- The childminder used warm, kind and nurturing approaches in their interactions.
- The childminder had developed and maintained strong relationships with parents and carers.
- Children were settled and having fun. The childminder was responsive to their interests and choices.
- The childminder should make improvements by reviewing the accessibility of items being stored in cupboards that has the potential to compromise children's health and safety.
- The childminder should make improvements that would minimise infection risks to children to support children's health and wellbeing.
- Children benefitted from regular visits to places in the local community.
- The childminder was using self-evaluation processes. These could be further developed to improve outcomes for children and their families.
- The childminder showed an interest and commitment to developing their skills and knowledge through their attendance in professional development opportunities.

## 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 made an evaluation of good for this key question, as several important strengths, when taken together, clearly outweighed areas for improvement.

### Quality indicator 1.1: Nurturing care and support

The childminder had a caring relationship with the children who were settled and comfortable in their care. They responded warmly to the children, following their cues, interests and wishes throughout our visit. The childminder provided cuddles to children to comfort them when upset. This supported children to feel safe, secure, and contributed to the positive relationships they had with the childminder. Parents agreed and commented, "The relationship with the childminder is fantastic. They are caring, attentive and create a warm welcoming environment. The bond they've built has made us feel confident that our child is in safe hands" and "My child and I feel safe and comfortable with the childminder. My child is happy to go there."

Personal plans were in place for children and were created in partnership with parents. The personal plans included contact details, health, and medical information and all about me information for children. The plans were updated and reviewed with parents to support with being reflective of the children's current needs and interests. This supports the childminder to provide care to meet children's individual needs. A parent commented, "We are actively involved in our child's care, working closely with the childminder to develop and review their personal plan. This partnership ensures that our child's needs and progress are always prioritised."

The childminder spoke knowledgeably about children, their individual routines and how they accommodated them within the service. This contributed to children feeling safe and secure. From discussion with the childminder and parents, it was clear that she worked closely with families to ensure she was familiar with each child's needs. The childminder shared with us she had recently worked in partnership with a family to support a child's toilet learning.

Children were provided with a snack in the dining area of the kitchen. The childminder was supervising and talking to the children throughout the mealtime experience. We discussed with the childminder, the children and childminder sitting together at the dining table could contribute to a more sociable and relaxed experience for children.

The childminder had attended child protection training and had a child protection policy in place. They were aware of their responsibility to safeguard children in their care and had the ability to recognise when children and families needed support.

Children attending the service on the day of inspection did not require any medication. The childminder had a medication policy in place and administration records available if a child required medication. We were satisfied medication would be administered and stored safely if a child required this.

### Quality indicator 1.3: Play and learning

During our visit, children were having fun. The childminder was joining in play with them and responsive to their interests and choices. Children were engaged in play experiences which provided opportunities for them to develop their skills in language, literacy, and numeracy. The children joined in singing and action

songs with the childminder which included the English language and Arabic. Children had opportunities to develop their matching and fine motor skills when playing with the jigsaws. Children were selecting wooden blocks and using these as part of their imaginative play when transporting them into a small world vehicle. A parent commented, "He enjoys his time at childminders because he gets to learn new things, read stories, and play with other kids. Also, outdoor activity."

Whilst the childminder had made improvement for opportunities for children to explore natural materials these could be extended further. This has the potential to enhance children's interests and support children to lead their own play and learning.

As part of children's personal plans, the childminder had included photographs of children's play and learning. The plans contained records of children's progress and development and planned for next steps to support with children's skills and learning. These were still at the early stages of development. Regular information in relation to children's learning and achievement has the potential to support and extend children's play and learning. We discussed with the childminder their skills and achievements could be linked to for example SHANARRI wellbeing indicators (safe, healthy, achieving, nurtured, active, respected, and responsible).

## How good is our setting?

4 - Good

We made an evaluation of good for this key question, as several important strengths, when taken together, clearly outweighed areas for improvement.

### Quality indicator 2.2: Children experience high quality facilities

The childminder had created a play space in a bedroom and the children also used the lounge area which was comfortable. Both areas were safe, clean and had natural light which supported children's health and wellbeing. The childminder provided a cosy space for children with the use of couches, with the opportunity for comfort and rest for children throughout the day.

The childminder had access to a communal garden. They shared they did not use this space with the children. Instead, children benefited from visiting nearby facilities in the community to include a local park "Happy Park" and Botanic Gardens. Children benefitted from having opportunities to be active outdoors in the fresh air and opportunities to develop their physical movement skills and participate in risky and challenging play. A parent commented, "Our child enjoys a variety of outdoor experiences with the childminder, including going for nature walks and engaging in fun physical activities that encourage exploration and creativity."

Children had opportunities to be part of and become familiar with the local community. Children's play and learning was extended through visits within the local community. The children attended a local toddler group, and the library provided opportunities to participate in activities and to come together to play and learn with other children. These experiences support children to gain confidence and to develop a sense of belonging within the local community.

There were books, games and toys stored in containers in a bedroom. These were accessible to children and encouraged choice and independence. The childminder should have a wider range of toys accessible for the children in the lounge area, to select from and choose in their play and learning as they move between both environments.

Risk assessments of the home were in place and being recorded to support children's safety and wellbeing. Most environments were safe for children. We identified cleaning materials were being kept in a cupboard which was accessible to children. This has the potential to compromise children's health. When we discussed this with the childminder, we were satisfied that action would be taken to support children's safety.

Children were not encouraged to wash their hands before mealtimes. We discussed this with the childminder who responded by supporting the children to wash their hands. One towel was being used for the children to dry their hands. We discussed the use of individual towels for each of the children, being easily identifiable as their own or the use of paper towels to meet infection prevention and control procedures. We were satisfied that action would be taken to support children's health and wellbeing.

## How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, when taken together, clearly outweighed areas for improvement.

### Quality indicator 3.1: Quality assurance and improvement are led well

The childminder had continued to improve their service by reviewing and updating their policies and procedures to reflect current publications. This has the potential to contribute to supporting the childminder in their role when providing care, play and learning to children. In addition, the services risk assessments had been reviewed and updated to contribute to supporting children's safety and well-being.

The childminder valued the opinions of families and sought their views through face-to-face discussions and the issuing of questionnaires. The childminder had invited families to complete a 'service quality questionnaire.' This had been an opportunity for parents to provide feedback, share their views and make suggestions for improvements. The questionnaires returned provided positive feedback from families. A parent commented, "My child and I actively involved to help develop and improve the service ensuring it meets the needs of all children."

The childminder had begun a process of self-evaluation and had considered areas of the service to be improved. We discussed with the childminder how self-evaluation could be improved further, by highlighting strengths of the service and referring to the Care Inspectorate "A quality framework for daycare of children, childminding and school-aged childcare." This has the potential to continue to improve outcomes for children and their families.

## How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, when taken together, clearly outweighed areas for improvement.

### Quality indicator 4.1: Knowledge, skills and values

The childminder made good use of professional development opportunities. Showing their commitment to learn and to keep up to date with good practice publications to support children's care, play and learning. They had recently attended a variety of training and shared with us how this had supported them to reflect, and as a result they had made changes to their practice.

The childminder was volunteering in a local school as an assistant to enhance their spoken language in English and enhance their skills in interactions with school aged children.

The childminder was a member of the Scottish Childminding Association (SCMA) and gathered their resources to record information on children and develop their knowledge and understanding of best practice to support children's health, safety, and wellbeing. SCMA is a national umbrella organisation who are dedicated to supporting childminding provision.

The childminder had fostered and developed relationships with children and families attending the service. The childminder shared photographs and provided updates on valuable activities and events to parents each day. This contributed to partnerships with parents and continuity to meet children's care and learning needs. One parent commented, "We are extremely happy with the care our child receives in this service because the childminder provides a nurturing, safe and engaging environment that supports our child's growth and development. The attention to detail and personalised care make us feel confident that our child is in great hands."

## 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 develop activities and experiences to ensure children have opportunities to explore natural materials which are responsive to children's interests and stage of development.

This is to ensure care and support is consistent with Health and Social Care Standards, which state: "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 8 February 2024.**

#### Action taken since then

The childminder had developed the experiences available to children and had extended the resources available for their play and learning to include natural materials.

This area for improvement has been met.

#### Previous area for improvement 2

To keep children safe and secure, the childminder should review and update accordingly the risk assessments in place. The recording of risk assessments should be extended to include outdoor play areas visited regularly.

This is to ensure care and support is consistent with Health and Social Care Standards, which state: "My environment is secure and safe" (HSCS 5.17).

**This area for improvement was made on 8 February 2024.**

### Action taken since then

The childminder had reviewed and updated their risk assessments for all areas of the home. The childminder had created a risk assessment for outdoor play environments.

This area for improvement has been met.

### Previous area for improvement 3

To keep children safe and secure, the childminder should review and further develop policies and procedures in line with good practice guidance and documents. The provider should make improvements to the following policies and procedures:

- Child Protection
- Administration of Medication
- Confidentiality
- Admission & Settling In
- Safe Sleeping

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

**This area for improvement was made on 8 February 2024.**

### Action taken since then

The childminder had reviewed and updated the service policies in line with good practice guidance.

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](http://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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