

# Jamie's Childminding Services Child Minding

Aberdeen

**Type of inspection:**  
Unannounced

**Completed on:**  
21 January 2025

**Service provided by:**  
Jamie Craig

**Service provider number:**  
SP2021000192

**Service no:**  
CS2021000312

## About the service

Jamie's Childminding Services is situated in the residential area of Cove in Aberdeen. Children are cared for in the ground floor of the property, and have access to the living/dining room, kitchen and bathroom. The service is near a bus route and local shops and facilities.

The service is registered to provide a care service to a maximum of seven 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.

One minded child and one of the childminder's children were present during the inspection.

## About the inspection

This was an unannounced inspection which took place on 21 January 2025 between 10:00 and 13:00. 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:

- spent time with children using the service
- received three responses to our request for feedback from parents
- spoke with the childminder
- observed practice and children's experiences
- reviewed documents.

**Key messages**

- Children were cared for by a kind, patient childminder. They knew children well and were flexible in their approach.
- The childminder was developing their practice in observing and planning for children's learning.
- Children were cared for in safe, comfortable surroundings.
- Children had access to appropriate play resources to support their play.
- Quality assurance practices were in the early stages and had supported improved experiences and outcomes for children.
- The childminder demonstrated a commitment to ongoing professional development.

**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. We identified several strengths, which impacted positively on outcomes for children and clearly outweighed areas for improvement.

### Quality indicator 1.1: Nurturing care and support

Children were cared for by a kind, patient childminder. They knew children well and were flexible in their approach. Children were given appropriate choices to help promote positive interactions. When they needed support to join in games, share and take turns, the childminder supported this patiently. They offered explanations and gave children plenty of time to process information and respond. These measures promoted a respectful environment, where children felt secure.

Children's care was promoted through the use of personal plans, which held information to support their health and wellbeing. Chronologies were used to record significant events in children's lives. The childminder had updated the format they used for personal plans to include information based on the GIRFEC (Getting It Right For Every Child) wellbeing indicators. The childminder reviewed the information they held on children regularly with parents, who told us they felt involved in their children's care. Reviews were not always dated and the childminder agreed to do this. This will help ensure all information is reviewed within a minimum of six months as required.

Children enjoyed relaxed mealtimes. They sat at a child-sized table, which they helped to set with placemats, cups and plates. The childminder sat with children, chatting to them and supporting them. They were aware of healthy eating guidelines and children accessed drinks from their own bottles throughout the day to help them stay hydrated. The childminder was knowledgeable about how to keep children safe during mealtimes. For example, they cut fruit to the recommended size and patiently encouraged children to remain seated when eating to minimise the risk of choking. These measures resulted in safe, pleasant mealtimes for children.

Children were supported well during personal care routines. Nappy changes took place at the base of the stairs, where the childminder could position themselves to ensure privacy. They chatted to children, explaining what they were doing and giving children choices. Children were encouraged to wash and dry their own hands with appropriate support and supervision. This gave children opportunities to develop self-care skills and independence.

Children's medication was stored appropriately. Although medications stored at the time of inspection had never been administered, we observed that the childminder had the correct paperwork available to record when this did occur. Reviews had not been carried out, and we reminded the childminder to review all medications at a minimum of every three months. We signposted them to recently updated guidance "Management of medication in daycare of children and childminding services" on the Care Inspectorate Hub to support their practice in this area and promote positive outcomes for children.

### Quality indicator 1.3 Play and Learning

Children had fun as they played. They were free to choose from the available resources, and the childminder supported them in their play. The childminder joined in their games. When the children played with playdough, they helped them find tools to support this.

When they pretended to make ice cream, the childminder "tasted" it and encouraged them to think about different flavours. This supported children to extend their ideas and use their imagination.

Children had opportunities to develop language, literacy and numeracy skills. The childminder chatted with them, using age-appropriate vocabulary. For example, when one child was interested in Halloween resources, the childminder used the word "spooky" to describe them. Environmental print on posters and books provided different examples of text. Numbers and simple counting were promoted through games and routines. These measures helped children learn as they played.

Children's play was mainly spontaneous, with some planned activities. These were mainly seasonal, and the childminder planned them to ensure that all children could participate if they wanted to. The childminder planned learning experiences informally, based on their observations of children's learning. For example, when one child started to recognise colours, they ensured that they provided opportunities to compare and discuss colours as they played. They had recently started to develop the use of written observations to inform planning for learning and we encouraged them to continue with this. This will promote individualised experiences to support children's progress.

Children had opportunities to explore their community. The childminder regularly took children on walks and met up with other childminders which gave children opportunities to explore and socialise.

## How good is our setting?

4 - Good

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

### Quality indicator 2.2 Children experience high quality facilities

Children were cared for in a comfortable, homely environment. They spent most of their time in the living/ dining room, where they had plenty of room to move about during play. Comfortable sofas provided a place to rest and relax, and a child sized table was used for play and meals.

Children had access to a range of play resources appropriate to their interests, ages and stages of development. These were well used during the inspection, with the children choosing freely what they wanted to play with. Children enjoyed playing with sensory materials such as playdough and real-life resources. The childminder spoke about developing these further. We encouraged them to continue with these plans to help promote children's creativity and imagination.

Children had access to regular outdoor play opportunities. The childminder's garden was not in use at the time of inspection, however children walked in the local area daily, and visited local parks and woodland. One parent told us their child enjoyed "Going on walks, going to the park, playing in the back garden during the nicer weather, jumping in muddy puddles!" These measures helped support children's physical development and enjoyment of the outdoors.

Children were kept safe through the childminder's knowledge and practice. They followed infection prevention and control procedures such as wiping tables and frequent handwashing. Risk assessments had been carried out for all areas to help identify and reduce any potential hazards. The childminder used appropriate PPE (Personal Protective Equipment) during nappy changes. The setting was clean and fresh, resulting in a pleasant, safe environment for children.

Children's information was securely stored in folders.

Digital information, such as posts on a Facebook page, were accessed only by those invited to join. Parental permission was obtained when children's images appeared in these. These measures help promote the privacy and security of children and families.

## How good is our leadership?

4 - Good

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

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

Children were cared for by a childminder who had a clear vision for providing individualised, high-quality care. Parents spoke of being welcomed into the childminder's home, their children's friendships with the childminder's children, and the childminder knowing their children well. Information about the service was shared with parents through an information sheet and policies, which promoted an understanding of what to expect.

Families had opportunities to feedback their views. The childminder had developed questionnaires, and at the time of inspection, was awaiting parent's responses to these. They regularly asked children for their views, which they had used to inform changes. These included more time at the park and suggestions for snack. These measures helped ensure children and parents were meaningfully involved in the development of the service.

The childminder demonstrated a commitment to ongoing development and improvement. These had included the development of children's personal plans, observations of learning, the recording of medication and children's mealtime experiences. We encouraged them to continue to develop more formal self-evaluation practices, using guidance such as the Care Inspectorates "Quality Framework for daycare of children, childminding and school-aged children" to help inform planned improvements and ensure that positive outcomes for children are central to all developments.

## How good is our staff team?

4 - Good

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

### Quality indicator 4.1 Staff skills, knowledge and values

Children were cared for by a childminder who valued positive relationships and attachments. Settling in visits were flexible, to meet children's needs and they told us children usually settled quickly. Their nurturing approach resulted in children feeling comfortable and relaxed. Parents told us they were happy with the care their children received and spoke positively of their relationship with the childminder.

Children had their views respected and listened to. They were given choices throughout the day and asked what they wanted to do. When the childminder discussed going to the park in the afternoon, she checked with them that they wanted to do this. They were skilled at picking up on children's cues and acting on these. For example, when the children became unsettled, the childminder realised they were hungry and organised to have lunch early.

This gave assurances that children's views and needs were central to their care.

The childminder demonstrated a good understanding of children's developmental stages. They were flexible in accommodating children's needs and responding to age-appropriate behaviours. For example, when the children squabbled, they supported them to understand their emotions and helped them resolve their disputes. This helped children develop social skills and confidence.

Children's care was promoted by the childminder's knowledge. They attended regular training courses and engaged fully with feedback from the inspection. They were familiar with key guidance documents to support their practice. They were able to discuss recent child protection training and how this has helped them improve their practice. The childminder's commitment to professional development helped promote ongoing positive experiences and outcomes for children.

## 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

To support children's safety and wellbeing, the childminder should develop their knowledge and practice. This should include but is not limited to:

- a) Being familiar with choking prevention guidance, putting this guidance into practice, and supervising children closely when they are eating.
- b) Recording children's medication in line with guidance, including obtaining signed parental permission.
- c) Developing the use of chronologies to record significant events in children's lives.
- d) Reviewing nappy changing arrangements to reduce the risk of cross infection and promote dignity and privacy for children.

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).

**This area for improvement was made on 22 February 2024.**

#### Action taken since then

- a) The childminder was knowledgeable about how to keep children safe during mealtimes. For example, they sat with children, cut fruit to the recommended size and patiently encouraged children to remain seated when eating to minimise the risk of choking.
- b) Children's medication was stored appropriately.

Although medications stored at the time of inspection had never been administered, we observed that the childminder had the correct paperwork available to record when this did occur.

c) Chronologies were used to record significant events in children's lives.

d) Nappy changes took place at the base of the stairs, where the childminder could position themselves to ensure privacy. The childminder used appropriate PPE (Personal Protective Equipment).

**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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