

# McGinlay, Jane Child Minding

Dundee

**Type of inspection:**  
Unannounced

**Completed on:**  
12 February 2025

**Service provided by:**  
Jane McGinlay

**Service provider number:**  
SP2007964991

**Service no:**  
CS2007150152

## About the service

Jane McGinlay provides a childminding service from her home in Dundee. The service is registered to provide care to a maximum of 6 children under 16 at any one time, of whom no more than 6 are under 12, no more than 3 are not yet attending primary school, and no more than 1 is under 12 months. Numbers are inclusive of children of the childminder's family. Minded children cannot be cared for by persons not named on the registration certificate. Overnight care will not be provided.

The service is based in a residential area of Dundee and is close to local parks, shops, and schools.

## About the inspection

This was an unannounced inspection which took place on 12 February 2025 between 11:30 and 13:15. Feedback was shared during this visit. The inspection was carried out by an 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 and two of their family members;
- observed practice and daily life;
- reviewed documents.

## Key messages

- Interactions between the childminder and children were warm, loving, and caring.
- The childminder knew the children and their families well.
- Children led their own play and made choices from a range of toys and resources.
- Personal plans had been developed to include more detailed information to support the childminder to fully meet the needs of children in her care.

## 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?	3 - Adequate
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

The childminder was warm, loving and caring during her interactions with children. She had developed positive attachments and knew the children well. The childminder was responsive to the needs of children, and she responded to facial expressions and cues. She ensured that children were happy and settled while in her care. A parent shared that 'Jane is such a caring and lovely person.'

Detailed personal plans were now in place. This ensured the childminder had all the required information to meet children's needs. These had been recently updated with families. Parents agreed that they were involved in developing their child's personal plan.

Medication consent forms were now in place for children who required medication to be administered. The childminder was also now recording the administration of medication and sharing with parents. This process supported the childminder to maintain the health and wellbeing needs of children.

Lunchtime was a nice social experience for children. They made choices about what they would like to eat and began to develop their independence and life skills. The childminder sat with the children throughout the mealtime experience and took part in quality discussions with them. Children had access to their own water bottles to keep them hydrated throughout the day.

The childminder supported children with their toileting needs. Children used a step to reach the sink for washing their hands after using the toilet. Infection prevention and control measures were followed at all times to minimise the risk of spread of infection.

The childminder had a child protection policy in place. She had a good understanding of the processes to follow should she have any concerns relating to a child in her care. This ensured that the childminder had the skills and knowledge to support her to safeguard children.

### Quality Indicator 1.3 Play and Learning

Children were leading their own play and were choosing which toys and resources to play with. The childminder brought out dinosaurs to support a child's current interest. The child named each of the dinosaurs. Children also played a game with the childminder and were confident recognising and matching colours. There was a lot of praise and laughter during this play experience. Children took part in an activity to identify, recognise and match letters to create words. The children did this confidently and one child identified letters that were in their mum's name. Children had fun and were engaged in these play experiences. A parent commented 'Jane is always doing educational activities with them.'

The childminder had a good knowledge of children's current interests and provided appropriate toys and resources to support these. There were a variety of toys and resources both indoors and outdoors to develop children's problem-solving skills, imaginations, gross motor skills, numeracy, and literacy. Children spent time outdoors in the childminder's secure garden area to develop play and learning and have regular access to fresh air.

Photographs of children's play and learning experiences were displayed in folders and shared with parents. These showcased a wide range of play experiences both indoors and outdoors and included outings. One child pointed out specific photographs and shared what they were doing in the picture. A parent highlighted to us that 'daily updates are provided from Jane and regular written updates on my child's learning and progression are provided including photos.'

## How good is our setting?

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 2.2 Children experience high quality facilities

The children's playroom was well laid out and provided space for tabletop activities, floor play and included a comfortable space for children to rest and relax. Suitable storage systems were in place which provided children with easy access to resources. Children's artwork was displayed around the playroom which provided a welcoming environment and supported children to feel valued and respected. A parent commented 'I feel very comfortable in Jane's home.'

The childminder provided a safe and secure environment both indoors and outdoors for children to take part in play and learning experiences. Risk assessments were in place for all environments and included trips and outings. The risk assessments had been recently reviewed and ensured safe environments for children. Smoke alarm checks were completed monthly and recorded and other maintenance checks were completed as required.

Children chose when to access the outdoor play area and had free flow access through the living area of the childminder's home. The garden was safe, secure, and welcoming for children and provided a range of play experiences. A variety of resources supported the development of gross motor skills and encouraged children to be active.

The childminder made effective use of the local community. Children attended a local playgroup in the mornings which provided a different range of play and learning experiences as well as the opportunity to develop social skills. Children regularly visited local parks and green spaces to take part in active play to support their health and wellbeing. One child spoke about a recent trip to the McManus Dundee Art Gallery and Museum and said, 'I got a butterfly egg, it's in water and I'm watching it.' This outing provided the opportunity for children to learn about living things and their life cycles.

**How good is our leadership?****3 - Adequate**

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

**Quality Indicator 3.1 Quality assurance and improvement are led well**

The service now has a vision, values, and aims in place. It was discussed that it is valuable to involve children and families in the creation and development of these.

The childminder had formed positive relationships with families and had daily discussions with them at pick up and drop off times. These discussions provided valuable opportunities for maintaining effective communications and encouraged parents to share feedback, suggestions, or concerns about the service. This could support the childminder to use this information to reflect on her service and make ongoing improvements. **See area for improvement one.**

Policies were in place which adhered to best practice documents and guidance. The childminder had developed a missing child policy and a complaints policy since her last inspection. It would be beneficial for the childminder to date each of her policies and record the annual review of each of these documents.

**Areas for improvement**

1. To improve outcomes for children, quality assurance processes should be developed. This should include but is not limited to ensuring:

a) self-evaluation processes are developed to support the childminder to reflect on practice and identify strengths and areas for further improvement including participating in training.

**This is to ensure that care and support 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

The childminder had several years of experience of childminding and had a good knowledge of children in her care. She maintained effective communications with parents through daily verbal discussions and through the use of messenger. The childminder provided a homely environment which supported children to play and have fun. Positive attachments had been formed between the childminder and children and interactions were warm, loving, and caring.

The childminder had not taken part in any recent training or development. Several training opportunities were now due to be updated and refreshed. The childminder was aware of the training that she had to undertake to refresh her knowledge and skills.



## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 31 January 2024, you must ensure children's medical needs are safely managed.

To do this, you must, at a minimum, ensure that:

- a) medical permission forms are in place and are fully completed by families.
- b) administration of medication is accurately recorded and shared with parents.

This is to comply with Regulation 4(1)(a) 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: 'Any treatment or intervention that I experience is safe and effective (HSCS 1.24).

This requirement was made on 11 January 2024.

#### Action taken on previous requirement

There are now permissions in place for the childminder to administer medication to children. The childminder now records when the medication has been administered to the child.

**Met - outwith timescales**

## 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 further develop personal plans to ensure she holds all the information required to fully meet the needs of children in her care. This should include but is not limited to ensuring that:

a) this information includes health needs, allergies, long term medication requirements and any possible additional support needs;

b) the childminder reviews these plans at least every six months with parents to ensure all information recorded is current and accurate.

**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).**

**This area for improvement was made on 11 January 2024.**

### **Action taken since then**

The childminder now has processes in place to ensure the monitoring of personal plans and medication.

The childminder has not yet developed other self-evaluation processes to reflect on practice to support ongoing improvement within the service.

This area for improvement has been partly met and will be continued within the report.

## **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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	4 - Good
4.1 Staff skills, knowledge and values	4 - Good

## 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](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto: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 iarrtas.

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.