

PiPsqueaks Child Minding

Tranent

Type of inspection:
Unannounced

Completed on:
18 February 2025

Service provided by:
Phillipa Headley

Service provider number:
SP2012983549

Service no:
CS2012308306

About the service

Phillipa Headley' childminding service is known as PiPsqueaks. She provides a childminding service from her family home in a residential area of Pencaitland.

The childminder is registered to provide a care service to a maximum of six children at any one time under the age of 16, 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 the childminder's family. The childminder works with an assistant only on occasions.

Children access the ground floor of the property which includes, the lounge and dining area, downstairs toilet, front garden and an enclosed garden to the rear of the house. Children sleep in a travel cot within an upstairs bedroom.

About the inspection

This was an unannounced inspection which took place on 18 February 2025 between 13:00 and 16:00. 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 registration information, information submitted by the service and intelligence gathered since the service registered.

In making our evaluations of the service we:

- spoke to and interacted with the three minded children using the service
- spoke with the childminder
- observed practice, daily routines, and children's experiences
- reviewed documents in the service.

Key messages

- Children were relaxed and happy in the childminder's care.
- A strong emphasis was placed on outdoor play and accessing the local and wider community.
- Children had fun and could choose from a range of toys and resources, that were appropriate to their age and developmental stage.
- Personal plans should be reviewed in line with legislation.
- The childminder should develop self evaluation systems to enable them to review aspects of their 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?	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 a number of important strengths impacted on positive outcomes for children.

Quality Indicator 1.1: Nurturing care and support

Children experienced warm and nurturing interactions with the childminder. They benefited from a childminder who knew their personalities and their needs well and as a result, children were happy, relaxed and settled.

The childminder could talk confidently about children in their care and their individual likes, dislikes, and strengths. Some information was available in children's personal plans, such as emergency contact details, medical information, and dietary requirements. The childminder should ensure that personal plans are formally reviewed with children and their families at least every six months, or sooner if required. An area for improvement made at the previous inspection remains outstanding and has been carried forward in this report (see area for improvement 1).

No medication was being administered to children or stored at the time of the inspection. We reviewed medication policies and systems for recording medication and provided feedback to support the childminder with ensuring all relevant information was gathered. For example, we signposted the childminder to 'Management of medication in daycare of children and childminding services (2024). This can be found at [hub.careinspectorate.com](https://www.careinspectorate.com/hub) and could support the childminder to review their documents and policies. This would ensure the childminder has all the required information to protect children if medication were required to be administered.

As part of a child's daily routine, they slept in a travel cot upstairs. We discussed the need for regular checks to be carried out on the child as monitors were not used. We signposted the childminder to the Safer Sleep for Babies good practice guidance. This can be found at [hub.careinspectorate.com](https://www.careinspectorate.com/hub)

Quality Indicator 1.3: Play and learning

Toys and resources were clean and well organised in a manner which supported children to self select and make choices about their play. They were reflective of children's needs and interests. Children were having fun as they played happily together. They were sharing toys and taking turns. The childminder sat alongside the children supporting them in their play. For example, children sat together discussing and making creative pictures. The childminder encouraged and praised them for their efforts. This supported their language, confidence, and self-esteem.

The childminder had a range of books available for children to read or look at. She often sat with children looking at books and telling them stories. This provided a sense of routine and comfort, whilst supporting children's language, speaking, and listening skills.

Children were encouraged to be outdoors and get fresh air. They had opportunities to play within the secure rear garden and through supervised play in the front garden. There was a range of resources available to develop their physical skills, coordination, balance and to support children to problem solving.

Children were supported to have strong connections to their local and wider community. They attended toddler groups, and visited local cafes, parks, and woodland. These opportunities enhanced children's play and learning experiences and social activities.

Areas for improvement

1. To continue to meet the individual care needs and interests of each minded child the childminder should ensure their personal plans are reviewed when there is a significant change in a service user's health, welfare or safety needs, or at least once every six months.

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).

How good is our setting?

4 - Good

We evaluated this key question as good, where a number of important strengths impacted on positive outcomes for children.

Quality Indicator 2.2: Children experience high quality facilities

Children were cared for in a home from home environment which provided a warm, relaxed atmosphere. The home was bright, comfortable and welcoming. The children had access to the lower part of the house, which included an open plan lounge, dining area with kitchen and downstairs toilet facilities. Children were happy, secure, and relaxed within their environment. This supported a nurturing environment for the children.

Spaces within the childminder's home reflected children's current interests, and children could access a range of toys and materials to meet their needs. For example, they had sufficient floor space to explore a range of small world resources and enjoy a large rocking horse. A dining table provided an area for children to be creative with art materials. Children moved around the space freely and with confidence, showing they felt welcomed and that they had choice of where to spend their time and play.

Children learned about risks as the childminder talked to them about being safe indoors by clearing away toys and trip hazards from the floor. Outdoors children practised road safety as they explored the community. This supported children to develop their awareness of how to keep themselves safe.

Children had opportunities to play in the rear garden with a range of resources available. The childminder confirmed children were supervised whilst playing in the front garden as this area was not secured. We signposted the childminder to SIMOA, guidance to raise awareness and support her in protecting children and keeping them safe outdoors. This can be found at hub.careinspectorate.com

The childminder confirmed they were looking at storage, to store the double buggy used by minded children. We discussed the need to make sure garden toys were stored appropriately to keep them clean and well maintained. The childminder told us the large trampoline would be removed from the garden as this was damaged.

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 and led well

A welcome folder was shared with new families to provide information about the service and to set out expectations. This helped families understand what to expect from the service.

The childminder had included some parents in the evaluation of the service through questionnaires. Children had some opportunities to discuss with the childminder the activities and things they liked to do. We discussed how regular opportunities for children and families to feedback on how well their needs, wishes and choices were being met, would allow the childminder to ensure their service continued to meet their needs. This would enable children to benefit from a service focussed on delivering high quality care and support.

The childminder engaged well during the inspection and was responsive to discussions and suggestions. Moving forward, the childminder could implement self evaluation processes to enable them to review and quality assure other aspects of the service. For example, a system to ensure personal plans were maintained in line with legislation and policies and procedures are updated to reflect changes and current best practice. This could help develop and embed a cycle of continuous improvement (see area for improvement 1).

Areas for improvement

1. To support a culture of continuous improvement and positive outcomes for children, the childminder should increase their knowledge and use of current best practice in Early learning and childcare. This should include using the Care Inspectorates' website and 'Hub' to support personal planning, updating their policies and procedures, as well as the use of best practice documents including but not limited to:-

'Guide for providers on personal planning'

'Management of medication in daycare of children and childminding services'

'Safe sleep for babies'

This is to ensure that care and support 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 4.11).

How good is our staff team?

4 - Good

We evaluated this key question as good, where a number of important strengths impacted on positive outcomes for children.

Quality Indicator 4.1: Skills, knowledge and values

The childminder was warm and caring in her interactions with the children. They had developed positive relationships with children and their families. Children interacted with the childminder confidently and their

requests were responded to in a timely manner. This contributed positively to children's wellbeing and helped them to feel respected and valued.

The childminder had completed training relevant to their role and had used supporting documents to promote children's wellbeing. We discussed with the childminder, continuing to develop their knowledge and skills through ongoing training, and to use resources available to them for support, such as, the SCMA, Scottish Childminding website www.childminding.org and Care Inspectorates' Hub, hub.careinspectorate.com.

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 continue to meet the individual care needs and interests of each minded child the childminder should ensure their personal plans are reviewed when there is a significant change in a service user's health, welfare or safety needs, or at least once every six months.

National Care Standards for Early Education and Childcare up to the age of 16 - Standard 3: Health and Wellbeing and Standard 6: Support and Development

This area for improvement was made on 21 December 2017.

Action taken since then

Personal plans were kept for all children who use the service. These contained information about each child's GP, medical conditions, emergency contacts, routine and development. However these were not being reviewed as required by legislation. **This recommendation was not met** and is carried forward in this report under area for improvement 1 under Quality Indicator 1.1

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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

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