

Munro, Morag Child Minding

Aberdeen

Type of inspection:
Unannounced

Completed on:
10 March 2025

Service provided by:
Morag Munro

Service provider number:
SP2003900558

Service no:
CS2003001936

About the service

Morag Munro operates a childminding service from their family home in Portlethen. They are registered to provide a childminding service to care for a maximum of six children at any one time under the age of 16, of whom a maximum of six will be under 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 childminding service operates from a self-contained building within their garden. It is equipped with a kitchen and toilet facilities and leads into a fully enclosed garden. The service is close to local primary schools, shops, park and green spaces.

About the inspection

This was an unannounced inspection which took place on 10 March 2025 between 14:25 and 16:45. 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:

- gathered feedback about the service from two families
- spoke with the childminder
- spoke with children
- observed practice and children's experiences
- reviewed documents.

Key messages

- Children received warm and caring interactions from the childminder.
- Children could lead their own play, accessing a range of appropriate resources to support this.
- Children had fun and were well settled in the childminder's care.
- Children and their families were beginning to be involved in the evaluation of the service. The childminder should continue to develop this.

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 quality indicator 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

Children benefited from the positive relationship that had been formed with the childminder. Their interactions were caring and warm, supporting children's confidence and self-esteem. The childminder knew the children well. They were able to tell us about the children's interests, in and outside of the setting and spoke knowledgeably about their personalities and characters. This promoted positive outcomes for children as the childminder was able to develop children's interests.

Children were observed to be happy, secure and settled. Parents told us they were happy with the care and support their child receives. One parent told us; "My children are safe and enjoy being there. They are always happy to go and never want to come home". Another parent said; "[The childminder provides a nurturing home from home, my child enjoys their time there." The childminder had gathered feedback which showed parents were happy with the care their children received.

Children ate snack sitting at the table when they returned from school. Children were offered a selection of fruit and asked for rice cakes. The childminder was aware of 'Setting the table guidance' the best practice guidance in relation to healthy eating and was offering children snacks in line with this. Snack time was sociable and relaxed, providing an opportunity for children to chat, build and sustain relationships with the childminder and each other.

Each child had a personal plan which was used to gather information relevant to their continued care and wellbeing. These had been developed since the last inspection and were completed with parents and children. This supported the childminder to meet children's individual needs. The childminder had gathered information from children about preferences and interests. We suggested including information about care and support being given to children. This would support accurate information sharing and an evaluation of care.

The childminder had recognised the importance of safeguarding children. They had attended recent training and now had chronologies in place to capture significant events in children's lives. These were used to highlight any potential safeguarding issues arising and ensured that appropriate action had been taken to keep children safe and protected.

Children's health and wellbeing was supported as the childminder now had a system in place for managing medication. Since the last inspection the childminder had developed their policies and procedures around medication. They had updated the medication policy, were obtaining parental permission and had a format in place for recording the administration of medication. This contributed to keeping children safe and well.

Quality Indicator 1.3 - Play and learning

Children were happy and having fun in the childminder's care. They could freely access resources supporting free choice which empowered children to lead their own play.

The children had access to a range of quality developmentally appropriate toys and resources to support their play and learning. These included role play, construction, small world, loose parts and games. These encouraged children's creativity, problem solving and imagination. Children's numeracy and literacy was promoted with the provision of a selection of resources available within the setting. These included mark making materials, books and games for the children to explore and develop their numeracy and literacy skills.

The childminder was responsive to children's current interests and provided resources to engage children in meaningful play experiences. This included listening to children and involving them in sorting the resources within the setting. This ensured children knew exactly what was available to them. Children played well together sorting the Happyland toys, discussing which items should go where. They then chose to play a game of Connect 4, using their numeracy and problem solving skills well.

Children had opportunities to benefit from fresh air and exercise. They were able to explore their local area while walking home from school. They walked past the golf course where they were able to see horses and ducks, which the children enjoyed. This allowed the children to become familiar and feel a sense of belonging within their community.

How good is our setting?

4 - Good

We evaluated this quality indicator 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

Children were cared for in a warm, welcoming, and homely environment. The self-contained building had a play area, kitchen/dining space, a toilet and direct access to an enclosed garden. These areas were well maintained and allowed children ample space for play activities.

Children were confident moving around the space. Resources were accessible to them, providing opportunities for them to direct their own play and be independent. Children were also able to make choices and develop their own interests. For example, they could choose to play with peers or alone and were able to rest or participate in quieter activities when they needed to.

Children's wellbeing was supported through access to the outdoors. Although the garden was not used during our visit, the childminder told us they used it in the summer. Children sometimes had the opportunity to walk to and from school. Within the children's questionnaires, we noted they said they would like to play outdoors more. The childminder should now consider taking account of the children's wishes and offer them more opportunities to spend time outdoors daily. This would ensure regular access to fresh air and exercise, to further support their health and wellbeing.

Children's safety was promoted as measures were in place to minimise risk. Risk assessments identified potential hazards and helped ensure children's safety. We discussed updating these to ensure mitigations in place were clear. The childminder supported children's awareness of risk through discussion and role modelling, for example while walking home from school.

Children's health was promoted as the childminder understood the importance of maintaining a hygienic environment.

Children were reminded to wash their hands at appropriate times, supporting their own personal hygiene routines. An infection control policy was in place and they had completed 'Infection, Prevention and Control' training to support their practice.

How good is our leadership?

4 - Good

We evaluated this quality indicator as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality Indicator 3.1 - Quality assurance and improvement are led well

The childminder was working in accordance with the service aims and objectives and these were evident during the inspection. The childminder had not yet involved children and families in a review of these. They should consider this to ensure that their service continues to meet the needs of children and their families. This would support families to know what to expect, and what was important for the service to meet the needs of children and families.

The childminder understood the importance of using the views of children and families to inform activities and the development of the service. They used questionnaires to seek children's and families views. Responses had been positive and we discussed how the childminder might use suggestions in the future to shape developments within the service.

The childminder was self-evaluating their practice regularly and was beginning to evaluate the service using the document 'A quality framework for daycare of children childminding and school aged children'. We advised that they should continue to develop the self-evaluation of the service, considering the impact of developments on outcomes for children. This will support the childminder to continuously improve children's experiences and outcomes.

The childminder had a range of policies and procedures in place supporting them to provide a quality service. Some policies had been updated since the last inspection. However, some had yet to be reviewed to ensure that they reflected the effective running of the setting.

How good is our staff team?

4 - Good

We evaluated this quality indicator as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality Indicator 4.1 - Skills knowledge and values

Children benefited from the childminder's calm and caring approach which meant that they were responsive to meeting children's needs. The childminder was respectful of children's rights, providing care that was individualised and responsive to each child. This contributed positively to children's wellbeing and helped them to feel settled and secure in the childminder's care.

Our discussions highlighted that the childminder was enthusiastic and committed to their role and the families using the service. Parents told us they had strong connection with the childminder. One parent said; "[The childminder] is very approachable and welcoming. I feel I could approach [them] at any time".

One child said "[The childminder] is kind and makes me feel safe". The childminder was able to discuss how they were supporting children and had a clear understanding of how they develop and learn.

The childminder made good use of professional development opportunities. They had completed basic training including infection control, paediatric first aid, child protection and food hygiene. The childminder had also recently completed a number of courses run by the SCMA (Scottish Childminder Association) including autism, ADHD and the senses and understanding child development. We discussed the benefits of keeping a record of their professional development including information about each course. This would support the childminder to reflect on training undertaken and ultimately improve outcomes for children. The childminder should now take time to document this learning and the impact it has had on their setting.

The childminder had increased their knowledge and understanding of best practice guidance. They were able to discuss how they were using this knowledge to improve the setting and outcomes for children. For example, through engaging with new 'Setting the table guidance' snacks being offered to children were in line with this. Knowledge of best practice documents supported the childminder in delivering care that was based on most recent research and information.

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 health and wellbeing, the childminder should ensure each child has a written personal plan that demonstrates how their needs will be met. These should be updated at least every six months and when a change occurs to a child's needs or circumstances.

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

'My personal 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 30 January 2024.

Action taken since then

Each child had a personal plan which was used to gather information relevant to their continued care and wellbeing. These had been developed since the last inspection and were completed with parents and children supporting the childminder to meet children's individual needs. **This area for improvement has been met.**

Previous area for improvement 2

To ensure children's healthcare needs are met, the childminder should refer to the Care Inspectorate 'Management of medication in daycare of children and childminding services' medication guidelines.

This should include but not limited to, recording written consent, clear instructions on when to administer medication and reviewing medication with families.

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).

This area for improvement was made on 30 January 2024.

Action taken since then

Children's health and wellbeing was supported as the childminder now had a system in place for managing medication. Since the last inspection the childminder had developed their policies and procedures around medication. They had updated the medication policy, were obtaining parental permission and had a format in place for recording the administration of medication. This contributed to keeping children safe and well.

This area for improvement has been met.

Previous area for improvement 3

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

- a) important aspects of the service such as personal planning and the safe administration of medication are regularly monitored and carried out in accordance with best practice guidance;
- b) self-evaluation processes are developed to support the childminder to reflect on practice and identify strengths and areas for further improvement.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 30 January 2024.

Action taken since then

The childminder was self-evaluating practice regularly and was beginning to evaluate their service using the document 'A quality framework for daycare of children childminding and school aged children'. We advised that they should continue to develop the self-evaluation of the service, considering the impact of developments on outcomes for children. **This area for improvement has been met.**

Previous area for improvement 4

The childminder should access mandatory training and current best practice guidance, to develop their professional skills and knowledge and to promote the improvement of the service.

This should include, but is not limited to;

- Child protection and food hygiene training

- Reviewing best practice documentation and accessing the bitesize videos on the Care Inspectorate Hub
- Evaluating the impact of training on their practice, children and families.

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).

This area for improvement was made on 30 January 2024.

Action taken since then

The childminder made good use of professional development opportunities. They had completed basic training and had recently completed courses run by the SCMA (Scottish Childminder Association) including autism, ADHD and the senses and understanding child development. The childminder had increased their knowledge and understanding of best practice guidance. They were able to discuss how they were using this knowledge to improve the setting and outcomes for children. **This area for improvement has been met.**

Previous area for improvement 5

Previous area for improvement. The childminder should record that she reviews and updates risk assessments. National Care Standards for Early Education and Childcare up to the age of 16: Standard 14 - Well Managed Service. This area for improvement was made on 21 April 2017.

This area for improvement was made on 21 April 2017.

Action taken since then

Risk assessments identified potential hazards and helped ensure children's safety, however these should be updated as mitigations need to be clearer. **This area for improvement has not 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.

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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