

# Ellis, Wilma-Ann Child Minding

Stevenston

**Type of inspection:**  
Announced (short notice)

**Completed on:**  
5 March 2025

**Service provided by:**  
Wilma-Ann Ellis

**Service provider number:**  
SP2010980325

**Service no:**  
CS2010274431

## About the service

Wilma-Ann Ellis provides a childminding service from their home in Stevenston. The downstairs areas of the property are used for the purpose of childminding. This includes a living room, kitchen and the enclosed garden. Minded children also have access to an upstairs toilet.

The service is registered to provide care for a maximum of six children at any one time under the age of 16. Numbers are inclusive of the children in the childminder's family. The service is close to local schools, shops, beaches and other amenities. At the time of our inspection, nine children were registered with the service.

## About the inspection

This was a short notice announced inspection which took place on Wednesday 5 March 2025 between 15:20 and 17:00. 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:

- spoke with three children using the service
- spoke with the childminder
- observed practice and daily life for children attending the service
- reviewed documents.

## Key messages

- Children's wellbeing benefitted from secure relationships with the childminder, who knew them and their families well.
- To ensure individual children's needs are planned for, the childminder should develop personal plans in line with legislation and best practice guidance.
- To improve and develop the service, the childminder should implement a robust system of quality assurance as this will promote positive outcomes for children.
- The childminder should improve their knowledge of child development and develop their awareness of best practice guidance and use these to develop and reflect on their practice.
- The childminder should ensure that all essential documentation and certificates that they are required to maintain for the purpose of childminding such as their registration certificate, policies and procedures are stored on the premises at all times and are easily accessible.

## 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?	3 - Adequate
How good is our setting?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

## How good is our care, play and learning?

## 3 - Adequate

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

### Quality indicator 1.1: Nurturing care and support

Interactions between the childminder and minded children were kind and supportive. For example, patient and good humoured interactions were used when encouraging children to play cooperatively and to take turns when playing card games. The childminder spoke positively about building relationships with the children and how this had impacted on the care they provided. All parents who responded to our questionnaire strongly agreed that they were happy with the care the childminder provided. Comments included: "My children love going with Wilma, she's kind, caring and nurturing" and "My child has a strong connection with Wilma."

The childminder knew the children in their care well and was confident when discussing their interests and where they may need support. They had gathered information about some children's health, personal preferences and routines prior to children starting. However, this information had not been gathered for all children. We asked to sample personal plans for three children and only one was available. This was not fully completed and had not been shared with the child or their parents. This meant that there was potential for children's needs being unmet. We made an area for improvement about improving personal plans at our last two inspections. This area for improvement has not been met and remains in place.

The childminder provided snacks for children. Snack options included wraps, sandwiches, fruit, crisps and flavoured water. Children were supported to access these foods at a time that suited their individual needs and preferences. Whilst children enjoyed a sociable snack experience, the childminder should now focus on supporting children to remain seated whilst eating and to undertake effective hand hygiene. This would reduce the risk of choking and minimise any potential spread of infection, keeping children safe (area for improvement 1).

There were no children requiring medication on the day of our visit. The childminder had some documentation in place to gain parental permission to administer medication. However, they could not locate the recording form that they would complete when medication had been administered by the childminder. We have asked the childminder to review their processes for safely storing essential documentation that they are required to have accessible when minding children. We have reported more on this within How good is our leadership?

### Quality indicator 1.3: Play and learning

Children were relaxed and having fun in the childminder's care. They chose what to play with from a selection of toys which were stored in accessible boxes in the childminder's hallway, supporting their independence.

There had been some opportunities for school aged children to make suggestions for outings during school holidays. The childminder should continue to consult children in all play and learning experiences offered and evidence where suggestions have led to fun and meaningful experiences. This would allow children to revisit past experiences and would demonstrate to them that their opinions are valued and respected.

Children's play was spontaneous and child led. We encouraged the childminder to develop some planned learning. We discussed the benefits of introducing observations of children's learning to inform plans for supporting their development. This will help ensure that play and learning opportunities are individualised and relevant for each child.

As it was mostly school aged children that attended the service, they were permitted to bring electronic devices from home to use whilst attending the service. One child told us they enjoyed attending the service as they could play games on their electronic device with friends. The childminder should strengthen their policy and procedures around use of electronic devices outlining their expectations and the safety measures in place to ensure children's safety online. This will ensure expectations are clear for children and families.

### Areas for improvement

1. To ensure children's safety at mealtimes, the childminder should ensure that children are supervised appropriately and are supported to remain seated whilst eating to reduce the risk of choking. Effective hand hygiene should also be applied by the childminder and children to minimise the risk of possible infection spreading.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I can enjoy unhurried snack and mealtimes in as relaxed an atmosphere as possible" (HSCS 1.35).

### 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 benefitted from an environment that was welcoming with plenty of natural light and ventilation. Children had ample space for their needs and could explore resources in the childminder's living room or hallway which contained a child's sized table and chairs. Comfortable sofas provided space to rest and relax. One parent commented: "Wilma is kind, caring, approachable, nurturing and has a nice homely environment for the children."

Children were kept safe as the childminder had carried out and recorded risk assessments of all areas of their home accessed by children. They had put the necessary mitigations in place to keep children safe. In addition, the childminder often cared for a family member's pet dog. We met the dog during inspection and found the dog to be calm and friendly. The childminder had gained parental permission for children having access to the dog and had developed a policy to ensure children's safety.

The childminder's garden provided a variety of play equipment to support children's physical development. Children told us that they could access the garden in warmer weather. We observed a child asking to play outdoors and this was denied. The childminder told us that their garden was not in use due to water logged areas and recent storm damage to the boundary fencing. The childminder was aware of the importance of children accessing fresh air to support their wellbeing and made use of local parks to enable them to engage with healthy lifestyles.

Children had opportunities to explore their community. The childminder regularly took children on walks to support their physical health. During summer months, children took part in planned outings within the wider communities, such as visits to the beach. This enabled children to develop their knowledge of their community and created a sense of inclusion.

The childminder's infection prevention and control measures mostly supported children's health. However, we observed that children were not fully supported to uptake good hand hygiene. The childminder should ensure children have access to individual hand drying resources in the bathroom and ensure children wash their hands before eating snacks.

## 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 childminder shared their vision, values and aims for the service with families when registering. This meant families knew what to expect and could make any suggestion to inform the childminder's practice.

The childminder consulted with parents informally through discussions at drop off and collection. The use of digital platform WhatsApp supported effective communication and sharing of relevant information. This enabled parents to see their child's progress, and gave them the opportunity to provide feedback to the childminder, and share learning from home.

The childminder had in previous years sought the views of children and parents through questionnaires. They should consider reintroducing these formalised approaches of gaining feedback as this would help them to identify how to develop and make improvements based on the views and wishes of those that use the service. This supports families to feel that their views are important.

Whilst the childminder engaged fully in the inspection process and welcomed feedback, we found that improvements to children's experiences were not promoted through quality assurance practices. The childminder did not evaluate their own practice and they were not familiar with guidance documents to support self-evaluation. We suggested the development of simple quality assurance processes to inform planned improvements. We discussed how to approach this and shared links to resources which would support the childminder in developing their practice and introducing an improvement plan. Developing quality assurance systems had been identified as an area for improvement within the childminder's previous inspection reports since 2022. To ensure clarity for the childminder, a new area for improvement has been made (see area for improvement 1).

As part of our inspection, we asked to review some of the childminder's professional registration documents which they are required to maintain as a childminder. The childminder was unable to locate some of this at the time of inspection. We received some documents electronically the next day. The childminder should ensure all documentation to support their business is stored on the premises and available at all times. This would ensure information was accessible for parents. In addition, we have advised the childminder to register with the Information Commissioner's Office (ICO) to ensure they are storing, processing and sharing personal information lawfully.

The childminder shared their policies with us electronically following our visit. We highlighted that most would benefit from being reviewed to reference current legislation, frameworks and best practice guidance. We advised the childminder to review their practice, policies and procedures when new guidance is published to keep them current and to support positive outcomes for children. This would ensure parents could access relevant and accurate information.

### Areas for improvement

1. To support positive experiences and enhance outcomes for children, the childminder should develop quality assurance processes. This should include but is not limited to regularly gathering feedback from children and families and developing self-evaluation practice that informs continuous improvements for the service.

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).

### How good is our staff team?

**3 - Adequate**

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

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

The childminder displayed compassionate care which enabled children to feel safe and secure. They had built up positive relationships with families which enabled them to feel confident in discussing any concerns. All parents strongly agreed that they had a "strong connection with their childminder." Comments included: "Wilma is great as a person and childminder, very reliable and kind."

Parents spoke positively of the service they received and commented that they felt communication was a key strength of the childminder. Comments included; "Wilma is always accessible and has great communication. She keeps me well informed" and "Wilma's communication is great, she keeps me up-to-date with my child's care." This demonstrated the childminder's commitment to work in partnership with families.

Sine their previous inspection, the childminder had completed child protection training to increase their understanding of safeguarding children. During their last inspection, we asked the childminder to update their child protection policy, however this had not been actioned. The childminder should update their policy to reflect current legislation and any knowledge gained from training. This will support them to take appropriate action if a concern for the welfare or wellbeing of a child should arise.

During their previous inspection in 2023, we identified that the childminder would benefit from developing their understanding of child development. The childminder had not undertaken any self-directed study or professional learning relating to this. By improving their knowledge of child development, children will benefit from a childminder who had knowledge to plan more developmentally appropriate play and learning experiences and implement support strategies to enable children to progress and reach their potential (area for improvement 1).

## Areas for improvement

1. To support children's wellbeing and ensure they experience high-quality play and learning experiences that meet their needs, the childminder should undertake training or self-directed study relating to child development. The childminder should also consider ways to demonstrate the impact of any learning on their service, or how this has supported individual 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).

## 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 children's personal planning to show how their health, welfare and safety needs are to be met. They should also establish a process to involve parents/carers and older children in personal plan target setting and in the six monthly review.

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).

**This area for improvement was made on 3 August 2022.**

### Action taken since then

The childminder had not made sufficient progress with this area for improvement. They had not implemented personal plans for all children attending their setting. We signposted the childminder to the Care Inspectorate's Guide for providers on personal planning early learning and childcare to support improvements.

**This area for improvement had not been met.**

### Previous area for improvement 2

The childminder must improve systems to minimise the spread of infection. She should familiarise and implement the best practice guidance which can be found here: <https://hub.careinspectorate.com/media/1538/infection-prevention-and-control-in-childcare-settings.pdf>

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



This is to ensure that care and support is consistent with the Health and Social Care Standard (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 3 August 2022.**

#### Action taken since then

Resources for children were clean and accessible and the childminder advised they clean these after use with antibacterial wipes/spray and a cleaning log was maintained for the service. The childminder should now ensure that children are washing their hands at appropriate times, such as before eating.

As the practice guidance contained within this area for improvement is no longer available, to ensure clarity for the childminder we have reworded this within this report. See area for improvement 1 under How good is our setting?

### Previous area for improvement 3

In order to improve and progress the service, and secure good outcomes for children, the childminder should:

a) Undertake a detailed self-evaluation of their service using feedback from parents and children and the wellbeing indicators, in line with the Care Inspectorate's self-assessment format.

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 3 August 2022.**

#### Action taken since then

The childminder had not engaged in any self-evaluation or consulted children and families in the improvements of their service. We have signposted the childminder to the Care Inspectorate's Self-Evaluation for improvement – your guide to support improvements.

We no longer request that childminders submit a self-assessment. To ensure clarity for the childminder, we have reworded this area for improvement within this report. See area for improvement 1 under How good is our leadership?

### Previous area for improvement 4

To support children's health, wellbeing and develop the quality of play experiences, the childminder should undertake training and learning appropriate to her role. This could include, but not be limited to: child development and child protection. The childminder should also consider ways to demonstrate the impact of any training or self-study.

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" (HSCS 3.14) and "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 3 August 2022.

## Action taken since then

The childminder had undertaken child protection training. This supported the childminder's understanding in keeping children safe, however, had not positively impacted on the quality of children's play experiences.

The childminder had made some progress relating to this area for improvement. To ensure clarity for the childminder we have reworded this area for improvement within this report. See area for improvement 1 under How good is our staff team?

## 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?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
1.3 Play and learning	3 - Adequate
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?	3 - Adequate
4.1 Staff skills, knowledge and values	3 - Adequate

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