

# Fraser, Alison Child Minding

Inverness

**Type of inspection:**  
Unannounced

**Completed on:**  
13 March 2025

**Service provided by:**  
Alison Fraser

**Service provider number:**  
SP2005949052

**Service no:**  
CS2005101607

## About the service

Alison Fraser provides a childminding service from her home in a residential area near the centre of Inverness. The minded children make use of the living room, hallway, upstairs bedroom and upstairs toilet area. Children can access an enclosed outdoor play space within the back garden.

The childminder is registered to provide a care service for a maximum of six children at any one time under the age of 16, of whom no more than six are under the age of 12, of whom no more than three are not yet attending primary school and of whom no more than two are under 12 months. Numbers are inclusive of children of the childminder's family. The parts of the premises not to be used are the main bedroom.

## About the inspection

This was an unannounced inspection which took place on 11 March 2025 between 11:15 and 13:15. 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 one child using the service;
- reviewed online questionnaire feedback from five families;
- spoke with the childminder;
- observed practice and children's experiences; and
- reviewed documents.

## Key messages

- Children received warm and nurturing approaches to their care which supported them to feel safe, loved and secure.
- The childminder supported children's developing language and numeracy skills through play.
- Children benefited from access to some resources that reflected their interests and developmental stages.
- Most families reported positively on the communication received by the service and the care and support in place for their children.
- Arrangements for safe sleeping spaces should be reviewed and improved.
- The childminder should self-evaluate their service against best practice guidance, to support them to make improvements.

## 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?	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?

## 3 - Adequate

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

### Quality indicator 1.1: Nurturing care and support

The child in the service experienced warm, caring and nurturing approaches from the childminder. They listened to and observed the child's words, actions and emotions and were responsive to their needs. As a result, the child was confident and comfortable in the care of the childminder and strong attachments had been formed which supported their overall wellbeing. One parent commented: "Alison has from the first time of meeting her to the present day is always warm, welcoming and very sensitive to each child being an individual with individual needs; she knows how to bring out the best in them and they all love her. She provides a home from home in her care."

Personal planning information was in place for all children and contained important information that supported meeting children's needs. For example, details about their interests, health and likes and dislikes. The childminder knew children well which supported them to meet children's care needs. They spoke with families regularly about the individual needs of children and this approach supported effective communication and consistency of care. All families strongly agreed or agreed with the statement: 'I am fully involved in my child's care, including developing and reviewing their personal plan.'

The child in the service benefited from a calm, unhurried lunchtime experience. The childminder positioned themselves well to be able to support the child with the development of their own feeding skills and keep them safe. All snack and lunch items were supplied from families which limited the opportunities for children to be involved in the preparation of snack or lunch. We signposted Care Inspectorate's practice note, 'Keeping children safe: supporting positive mealtime experiences in early learning and childcare (ELC)', to support the ongoing review of mealtime experiences.

Although no children required medication at the time of the inspection, we reviewed the processes in place for this and found some gaps. Since their last inspection, the childminder had reviewed some systems in place to support the safe management of medication and had made some improvements to their policy. However, paperwork for permission to administer medication was still missing key details such as confirmation the first dose has been administered and symptoms which indicate administration would be necessary. We signposted the Care Inspectorate document 'Management of medication in daycare of children and childminding services' to support the childminder with the further review of systems for the management of medication. There was an area for improvement related to this made at the last inspection. This has not yet been met and will be continued (**see outstanding areas for improvement section**).

The childminder understood the importance of sleep for children's overall development. However, children were not always supported to sleep in a safe environment. Sleep arrangements for the child in the service was within a small zippable pop up travel pod which was positioned on top of an adult sized bed. These sleep arrangements did not take account of best practice guidance and posed an element of risk to children sleeping. Through discussions and sharing of information, the childminder agreed to review practice with regards to where children slept. This would ensure that children sleep in an area that is comfortable, not restrained, supports their privacy and dignity, and keeps them safe (**see area for improvement 1**).

### Quality indicator 1.3: Play and learning

The minded child had opportunities to lead their play and have fun in the childminder's home. They were happy and settled in the service and the childminder supported their play with some sensitive interactions. For example, when the minded child stacked wooden blocks, the childminder supported the child to identify the characteristics of the objects such as their colour, quantity and size. She also supported the child to investigate and create sounds with musical instruments. These experiences promoted the child's natural creativity and developing numeracy skills.

Some play experiences supported children's skills in literacy, numeracy and language. The childminder told us that children regularly enjoyed sharing books, songs and rhymes and mark making opportunities and there were resources to support these experiences on offer. Families commented positively about the experiences on offer for their children: "He has access to various age and stage appropriate toys, listening and playing along to music, building toys, interactive stories and play with puppets, he loves being with the other childminding children as well as hanging out with Alison's family and pets." and "Alison does a variety of things with the kids, from indoor play and learning, learning through songs/music and lots of crafts. She also takes them out in nature on walks and play parks. They also develop social skills with the other kids that come." As a result, children benefited from experiences which supported their development.

The childminder had a flexible approach to planning as they followed the child's interests and responded to their choices. The childminder used a daily diary to record details of individual children's learning experiences. Children's play experiences and progress was shared each day with families through the daily diary and at pick up and drop off times. Most families shared that they received good communication about their child's learning and development. Parents commented: "Alison's communication both verbally and via the communication book is always brilliant." and "Alison keeps us up to date through diaries and conversations and all that the kids do whilst in her care.". This demonstrated families were valued and respected as partners in their children's learning.

Children's learning, development and achievements were tracked through a developmental rainbow chart. This helped the childminder assess where additional support may be required for children and to share children's achievements with their families. This supported the childminder to understand the children's individual learning journey and provide appropriate challenges.

Children's play experiences were enhanced by regular visits to the local community. Visits to the local park, nearby cafes and local playgroup as well as meeting up with other childminders, helped to promote children's social skills and develop their confidence.

### Areas for improvement

1. To support children's wellbeing, the childminder should ensure that children are able to rest and sleep in an area that is safe and promotes each child's privacy and dignity.

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

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14).

## 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 indoor downstairs space was clean and comfortable with plenty of natural light and ventilation. Indoors, children had access to a living room, dining space and an upstairs bathroom and bedroom area. The childminder had recently taken steps to improve the storage of play resources to ensure they were safe and accessible for children. As a result, children benefited from an environment where they could access resources easily and safely.

The minded child benefited from access to some resources that reflected their interests and developmental stages. These included small world resources, transport toys, building blocks and stacking objects and they enjoyed playing with the musical instruments on offer. There were some loose parts available such as coloured buttons, wooden rings and building blocks. We discussed introducing more loose parts and natural items to the resources available, to support children's developing natural curiosities. We signposted best practice guidance 'Growing my potential Promoting safe, responsive, nurturing care and learning experiences and environments for babies and young children aged 1 and 2 years' to support the childminder with the ongoing development and review of the learning environment for younger children.

Children's health and wellbeing was supported with regular opportunities for outdoor play. They participated in daily walks in the community as well as visiting the local playpark. The children had access to the childminder's enclosed back garden which contained a range of resources including some loose parts and an area to investigate water. This helped to promote children's creativity and curiosity. The outdoor space also provided areas to climb, use wheeled toys and run which supported children's physical development.

Effective infection prevention and control measures were in place. Children were encouraged to wash their hands at key times and effective nappy changing and cleaning procedures meant that the spread of infection was kept to a minimum. This contributed to a safe environment for children.

## 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

Aims and objectives, and policies were shared with families when they started using the service. The childminder had recently reviewed and updated some of the policies to provide families with up to date information. We offered guidance to the childminder and signposted best practice guidance to support the further review of some policies to ensure all information was current, and reflected the service offered, giving clear expectations to parents about the service.

The childminder provided a warm and welcoming service, helping children feel loved, safe and secure. They engaged with families and children, and asked for feedback about the service through informal chats and questionnaires. This helped the childminder to reflect on the needs of the children and make changes to support them. The childminder provided opportunities for meaningful communication with families. Children's play experiences and achievements and other important information was shared with parents

through a variety of methods. These included through a daily diary, online messages and face to face discussions. Some families commented: "We have open discussions and are asked for feedback of how things are working for us." and "Any feedback or involvement would always be welcomed and taken onboard. Communication is good." This helped the childminder to maintain clear and effective communication which supported families to feel valued and respected.

Children's experiences and outcomes were not yet benefiting from effective self-evaluation to reflect on progress, to identify strengths and areas for improvement within the service. However, the childminder demonstrated some reflective and self-evaluative practice of aspects of the service. For example, the childminder had made improvements to the nappy changing arrangements and to the accessibility and safety of resources. This supported positive outcomes for children. We advised they should continue to reflect on their practice, considering what is working well, how they know, and what can be improved on. An area for improvement made at our last inspection remains in place (**see section, outstanding areas for improvement**). We signposted self-evaluation tools including: 'A quality framework for daycare of children, childminding and school-aged childcare' and the Scottish Childminding Association self-evaluation toolkit to support the childminder to begin to identify areas for development and plan for improvement.

## 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 minded child experienced warmth, kindness and compassion in the responsive interactions we observed with the childminder. This supported the development of strong relationships with the children. Overall, the childminder understood what children needed to help them grow and develop, and responded to the child's needs in a caring manner. This helped the child to build good attachments and positively supported their wellbeing. One parent commented: "Alison provides consistent, nurturing care for my child. She is understanding of different personalities and has supported my youngest child in his social interactions with others despite their shy and reserved nature. I feel I can approach Alison about any worries or concerns I may have and she is always empathetic and supportive."

The childminder recognised the importance of maintaining their skills and knowledge in keeping children safe and protected. They had attended core training in food hygiene as well as practical paediatric first aid. The childminder had a good knowledge of child protection procedures and understood the appropriate steps to take if they had a child protection concern. The childminder had supportive links with another local childminder. This provided opportunities for sharing ideas, developing knowledge and reflecting on practice, contributing to positive outcomes for children.

The childminder was a member of the Scottish Childminding Association and had recently accessed further professional learning through this membership to improve their skills and knowledge to enhance outcomes for children. We discussed ways the childminder could document the impact of professional learning on children's experiences and how further opportunities could be accessed, which would support the service development priorities.

## 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 ensure children are kept safe. The childminder should review the systems in place to support the safe management of medication. This should include but is not limited to:

- a) reviewing medication permission forms to ensure all information required is included and follows best practice guidance as stated in the Care Inspectorate publication 'Management of medication in daycare of children and childminding services'; and
- b) implementing a clear policy for the safe storage and administration of medicine which is accessible to families.

This is to ensure 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 area for improvement was made on 18 March 2024.**

#### Action taken since then

The childminder had reviewed some systems in place to support the safe management of medication. However, further work was needed to address gaps in these systems. There is further information related to this within the inspection findings for quality indicator 1.1 'How good is our care, play and learning?'.

The area for improvement has not yet been met and will be continued.

#### Previous area for improvement 2

To help ensure children are cared for in an inviting, accessible and safe environment the childminder should review and improve the storage of resources and play equipment indoors.

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

'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.' (HSCS 5.22).

**This area for improvement was made on 18 March 2024.**

#### Action taken since then

The childminder had reviewed the storage arrangements for resources indoors. Resources were now stored in a safer and more accessible way. This supported children's safety and promoted their independence and choice in play.

This area for improvement has been met.



### Previous area for improvement 3

To keep children safe and healthy and to promote their wellbeing, the service should improve infection prevention and control measures. This includes but is not limited to ensuring:

- a) nappy changing and toileting areas are clean and hygienic;
- b) resources to support nappy changing practices are clean and free from damage; and
- c) nappy changing practices follow best practice guidance.

This is to ensure that infection prevention and control practices are consistent with the Public Health Scotland document: Health protection in children and young people settings, including education.

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 18 March 2024.**

#### Action taken since then

Nappy changing procedures followed best practice guidance which supported children's health and safety. The childminder had reviewed the systems in place for nappy changing to ensure nappy changing and toilet areas were clean and hygienic. Some items to support nappy changing, including the damaged changing mat had been replaced. This helped to minimise the risk of the spread of infection.

This area for improvement has been met.

### Previous area for improvement 4

To identify areas for improvement and to enhance outcomes for children, the childminder should make use of best practice guidance. This should include but is not limited to:

- a) reflecting on, and improving the service provided.

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 a robust and transparent quality assurance processes.' (HSCS 4.19).

**This area for improvement was made on 18 March 2024.**

#### Action taken since then

The service was in the early stages of using best practice guidance to reflect on the current provision and make improvements. Some improvements had been made to nappy changing processes and the safety and accessibility of resources for children which were identified at the last inspection. However, there were limited systems in place for the childminder to identify areas for development and plan for improvement to support positive outcomes for children. For example, the area for improvement around the safe administration of medicine had not been met and suitable arrangements for children's sleep had not been identified or addressed.

This area for improvement has not yet been met and will be continued.

## 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	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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