

SJ Childminding Child Minding

Aberlour

Type of inspection:
Unannounced

Completed on:
25 March 2025

Service provided by:

Service provider number:
SP2022000220

Service no:
CS2022000330

About the service

SJ childminding provides a childminding service from their property in a rural town. The childminder is registered to provide a care service to a maximum of five children at any one time up to 16 years of age; of whom no more than three are not yet attending primary school and of whom no more than one is under 12 months. Numbers include the children of the childminder's family/household.

Children are cared for in the lounge adjacent to the kitchen/diner and there is downstairs toilets. A bedroom upstairs is used for children that need to sleep. There is a fenced garden to the rear of the property that has a lawn.

About the inspection

This was an unannounced inspection which took place on 18 March 2025 between 10:30 and 13:30. The inspection was carried out by one inspector from the Care Inspectorate. A further visit took place by an inspector from the Care Inspectorate on 25 March 2025 between 12:00 and 12:30.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- communicated with four parents
- spoke with the childminder
- observed practice and daily experiences
- reviewed documents.

Key messages

- Children had built positive relationships with the childminder, which had been helped by the warm and caring approach of the childminder.
- Children clearly enjoyed being able to move around safely and independently and making choices in their play.
- Children benefited from being cared for in a comfortable, clean, well furnished and homely environment.
- The childminder had exceeded the number of children to be cared for on the registration certificate. During the course of the inspection visits the childminder had taken appropriate steps to reduce the number of children they were caring for, to support children's safety and welfare.
- To support enhanced outcomes for children the childminder should identify and undertake training/development linked to their own learning needs to supports children's experiences.

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?	2 - Weak
How good is our setting?	3 - Adequate
How good is our leadership?	2 - Weak
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?

2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

1.1 Nurturing care and support

Children had built positive relationships with the childminder, which had been helped by the warm and caring approach of the childminder. Children were clearly comfortable in each others company, there was lots of smiles. At times it was difficult for the childminder to be responsive to each of the child's individual needs due to the excessive numbers of young children that were attending the service. When two very young children sought physical comfort and reassurance from the childminder, it hindered the childminder's ability to engage and support the overall wellbeing of the remaining children (see requirement 1 under 3.1 of this report).

Suitable arrangements were in place for personal care that considered privacy and dignity of the children. Children's emotional security and overall development was supported through suitable and sensitive arrangements for sleep. Although a parent told us that they were unsure that their child got the sleep that they needed. To help ensure that sleep routines reflected individual needs and family wishes we advised the childminder to ensure that these were clearly recorded in the child's personal plan and kept under review.

Children enjoyed sitting and eating their lunch together and it was an unhurried event, food choices reflected current guidance. However, there was not enough seating for all of the children, a child was somewhat anxious and unsettled as they having to wait until there was a space. The childminder's ability to remain focused on each of the children, respond to any needs/emergencies and to promote close attachment, were impeded by the excessive numbers of children. We suggested that water bottles were readily accessible to all of the children, particularly at meal times to enable them to remain hydrated.

The childminder shared information with families on a daily basis at handovers and also used regular electronic communication that helped to promote consistency of care to the children. Families had been involved in the creation of the child's personal plan, it contained key information such as health needs, likes/dislikes and interests. The childminder was introducing a new format for the child's personal plan and parents were in the process of completing and returning them. The childminder considered it would be beneficial for the purposes of recording and ease of access to information. The majority of parents told us that they did not consider that they were fully involved in their child's care, including developing and reviewing the personal plan. We discussed the benefits of involving parents in a discussion and seeking clarification about the information contained within the personal plan to help promote continuity of care (see area for improvement 1).

Chronologies, that helped with the identification of children's needs, and directed action to support children well, were not being used by the childminder. We discussed this with the childminder and referred them to guidance to help support their practice. Ref: Practice guide to chronologies - [hub.careinspectorate.com](https://www.careinspectorate.com/hub/practiceguide/chronologies)

1.3 Play and Learning

Children were able to lead their play and learning from resources that were rotated by the childminder. Children enjoyed exploring a box that had a mix of items such as push along toys, cars, shape sorters and musical toys. Some children took turns in filling a paper gift bag with a variety of objects before tipping them out and starting again. The childminder told us how the children had enjoyed creative play with a large paper box the previous week, decorating and painting it.

Children clearly enjoyed being able to move around safely and independently. They were engaged for a short time looking at different books together. The childminder invited them join in with story, they sat together and talked about the pictures they were seeing. The childminder modelled words that supported the children's language skills.

To enable children to have opportunities for creative and exploratory play we discussed the benefits of sensory and tactile play materials. A large dolls house was easily accessible to the children in the lounge but had limitations in resources to excite role play and children's imagination. Many play resources were plastic, we discussed the benefits of textured materials such as wood and real items such as small pots, pans and spoons and containers. They provided opportunities to repeat and practice different actions during play, that helped children's brain development. Children having wider access to play resources especially open ended (no fixed purpose), mark making/drawing both indoors and outdoors would promote choice, spontaneous play and exploration (see area for improvement 2).

To assist the childminder with the evaluation of children's progress we discussed the benefits of sharing and discussing children's development and progress with parents, alongside the review of the personal plan. A few parents told us that they would like to hear more about the activities their children had been doing and what they had been up to.

Children's opportunities for play and learning were enhanced through some connections with their own community such as play parks and woodland walks.

Areas for improvement

1. To support children's wellbeing and development, the childminder should ensure:

- a) personal plans reflect children's current needs
- b) the information in the personal plans is used effectively to meet each child's needs
- c) families are involved in regularly reviewing their child's personal plan

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); and
'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

2. To further enhance children's play experiences that help to develop their skills language, literacy and numeracy and engage their imagination. The childminder should promote children's choice and extend

creative approaches indoors and outdoors that engage children's imagination.

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

'As a child I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

This is to ensure children's play and learning is consistent with the Care Inspectorate and Scottish Government documents:

- a) A quality framework for daycare of children, childminding and school-aged childcare
- b) Growing my potential
- c) Realising the ambition: being me hub.careinspectorate.com
- d) Schemas: Learning through play - education.gov.scot

How good is our setting?

3 - Adequate

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

Children benefited from being cared for in a comfortable, clean, well furnished and homely environment. It helped to give the message to children that they mattered. Plenty of natural light contributed to children's psychological wellbeing.

Children did not wash their hands prior to eating that so that their wellbeing was supported. We discussed the benefits of robust infection control practice that helped to minimise the spread of infection. Ref: Health protection in children and young people settings, including education - Public Health Scotland (see area for improvement 1).

Children were supported to enjoy play experiences that also enabled them to move around freely. The childminder had identified and removed risks to children within the home. The childminder spoke about their practice to support the safety of children out of the home environment and their use of safety reins for the children. Where there may be specific risks to the children, we discussed the benefits of individual risk assessments. We referred the childminder to the SIMOA keeping children safe practice notes - hub.careinspectorate.com

The indoor and outdoor environments were sensitively structured and took account of the children's stages of development and learning. The lounge enabled children to enjoy lots of floor play and sofa's enable them to rest and enjoy quieter activities such as books/stories. The small fenced garden was mostly lawn and easily accessible to the children. The childminder advised that it was an area they intended to regenerate, the mud kitchen and some more natural play materials needed replacing. We discussed the benefits of natural and open ended resources for such purposes. Ref: Out to play, section 9: childminding settings and Space to grow and thrive - hub.careinspectorate.com

Areas for improvement

1. To support the safety and wellbeing of children the childminder should consistently implement robust infection control practices.

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) and
'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

How good is our leadership?

2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

The childminder had policies that supported them in running the service and provided a foundation for evaluation of the setting. We suggested that having a programme of review would help to ensure that they continued to reflect the provision of the setting, and aligned with good practice guidance.

The childminder communicated with parents at handovers and also used a software package to share information with parents. Parents considered that they had a strong connection with the childminder and that they were easy to approach. The childminder invited them to share their views, they were often asked about activities for the children.

To enable a consistent and manageable programme of improvement that was sustained, we discussed the benefits of a concise format for recording changes as they occurred and noting the impact of such changes. We also referred the childminder to the early learning and childcare improvement programme for childminders - hub.careinspectorate.com (see area for improvement 1).

We also discussed notification reporting to the Care Inspectorate and referred the childminder to the guidance on the Care Inspectorate hub.

At our first visit we found the childminder to be over the numbers of children stated in their conditions of registration. A serious concern letter was issued to them. This set out a requirement for the childminder to take appropriate action to ensure they adhered to their conditions of registration. The childminder responded promptly and we were satisfied that suitable actions had been taken to appropriately meet the needs of children. The requirement was met within the given timescales. (See Requirement 1 under 'What the service has done to meet any requirements we made at or since the last inspection').

Areas for improvement

1. To support development of the service the, childminder should consider formal opportunities for children and families to share their views and influence changes that lead to improvement.

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

'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7); and
'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This is to ensure that continuous improvement is consistent with the Care Inspectorate document:

- a) A quality framework for daycare of children, childminding and school-aged childcare.
- b) How we support improvement programme - [childminding -hub.careinspectorate.com](https://hub.careinspectorate.com).

How good is our staff team?

3 - Adequate

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

The childminder's warmth and kindness enabled children to feel loved and secure. They interacted in a sensitive and responsive way to promote children's independence and confidence.

The childminder was a member of a childminding organisation and utilised some of their documents for the purposes of childminding. It also helped to keep them informed of resources and provided professional support.

The childminder had completed core training such as first aid and child protection to support their skills and knowledge. There had been less opportunity for them to be familiar with and utilise early years good practice guidance and documents that also supported practice and their development.

We also discussed the benefits of keeping a record of training with the childminder, that helped to identify how they had used their learning and development to improve their practice and experiences for children and families (see area for improvement 1).

Areas for improvement

1. To support enhanced outcomes for children the childminder should identify and undertake training/development linked to their own learning needs. Improvement resources and good practice guidance should also be used for such purposes.

This is to ensure that 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 and are able to reflect on their practice (HSCS 3.14).

This is to ensure the childminder's practice and learning is consistent with the Care Inspectorate document:

A quality framework for daycare of children, childminding and school-aged childcare
hub.careinspectorate.com

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

Requirements

Requirement 1

By 24 March 2025, you the provider, must ensure that the conditions of your registration are adhered to, to appropriately meet the needs of children. To do this, the provider must, at a minimum:

- a) Ensure the maximum number of children attending the service does not exceed the number stated on the registration certificate.
- b) Keep accurate records of children's attendance. Ensuring they are updated throughout the session to reflect the children present at all times.
- c) Provide evidence that action has been taken to ensure you are working within the conditions of your registration.

This is in order 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 which state that,

'I use a service and organisation that are well led and managed' (HSCS 4.23).

This requirement was made on 19 March 2025.

Action taken on previous requirement

The childminder had taken appropriate action by 24 March 2025 to ensure that the conditions of their registration were adhered to and that the numbers of children attending did not exceed the number stated on the certificate. They had also put systems in place to keep records of children's attendance.

Met - within timescales

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?	2 - Weak
1.1 Nurturing care and support	2 - Weak
1.3 Play and learning	3 - Adequate

How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate

How good is our leadership?	2 - Weak
3.1 Quality assurance and improvement are led well	2 - Weak

How good is our staff team?	3 - Adequate
4.1 Staff skills, knowledge and values	3 - Adequate

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