

# Dunbar, Jane Child Minding

Inverness

**Type of inspection:**  
Unannounced

**Completed on:**  
20 March 2025

**Service provided by:**  
Jane Dunbar

**Service provider number:**  
SP2003907989

**Service no:**  
CS2003008410

## About the service

Jane Dunbar is registered to provide a care service to 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.

The service is provided in a terraced house in a residential area in Inverness. Children have access to an enclosed front garden, living room, kitchen and bathroom facilities. The childminder's home is located close to local primary schools and parks.

## About the inspection

This was an unannounced inspection which took place on 19 March 2025 between 3.00pm and 4.30pm. The inspection was carried out by two inspectors 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 two children using the service and one of their family;
- reviewed feedback received from one family;
- spoke with the childminder;
- observed practice and daily life; and
- reviewed documents.

## Key messages

- The childminder had developed strong relationships with children and their families which supported children to feel safe and secure.
- The childminder should develop processes to ensure that personal information is recorded and used effectively, to support the childminder to meet children's individual needs.
- Effective infection prevention control procedures were in place to protect children from the possible spread of infection.
- The childminder should self-evaluate her service against best practice guidance, to support her to make improvements.
- The childminder must complete training in first aid, as gaps in their skills and knowledge had the potential to put children at risk.

## 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?	2 - Weak

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 childminder supported the child in her care with warm and nurturing approaches. They had developed good relationships with minded children and their families. The childminder spoke about what was important to each child in their care. They were attuned to the children's needs, and was able to read their cues, providing cuddles to support emotional wellbeing. As a result, children felt safe and secure.

The childminder appeared to know children well which supported them to meet their care needs. Informal communication systems were in place with families. This was done through daily discussions and text messages. This supported continuity of care and included parents in their child's day. However, effective systems were not in place to ensure the childminder was kept up to date with children's changing needs. As a result, we were not confident the childminder had accurate and up to date information for all children. The childminder should ensure they record significant information, and reviews it regularly with families, to support them to continue to provide children with the right care and support (see area for improvement 1).

The childminder supported children and families when they needed extra support. For example, they used their skills and knowledge to support children with healthy eating, or supported children to develop their resilience and confidence in trying out new experiences. One parent told us "(the childminder) has put so much in from toilet training to eating healthy food, she has taught my child so much". As a result, children's overall wellbeing was being supported.

### Quality indicator 1.3: Play and Learning

Children were observed to be happy and enjoying their time with the childminder. The childminder was cheerful, smiley and promoted a fun ethos. They were relaxed and playful in their interactions with children. For example, they joined one child in pretend play, making food. Although the childminder played alongside the child, they needed to interact more skilfully to ensure children were widening their skills and consolidating their learning through play. Some interactions were not always consistent in engaging or supporting children's play through skilled, open-ended questioning. This reduced opportunities to support early language development. The childminder followed the minded child's cues around where they wanted to play, moving between the garden and the living room. This supported the minded child to lead their own play.

Children's interests were extended by using community resources. Going to local parks meant they benefited from exploring their local area and the wider environment. This contributed to children having opportunities to be active and lead a healthy lifestyle.

The childminder had an informal approach to planning and was responsive to children's changing interests and needs of the children attending. However, there was no system in place to effectively assess and track observations to support children's progression. We discussed how the childminder could improve upon meeting children's needs by some planning and recording of next steps. This would assist in providing challenging and stimulating experiences to help children reach their potential.

## Areas for improvement

1. To support children's health and wellbeing, the childminder should ensure all children have a personal plan that details their individual needs, choices and progress. This information should be used by the childminder to care for and support children effectively. Plans should be reviewed by parents to reflect children's current needs.

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

'My personal plan (sometimes referred to as my 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 several strengths impacted positively on outcomes for children/people and clearly outweighed areas for improvement.

The childminder's home was clean and tidy, offering a warm, home from home atmosphere for the children in her care. Children were able to access the childminder's living room where they could play and rest. This supported them to feel comfortable, relaxed and at home. Children could lead their play, choosing to play in the garden or the childminder's home. Some resources offered supported children's developing literacy and numeracy skills, for example, books, puzzles and mark making resources. The childminder could now introduce more real life resources and open ended materials to support children's learning.

The childminder was aware of the need to keep children safe when they were playing in the garden, remaining outside with them while they played. She demonstrated a good understanding of the potential risks when taking children on trips, such as, ensuring parks were suitable for the age of children, and being aware of boundaries and exits. This contributed to keeping children safe.

Children were protected from the possible spread of infection as the childminder followed effective arrangements for cleaning and infection prevention control. They had developed procedures for keeping children safe around pets. Children were supported to wash their hands after interacting with the childminder's pets, and were supervised at all times by the childminder when pets were present. This contributed to children playing and learning in a safe environment.

### How good is our leadership?

**3 - Adequate**

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

The childminder valued the feedback of children and families, which allowed her to adapt her practice for individual children to meet their needs. The childminder received informal feedback from families when they dropped off and collected children. We suggested how she could gain feedback about wider aspects of her service, such as around play and development, to support her to further develop her service.

The childminder had made limited progress since the last inspection. For example they had begun to review some of their policies to make sure they contained the right information for parents. We recommended sharing these as they were reviewed, with families, to ensure they were aware of any changes and had opportunity to comment. However, overall, the pace of change was too slow, which was resulting in aspects of the service which were not in line with best practice guidance and had the potential to impact negatively on outcomes for children.

There were no systems in place for the childminder to evaluate the quality of the service and identify areas for improvement. We discussed the benefits of using quality audit tools such as, 'A quality framework for day-care of children, childminding and school-aged childcare' in order to support self-evaluation. This was a previous area for improvement and remains unmet (see area for improvement 2 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?'). The childminder should now submit an action plan to the Care Inspectorate, detailing how they will address the areas for improvements identified within this inspection report. The Care Inspectorate will assess the quality of the action plan and follow this up at the next inspection.

## How good is our staff team?

**2 - Weak**

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

Children were listened and responded to with care, nurture and compassion. As a result, children had developed strong relationships and attachments with the childminder. They were supported through responsive care where warm, kind interactions from the childminder helped them to feel valued and secure.

The childminder had not recently completed any professional development which had a positive impact on their practice. They had not undertaken any recent training in core areas, such as first aid and child protection. This had resulted in gaps in the childminder's skills and knowledge, which had the potential to put children at risk. We made a requirement around this at our inspection in February 2024 which has been restated (see requirement 1 under 'What the service has done to meet any requirements made at or since the last inspection?')

The childminder had not kept up to date with current guidance and best practice through professional reading, or wider training. As a result, she was not using best practice and relevant evidence to improve the quality of children's experiences. The limited opportunities for ongoing development had resulted in gaps in professional knowledge and skills, which impacted negatively on the quality of children's experiences. The childminder now needs to identify more time to engage with some of these documents in order to shape and inform their practice.

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

### Requirements

#### Requirement 1

By 30 June 2024, to improve outcomes for children and ensure they are safe, the provider must, at a minimum:

a) complete training in paediatric first aid.

This is in order to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011 (SSI 2011/2010) 4.(1)(a) make proper provision for the health, welfare and safety of service users.

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).

We have extended the timescale for meeting this requirement to 31 July 2025.

**This requirement was made on 27 February 2024.**

#### Action taken on previous requirement

The childminder had not completed training in paediatric first aid at the time of this inspection to ensure children were safe.

**Not met**

## 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 promote a safe environment for children, the childminder should review and make improvements to practice around children interacting with pets. This should include, but is not limited to:

- a) effective supervision when pets and children are together; and
- b) infection prevention and control measures.

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 5.19).

**This area for improvement was made on 27 February 2024.**

#### Action taken since then

The childminder had put effective processes in place to ensure that children experienced a safe environment. This included appropriate supervision around pets and infection prevention measures, to protect children from the possible spread of infection. This area for improvement has been met.

#### Previous area for improvement 2

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) reflect on, and make improvements in 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 27 February 2024.**

#### Action taken since then

The childminder had made no progress in making use of best practice guidance to support them to reflect on, and make improvements in the service provided. This area for improvement has not been met, and remains in place.



## 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	4 - Good
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?	2 - Weak
4.1 Staff skills, knowledge and values	2 - Weak

## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.