

# G4 Minders Child Minding

Glasgow

Type of inspection:

Unannounced

Completed on:

29 May 2025

Service provided by:

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Service provider number:

SP2014985802

**Service no:** CS2014324923



## Inspection report

### About the service

G4 Minders childminding service is provided from the childminder's home in the Yoker area of Glasgow. The service is close to local schools, nurseries, shops, parks, woodland, public transport links, and other amenities.

The children have access to the main living room space, play room, dining room, enclosed back garden, and bathroom area, all on the ground floor.

The childminder is registered to care for a maximum of six children at any one time up to 16 years of age, of whom no more than three are not yet of an age to attend primary school and of whom no more than one is under 12 months. At the time of inspection, there were two minded children being cared for.

## About the inspection

This was an unannounced inspection which took place on 28 May 2025. Feedback was provided to the childminder on 29 May 2025. 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 children using the service
- spoke with families of children using the service
- spoke with the childminder
- reviewed four completed questionnaire
- observed practice and daily life
- reviewed documents.

## Key messages

- · Children were happy and having fun.
- The childminder had developed positive relationships with children and families.
- Children benefitted from a wide range of resources that supported their development.
- Children benefitted from a skilled childminder, who was committed to their continued professional development.
- Parental feedback about the service was very positive.
- The childminder should continue to develop their self-evaluation and improvement planning.
- · Personal plans should be improved.

## 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 key question 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.

The childminder was warm, caring and nurturing in their approach. Strong relationships had been established between children, families and the childminder. Children were cared for with compassion and in line with their personal preferences and routines. Parents commented positively on the relationship they and their child had with the childminder. Comments included:

"My relationship with the childminder is a strong one because I get along with them so well concerning the wellbeing of my child."

"My child minder used to give daily feedback, areas of improvement, appreciation, and tasks to work together. Put together all these she used to communicate with us in great manner."

Children benefitted from caring and sensitive interactions that supported their rights, dignity and wellbeing. For example, the childminder sensitively explained to children how they needed changed after playing with water, as they would be comfortable when in dry clothing. This supported children's wellbeing.

The childminder had a medication policy in place, and a good understanding of the best practice guidance. We were satisfied medication would be administered and stored safely if a child required this.

The childminder had a safe sleep practice and planned to take part in training to support safe sleep routines for children. There was a travel cot and bedding available for children to sleep. One parent said, "Childminder accepts the child's requirement of rest, relax and sleep based on the child's mood and body nature." We concluded children could sleep and rest safely, in line with their needs and parental wishes.

Families were providing their own snacks and meals for their children. Snacks and meals provided were nutritious for children, supporting their health. Mealtimes were a positive nurturing experience. The childminder supervised them as they ate, giving them support as needed with feeding. We observed young children to be eating foods that were not appropriately prepared to prevent choking. Once prompted, the childminder cut the foods to serve to children. We signposted the childminder to Scottish Government best practice guidance 'Setting the Table' for food preparation to support children's safety.

Personal plans were in place for all children. They consisted of enrolment forms that recorded the basic health, safety and wellbeing needs of children. We observed the childminder knew children well and met their individual needs. When sampling plans, we found they were not always updated regularly and did not always reflect the knowledge the childminder had of individual children. We acknowledged the childminder was planning to change the format of personal plans. We agreed the new format would capture children's individual needs and preferences if completed accurately. During inspection feedback, the childminder shared they had started to complete the new plans in partnership with families. This was a positive step to ensure children's personal plans are robust (see area for improvement 1).

## Quality indicator 1.3: Play and learning.

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

Children were happy, had fun and were engaged in play at the childminder's setting. The childminder was responsive to their choices and interests, offering support and encouragement. The childminder was engaged with the children throughout our visit. They gave children time to respond and knew when to step in and when to step back from play. One person said, "My childminder is so kind and always makes my times there happy." This meant the childminder has developed positive, nurturing relationships with children and families.

The childminder understood child development and how play opportunities were needed at times depending on the age of the children. For example, one child had fun and developed their fine motor skills and concentration during a threading bead experience. The childminder engaged the younger child with a different age-appropriate play opportunity, giving support to both children throughout. The childminder role modelled and guided the younger child but also allowed them to make their own choices, to support their right to play.

Children had good opportunities to play outdoors. This included using the bikes, slides, various ride on toys, and other learning opportunities outdoors including threading, water play and bubbles. This supported children's wellbeing and physical development.

Children had access to age and stage appropriate resources which they were able to choose, with help from the childminder. Resources available included, arts and crafts materials, books and construction toys. This facilitated opportunities to develop children's imagination, fine motor, and language and vocabulary skills. We discussed with the childminder that organising resources in a way that would allow the children to self-select could support independence, choice and make them feel valued, as well as introducing more natural resources to develop understanding of different materials, texture, and weight.

Children benefitted from opportunities of regular outings to the local community. They regularly visited the supermarket, local library and surrounding parks. This developed positive community links and supported the children's learning away from the setting. This helped the children's understanding of the world around them, whilst developing their life and social skills.

#### Areas for improvement

1. To ensure children's health, wellbeing and safety needs are met, the childminder should review children's needs and update personal plans every six months, or before if information changes.

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 'My needs as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

## 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 childminder's home was well furnished and had plenty of natural light and ventilation through open doors and windows. Children had access to the main play room, a well-resourced secure outdoor area, lounge and dining area. This allowed plenty of room for children to play, learn, relax and rest.

The childminder was aware and responded to risk appropriately. For example, they supported children to use the slide outdoors by taking their hand and standing closely to supervise them. Risk assessments the childminder had in place were updated regularly to detail the hazards and reflect the mitigations and measures in place to minimise risk to children. All parents who provided feedback agreed or strongly agreed with the statement: "My child is cared for in a safe, secure and well-maintained environment." We concluded the environment was effectively maintained so the children could enjoy challenging fun play experiences safely.

The childminder understood children should always be accounted for while in the service, in the outdoor garden, and on trips and outings. Through discussion with the childminder, it was clear that they were aware of a range of ways to keep children safe. However, we suggested keeping a register would support the childminder to account for children and track attendance.

Overall, daily infection prevention and control (IPC) was managed well. The main play spaces were clean, good handwashing practice took place, children's personal care items were stored safely, and the childminder cleaned surfaces before and after children ate. In contrast, we identified some IPC practices that should be improved. For example, some areas including highchairs needed deep cleaning to remove engrained dirt. Children should be cared for in a setting with effective IPC to prevent the possible spread of germs and infection that can cause children to become unwell.

## How good is our leadership?

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 3.1: Quality assurance and improvement are led well.

The childminder was a member of the Scottish Childminding Association (SCMA) which is a professional organisation providing support, training, and information to childminders in Scotland. They had implemented SCMA paperwork to support all aspects of their childminding service, including children's enrolment forms, consent from families, and written procedures. This supported the childminder to provide quality care play and learning for children and families.

The childminder ensured all parents knew how their children had spent their day. They shared regular communication with parents through an online app and chatted with families at collection and drop off times. We reviewed the communications the childminder had sent and found these to detail news for the service, alongside photographs and observations of children's play. We concluded that the childminder had fostered good relationships with families, and they were being kept actively informed and consulted on children's experiences and the life of the childminding service.

The childminder had recently involved families and children by encouraging them to share their views and suggestions. This involved sending out questionnaire surveys to parents. The questionnaires were used to support them to evaluate and plan improvements. For example, they had met with children to plan summer outings, and met with parents to share the play spaces and experiences that children participated in. This meant people felt their opinions were listened to, valued and used to plan improvements.

The childminder was at early stages of using self-evaluation and improvement planning to reflect and plan improvements to their practice. They had used SCMA tool kits to self-evaluate their practice. This resulted in some positive changes to practice. For example, policies and procedures had been updated to ensure they were current and appropriate for the people using the service. We concluded children and families benefitted from a childminder who was reflective and keen to make continuous improvements that support high-quality care play and learning for children.

## 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 childminder had clear aims and objectives that had been created in partnership with families and children. An aims and objectives booklet had been created and shared with families. The booklet included a variety of policies, such as child protection, medication, settling in, and an emergency plan if needed. These policies were clear and concise to ensure they were understood by all families. Additionally, parents provided positive feedback about the childminder's approach. Comments included:

"Everything doing so far is extraordinary in great compassion and dedication."

"My child is happy to spent time with his childminder and feels safe and comfortable at all times."

We concluded the childminder shared their aims and objective well with families, supporting them to work together to provide quality outcomes for children attending the service.

The childminder was actively seeking learning opportunities to support their professional development and better outcomes for the children attending the service. This included attending a variety of different courses that covered many early years themes, such as children's rights and participation, adverse childhood trauma awareness, child led planning, child protection and first aid. As a result, the childminder had developed a good understanding of how to support children's interests, play ideas, care, and rights. For example, the childminder had established strong relationships with children, they were happy in the

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childminder's care and having fun. This contributed to the childminder providing safe, quality care play and learning for children.

The childminder had a good understanding of the legal obligation to manage the service well and keep children safe. This included children's personal information being stored safely in line with government data protection regulations (GDPR). We reviewed evidence the childminder had updated parents around the GDPR and how they would store information. This demonstrated a commitment to keeping children and families appropriately informed about their rights and consulted on matters that affected them.

## 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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