

Jaclyn's Childminding Child Minding

Stirling

Type of inspection:
Unannounced

Completed on:
2 May 2025

Service provided by:
Jaclyn Gray

Service provider number:
SP2017988969

Service no:
CS2017355732

About the service

Jaclyn's childminding provides a childminding service from their property in a quiet residential area of Stirling. When working alone, the childminder is registered to provide a care service for a maximum of six children up to 16 years of age; When working with the named assistant, they can care for a maximum of eight children up to 16 years of age. Numbers are inclusive of the childminder's own children. At the time of our inspection, 14 children were registered with the service.

The service is close to local primary schools, shops, parks and other amenities. The children are cared for in the living and upstairs bathroom. Children also have access to an enclosed rear garden, however, this was not accessible to children on the day of inspection.

About the inspection

This was an unannounced inspection which took place on 1 and 2 May 2025 between 11:45 and 16:30. One inspector carried out the inspection.

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.

To inform our evaluation we:

- spoke with five children using the service
- received seven completed questionnaires from parents and carers using the service
- spoke with the childminder and their assistant
- observed practice and daily life
- reviewed documents.

As part of this inspection we undertook a focus area. We have gathered specific information to help us understand more about how services support children's safety, wellbeing and engagement in their play and learning.

This included reviewing the following aspects:

- staff deployment
- safety of the physical environment, indoors and outdoors
- the quality of personal plans and how well children's needs are being met
- children's engagement with the experiences provided in their setting.

Key messages

Children experienced warm, caring interactions, which supported their overall wellbeing.

Children's privacy and dignity was not always supported. As a result, children's rights to be safe and protected from harm were not met.

Risk assessments were not effective in keeping children safe. They did not fully consider potential risks or identify mitigations to minimise the risks to children.

Children's experiences were not always well planned for. Opportunities were missed to provide play and learning that reflected their individual needs and curiosities in a meaningful way.

The childminder and the assistant did not always communicate well to ensure children were effectively supervised.

The childminder and assistant supported each other to manage tasks and care for children. They shared advice throughout the day to promote positive 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?	2 - Weak
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?

2 - Weak

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

Quality Indicator 1.1: Nurturing care and support

Children's privacy and dignity was not always supported. While on an outing, the childminder and assistant did not take the necessary steps to ensure personal care was provided in a safe and respectful way. As a result, children's rights to be safe and protected from harm were not met. **(See Area for improvement 1)**

The childminder and assistant had an understanding of safeguarding procedures. Training opportunities were sought to support their practice. Paperwork was in place to support the effective recording and reporting of protection concerns, if required.

Personal plans were not in place for all children and were not regularly reviewed to ensure information was accurate. This did not comply with national guidance and legislation. One parent told us, "I do not have much involvement in my child's personal plan, however, we and the childminder speak on such a regular basis that [the childminder] knows my child well and all their developmental needs". As a result of the limited information recorded on children's care and wellbeing, their needs were at risk of not being met. **(See Requirement 1)**

The majority of children's lunches were provided by parents and carers. This supported individual cultural and dietary requirements. The childminder's practice did not effectively prevent the risk of choking. The seating position and preparation of food were not always safe and resulted in a child choking on a few occasions. We signposted the childminders to 'Good practice guidance: prevention and management of choking episodes in babies and children' to improve practice and support safer feeding routines.

Children's safety, emotional security and wellbeing were compromised by poor sleep arrangements. They mostly slept in prams outside and were not closely supervised. This did not reflect national guidance and was not sufficiently risk assessed to ensure children's health, safety or wellbeing was fully considered. We signposted the childminders to 'Safer Sleep for Babies: A guide for early years care providers, childminders and foster carers' to improve children's sleep routines.

Children experienced warm, caring interactions, which supported their overall wellbeing. When asked about the strengths of the service, one parent responded, "I like that my child loves going there every week. The childminder is just amazing with kids". Another parent told us, "The relationship the childminder has formed with my child is such a close bond. My child gets so excited when they hear they are going to [the childminder's] house". As a result, children were able to form positive attachments and trust those caring for them.

Quality Indicator 1.3: Play and learning

Most children were happy and engaged in their play. The childminders provided different toys and games, depending on children's interests. For example, a dinosaur tunnel and tent was out in response to one child's love of dinosaurs. Other resources, such as shape sorting, magnetic tiles and cars, were available for children to freely access. This promoted choice and respected their interests.

Children's experiences were not always well planned for. For example, after attending a toddler group in the morning, they went directly to a play park for two and a half hours. The childminders had not effectively planned to ensure children experienced high quality care, play and learning. Children were able to take part in some fun activities such as, going down the slide and playing in the sand area. Opportunities were missed to provide play and learning that reflected their individual needs and curiosities in a meaningful way. **(See Area for improvement 2)**

Children had the opportunity to visit places in the community, including play parks and various playgroups. One parent told us, "They explore local outdoor areas most days such as, parks, walking trails and Briarlands Farm". This helped to extend their play and learning opportunities and to socialise with other children.

Some play and learning experiences were captured through the use of Floorbooks. Photographs and brief descriptions of learning were added to sporadically. The childminder was keen to improve on the consistency of these to support children to reflect on their play and learning. Experiences were shared with parents through text messages. One parent told us, "I get information about my child through the day such as, pictures and updates on what she is doing and when I pick them up". This supported information sharing and enabled parents and carers to feel included.

Some of the children's development was beginning to be tracked and monitored by the childminders. This enabled them to identify some of the children's achievements and possible development needs. There was scope to develop this further to ensure children's play and learning was meaningful and enabled them to thrive.

Requirements

1. By 31 July 2025, the provider must ensure all children's care and wellbeing needs are fully considered and planned for.

To do this, the provider must at a minimum:

- a) ensure all children's personal plans are fully completed and up-to-date
- b) children and parents or carers are fully involved in this process
- c) ensure all children have the appropriate level of information in their personal plan to meet their needs
- d) ensure they and any assistants, are well informed about the children and use the personal planning information to provide individualised and responsive care relevant to their needs.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 (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).

Areas for improvement

1. The provider should ensure the necessary steps are taken to uphold all children's rights to be safe and protected from harm. This includes but is not limited to, ensuring personal care is provided in a safe and dignified way.

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

'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected' (HSCS 1.4); and

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

2. Children's play and learning should reflect their individual interests, curiosities and support them to progress.

To ensure this the provider should at a minimum,

a) Observe and assess children's development to plan play opportunities that support children to thrive.

b) Provide developmentally appropriate experiences that meet the needs of individual needs and interests of children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am supported to achieve my potential in education and employment if this is right for me' (HSCS 1.27).

How good is our setting?

2 - Weak

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

Quality Indicator 2.2: Children experience high quality facilities

Risk assessments were not effective in keeping children safe. They did not fully consider potential risks or identify mitigations to minimise the risks to children. As a result, they did not inform positive practice. For example, car seat belts were not adequately checked once children were in the car. As a result, it was not noticed that one child did not have their seat belt fastened. This was highlighted to the childminder at the time and they took prompt action to ensure children were safely secured in their car seats. **(See Requirement 1)**

The childminder had reflected that the outdoor space was unsafe for children as it was unkept in some areas. As an alternative, they made use of other space in the local community. They included, toddler groups and local parks. One parent commented, "The garden needs a freshen up and a new risk assessment implemented as I feel personally it's gotten a little messy. It was a great area last summer and was used everyday. Feel it wasn't used to full potential in the winter". As a result, children were confined to the living room area, which limited the available space for children to play and move. **(See Requirement 1)**

Children were not included in risk assessing which meant they were not learning about how to manage risk. A new climbing frame has been installed in the park and the childminders visited the park to show the children. Shortly after arriving, the adults decided that it was unsafe for the children. Children were not asked about their views and were deterred from trying to climb it. When one child did begin climbing it, the adults brought them down with little to no explanation. As a result, children's abilities were undermined and opportunities were missed to engage in rich learning about risk and how to manage it. **(See Requirement 1)**

Children's experiences were not always developmentally appropriate. Toys and games on offer did not support challenge, excitement or stimulation for all children. The lack of planning of play experiences for school aged children resulted in them having limited opportunities. They asked if they could watch television, which the childminder supported. The programme selected by the children contained scenes that were not appropriate for younger children who were also in the space. One child commented, "we are just watching death". The childminders failed to respond to this or identify the distress this could have caused children. This experience had the potential to negatively impact on children's wellbeing. (See Area for improvement 1 under Quality Indicator 1.3: Play and Learning section of this report)

Infection prevention and control procedures did not follow national guidance. Personal Protective Equipment (PPE) used during nappy changing was not fit for purpose. By the time of feedback, the childminder had access to gloves that were suitable for protecting against risk of contamination of bodily fluids. Hand washing procedures were not safe. For example, children used wipes to clean their hands before eating and hand sanitisers were primarily used between nappy changing. We signposted the childminders to 'National Health Protection Guidance for Children and Young People Settings, including education', to support the improvement of infection prevention and control, including safer hand hygiene practices.

Requirements

1. Children's environment must be safe and well maintained.

To ensure this, the provider at a minimum must:

- a) fully consider risks and identify relevant mitigations to reduce them
- b) support children to explore and manage risk
- c) all areas are safe and accessible to children to ensure they have ample space to move around.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure I experience high quality care and support that is right for me and is consistent with the Health and Social Care Standards (HSCS), which state that: 'My environment is secure and safe' (HSCS 5.19).

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 provided a service that met the needs of individual children and families they cared for. Parents were kept informed of the childminder's holidays, this communication supported them to prepare alternative childcare, if required. Families were supported with patterns of care they required, ensuring the service met their and their child's needs.

Aims and objectives detailed the service provided and helped children to be safe, included and respected. These had not been reviewed for some time to ensure they fully reflected those using the service. Children and families' views should be sought in the process to ensure their views and opinions are valued.

The childminders were beginning to use self-evaluation to identify progress and recognise strengths and areas for improvement. This demonstrated a commitment to continually improving practice and valuing feedback from those using the service. They measured quality of children's care, play and learning informally through general discussions with parents and observations of children's level of happiness. This allowed the childminder some opportunity to be immediately responsive to children and families' requests and make changes. One parent told us, "they are always happy to accept feedback and ideas". Use of quality audit tools such as, 'A quality framework for day care of children, childminding and school-aged childcare' would support the childminder to reflect further. This would support them to celebrate what is going well and identify areas for improvements. **(See Area for improvement 1)**

The childminder was able to discuss planned improvements for the setting, for example, reorganising the storage of children's toys and games to make them more accessible. Identified areas for improvement were not recorded. This limited opportunities for reflection and risked improvement opportunities to be missed. We suggested ways, such as keeping a reflective diary, to support monitored and measured improvement.

Areas for improvement

1. Children should experience high quality care, play and learning. The childminder should ensure formal quality assurance processes, including self-evaluation and improvement plans, are in place and lead to continuous improvement.

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 4.3: Staff deployment

The childminder and the assistant did not always communicate well to ensure children were effectively supervised. For example, while out at the park, while putting children in the car and when children were sleeping. This resulted in children's safety being compromised. **(See Area for improvement 1)**

The childminder and assistant knew each other well. This supported a positive working relationship which created a positive ethos within the service. All parents agreed or strongly agreed that they had a good relationship with the childminder and the assistant. One told us, "the assistant is absolutely wonderful and provides the same amount of love, care and support to my child as the childminder. They have an excellent bond with our child". This impacted positively on children's wellbeing.

The childminder and assistant had a positive, enabling attitude towards professional development. They engaged in core training opportunities such as, child protection and first aid. An opportunity was missed to carry out independent research to ensure they fully understood a child's individual needs. We encouraged the childminder and assistant to seek development opportunities in response to changes in children's care, play and learning needs. This would ensure children receive care from people who have a full understanding of their needs.

The childminder and assistant supported each other to manage tasks and care for children. They shared advice throughout the day to promote positive experiences. This enabled children to experience consistency and supported the childminder and assistant to reflect on their practice to ensure it was right for children. We encouraged the childminder to record when gaps in professional development were identified in order to effectively plan opportunities to develop practice.

Areas for improvement

1. Children should be kept safe and fully supported in their care, play and learning. The provider should ensure that children are effectively supervised at all times.

This is to ensure 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).

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 ensure that their children complete a fit person check as they are both over the age of 16 years as part of their responsibilities as a registered service. Children attending the service will be safeguarded as a result.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

This area for improvement was made on 20 September 2018.

Action taken since then

A notification was made to us regarding a member of the childminder's household turning 16 years of age. The relevant checks were carried out.

This area for improvement has been met.

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?	2 - Weak
2.2 Children experience high quality facilities	2 - Weak
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
4.3 Staff deployment	3 - Adequate

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