

Donaldson, Caron Marie Child Minding

Glasgow

Type of inspection:
Unannounced

Completed on:
10 July 2025

Service provided by:
Donaldson, Caron Marie Donaldson,
Caron Marie

Service provider number:
SP2003910194

Service no:
CS2003038685

About the service

Caron Marie Donaldson's childminding service is provided from the childminder's home in a quiet residential area within Cumbernauld, North Lanarkshire. The childminder 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. At the time of inspection two children were registered to the service.

Childminding takes place on the ground floor of the property. Children have access to a lounge, dining room and a downstairs bathroom. The service is close to greenspace, woodlands and transport links.

About the inspection

This was an unannounced inspection which took place on Thursday 10 July 2025, between 10:00 and 12:30. 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 two children using the service
- observed children play experiences
- spoke with the childminder
- looked around the home and garden
- reviewed service documents and records.

Key messages

- Children were happy, settled and relaxed in the care of the childminder.
- Positive relationships had been established with children and families.
- Personal plans should be further developed to ensure they support the individual needs of children and are updated at least every six months.
- Children's play, learning and development were supported by activities appropriate to their age and developmental stage.
- Children were cared for in a warm, comfortable and homely environment which helped them feel safe and secure.
- The childminder should continue to develop self-evaluation and improvement processes with children and families, to embed a meaningful cycle of continuous improvement.

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 outweigh areas for improvement.

Quality indicator 1.1: Nurturing care and support

On the day of inspection, two children were present. Both children were confident and comfortable in the childminder's care and had a clear sense of belonging. The childminder was caring, responsive and nurturing and showed an interest in what children had to say. This supported children's communication skills and ensured they felt valued.

The childminder had an awareness of each child's individual needs. They confidently described children's personal preferences and routines and how this was supported.

At the previous inspection we asked the childminder to develop children's personal plans to support children's wellbeing. The childminder had developed plans to gather important information from parents before children started at the service. This helped to ensure they had the appropriate information to meet their needs. However, we found that personal plans had not been updated for some time. We discussed how personal plans could be further developed to ensure they identified how the childminder would support children's needs. These should be developed in line with best practice guidance and include regular reviews with parents about their child's needs, wishes and choices. We signposted the childminder to personal plans guidance available on our website. The previous area for improvement has been repeated.

Children benefitted from unhurried, relaxed mealtime experiences where their needs, choice and preferences were respected. Parents provided a variety of healthy meals for children whilst they attended the service. This helped support their individual dietary needs. The childminder sat alongside children chatting and smiling, contributing to positive relationships.

Quality indicator 1.3: Play and learning

The pace of the day was relaxed and responsive, which helped ensure children's needs were met. Children were comfortable leading their play and participating in activities of their choice. They had access to a good range of toys and resources, including construction, role play resources, electronic toys and books. We suggested children's play and learning could be supported by having further access to natural and open ended materials to support children's creativity, curiosity and problem solving skills.

Children had opportunities to engage in experiences that supported their literacy and numeracy development. For example, children enjoyed sorting and categorising materials, according to their own ideas. The childminder supported children's language and communication skills through the use of open ended questions to extend children's thinking and learning. For example, using questions such as "I wonder what will happen next?"

Children led their own play and invited the childminder to play with them. They responded positively to the interactions from the childminder and sought more of these. This contributed to children feeling valued and strengthened positive relationships.

Children told us "its great fun here. I like playing with the animals and reading books. There's lots of books to pick from" and "[childminder] plays a lots of games with us and we go to the park to play football. I love football and drawing. I get to do both these things here."

Children's opportunities for play and learning were enhanced through connections to their local community. They enjoyed visiting local parks and going on walks through local woodlands. They had recently been involved in growing and planting of herbs, nurturing children's sense of wonder and understanding of the world around them.

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 outweigh areas for improvement.

Quality indicator 2.2: Children experience high quality facilities

The childminder had created a relaxed, homely and welcoming atmosphere. Children were comfortable within the environment as they freely moved between the dining and lounge area. Furniture in the lounge was arranged so that children could enjoy floor activities and there were large sofas for children to rest and relax on. Children could use the table in the dining area for mealtimes and for table activities for example, arts and crafts.

The environment was set out with resources to support current interests and stage of development. The childminder arranged resources on open shelving and low down storage boxes. This allowed children to have independence and choice in their play throughout the day. These resources were rotated and changed to support children's interest. When describing the setting, one child told us, "I like how relaxed it is. I can get pencils and paper here whenever I want."

The childminder had a good understanding of the importance of children having opportunities to play outdoors and ensured that they had regular access to the play opportunities in the local and wider community. This helped enrich children's learning and enabled them to develop positive links with their community. Children told us "we get to go to the park. I like the swings there" and "sometimes after school we go a walk in the woods."

Infection control practices were followed. Regular cleaning of all areas used for childminding contributed to a clean and pleasant environment for children. However, to reduce the risk of infection the childminder should ensure individual drying material is available for children when handwashing.

Children's information was secured securely and the childminder ensured confidentiality at all times.

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 outweigh areas for improvement.

Quality indicator 3.1: Quality assurance and improvement are led well

The childminder had developed positive relationships with parents and carers and worked in partnership with them. They used daily conversations and communication apps, for example, WhatsApp, to build relationships and exchange information. This helped the childminder to get to know children well, providing care and support, whilst also ensuring parents were included.

A number of policies were in place and these were shared with parents through a welcome pack when their child started at the service. These policies helped parents to become familiar with the ethos, values and aims of the service. We suggested some changes to some policies to help ensure they are reflective of current best practice.

The childminder was beginning to develop approaches to ensure families were involved and could contribute towards change in the service. For example, through the use of questionnaires. We encouraged the childminder to continue to develop ways to involve children and their families in improving the service and further strengthen self-evaluation. This will support the childminder to reflect on what is working well in the service and what could be improved. **(See Area for Improvement 1)**

The childminder was developing self-evaluation approaches to reflect on their practice. They had identified improving personal plans as an area of focus. During the inspection we discussed ways to develop an improvement plan. This would help influence and lead positive changes for children. The childminder should continue to develop and formalise their approach, embedding ongoing self-evaluation to their practice. We suggested that they begin to use the quality framework to formalise self-evaluation in the service showing what was working well in the service and what needed to improve. **(See Area for Improvement 1)**

Areas for improvement

1. To ensure that quality assurance processes impact positively on outcomes for children, they should be developed to help identify and inform improvement planning. This should include, but is not limited to, developing self-evaluation processes, actively seeking views from families and children, updating policies and procedures and reflecting on best practice guidance.

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) and; 'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership.' (HSCS 4.7).

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 outweigh areas for improvement.

Quality indicator 4.1: Staff skills, knowledge and values

We found the childminder to be warm, caring and compassionate to the children. Children appeared secure in their care and responded to the childminder in a loving and affectional manner. The childminder was respectful, courteous and listened carefully to children. Children described the childminder as "kind" and "funny."

Relationships with children and their parents were positive, caring and nurturing. Children were listened to and treated with respect. The childminder had a good understanding of the importance of play and valued play opportunities, ensuring children were having fun whilst learning. This contributed to children being happy and engaged in their play.

The childminder was a member of the Scottish Childminding Association (SCMA) and shared how this had supported them within their role. For example, the childminder had completed some online training courses. The childminder had also completed first aid training, child protection training and a course on awareness of Autism.

We discussed how best practice guidance would also support their development as they reflect on current practice, whilst also supporting professional development. The childminder would benefit from keeping a record of training reflecting on the impact of training on their practice to support children's experiences. The childminder should continue to update their skills and knowledge in relation to providing high quality play and learning experiences for children.

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 record how children's health, social, welfare and safety needs will be met within individual personal plans. This is to ensure that children's needs are planned and met. To achieve this plans should: Set out how children's needs will be met, record how children have progressed, be put in place within 28 days of a child starting at the service, be reviewed every six months or more often if the child's needs change and be shared and updated with children, parents and carers.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state '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) and 'my needs as agreed in my personal plan, are fully met and my needs and choices are respected.' (HSCS 1.23)

This area for improvement was made on 21 January 2019.

Action taken since then

Since the previous inspection the childminder has developed their personal plans to record information to support the needs of children when they started the service. However, we found personal plans had not been updated and children's current preferences and needs were not recorded.

The childminder should develop personal plans to ensure they reflect children's current needs, interest and preference. These should be reviewed and agreed with children, parents and/or carers.

This Area for Improvement has Not been Met.

Previous area for improvement 2

The childminder should update her child protection policy to include updated contact details of relevant agencies. She should source and complete child protection training in order to refresh and update her knowledge in this area. This would contribute to the health and safety of children.

This is to ensure that care and support is consistent with the Health and Social Care Standards 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 21 January 2019.

Action taken since then

The childminder had completed child protection training. The child protection policy had been updated to reflect current national guidance and contact numbers for relevant agencies. We asked the childminder to streamline their policy, as at the time of inspection we discovered three different policies linked to child protection.

This Area of Improvement has been Met.

Previous area for improvement 3

The childminder should ensure effective medication systems are in place to support the medical and health needs of individual children in line with current Care Inspectorate best practice guidance - Management of medication in daycare of children and childminding services.

National Care Standards Early Education and Childcare up to the age of 16: Standard 3 - Health and wellbeing.

This area for improvement was made on 21 January 2019.

Action taken since then

Appropriate systems were in place to support the administration of medication, this was supported with a detailed policy. At the time of inspection no children required medication. However, the childminder shared their processes with us and was knowledgeable about current managing and administering medication guidance.

This Area for Improvement has been Met.

Previous area for improvement 4

The childminder should undertake training relevant to her role and responsibilities, the needs of individual children and to support her continuous professional development.

This should include child protection training and Getting it right for every child (GIRFEC) training to improve practice and promote positive outcomes for children and families. National Care Standards Early Education and Childcare up to the age of 16: Standard 14 - Well-managed service.

This area for improvement was made on 21 January 2019.

Action taken since then

Since the previous inspection the childminder had completed first aid and child protection training. They had engaged with 'Getting it right for every child' (GIRFEC) reading materials and were aware of wellbeing indicators to support outcomes for children. The childminder should continue to engage with best practice reading material to help ensure their knowledge is current.

This Area for Improvement has been Met.

Previous area for improvement 5

The childminder should continue to develop systems, both formal and informal, which should help her to evaluate and improve her service. Parents and children should be involved in the evaluation process, and the childminder should be able to show how this had led to the improvement of her service.

National Care Standards Early Education and Childcare up to the age of 16: Standard 14 - Well-managed service.

This area for improvement was made on 21 January 2019.

Action taken since then

The childminder had developed a questionnaire to consult with parents about their practice. However, the use of this was limited and was not contributing towards the continuous improvement of practice. We discussed where developing quality assurance approaches, including developing self-evaluation with children and families would support the development of the service.

This Area for Improvement has Not been Met and has been reworded in key question 3, 'how good is our leadership?'

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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