

# Jo-Jo's Juniors Child Minding

Kilmarnock

**Type of inspection:**  
Unannounced

**Completed on:**  
11 July 2025

**Service provided by:**  
Joanne Blair

**Service provider number:**  
SP2012984112

**Service no:**  
CS2012312085

## About the service

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 no more than three are not yet attending primary school and of whom no more than one is under 12 months. Numbers are inclusive of children of the childminder's family.

At the time of our inspection, nine children were registered with the service; one pre-5 child, two children aged two to three and one child under 12 attended the service during the inspection.

The service operates from the childminder's home in a residential area of Kilmarnock, East Ayrshire. Children are cared for on the ground floor in three linking rooms, including a living room, kitchen and designated playroom/dining room that provides access to the fully enclosed outdoor play area. The childminder's home is near local amenities, including schools, nurseries, shops and parks.

## About the inspection

This was an unannounced inspection which took place on Tuesday 8 July 2025 between 11:30 and 13:45. 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 and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with four children using the service
- received six completed Microsoft Forms questionnaires
- spoke with the childminder
- observed practice and daily life
- reviewed documents.

## Key messages

- The childminder was caring, nurturing and loving in their interactions with children.
- Mealtimes were a calm, organised, and positive experience for all children.
- Children were happy, confident and having fun.
- Children led their play indoors and outdoors.
- Milestone trackers and observations could be used to document children's learning progress and provide a detailed record of children's interests, skills learned, and areas of development.
- Risk assessments and policies should be in place, reviewed, and updated in response to changes in the service, ensuring they align with relevant guidance and legislation.
- The childminder should improve their approach to self-evaluation processes and develop a plan for service improvements.
- The childminder should implement robust quality assurance processes within the setting to improve outcomes for children and ensure their safety and wellbeing.
- The childminder should keep current with guidance and evaluate how training impacts practice to improve children's outcomes.

## 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?	3 - Adequate
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 compassionate, respectful, and responsive in their engagement with the children in their care. This approach enabled children to feel valued, loved, and secure.

Personal plans were in place for all children and included the necessary information to meet their wellbeing needs. These were developed and reviewed regularly and shared with children's families through email. A parent shared, "The childminder keeps me up to date on everything I need to know". Another commented, "We discuss how and what my child is doing". When the plans were being formally reviewed and updated, they should be signed by both the childminder and the parent. This approach would further support consistency in children's care and support, including any emerging or changing needs that may arise.

The childminder communicated with parents through daily chats, WhatsApp messaging and emails to share information about their children. This approach ensured parents were kept up to date and supported positive relationships. A parent shared, "I have never been invited into the childminder's home to discuss my child's play and development; however, we frequently talk about everything during drop-off and pick-up times, and any needs or concerns are addressed". Another commented, "The childminder always discusses play, care, and learning, but it's never inside the home; it's always at the front door, which I don't have an issue with. However, I do think it could be better". To further support communication between the setting and the children's homes. The childminder should offer families the choice to enter the service at drop-off and pick-up times. This practice would enable valuable and sensitive information to be shared between families and the childminder, fostering a family-centred culture and strengthening connections.

We directed the childminder to the guidance, 'Me, My Family, and My Childcare Setting,' available here: <https://hub.careinspectorate.com/how-we-support-improvement/quality-improvement-programmes-and-topics/me-my-family-and-my-childcare-setting/>. This guide offers helpful support.

Healthy eating was promoted at the service, in line with the best practice guidance, 'Setting the Table'. The lunch menu followed a rolling three-week plan, ensuring that meals, snacks, and drinks met nutritional requirements and promoted good health. Younger children were seated at either a low table or in a highchair to ensure their comfort. The childminder supervised them during meals, which ensured their safety. Children were encouraged to feed themselves, which promoted independence and developed a sense of responsibility. An older child chose to eat lunch at a later time, which respected their decision about their care.

The childminder was first aid trained and had a medication policy in place. To ensure children's safety, paperwork should confirm that the first dose was given at home. We directed the childminder to the Care Inspectorate's best practice guidance, 'Management of Medication in Daycare and Childminding Services,' which would help update the policy and minimise risks. Available here: [https://hub.careinspectorate.com/media/6086/Management-of-Medication-in-Daycare-of-Children-and-Childminding-Services\\_Dec-2024.pdf](https://hub.careinspectorate.com/media/6086/Management-of-Medication-in-Daycare-of-Children-and-Childminding-Services_Dec-2024.pdf).

The childminder's home was equipped with comfortable sofas where children could relax. During our inspection, we did not observe sleep time routines. However, the childminder provided information about the setting's policies and procedures, as well as the sleep products used. The sleep routines were personalised and catered to the individual needs of children and the preferences of their families. A parent shared, "My child has the same nap schedule as home and settles well". Another said, "I have no concerns around this. The childminder is aware of my child's nap schedule and supports them to mirror their home routine". We signposted the childminder to safe sleep guidance and spoke about the importance of obtaining informed consent from parents, as this would help establish safe sleep practices. Information can be found here:

<https://lullabytrust.org.uk/resource/safe-sleep-awareness-for-early-years-settings/>.

A child protection policy was in place, and the childminder completed necessary training in protection and safeguarding. This training reinforced their understanding of their role and ensured the safety of children.

### **Quality indicator 1.3: Play and learning**

Children moved freely indoors and outdoors, which supported their right to play. The young children played with musical instruments and ribbons, and danced to the music, exploring musical concepts and actions through repetitive patterns of behaviour based on their interests. This activity developed children's schemas, including trajectory and connection. Additional activities included listening to stories, drawing, and stacking the play cups, which supported children's creativity, early literacy development, and interest in familiar stories, as well as their problem-solving skills.

An older child spent time outdoors playing football, and younger children learned to ride scooters and engaged in role-play in the playhouse. Younger children chose to play alongside one another and had a fun time. All outdoor activities supported children's choice and their physical and emotional health. A parent shared, "The childminder's home is always open for outdoor play". Another commented, "They are often outside in the garden". The play materials available both indoors and outdoors were age-appropriate and accessible, which kept children engaged and promoted their learning and development.

The childminder had a good understanding of child development and shared children's achievements through general discussions with parents and updates in children's personal care plans. Developmental milestone trackers could be used to measure children's progress in health and wellbeing, literacy, and numeracy. These would enable the childminder to focus more on children's individual needs and strengths through a continuous process informed by ongoing observations and assessments of children's development over time, and ensure measurable outcomes.

The childminder could also share with families their children's experiences and activities using photographs and quality observations throughout their time spent at the service. These should include details on what skills the children learned and areas for development. This method would help the childminder to identify each child's learning styles and provide tailored support and next steps for future learning. Information on child development: observation and assessment planning can be found on the Scottish Childminding Association (SCMA) website, available here: <https://www.mylearning.scot/badges/childminders-child-development-observation-assessment-and-planning/>.

## 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

Measures such as well-maintained boundary fencing and gates, along with a register for children's attendance, ensured their safety and provided an overview of the number of children attending the service over the weeks and months. The registration system ensured that the number of children attending reflected the service's registration conditions and maintained a safe environment for children.

Children attended a setting that was welcoming, homely, and comfortably furnished. They had ample indoor and outdoor space to support their play and learning. Parents shared positive feedback about the childminder's setting, including that it was "A loving home from home environment where my child is supported" and "A home from home with a safe place to explore and learn while giving me peace of mind that they are safe". The entrance area stored children's personal belongings and included individual pegs, which ensured that children felt valued and promoted inclusion.

The childminder shared that the conservatory door was typically left open during the day. They should monitor the temperature in both the dining area and the playroom spaces on warm and cold days. This attentive monitoring would create an environment that ensured children's comfort while they played and shared meals.

Toys and resources supported child-led play, including dolls, a pram, musical instruments, scooters, a cosy coupe car, and playhouses, which enabled young children to share resources, develop friendships, and use their imagination. A parent shared, "The childminder adapts activities when required to for my child". An older child said they enjoyed drawing and playing football and were encouraged to participate in these activities during the inspection. The play environment and resources were tailored to children's interests and requests, enabling them to make relevant and meaningful choices.

Children had access to the upstairs toilet and handwashing facilities. We reminded the childminder of best practices for handwashing and that running water and soap were preferable for children rather than using wipes. The childminder should also ensure that each child has an individual hand towel for drying their hands. The childminder agreed to implement these changes in the short term and discussed their five-year plan to convert a downstairs cupboard into a toilet, which would make personal care routines more practical for both them and the children.

We did not see a nappy-changing routine in place. Instead, the childminder discussed the service's policies and procedures, as well as the use of Personal Protective Equipment (PPE). We discussed the importance of wearing an apron, particularly since the childminder also prepared food. To further support infection prevention and control practices, we directed the childminder to guidance that should further prevent cross-contamination and mitigate the potential risk of infection. Available here: <https://www.nhsggc.scot/your-health/public-health/public-health-protection-unit/childcare-settings-infection-prevention-and-control/>.

The childminder assessed risks informally in the setting. We discussed conducting risk assessments for indoor, outdoor, and outing activities, and, where appropriate, involving children in the process. These safe measures would enable children to manage risks and make informed decisions about their safety. Risk assessments should also include, but not be limited to, the family dog, garden gate, and the grassy area outside the home.

The childminder understood the importance of promptly notifying the Care Inspectorate in the event of any serious accidents or incidents, with a commitment to doing so within 24 hours. During our inspection visit, we found that there had been no recorded accidents or incidents within the service. However, if an incident did occur, we were satisfied the childminder would maintain accurate records and communicate the incident with the children's families, ensuring they were fully informed about any first aid or care administered. This proactive approach to planning for each child's health and wellbeing would foster a safe and supportive environment for all children under their care.

## 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 was welcoming and engaged in the inspection process, responding to our suggestions for development and being open in their conversations, which should support their capacity to improve and provide positive outcomes for children.

The childminder created an aims statement for the service, which was shared with families before their children enrolled. This information helped families choose a service that aligned with their needs and supported the service's objectives, which focused on ensuring children's happiness, health, and sense of security. The child-centred approach prioritised children's interests and wellbeing needs.

The childminder informally assessed their service through conversations with parents and observations of children's happiness, recognising a need for better administrative organisation. They were beginning to develop their quality assurance and self-evaluation methods, but had no formal system for gathering feedback from children and families. We recommended that the childminder learn about the upcoming 'shared framework', where they can use the self-evaluation tool to identify strengths in the setting and create a service improvement plan, incorporating input from children and parents to gain valuable insights into their experiences and expectations (see area for improvement 1).

Information on the shared framework is available here: <https://www.careinspectorate.com/index.php/quality-improvement-framework-for-early-learning-and-childcare-sectors> and through the Care Inspectorate provider updates.

The childminder had public liability insurance for their service, contributing to a safe environment for children. The childminder used their car to transport the children. However, we noted that the childminder did not have adequate insurance that allowed them to use their vehicle for business purposes. We requested that they refrain from using their car to transport children until appropriate insurance had been obtained (see area for improvement 1).

The annual return submitted to the Care Inspectorate indicated that the childminder's child had surpassed the age of 16 and was residing in the childminder's home. As a result, they needed to undergo a Police Act Enhanced Disclosure check to ensure their suitability around children in the childminder's care. After the inspection, we sent documents to confirm that all adults who came into contact with children met regulatory standards and legislative requirements. The childminder quickly returned the necessary paperwork to the Care Inspectorate, which was then submitted to Disclosure Scotland. This process ensured the safety and wellbeing of all children in their care (see area for improvement 1).

Policies and procedures were in place and should be reviewed regularly to ensure they remain current with best practice guidance, including the Health and Social Care Standards (HSCS) and reflect changes in service delivery. For example, implementing a safe sleep and pet policy would further ensure the safety of children.

## Areas for improvement

1. To improve outcomes for children, the childminder should implement robust quality assurance processes within the setting. This should include, but is not limited to, familiarising themselves with best practice guidance to support self-evaluation and continuous improvement efforts. Ensure that business vehicle insurance is in place for transporting children by car. Enhanced background checks are conducted promptly for adults who reside in the childminder's home and have regular contact with the children to ensure children's safety and wellbeing.

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

## 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 offered a flexible and accommodating service, which fostered respectful and trusting relationships with families. A parent shared, "The childminder helps in any way they can. We just need to send a message, and they are more than happy to help". As a result, the childminder had established good relationships with families, recognising the positive impact they had on children's lives.

The childminder completed training in first aid and child protection to enhance their knowledge and skills, ensuring that children were kept safe and protected. They earned a Higher National Certificate (HNC) in Childhood Practice at Level 7 in 2020. They should continue accessing relevant training and professional reading related to their role as a childminder. They should also consider how learning has impacted their practice and outcomes for children. Ongoing learning and reflection would ensure children received continuous care from a trained, competent, and skilled childminder.



The childminder kept up to date with developments in the sector through their partnership status with the local authority to deliver early learning and childcare, membership with the Scottish Childminding Association (SCMA) and registration with the Care Inspectorate, where they received provider updates. The childminder could also access the Care Inspectorate hub, where they can find relevant guidance documents and other valuable resources. This further reading would ensure their practice was current and support them in their role.

The childminder communicated with other childminders on outings to parks and during school pickups. They also used WhatsApp messaging to share craft ideas for seasonal activities that supported children's play and learning. The relationships supported the experiences and activities provided for children and fostered a sense of community among childminders.

## 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?	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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	4 - Good
4.1 Staff skills, knowledge and values	4 - Good

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