

Barnardo's Dundee Childsitting Service Child Care Agency

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Type of inspection:
Announced (short notice)

Completed on:
21 July 2025

Service provided by:
Barnardo's known as Barnardo's
Scotland

Service provider number:
SP2003003405

Service no:
CS2003053415

About the service

Barnardo's Dundee Childsitting Service is a childcare agency which is registered to supply child carers to parents. The service provides care and support to children and young people within their own homes.

The Care Inspectorate does not regulate the element of a childcare agency that supplies or introduces childcare workers to a day care of children's setting.

About the inspection

This was a short notice announced inspection which took place on Thursday 17 July 2025 between 09:30 and 14:00. 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- received written feedback from one child and parent, and one volunteer
- spoke with staff and management
- reviewed documents.

Key messages

Staff and volunteers skills and experience were carefully considered when matching them to families. This ensured that individual children's needs could be well supported to help them to make good progress.

All children had a personal plan which contained information gathered through consultation with parents. The plan identified children's needs, including dietary and medical, and wishes.

Management of medication procedures could be further developed so that staff have enhanced knowledge about how to keep children protected from harm.

Children's wellbeing and sense of worth was enhanced by staff and volunteers who were knowledgeable about and valued diversity and inclusion.

There were clear systems in place to ensure that children were kept safe and protected.

Robust safe recruitment procedures were in place. This meant that safety checks were carried out on all staff and volunteers before they worked with children's families, which helped to keep everyone safe.

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 well do we support children's care, play and learning?	4 - Good
How good is our leadership and staffing?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support children's care, play and learning? 4 - Good

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

Quality Indicator 1.1: Staff nurture and support children's care, play and learning

The agency valued the importance of effective relationship building through providing consistent care and support. Children and families were supported by the same case holder and volunteers throughout their time using the agency. This helped children to feel safe and secure. Volunteers visited children in their home before starting to care for them. This provided a valuable opportunity to establish caring and nurturing relationships from the beginning. A child told us, "The volunteers listen to us, and they are kind."

Volunteer's skills were carefully considered when matching them to individual families. For example, training, and experience of looking after children with specific needs. This helped to make sure that individual children's needs could be well supported to make good progress.

All children had a personal plan which included an 'All about Me' section which contained information gathered through consultation with parents. The plan identified children's needs, including dietary and medical, and wishes. All children also had a risk assessment with clear strategies to support them to be safe, healthy, and achieving. Moving forward, the agency could consider using the wellbeing indicator headings to structure the 'All about Me' section. This could provide more information about individual children's interests, feelings, and preferences. Volunteers could use this information to plan appropriate play experiences to support children's learning and development. The child's voice could be documented on their plan to show that their views have been considered, valued, and actioned.

Children's wellbeing and sense of worth was enhanced by staff and volunteers who were knowledgeable about and valued diversity and inclusion. Training was incorporated into the induction programme. The organisation code of conduct informed about the expected standards of equality, diversity, and inclusion practice. This meant that all staff and volunteers understood the importance of treating children and families with dignity and respect. Similarly, the agency provided clear guidance about how to ensure children's health and safety were prioritised while caring for them.

Moving forward, best practice guidance links could be added to the information pack taken to the family homes. This could include links for health and safety, play and learning, and value-based practice. Easy access to guidance could help to enhance volunteer and family knowledge and skills to offer children high quality play experiences.

Plans were in place to review and improve management of medication procedures to be more robust to keep children safe and well. When doing this the agency should use the best practice guidance: Management of medication in day care of children and childminding services (Care Inspectorate, 2014). Protocols should be in place so that staff and volunteers are clear about what to do if the medication does not alleviate symptoms, or when to take further action should an emergency occur. Parents should provide consent for each specific medication to be given and should include information in line with best practice guidance. Administration of medication records should ensure that the time the last dose of medication was administered is recorded. It should state that parents have given the first two doses of new medication to ensure there is no reaction to this **(see area for improvement 1)**.

Quality Indicator 1.2: Children are safe and protected

There were clear systems in place to ensure that children were kept safe and protected. Two volunteers were assigned to every sitting service to provide additional care and support. Volunteers carried identification badges and there were safe collection procedures in place if required.

The manager was competent in their role as designated person with overall responsibility for safeguarding and child protection. This was complimented by the agency having a robust duty manager system in place. This meant that there was always a designated child protection officer available should guidance and support be required to protect children. A volunteer told us, "We can raise concerns immediately through the duty manager. I feel confident doing this and understand the importance of child protection."

All staff and volunteers had a clear understanding of their role and responsibilities relating to keeping children safe and protected. The agency was proactive in supporting staff and volunteers to keep their knowledge up to date through regular training, and as part of the induction. Consideration could be given to improving the child protection and safeguarding guidance to ensure that it is clearer. It could also be added to the information pack taken to the family home. This would mean that staff and volunteers would have access to clear guidance to support them should a situation arise.

Improved guidance should reflect emerging issues within society, for example, cyber bullying. It should also inform of the agency standards and expectations around online use. This would help to keep children safe and protected when accessing online services.

Areas for improvement

1. For all children to be kept safe and healthy, the provider should improve the management of medication policy and procedures and support staff to apply this in practice.

This should include but is not limited to, the medication policy, and consent and administration of medication records being reviewed to bring it in line with current best practice guidance: Care Inspectorate guidance, Management of medication in day care of children and childminding services (2014).

This is to ensure that 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)

How good is our leadership and staffing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 2.1: Quality assurance and improvement are led well

The management team were committed to self-evaluation and improvement to develop a strong ethos of continuous improvement. To do this they used the guidance, 'A quality framework for childcare agencies introducing and supplying childcare staff', (Care Inspectorate, 2024). The quality indicators in the framework helped them to reflect on what improvements could be made to enhance outcomes for children and families.

The agency provided a block of child sitting to families over an agreed period to support the individual needs of each family. An improvement plan priority was to ensure that all families were given opportunities to contribute to service development regarding the care of their child. The management team reflected on the effectiveness of how they gathered families' views. They were considering how to use feedback to improve the service, with a view to enhancing a 'you said, we did' culture. Children, parents, and volunteers benefitted from regular check in visits during the agreed child sitting period. Check in meetings also helped volunteers to understand the importance of reflective practice when working in partnership with children and families to improve outcomes.

Plans were in place to improve the effectiveness of the check in meetings so that children and families were meaningfully involved to influence change in the agency. This would help children and families to feel valued and that they mattered. This included introducing a meeting to evaluate the service provided at the end of the sitting period. Improved recording procedures could help to show that improvements made were having a positive impact on outcomes for children.

Current methods to ensure that children's views were listened to and acted upon were being improved. For example, improvements were being made to how the agency captured the voice of children whose main

communication was nonverbal. Training opportunities included alternative communication methods to enable children to communicate to express their needs, wishes and choices.

Volunteers were positive about their time at the agency, and one volunteer told us, "I feel well supported and I am very happy with the support from the team at Barnardo's. They are full of knowledge and happy to pass this on. I have always had an enjoyable experience when volunteering."

Quality Indicator 2.2: Staff are used effectively to meet the needs of children and families

Recruitment procedures for all staff and volunteers files that we reviewed were in line with current best practice guidance. For example, safety checks were all carried out before staff and volunteers started in their role. This helped to keep children and their families safe. Similarly, the manager had implemented a procedure to check new staff details on the Scottish Social Services Council (SSSC) website. This was to ensure that staff and volunteers had not been reported to the SSSC, currently under investigation, or had been dismissed from another care service. The very good procedures in place helped to ensure that the welfare and safety of children was not compromised. A parent told us, "I trust that Barnardo's have done the work to ensure that staff and volunteers are recruited safely."

Staff and volunteers were given clear guidance about the agency and what was expected of them in their role to provide positive outcomes for children. Induction procedures were well planned to take account of ongoing learning and development. This included opportunities to access core training such as child protection and paediatric first aid. A final induction meeting offered an opportunity to revisit and reflect on key topics of induction. To further develop induction opportunities, improvement plans were in place to review and update necessary induction training and to create development plans for volunteers. This would help to ensure that volunteers were continuing to develop knowledge and skills to give children the best experiences.

Staff and volunteers were supported to access training to support their learning, or to support the specific needs of the family with which they were working. For example, introduction to volunteering, data protection fundamental and focus levels, safeguarding focus and additional modules, and health and safety. A volunteer told us, "Training is mostly online. I am happy with the training that is on offer and the training I have done. I would feel comfortable asking for help or further training if needed and I feel confident going into every sit." This helped to ensure that staff and volunteers were knowledgeable and understood their role to enhance outcomes for children.

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 well do we support children's care, play and learning?	4 - Good
1.1 Staff nurture and support children's care, play and learning	4 - Good
1.2 Children are safe and protected	5 - Very Good

How good is our leadership and staffing?	5 - Very Good
2.1 Quality assurance improvement are led well	5 - Very Good
2.2 Staff are used effectively to meet the needs of children and families	5 - Very Good

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