

Graham, Melanie Child Minding

Saltcoats

Type of inspection:

Announced (short notice)

Completed on:

28 July 2025

Service provided by:

Melanie Graham

Service no:

CS2009196565

Service provider number:

SP2009973743



About the service

Melanie Graham provides a childminding service from their home in Saltcoats, North Ayrshire. Children have access to the childminder's lounge, hallway and downstairs WC. At the time of our inspection, children did not have access to the childminder's garden. The service is located close to early learning and childcare settings, schools and local parks.

The childminder is registered to care for a maximum of six children 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 the childminder's family. At the time of our inspection there were two children registered with the service.

About the inspection

This was a short notice announced inspection which took place between 22 and 28 July 2025. 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:

- issued a digital questionnaire and asked the childminder to share this with families using the service. We received no responses
- spoke with the childminder
- observed practice and daily life for one child attending the service
- · reviewed documents.

Key messages

- The childminder was kind and caring, they provided children with reassurance to help them feel secure and happy.
- Children were able to lead their play independently.
- The childminder should develop their skills in planning, observing, and recording children's learning and development through play-based activities.
- The childminder must ensure all members of their household have appropriate disclosure checks completed to ensure children's safety.
- The childminder should ensure they have enrolment information for each child attending the service. This includes emergency contact details and medical information.
- Personal plans should be enhanced to include child and parental participation as part of the development and review processes.
- The childminder should involve children and families in their self-evaluation and quality assurance process.

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?	3 - Adequate
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?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Quality Indicator 1.1: Nurturing care and support

Children experienced warm, kind and caring interactions from the childminder. This supported the development of positive relationships and contributed to children feeling valued. The childminder took time to discuss a child's recent holiday, helping them to reflect on their experiences and share their enjoyment. This enabled children to feel listened to and respected.

All meals and snacks were provided from home and the childminder told us they offered these in response to children's individual routines. Due to the personal routine of the child present, we did not observe a snack or lunch experience. As a result, we could not evaluate the planning, experience, or sociability of mealtimes as part of this inspection.

On the first day of our inspection, we requested to review children's enrolment information. This includes but is not limited to details of children's health needs and emergency contact information. The childminder had not gathered this information for the children registered with their service. As a result, they did not have sufficient information to enable them to care for children safely. We asked that this information was gathered promptly, and received confirmation electronically that this was completed following our inspection. The childminder should ensure that for any new children who register with the service, appropriate information is gathered prior to their attendance, and for existing children this is regularly reviewed with families to ensure children can be cared for safely, supporting their wellbeing (see area for improvement 1). To support the childminder's understanding of what information they must keep, we signposted them to Care Inspectorate (2025) guidance: 'Early learning and childcare services: Guidance on records you must keep and notifications you must make.'

At the time of inspection, no children required medication. We requested to sample medication permission forms. The childminder could not locate these and stated they were stored electronically. We received a copy of the blank proformas electronically after our visit. The childminder should ensure that permission forms are easily accessible to support safe administration of medication when needed.

The childminder had recently introduced personal plans for children which provided an overview of their current developmental stage. This meant that for children who had attended the service for many years, we could not track their progress over time. To ensure plans remain responsive to children's needs, they should be developed with children where appropriate and reviewed regularly with parents. This will help ensure care and support continues to meet individual needs effectively (see area for improvement 2). To support the childminder with developing plans, we signposted them to Care Inspectorate (2021) guidance: 'Guide for Providers on Personal Planning: Early Learning and Childcare.'

We requested to sample attendance records which would show children's attendance patterns. The childminder confirmed that registers of attendance were not in place. We discussed the importance of always recording children's arrival at and departure from the service to ensure children could be accounted for in the event of an emergency. Maintaining accurate records supports children's safety.

Quality Indicator 1.3: Play and learning

The child present was happy and comfortable in the childminder's care. The childminder offered verbal play choices allowing children to lead their play. The child present told us that they wanted to relax on the sofa while watching their favourite television programme. We also saw the child enjoy drawing on a notebook. By responding to children's interests, the childminder contributed to them feeling content and at ease within the environment.

Children benefited from visits to local community parks. These outings helped strengthen their connection with the wider community and provided opportunities for physical activity and exploration which promoted children's physical health and overall wellbeing.

Due to the personal routines of the child present, our observations of children's play and learning experiences were limited during this inspection. We asked to sample photographs of children during play and the childminder could only source a few photographs. As a result, it was not clear what play and learning experiences were provided to children or how their interests were being extended through play. The childminder would benefit from routinely taking and sharing photographs with families to ensure parents feel fully involved in their child's daily care and informed of their developmental progress.

Observations were not used to track children's progress, identify achievements, or plan next steps. As a result, it was not clear if children were making good progress in their learning and development. To ensure children are supported to reach their potential, the childminder should formalise their planning for play and learning processes to ensure experiences are consistently well-informed by children's interests, developmental needs, and best practice guidance. The childminder should consider how observations and planning can be used to support and extend children's learning, and demonstrate how developmental progress can be meaningfully recorded and shared with families (see area for improvement 3). Enhancing this aspect of practice will ensure children are more meaningfully involved in shaping their day, supporting their rights and individuality.

Areas for improvement

1. To ensure children's safety and wellbeing, the childminder should ensure that full enrolment information is gathered and maintained for each child. Information gathered should be reflective of Care Inspectorate (2025) 'Early learning and childcare services: Guidance on records you must keep and notifications you must make.'

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

2. To ensure children's care and support remains responsive to their individual needs, the childminder should ensure that personal plans are developed in partnership with children (where appropriate), their parents, and are reviewed at least every six months to reflect any changes in needs, routines or development.

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 'I am fully involved in developing and reviewing my personal plan' (HSCS 2.17).

3.

To ensure play experiences sufficiently challenge children and meet their interests and developmental needs, the childminder should develop their processes for planning for, observing and recording children's progress and learning through play. The childminder should use their observations of children to reflect on and plan new learning opportunities, demonstrating how children's views and interests have been considered.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, my social and physical skills, confidence, self-esteem, and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1:31).

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

Children were cared for in a warm, welcoming and cosy environment that supported their play and relaxation. The setting was well ventilated with two external doors, supporting children's security. As a result, children were relaxed and settled in their surroundings.

The indoor environment was safe and free from immediate risks. While risk assessments were not available at the time of inspection, we received these electronically after our visit. The childminder stored some items in their hallway, this did not compromise children's safety as the childminder was responsive to this and made adjustments to ensure clear pathways at entry and exit points supporting children's safety.

The childminder told us that they did not use their garden when minding children. As an alternative measure, they visited local parks daily to ensure children had access to fresh air and exercise supporting their health and wellbeing.

Children's risk from cross infection was increased as the childminder told us they did not use a changing mat or apron when supporting young children with personal care. We asked the childminder to use a changing mat to ensure children's comfort when having their nappy changed and to apply appropriate personal protective equipment (PPE) during personal care routines as this could reduce the risk of potential infection spreading (see area for improvement 1).

The childminder had a large pet Husky dog, which was present during inspection. We found the dog to be calm and well-natured. A pet policy was in place, outlining hygiene practices and safe storage of pet-related items to support children's safety. To further enhance children's safety and parental confidence, a risk assessment and parental permissions should be developed for children having contact with the childminder's dog.

The childminder had completed first aid training to support them to care for children safely. While there had been no accidents or incidents for children whilst attending the setting, we sampled documentation which would be completed if necessary and found the recording formats were in line with current best practice guidance.

Children's personal information was stored securely in the upper level of the childminder's home. The childminder used a combination of electronic and paper records. Although the service was not registered with the Information Commissioner's Office (ICO) at the time of inspection, they completed registration promptly afterwards. This ensured personal information was stored and processed lawfully.

Areas for improvement

1. To limit the possible spread of infection the childminder should review and improve their nappy changing procedures to ensure appropriate personal protective equipment (PPE) is applied and children's comfort is supported during personal care routines.

This is to ensure the service complies with the Health and Social Care Standards (HSCS), which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

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 positively with the inspection process. They responded to suggestions for development which demonstrated their willingness to make improvements and improve outcomes for children.

The childminder had a range of policies and procedures in place, supporting them to provide a reliable service. Whilst the childminder told us they had recently updated these, we advised that some policies and procedures should be expanded to reflect current legislation and best practice guidance. For example, we identified gaps within the child protection and complaints policies. Updating policies and revisiting current best practice would support service delivery and enable positive outcomes for all children.

Daily discussions at handover times provided some opportunities for families to share their views on the service their child received. We discussed with the childminder the benefits of formalising processes to gather feedback on their service to support meaningful involvement of children and families. This would support continuous improvements based on the wishes and aspirations of those using the service.

At the time of inspection, the childminder did not have self-evaluation available to support the assessment of their service. A copy was received electronically following our visit. The content did not accurately reflect the service observed during inspection and dates showed this been completed after our visit. Therefore, we could not evidence any positive impact for families. The self-evaluation could be further enhanced by including detailed practice examples of how the childminder knows what their strengths and areas for improvement are. The childminder should continue to develop their self-evaluation processes, in partnership with children and families to ensure any identified improvement priorities are relevant, measurable and improve outcomes for children and families (see area for improvement 1).

Disclosure checks had not been completed for one individual who lived at the childminder's home. Without this, the childminder could not be certain that the individual was not barred from working with children, which could compromise children's safety. Following our visit, we received assurance that the childminder had initiated the process to have a Disclosure check completed. The childminder should adopt a more proactive approach to overseeing suitability checks of anyone living in their home to ensure children's safety.

Areas for improvement

1. To support positive outcomes for children and families, the childminder should strengthen how they reflect on the quality of their service. This should include but is not limited to, regularly asking children and families for feedback, keeping a record of what is working well and what could be improved, and using this to inform and make positive changes.

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?

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

During our visit, the childminder was attentive to the minded child. They responded promptly to the child's needs and engaged in frequent positive interactions, including conversation, praise and encouragement. As a result, the child was happy, confident, and secure in the childminder's care.

The childminder was a member of the Scottish Childminding Association (SCMA) and accessed emails and updates from them and the Care Inspectorate. This supported their awareness and understanding of current guidance.

The childminder had committed every Tuesday evening to engaging in professional learning which included completing online training courses and webinars. Online learning undertaken included safeguarding, play, effective interactions and brain development. Many of the learning sessions were not focused around current Scottish guidance, however, the childminder spoke us through how they had taken learning from each event and felt more knowledgeable. One example given related to safe food practices and how the childminder was now aware of updates to Scottish Government (2024) guidance; 'Setting the table'. The childminder would benefit from recording their key learning from training attended and the impact of this on their practice. This would support them to identify how they have improved outcomes for children and families.

We found that the childminder could apply more of their learning from training in practice to improve experiences for children. For example, they had attended loose parts play training and had not reflected on how this could improve their environments for children. We found that the indoor environment could be further enhanced by increasing sensory and heuristic play materials, particularly for younger children. This would support children's curiosity, creativity and offer greater choice in their play experiences.

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 further develop her practice to ensure personal plans are formally reviewed at least six monthly.

National Care Standards for early education and childcare up to the age of 16: Standard 3 - Health and wellbeing.

This area for improvement was made on 11 May 2017.

Action taken since then

The childminder had recently developed a personal plan for each child attending the service. However, plans had not been developed with children (where appropriate)

and their parents. To reflect Care Inspectorate's current best practice guidance this area for improvement has been reworded within this inspection report. See Key question 1, How good is our care play and learning?

This area for improvement was met.

Previous area for improvement 2

In order to keep up to date with best practice guidance and improve her service the childminder should identify her training needs and undertake suitable training/self-directed study.

National Care Standards for early education and childcare up to the age of 16: Standard 13 - Well-managed service.

This area for improvement was made on 11 May 2017.

Action taken since then

The childminder had committed their Tuesday evenings to developing their knowledge. They had attended various online training courses and webinars. The childminder should now consider reflecting on their learning to identify how that can improve outcomes for children and families.

This area for improvement was met.

Previous area for improvement 3

The childminder should submit a self-assessment to the Care Inspectorate about the strengths of the service and how she will address any areas for improvement.

National Care Standards for early education and childcare up to the age of 16: Standard 13 - Well-managed service.

This area for improvement was made on 11 May 2017.

Action taken since then

Care Inspectorate no longer request that childminders submit a self-assessment. We have reported on the childminder's self-evaluation processes within this report. See Key Question 3, How good is our leadership?

This area for improvement was 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?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
1.3 Play and learning	3 - Adequate

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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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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