

Little Buttons Child Minding

Perth

Type of inspection:
Unannounced

Completed on:
27 June 2025

Service provided by:
Chantal Walker

Service provider number:
SP2016987957

Service no:
CS2016346549

About the service

Chantal Walker provides a childminding service from her home in Perth. The childminder is registered to provide a care service for a maximum of six children up to 16 years of age.

The service is close to local amenities including green spaces, shops and the local school and nursery. Children are cared for on the ground floor of the home and have access to the living room, hallway and kitchen. Children have a dedicated playroom upstairs and access to a toilet. There is a secure enclosed garden to the rear the property, at the time of the inspection children were not accessing the garden.

About the inspection

This was an unannounced inspection which took place on 24 June 2025 between 11:30 and 14:15. We returned to the service at 16:00 to provide feedback. 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 and one of their family representatives
- spoke with the provider
- observed practice and daily life
- reviewed documents.

Key messages

- Children experienced warm, calm, and caring interactions from the childminder which helped them to feel valued, respected, and loved.
- The childminder was knowledgeable on children's circumstances, likes and preferences which contributed to children being happy, confident, and settled.
- The childminder was skilled in supporting children through highly effective use of language and questioning strategies.
- The childminder should implement systems to reflect on their practice and service and identify what is going well and what could be improved.
- The childminder should gather the views and opinions of families to support them to make positive changes and plan for future improvements.
- Strong relationships with families had been built which created a welcoming and inclusive ethos within the service.
- The childminder should access further training and undertake professional reading and research to support them to improve the quality of the service they provide and ensure their skills and knowledge are up to date.

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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality Indicator 1.1 Nurturing care and support

Children were nurtured and well cared for through warm, kind, and respectful interactions. The childminder was very attentive to the children and listened carefully to their views and requests. This supported them to feel loved and helped create a trusting, welcoming environment where children felt included with a sense of belonging.

The childminder demonstrated a responsive approach to meeting children's needs. They gathered detailed information about their likes, preferences, and family backgrounds. This highlighted the childminder's commitment to providing a nurturing and emotionally secure environment. Children received care tailored to their individual circumstances which resulted in children who were happy and settled in the childminder's company. Families benefited from regular updates throughout the day on their child's wellbeing. They valued the consistent communication and told us, 'I know exactly what my child has eaten, how long they've slept and what they have played with, which means I am happy at work.'

Mealtimes were a positive and social experience. Children were given time to enjoy their food at a pace that was right for them. Parents provided snacks and meals for their children and the childminder plated the foods before offering to the children. This provided children with choice and opportunities to be independent and responsible. The childminder sat with children encouraging good mealtime habits, manners and provided sensitive support. The childminder was knowledgeable on managing allergies and how to respond to a choking episode. This helped keep children safe.

At the time of our visit, no children attending the service required medication. We reviewed medication paperwork. We asked the childminder to ensure that expiry dates of any medication brought into the service is clearly recorded on the medication form. This would support the childminder to safely store and administer medication.

The childminding could confidently tell us actions they would take should they have a concern about a child's wellbeing or welfare. The childminder had not accessed child protection training for some time. We advised they should refresh their knowledge (see area for improvement 1 in Quality indicator - 4.1)

Quality Indicator 1.3 Play and learning

The childminder had a good understanding of the children's current developmental needs. Having a good knowledge of the children's family life enabled the childminder to provide interesting and enjoyable experiences that were based on children's current interests. For example, we saw a child choose various vehicles from a box and pointed to them, individually naming each one. They excitedly told us, 'Look a helicopter' and 'This is a van.' While playing, the child created an imaginary bus and collected tickets from us. The childminder skilfully asked effective questions to further develop the child's play and thinking. For example, 'Who is on the bus with us?' and 'Where is the bus going?' This promoted learning through play and by having fun.

Resources were easily accessible promoting choice and empowering children to lead their own play and learning. They had fun as they confidently explored the wide range of experiences available. There was scope to enhance the provision of loose parts, natural materials, and real-life experiences. This would further support younger children's curiosities, imagination skills, and creativity.

Families were sent photographs of the children's experiences while in the childminders care. However, there was no formal monitoring or evaluation of children's development and progress. The childminder should build on their approach to children's personal planning by clearly recording observations and identified next steps in learning and share children's success and achievements with families. It was evident children were learning new skills while at the service and we highlighted how these could be incorporated into their personal plans. This would help the childminder further to effectively support children to reach their full potential (see area for improvement 1).

Children were supported to develop their early language and numeracy skills. The childminder used age and stage appropriate language and waited for the appropriate time for children to respond to questions. A child brought the childminder a book, they sat together, pointing at the pictures and the childminder repeated words, which helped the child's understanding. Numeracy opportunities were naturally woven into children's experiences as the childminder helped them count objects and name the numbers on the kitchen clock.

Children benefited from daily walks with the childminder in the local area. This supported their physical health and wellbeing and promoted a sense of belonging to their community. To further enhance this practice, we suggested the childminder consider attending some community groups and meet with other childminders. These experiences would help promote children's social skills and connections to their wider communities.

Areas for improvement

1. To support children's progression in their learning and development, observations should be regularly recorded. Next steps in children's development should be identified, and monitored to ensure children are supported well to reach their full potential. Children's progress in their development should be shared with their families.

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?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality Indicator 2.2. Children experience high quality facilities

Children experienced a homely and welcoming environment. The playroom was upstairs, it bright and inviting and provided ample space for children to play on the floor, at the table or to relax on the sofa. The layout of the environment had been carefully considered to meet the needs, age and stages and interests of the children.

Children's health and safety was supported well through good infection, prevention, and control measures. Practices such as wearing indoor slippers, promoting consistent hand hygiene, and maintaining a clean environment contributed positively to children's overall wellbeing. The childminder demonstrated awareness of safe personal care routines by using a changing mat and appropriate personal protective equipment (PPE) during nappy changes. The children attending the service were young, the childminder told us they carried out intimate care routines on the kitchen floor to allow for supervision of all children. We suggested other options for the childminder to consider when changing nappies, to help minimise the spread of infection while keeping all children safe.

When we arrived at the service a few children were sleeping in prams. The childminder ensured they were closely supervised during their rest and responded warmly when they awoke, offering cuddles and comfort until they were ready to eat or engage in play. We acknowledged that space was limited and encouraged the childminder to consider other options to offer children a more comfortable and safer sleeping surface and environment.

The childminder visually and routinely checked the house before the arrival of the children. Safety gates were used at the playroom door and the front door was locked. We found risk assessments were in place and reviewed regularly. This meant any potential risks to children were removed. We highlighted to the childminder they could develop a risk assessment to ensure they were confident hazards and risks to children sleeping had been fully considered.

The childminder had a system in place to record any accidents and incidents. This ensured that parents were informed, and children received the appropriate care.

Children and family's information was stored securely within the childminders home. We advised the childminder considered becoming a member of the Information Commissioner's Office (ICO). This would support the childminder to ensure sharing and storing digital images remained safe and secure.

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

Children's experiences reflected the childminder's personal aims and objectives for their service. This included providing a homely and caring environment where children were respected and fully supported.

Informal communication with families enabled positive information sharing about the service and the care and support offered to their children. This meant families were kept informed about their children's experiences and what was happening in the service. A parent told us, 'Chantal, is open and honest, we fully trust her with our child' and 'Chantal is always professional, we get plenty of information and we know what to expect, I like that'. We suggested the childminder to now consider formally gathering the views of families and use this information to help support them with improvement planning (see area for improvement 1).

The childminder was honest with us during the inspection and told us paperwork was not one of their strengths. They recognised they were not reflecting on their practice and not using self-evaluation systems to support developments within the service. The childminder should now implement a formal approach to evaluating the service. For example, developing a system which recognises strengths and identifies areas of practice that could be improved.

This would support the childminder to create an improvement plan and action priorities to bring about effective and positive change. We signposted the childminder to the improvement section on our 'HUB' within our website. We also discussed the 'Quality Framework for daycare of children, childminding and school-aged childcare' and 'Self-evaluation for improvement -your guide.' Using these publications would help support the childminder to reflect on their service and implement plans to improve outcomes for children and families (see area for improvement 2).

Areas for improvement

1. To support continuous improvement the provider should develop systems to gather the views of families. They should use this information to reflect and inform service developments.

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

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

2. To improve outcomes for children self-evaluation should be developed. The childminder should become familiar with best practice guidance and use this to reflect on the service and plan for continuous improvement.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which states 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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality indicator 4.1 Staff skills, knowledge, and values

The childminder's friendly and compassionate manner and consistent levels of support promoted children's sense of achievement and overall wellbeing. The childminder enabled children to express their emotions and attentively listened and responded sensitively to children's cues for comfort, support, and reassurance. This effective approach empowered children to regulate their emotions. This meant children felt safe, valued, and loved. A parent told us, 'My child is always happy when they come home, I know that Chantal spends a lot of time supporting their emotions, I am very happy'.

The childminder received emails and updates from the Care Inspectorate which kept them informed of developments within the sector. Additionally, they met with another local childminder and valued the professional support they had provided. For example, assistance with policies and procedures and risk assessment templates. We suggested the childminder consider joining some local groups or childminding networks. This would offer the childminder opportunities to engage in professional discussions and reflect on their practice.

The childminder had a professional qualification, which was demonstrated in their understanding of how children play, learn, and develop. This knowledge was observed through their practice and interactions with children. The childminder had attended first aid training which contributed to keeping children safe.

The childminder was open and honest about not engaging in professional reading or research to enhance their practice. Additionally, they acknowledged that refresher training in child protection and infection prevention and control had not been accessed for some time. To support them to improve outcomes for children and families the childminder should now access core training and review current guidance and best practice documents (see area for improvement 1).

Areas for improvement

1. To support children's wellbeing the childminder should now access training, review current guidance, best practice documents, and apply their learning into practice.

This should include, but is not limited to, accessing training around child protection and infection, prevention, and control.

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

'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).

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?	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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