

Leanne McCaffery Child Minding

Glasgow

Type of inspection:
Unannounced

Completed on:
5 August 2025

Service provided by:
Leanne McCaffery

Service provider number:
SP2023000103

Service no:
CS2023000155

About the service

Leanne McCaffrey provides a childminding service from their property in a residential area in the Newlands area of East Kilbride, South Lanarkshire. The childminder is registered to provide care for a maximum of 6 children at any one time up to 16 years of age; of whom 6, no more than 6 are under 12 years; of whom no more than 3 are not yet attending primary school and; of whom no more than 1 is under 12 months. Numbers are inclusive of the childminder's own children. At the time of our inspection, 6 children were registered at the service.

The childminder is close to shops, schools and other amenities. Children are cared for in the living room, kitchen/diner and downstairs bathroom. They also have access to an enclosed rear garden.

About the inspection

This was an unannounced Inspection which took place on 5 August 2025 between 12:30 and 15:30. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous registration information, information submitted by the service and intelligence. In making our evaluations of the service we:

- observed children using the service
- gathered families feedback using a survey
- spoke with the childminder
- observed practice and daily life
- reviewed documents.

Key messages

- Children experienced a homely and welcoming environment.
- Warm and caring interactions from the childminder helped children feel loved, safe and secure.
- Personal plans should be further developed to ensure they support the individual needs of children and updated at least every six months.
- Children experienced regular opportunities for outdoor play, supporting their wellbeing.
- Risk assessments were in place to help ensure children were kept safe.
- The childminder should develop their knowledge and understanding of their roles and responsibilities as a care provider.
- The childminder had completed recent training, increasing their understanding of child development.

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 just outweighed the weaknesses.

Quality indicator: 1.1 Nurturing care and support

Children experienced supportive and caring interactions from the childminder. This helped children feel loved, safe and secure. At times, the childminder would use nicknames when speaking with children. Whilst these were used as a term of endearment, we discussed with childminder on using children's names to promote their identity.

Personal plans were in place for children which contained information gathered when they started the service. Such as details relating to health, individual preferences and next steps. For example, building positive relationships and supporting physical development. We discussed with the childminder where personal plans could be improved. This included ensuring information was up to date and recording strategies to meet children's needs. (**See area for improvement 1**). We signposted the childminder to best practice guidance.

The childminder provided meals for children and they enjoyed a relaxed and hurried mealtime. A new menu had been developed which contained a variety of healthy meals. We discussed with the childminder sharing this with parents to help them feel informed. Older children enjoyed sitting at the table to eat their meal and chatting with their peers. Younger children sat at a lower table. We discussed the benefits of all children sitting together, ensuring all children felt included.

Medication systems were in place to support the administration of medicine. We found that information on signs and symptoms were not always recorded. The childminder agreed to update medication forms to make the reasons for giving medication clearer. We were satisfied that systems were in place for safe administration of medicine.

Children had access to fresh drinking water throughout the day to support hydration. At lunchtime, diluting juice was offered as the childminder told us older children were less inclined to drink water. We signposted the childminder to best practice guidance to support them to promote healthy options.

Children could sleep and rest in response to their needs, which helped support their overall wellbeing. The childminder knew children's routines well and was responsive to their cues of tiredness. For example, recognising when children decided they did not want to sleep.

Quality indicator: 1.3 Play and Learning

Children had fun playing and exploring with toys and materials. They were able to move between different spaces, helping to support their preferences. For example, moving between the kitchen/diner and living room. Children had the freedom to transport resources between rooms, which encouraged and supported their individual play preferences. A variety of toys and materials were easily accessible for children to choose from. This meant they could make decisions and lead their own play. This included arts and crafts experiences. One child told us 'I am drawing an octopus'.

Children enjoyed playing with their peers and interacting with each other, strengthening their social skills. They spent time together using items such as, a play kitchen and pretend food as well as a shop and till. This contributed to children's mathematical and language development as well as nurturing their imagination.

The childminder had a variety of board games and books stored in a cupboard. Children were observed asking the childminder to access these resources, showing interest. We suggested making these more accessible for children, to promote independence, choice and support development.

Children benefited from opportunities to attend local classes in the community. For example, bookbug classes. This helped strengthen their community links as well as their social development. Opportunities to explore outdoors included visiting local parks, participating in walks and playing in the enclosed rear garden. This supported children to connect with nature and learn about the world around them.

The pace of the day for children was relaxed, and responsive to their needs. The childminder discussed routines of the day with children and gave them a choice of going out or staying at home, this helped to respect their voice and choices. One child told us "I do lots of fun things and see my friends".

Areas for improvement

1. To support children's wellbeing personal plans should be strengthened. This should include, but is not limited to, defined strategies tailored to each child's individual needs, outlining the approaches or resources that will support progress and routines for regular reviews in collaboration with families. To ensure plans remain relevant and accurately reflect each child's current stage of development.

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

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 benefited from a clean and well maintained environment that was bright and well ventilated. Soft furnishings provided areas for children to rest and relax. For example, cushions, beanbags and sofas. In addition, children had space to store their coats and shoes, promoting a sense of belonging and supporting them to feel they matter.

The childminder had considered different stages of development and provided resources to support children's learning. This included a range of games, toys and experiences. Such as puzzles, stories, play kitchen and dolls. This provided a balance between challenge and engagement, ensuring that children could explore in response to their interests and needs in a safe environment.

Infection prevention and control measures were in place to support the wellbeing of children. For example, children took part in hand washing after toileting, use of disposable gloves and aprons when changing

nappies. We discussed where further developments could be made by providing individual hand drying to support effective hygiene and to be mindful that children wash their hands before mealtimes.

A number of safety measures were in place to protect children from harm. This included good supervision, food probing to ensure a safe temperature of food and secure storage of hazardous materials in kitchen. In addition, the childminder had developed risk assessments to help identify potential risks when exploring in the community. For example, when in parks near water or ponds.

Children had access to the rear garden was enclosed. We asked the childminder to review access to some building materials stored at the side of the house. Whilst we did not observe children accessing this, the childminder agreed to ensure the side of the house was further closed off.

How good is our leadership?

3 - Adequate

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

Quality indicator: 3.1 Quality assurance and improvement are led well

The childminder presented a clear vision and aims that reflected children needs. This included providing a happy, family friendly, home from home environment. One parent commented "feels at home and comfortable there. Able to interact with other children".

The childminder communicated regularly with families through text messages, monthly emails, and daily conversations. This helped foster positive relationships with families. One parent told us "always feel welcomed and discussions are open on care given and what is required".

The childminder was registered with the Information Commissioners Office (ICO). The ICO is an organisation that promotes good practice in data handling.

A new mealtime menu had recently been developed and was being trialled with children. This would contribute to a consistent mealtime routine. Alternative options were available for children in response to their needs, likes and dislikes. We discussed involving children and families in the development of the menu and service planning. Involving them in decision-making processes would help strengthen participation and ensure the service reflects the needs and preferences of those who use it.

A variety of policies and procedures was in place to support the delivery of service and these were shared with parents within the handbook given when children started the service. This supported families to become familiar with the childminder and their service.

The childminder was at the early stages of developing an approach to quality assurance and self-evaluation. Whilst they showed awareness of some good practice guidance, we discussed areas where this could be further strengthened. For example, developing a deeper understanding of their role and responsibilities as a care provider would help support improvement. This includes, establishing clearer medication systems, supporting personal plans, and understanding conditions of registration. This would contribute to a more robust quality assurance processes and support the continuous improvement of the service.

We signposted the childminder to 'A quality improvement framework for the early learning and childcare sectors' for childminders, which is available on our website. This could help support self-evaluation

processes, helping the childminder identify what is working well and areas for further development. (**Area for improvement 2**).

Areas for improvement

1. To support positive outcomes for children and families, the childminder should develop approaches to gaining a deeper understanding of their role and responsibilities as a care provider to help support improvement. This should include, but is not limited to, accessing guidance appropriate to their role and applying in practice.

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

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 was welcoming during the inspection and engaged in discussions to support improvement within the service. They recognised they were at early stages of their childminding journey and were committed to making improvements to support positive outcomes for children.

Throughout the day, the childminder consulted with children, supporting their choices and respecting their wishes. This was clear in the way they engaged with children through questions. For example, "are you ready for lunch?", "what would you like next?", "would you like fruit?". These interactions ensured children were heard and valued in their daily routines.

Recent training included STEM (Science, Technology, Engineering and Mathematics), child protection, understanding child development and children's rights. We observed some of the impact from these in practice. For example, asking children for their views, listening to their voice and understanding different stages of child development.

The childminder told us that they planned to undertake further training to support them in their role and was a member of Scottish Childminding Association (SCMA). We signposted them to further information located on the Care Inspectorate Hub. This would further support positive 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 good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
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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