

# Stewart, Andrea

## Child Minding

Type of inspection: Unannounced  
Inspection completed on: 26 January 2017

**Service provided by:**  
Stewart, Andrea

**Service provider number:**  
SP2004915815

**Care service number:**  
CS2004059176

## The service

### Introduction

Andrea is registered as a child minder to provide care to children in her own home. The service has been registered since 1 April 2011. Current registration is 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 four 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. The maximum number of children not yet attending primary school shall be reduced to three by 31 August 2011.

The child minder provides her service from her home, located on a modern housing scheme in Kincorth, Aberdeen. The child minder's home is within easy access to local schools and amenities such as parks. Children have access to a good-sized room in which to play. No overnight service is to be provided.

The child minder's aims include:

- To look after the children under my care to the best of my ability.
- Ensure that there are a variety of activities organised for each day.
- Ensure great care is taken into consideration when looking after children.

### What we did during our inspection

We compiled this report following an unannounced inspection which took place between 12.15 pm and 2.45 pm on 26 January 2017. The inspection was carried out by a Care Inspectorate early years inspector. There were five minded children present.

During this inspection we spoke to the child minder and the children present and two parents. We observed the care given by the child minder and looked at a very limited amount of documents including a first aid certificate and incomplete care plans.

Comments from parents and children included:

"Andrea does a great job."

"My child enjoys going."

"I like playing with the toys."

We check services are meeting the principles of Getting it right for every child (also known as GIRFEC), Scotland's national approach to improving outcomes and wellbeing for children by offering the right help at the right time from the right people. It supports them and their parent(s) to work with services that can help them. There are eight wellbeing indicators at the heart of Getting it right for every child: safe; healthy; achieving; nurtured; active; respected; responsible; and included.

## Views of people using the service

There were five children present at the time of the inspection aged from 12 months to four years. We observed the children and saw that they were receiving a positive experience during their time at the child minders.

We spoke to some of the children during our visit. They told us about activities they liked to do at the child minders such as playing with the superhero costumes and cars. Children were observed to be happy and engaged in play throughout the inspection.

The Care Inspectorate received no parent questionnaires before inspection. The inspector gave two questionnaires out on the day and gave another three to the child minder to hand to parents.

## Self assessment

Every year all care services complete a self-assessment telling us how their service is performing. We check to make sure this is accurate.

The childminder had not completed a recent self-assessment. She told us that she no longer had a password for our eforms system but would now contact our contact centre to be issued with a new one.

## What the service did well

The child minder interacted well with the children in a kind and caring manner. She provided them with age appropriate activities.

## What the service could do better

The child minder must adhere to conditions of registration and maintain accurate and readily accessible records for each child attending her service. The child minder to ensure that she has an appropriate recorded policy and procedure for the administration of medication. Comprehensive risk assessments are to be maintained for all areas of her service including the family dog. The childminder should regularly assess her training and development needs and undertake relevant training. The child protection policy should be updated and include local contact details. Further strategies should be developed to involve children and parents in improving the service.

## From this inspection we graded this service as:

Quality of care and support	2 - Weak
Quality of environment	3 - Adequate
Quality of staffing	not assessed
Quality of management and leadership	2 - Weak

## Quality of care and support

### Findings from the inspection

The child minder interacted well with the children. This helped to form attachments between child and carer.

The children could choose from a toy box containing suitable toys during our visit. One child was also playing an educational game on a computer tablet. The children were relaxed and happy in the child minder's company.

The child minder communicated regularly with parents. Parents received daily 'WhatsApp' photos and texts about their child.

However, during the inspection we observed some concerns with the childminding service in regard to children's safety.

There were no effective care plans in place for the children to ensure their health, safety and wellbeing needs were being met. Some children had a very basic care plan which had not been dated by a parent, nor did it include their start date. They had not also been updated every six months. Other children did not have a care plan at all. As a result important information for each child such as medical details, name of the doctor, emergency contact details, needs of the child, how this extra support will be met was not in place. **See requirement 1.**

There was no evidence of any policies such as child protection and medication to help keep children safe. The child minder was able to give a basic account of what to do in a child protection situation to ensure safety of the child. **See requirement 2.**

During the inspection the children had an apple for snack. They ate this in the living room. The child minder disclosed that the children sometimes get chocolate, sweets and fizzy juice which did not support children to make healthy choices. We referred the childminder to the following guidance. <http://www.healthscotland.com/documents/21130.aspx> **See recommendation 1.**

To make meal times a more meaningful experience, children could help with the preparing and tidying up of snack and also eat at the table. This would provide the children with more social interaction between the other children and childminder and help to develop their communication skills and independence.

The child minder used a buggy for the children to sleep in which was not in line with current guidance for safe sleeping. We discussed the risks associated with this and referred them to the appropriate guidance. <http://hub.careinspectorate.com/media/268678/scot-cot-death-trust-early-years-safe-sleeping-guide.pdf>

There was no evidence of planning to support children's learning and development needs. A mind map or a list of what children would like to do would support this.

### Requirements

#### Number of requirements: 2

1. The childminder must ensure that she maintains accurate and readily accessible records for each of the children attending her service. These to include, but not exclusively:

- a) each child's name, address and date of birth
- b) name, address and telephone number of each child's next of kin and general practitioner
- c) the date on which the service was first provided to each child
- d) an accurate personal plan for each child which indicates their health, welfare and safety needs.

Plans to be reviewed at least every six months or earlier if there are any significant changes. The plans to be reviewed together with parents and others where appropriate.

This is in order to comply with Scottish Statutory Instrument 2002/114 Regulation 19(1)(a)(b)(c)(d) and 2011/210 Regulation 4(1)(a) - Welfare of Users, and Regulation 5 - Personal Plans.

**Timescale: this requirement must be met within seven days of receipt of this report.**

2. The childminder to ensure that she has an appropriate recorded policy and procedure for the administration of medication to children. This is to clearly indicate the process should a parent request that she administer medication to their child. The childminder to take into account current best practice guidance. The policy to be shared with parents.

This is in order to comply with Scottish Statutory Instrument 2002/114 Regulation 19(1)(a)(b)(c)(d) and 2011/210 Regulation 4(1)(a) - Welfare of Users

**Timescale: this requirement must be met within seven days of receipt of this report.**

National Care Standards Early Education and Childcare up to the age of 16 - Standard 3: Health and Wellbeing; and Standard 14: A Well-managed Service

Ref: The Management of Medication in Daycare and Childminding Services. Publication code: HCR-0412-061. Available online: [www.scswis.com/index.php?option=com\\_docman&task=doc](http://www.scswis.com/index.php?option=com_docman&task=doc).

## Recommendations

**Number of recommendations: 1**

1. The child minder should ensure the children receive healthy snacks and drinks in line with national practice guidance.

National Care Standards for Early Education and Childcare up to the age of 16 - Standard 3: Health and Wellbeing

**Grade: 2 - weak**

## Quality of environment

## Findings from the inspection

The children were in a clean environment that offered the children a home from home experience.

Children had access to the living room to play in that contained two toy boxes for the children to choose from.

The child minder said children had daily access to the outdoors within the local community helping them to feel included in their local area and providing them with physical exercise and fresh air. There was no evidence of this as the child minder did not keep photographs or other signs of activities and outings with the children. She should look to do this as it would be a great way to show parents and also the children what they have been doing and celebrate their achievements. The child minder would benefit from looking at My World Outdoors to support the children's outdoor learning. [http://www.careinspectorate.com/images/documents/3091/My\\_world\\_outdoors\\_-\\_early\\_years\\_good\\_practice\\_2016.pdf](http://www.careinspectorate.com/images/documents/3091/My_world_outdoors_-_early_years_good_practice_2016.pdf)

The children told us of some things they do at the child minders such as making a teepee tent, foot spas, playing dress up and cars. Two boys were playing super heroes during the inspection. The child minder had a positive approach to behaviour management.

There was no evidence of risk assessments in place for indoors, outdoors, the family pet dog and for each trip with the children. However, the child minder said she checked her home daily in relation to safety issues such as hazards in each room including checking sockets and plugs. **See recommendation 1.**

The child minder did not have a clear understanding of infection prevention and control and did not have all the personal protective equipment when changing nappies to prevent spread of infection. The childminder would benefit from reading The NHS infection prevention control policy. <http://www.hps.scot.nhs.uk/resourcedocument.aspx?id=5598> **See requirement 1.**

## Requirements

### Number of requirements: 1

1. The childminder must ensure that she makes proper provision for the health, welfare and safety of the minded children. In order to do this she must:

Implement appropriate procedures, at all times, which prevent and control the spread of infection. This to include, but not exclusively, ensuring the effective use of Personal Protective Equipment (PPE) when exposed to bodily fluids.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) - regulation 4(1)(a) and regulation 10(1)(2)(a).

**Timescale: this requirement must be met within seven days of receipt of this report.**

National Care Standards for Early Education and Childcare up to the age of 16 - Standard 2: A Safe Environment; and Standard 14: A Well-managed Service

## Recommendations

### Number of recommendations: 1

1. The childminder to ensure that she maintains comprehensive and effective, recorded, risk/benefit assessments for all areas of her service. This to include, but not exclusively, all outings and transport of the children by car.

National Care Standards Early Education and Childcare up to the age of 16 – Standard 2: A Safe Environment; and Standard 14: A Well-managed Service

**Grade:** 3 – adequate

## Quality of staffing

This quality theme was not assessed.

## Quality of management and leadership

### Findings from the inspection

There were a number of concerns with the child minding service in relation to management and leadership.

On the day of inspection the child minder was in breach of her registration conditions, she must ensure she adheres to this at all times to ensure safety of the children in her care. Caring for more children than registered for poses a serious risk to the children's safety such as transporting the children on outings or to school pick ups. Young children need more adult one to one time to ensure their needs are fully being met. **See requirement 1.**

The child minder was a member of the Scottish Childminding Association (SCMA) and had a policy folder from SCMA that had not been used. We discussed how this folder could be used to ensure better safety for the children and that their needs were being met. For example, the medication policy and medication record sheet for a child on calpol.

The childminder had not undertaken any professional training in the last few years and had limited knowledge and understanding of current practices. See further detail under 'Quality of care and support' and 'Quality of environment.' There was a current first aid certificate. We discussed the need to regularly review her training and development needs in accordance with the needs of the children in her care. Regular, comprehensive training and development helps to support current knowledge, influence best practice and promote good outcomes for children. Training to include core training (food hygiene, child protection, infection control). **See requirement 2.**

The childminder had very little information and understanding of the national framework 'Getting it Right for Every Child' (GIRFEC). Further information may be accessed on the Scottish Government website including information about the wellbeing indicators – safe, healthy, achieving, nurtured, active, respected, responsible, included (SHANARRI).

The child minder did not regularly gain children's and parent's views to help her to evaluate and improve her service. The child minder would benefit from reading SCMA's document on child led participation and the Care Inspectorates guide to involving children in improving the service. [http://www.careinspectorate.com/images/documents/News/Child\\_Led\\_Participation\\_Guide.pdf](http://www.careinspectorate.com/images/documents/News/Child_Led_Participation_Guide.pdf)  
<http://hub.careinspectorate.com/media/274540/practiceguideinvolvingchildrenandyp.pdf>

**See recommendation 1.**

The child minder was made aware of The Hub on the Care Inspectorate's website and how it could keep her knowledge up to date with current information.

The child minder would benefit from using the Scottish Government guidance 'Building the Ambition' to support her in the important role to deliver high quality early learning and childcare. This is a useful document when reviewing practice and supports the promotion of good outcomes for children. The document is available at: <http://www.gov.scot/Resource/0045/00458455.pdf>

The child minder is used by SCMA as a community child minder adhoc on her day off. This provides a benefit to children and families within the local community.

## Requirements

**Number of requirements: 2**

1. The childminder must ensure she adheres to her conditions of registration.

This is to comply with the Public Services Reform (Scotland) Act 2010, Section 64, (1) (b) and (3) (a).

**Timescale: this requirement must be met within seven days of receipt of this report.**

2. The childminder to ensure that she regularly assesses her development needs and undertakes training to support positive outcomes for children. Training to include, but not exclusively, core training (first aid, child protection, food hygiene, infection control).

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) - regulation 15(b).

National Care Standards Early Education and Childcare up to the age of 16 - Standard 12: Confidence in Staff; and Standard 14: A Well-managed Service

**Timescale: this requirement must be met within three months of receipt of this report.**



## Recommendations

### Number of recommendations: 1

1. The child minder to involve children and parents in regularly assessing and improving the quality of the overall service.

National Care Standards Early Education and Childcare up to the age of 16 – Standard 5: Quality of Experience; Standard 13: Improving the Service; and Standard 14: A Well-managed Service

**Grade:** 2 – weak

## What the service has done to meet any requirements we made at or since the last inspection

## Previous requirements

### Requirement 1

The childminder must ensure that she maintains accurate and readily accessible records for each of the children attending her service. These to include, but not exclusively:

- Registration details, to include, each child's name, address and date of birth, the name, address and telephone number of each child's next of kin and general practitioner, the date on which the service was first provided to each child.
- An accurate personal plan for each child which indicates how she will meet the ongoing health, welfare and safety needs of individual children. She must review the plans at regular intervals but specifically when there are any significant changes and at least every six months. The plans to be reviewed together with parents and children (where appropriate).

This is in order to comply with Scottish Statutory Instrument 2002/114 Regulation 19(1)(a)(b)(c)(d) and 2011/210 Regulation 4(1)(a) – Welfare of Users, and Regulation 5 – Personal Plans.

**Timescale:** within one month of receipt of this report.

**This requirement was made on 15 December 2015.**

### Action taken on previous requirement

The care plans she had for some children were not valid as they had not been signed or dated by a parent. Other children did not have a care plan. The plans had not been reviewed every six months.

**Not met**

## Requirement 2

The childminder must ensure that she makes proper provision for the health, welfare and safety of the minded children. In order to do this she must:

- Implement appropriate procedures, at all times, which prevent and control the spread of infection. This to include, but not exclusively, ensuring the effective use of Personal Protective Equipment (PPE) when exposed to bodily fluids.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) - regulation 4(1)(a) and regulation 10(1)(2)(a).

National Care Standards for Early Education and Childcare up to the age of 16 - Standard 2: A Safe Environment; and Standard 14: A Well-managed Service

**Timescale: within one week of receipt of this report.**

**This requirement was made on 15 December 2015.**

### Action taken on previous requirement

The child minder had purchased some of the PPE equipment gloves but no apron.

**Not met**

## What the service has done to meet any recommendations we made at or since the last inspection

## Previous recommendations

### Recommendation 1

We recommend that the childminder review her medication policy and procedure. The policy should clearly reflect current best practice guidance.

National Care Standards Early Education and Childcare up to the age of 16 - Standard 3: Health and Wellbeing.

When we made this recommendation, we also took account of the Care Inspectorate Health Guidance on the Management of Medication in Day Care and Childminding Services.

**This recommendation was made on 22 March 2013.**

### Action taken on previous recommendation

The child minder did not have a medication policy. She had blank templates of medicine forms for administering medicine. However, they had not been used. We discussed how these forms could be used in a meaningful way.

**Recommendation 2**

The child minder should source and access training that is relevant to her role. She should prioritise training in relation to ensuring children's safety and welfare, and develop a training plan to address other aspects of her service.

National Care Standards Early Education and Childcare up to the age of 16 – Standard 12: Confidence in Staff

**This recommendation was made on 22 March 2013.**

**Action taken on previous recommendation**

There was evidence of a valid first aid certificate, no other training had been undertaken since the last inspection. We discussed accessing The Hub on the Care Inspectorate's website

**Recommendation 3**

The childminder to ensure that she has an appropriate recorded policy and procedure for the administration of medication to children. This is to clearly indicate the process should a parent request that she administer medication to their child. The childminder to take into account current best practice guidance. The policy to be shared with parents.

National Care Standards Early Education and Childcare up to the age of 16 – Standard 3: Health and Wellbeing; and Standard 14: A Well-managed Service

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**This recommendation was made on 15 December 2015.**

**Action taken on previous recommendation**

The child minder did not have a medication policy. She had blank templates of medicine forms for administering medicine. However, they had not been used. We discussed how these forms could be used in a meaningful way.

**Recommendation 4**

The childminder to ensure that she maintains comprehensive and effective, recorded, risk/benefit assessments for all areas of her service. This to include, but not exclusively, all outings and transport of the children by car. This is in order to minimise the risk to children of avoidable accidents whilst assisting the children, to learn through play, to assess and manage hazards and challenges in different environments. All recorded risk/benefit assessments to be shared with parents and, where appropriate, the children.

National Care Standards Early Education and Childcare up to the age of 16 – Standard 2: A Safe Environment; and Standard 14: A Well-managed Service

**This recommendation was made on 15 December 2015.**

**Action taken on previous recommendation**

There was no evidence of risk assessments for indoors/outdoors and outings. However, the child minder said she checked her home each night after the children left for safety issues.

## Recommendation 5

The child minder to ensure that she regularly assesses her training and development needs, taking into account the individual needs of the children, her own personal development and current best practice guidance. The child minder to undertake regular, comprehensive training in order to promote ongoing good outcomes for the children in her care. Training to include, but not exclusively, core training.

National Care Standards Early Education and Childcare up to the age of 16 - Standard 12: Confidence in Staff; and Standard 14: A well-managed Service

**This recommendation was made on 15 December 2015.**

### Action taken on previous recommendation

There was evidence of a valid first aid certificate, no other training had been undertaken since the last inspection. We discussed accessing The Hub on the Care Inspectorate's website

## Recommendation 6

The childminder to ensure that the service child protection policy clearly indicates local contact details should she have a child protection concern. This policy to then be shared with parents.

National Care Standards Early Education and Childcare up to the age of 16 - Standard 14: A Well-managed Service

**This recommendation was made on 15 December 2015.**

### Action taken on previous recommendation

No written policy and good understanding on child protection however verbally outlined what she would do in a situation.

## Recommendation 7

The childminder to develop strategies which would involve the children and parents in regularly assessing and improving the quality of the overall service.

National Care Standards Early Education and Childcare up to the age of 16 - Standard 5: Quality of Experience; Standard 13: Improving the Service; and Standard 14: A Well-managed Service

**This recommendation was made on 15 December 2015.**

### Action taken on previous recommendation

This had been partly met by daily discussion, photos and texts to the parents. Formal questionnaires and mind maps were discussed to improve this area.

## 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).

## Enforcement

No enforcement action has been taken against this care service since the last inspection.

## Inspection and grading history

Date	Type	Gradings	
30 Oct 2015	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	Not assessed
		Management and leadership	3 - Adequate
22 Mar 2013	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	Not assessed
11 Jan 2011	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
18 Feb 2010	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
12 Jan 2009	Announced (short notice)	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	Not assessed

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