

Briede, Baiba **Child Minding**

Type of inspection: Unannounced
Inspection completed on: 13 March 2018

Service provided by:
Briede, Baiba

Service provider number:
SP2009974374

Care service number:
CS2009228545

The service

Introduction

Ms Briede has been a registered childminder since 2010. Current registration with the Care Inspectorate 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 three 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. Overnight care is not provided. Minded children cannot be cared for by persons other than those named on the certificate.

The service was provided from the childminder's home in the rural village of Stuartfield, Aberdeenshire, close to the village school, playgroup, shops and park. The areas used by the children were the lounge, kitchen dining room and ground floor bathroom. Children had access to the rear garden.

The aims of the service were comprehensive, summarised they included to:

- create a warm, fair, stimulating and happy home from home environment where children feel welcomed whilst they play and learn
- promote a healthy balanced diet
- encourage friendship and trust
- treat all children with the respect and understanding they deserve
- listen to children and value them as individuals
- work in partnership with parents
- provide play that will be interesting and encourage their all round development
- maintain a supervised and clean environment which ensures the health and safety of children in my care
- keep up-to-date with training.

What we did during our inspection

We wrote this report following an unannounced inspection carried out by two early learning and childcare inspectors. The inspection took place on 13 March 2018 between 14.30 and 17.00. Feedback was given to the childminder during and at the end of the inspection.

During the inspection we observed the childminder working with minded children and evaluated the quality of care, environment and management and leadership. We looked at relevant documents and records including children's records, care plans, and relevant policies.

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 parents to work with the 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

The children present told us that they were happy coming to the childminder's home after school; they liked being with the friends they had made there. They told us that the childminder asked them about activities they would like to do and that they had lots to do there.

One parent returned a completed questionnaire to us before the inspection which showed that they were very happy with the quality of care provided.

Self assessment

We did not receive an updated self-assessment from the childminder, because she had recently taken a break from childminding.

What the service did well

A warm, caring relationship was evident between the childminder and the minded children. Interaction was attentive and focussed on the needs of the individual and their interests. The childminder asked parents what they wanted for their child in order to get her approach right. Healthy lifestyles were promoted with the children.

The play environment was spacious and child friendly. Children were able to choose from a wide range of play activities they like, independently. Children were involved in the wider community.

The service was well-managed and appropriate, organised records were kept. The childminder had attended core training courses and improved health and safety considerations for the children. Parents were asked for their ideas to shape the service.

What the service could do better

The childminder needed to find out more about the national child protection guidance and develop her own child protection policy to give clear information to parents. The policy on giving medication to children could also be clearer. New guidance should be used to help the childminder reflect on and continue to improve her service.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	4 - Good
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

We evaluated the quality of care and support as good.

We observed that the childminder made the children very welcome in her home. Warm and friendly relationships were established which meant children were relaxed in the company of the childminder and confident in expressing their views. The childminder took account of children's moods and interests and was

flexible in her approach, ensuring the children participated in activities they enjoyed. The childminder was a good role model. As a result, children engaged positively with each other, helping the younger child to learn how to play table football; this meant he was included in their play.

Following a requirement at the previous inspection all children now had an up-to-date care plan in place and the childminder had all the information she needed in order to respond to children's individual needs.

Younger children attended local playgroups, enabling them to access their entitlement to pre-school education and make friends with children their own age. Outings, for example to feed the ducks, helped children to get to know their local community.

Children were encouraged in healthy lifestyles. Children had regular access to the garden for outdoor play and often visited the local park for energetic physical activity. Healthy snacks and drinks were provided by the childminder. A parent responding to our pre-inspection questionnaire told us that children's likes and dislikes were taken account of. Parents provided packed lunches for children.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of environment

Findings from the inspection

The quality of environment for the children was evaluated as good.

The childminder had recently moved house and had followed appropriate procedures to register the property with the Care Inspectorate and ensure the environment was safe and suitable for the children. The new premises offered increased space for the children to play. It was observed to be well-maintained, safe, clean and inviting.

The home was very child-friendly. Children had easy access to a wide range of good quality toys and activities suitable for all ages and stages. This meant they could be independent in their play and make their own choices. Parents reported that lots of craft opportunities were provided in response to a child's enjoyment.

Following a requirement at the previous inspection the childminder had developed her knowledge of infection control and put better procedures in place. Protective clothing was now used for nappy changing, children with illnesses were now excluded for appropriate times and different towels were used for the family and children. These changes meant children were now better protected from the spread of infection.

Also in response to a previous requirement, the childminder had improved her first aid knowledge and now felt confident in resuscitation methods and dealing with a child choking. A first aid kit was now in place, which

meant the childminder was better equipped to support children if they had an accident. Appropriate records of accidents were kept.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 – good

Quality of staffing

This quality theme was not assessed.

Quality of management and leadership

Findings from the inspection

The quality of management and leadership of the service was evaluated as good.

Following the previous inspection the childminder had taken forward an appropriate action plan and addressed and met the requirements and almost all of the recommendations made at the previous inspection. As a result there were clear improvements in the service for the children.

A comprehensive statement of aims and objectives had been developed to give the childminder a framework for her practice and to help parents understand what the service offered. Our observations were that the childminder was meeting her aims well and that outcomes for children were good.

The childminder had attended relevant training and improved her knowledge of first aid techniques and infection control considerations. Acting on this knowledge, improvements had been made that meant children were now safer and better protected from infection in the service. The childminder now had access to information on further courses available and planned to continue to develop her knowledge, skills and qualifications. Training on GIRFEC had yet to be undertaken.

Policies had been developed to reflect good practice as advised; however, information on medication procedures should be separated out from the infection control policy. Guidance on procedures for the safe administration of medication can be found here:

<http://hub.careinspectorate.com/media/189567/childrens-service-medication-guidance.pdf>.

The recommendation from the previous inspection was not fully met and is carried forward in this report (**see recommendation 1**).

The childminder was clear about her role in protecting children and keeping them safe. The child protection policy referred to talking to parents about any concerns as a first step. We discussed circumstances when this may not be the case; the policy needed to be made clearer. The policy did not refer to the national guidance which the childminder must familiarise herself with and use for direction (**see recommendation 2**). The guidance can be found at:

<http://hub.careinspectorate.com/media/109557/sg-national-child-protection-guidance.pdf>.

Children and families were involved well in shaping the service. Effective daily communication helped the childminder carry out parents' wishes in caring for their children. The childminder talked to parents about her plans and ideas and had offered the opportunity for group discussions. A notice board shared useful information and invited parents' ideas. The complaint procedure now needed to be updated to remove the address of the Aberdeen office of the Care Inspectorate as the location and procedures have changed.

Parents had evaluated the service using questionnaires which showed positive feedback. Recent events meant that the childminder had not been able to update her self-assessment or spend time on reflection and evaluation. We directed her to new Care Inspectorate publications which will help her to continue to develop her service.

Your Childminding Journey; an online resource <http://www.childmindingjourney.scot/>
And My Childminding Experience: <http://hub.careinspectorate.com/media/582717/my-childminding-experience.pdf>.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. In order to safely administer medication to children and ensure their health and wellbeing the childminder should develop a clear policy and procedure on the administration of medication and implement these effectively.

National Care Standards for Early Education and Childcare up to the age of 16 - Standard 14: Well-Managed Service.

2. In order to ensure positive outcomes for children the childminder should further develop her knowledge of the national child protection guidance and review and develop her policy accordingly.

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

Grade: 4 - good

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

Previous requirements

Requirement 1

In order to protect the health and wellbeing of the children the childminder must ensure that a robust infection control policy is developed and procedures are implemented effectively.

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)(d).

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 1 month, on receipt of this report.

This requirement was made on 13 February 2017.

Action taken on previous requirement

The childminder had developed her knowledge of infection control and put better procedures in place. Protective clothing was now used for nappy changing, children with illnesses were now excluded for appropriate times and different towels were used for the family and children. These changes meant children were now better protected from the spread of infection.

Met - within timescales

Requirement 2

In order to ensure children's care meets their personal needs the childminder should ensure that records of information and care plans are consistently in place for each child and updated at least once every six months.

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 5, Care Plans.

National Care Standards for Early Education and Childcare Up to the Age of 16 - Standard 14: Well-Managed Service

Timescale: Within 6 months, on receipt of this report.

This requirement was made on 13 February 2017.

Action taken on previous requirement

All children now had an up to date care plan in place and the childminder had all the information she needed in order to respond to children's individual needs.

Met - within timescales

Requirement 3

In order to be able to support children's health and wellbeing effectively if they have an accident the childminder must attend an accredited paediatric first aid course and provide a first aid kit.

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) - Welfare of Users.

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

Timescale: Within 6 months, on receipt of this report.

This requirement was made on 13 February 2017.

Action taken on previous requirement

the childminder had improved her first aid knowledge and now felt confident in resuscitation methods and dealing with a child choking. A first aid kit was now in place which meant the childminder was better equipped to support children if they had an accident.

Met - within timescales

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

Previous recommendations

Recommendation 1

The childminder should continue to develop ways to involve parents and children in the evaluation of the service.

National Care Standards for Early Education and Childcare Up to the Age of 16 - Standard 13: Improving the Service

This recommendation was made on 20 February 2013.

Action taken on previous recommendation

The childminder had improved her consultation and information sharing with parents and children.

The recommendation was met

Recommendation 2

In order to ensure that the childminder has the right knowledge and skills to meet children's needs the childminder should continue to plan and attend professional development opportunities, including GIRFEC training.

National Care Standards for Early Education and Childcare Up to the Age of 16 - Standard 12: Confidence in Staffing

This recommendation was made on 13 February 2017.

Action taken on previous recommendation

The childminder had attended training on First Aid, Infection control and elementary food hygiene and made significant improvements. Further training was planned and GIRFEC had yet to be undertaken.

The recommendation was met.

Recommendation 3

In order to meet the needs of service users effectively the childminder should develop a clear statement of aims and objectives for the service.

National Care Standards for Early Education and Childcare up to the Age of 16 - Standard 14: Well-Managed Service

This recommendation was made on 13 February 2017.

Action taken on previous recommendation

A comprehensive statement of aims and objectives had been developed and was impacting on the service.

The recommendation was met.

Recommendation 4

In order to safely administer medication to children and ensure their health and wellbeing the childminder should develop a clear policy and procedure on the administration of medication and implement these effectively.

National Care Standards for Early Education and Childcare Up to the Age of 16 - Standard 14: Well-Managed Service

This recommendation was made on 13 February 2017.

Action taken on previous recommendation

The childminder had made a start on developing her medication policy however further development was still needed to ensure safe procedures were in place for administering medication to children.

The recommendation was not met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at 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	
11 Jan 2017	Unannounced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	Not assessed
		Management and leadership	3 - Adequate
20 Feb 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	Not assessed
13 Mar 2012	Unannounced	Care and support	3 - Adequate
		Environment	5 - Very good
		Staffing	Not assessed
		Management and leadership	Not assessed
16 Dec 2010	Announced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	Not assessed

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