

Watson, Maureen

Child Minding

Type of inspection: Unannounced
Inspection completed on: 15 May 2018

Service provided by:
Watson Maureen

Service provider number:
SP2003905469

Care service number:
CS2003010064

The service

Introduction

Maureen Watson has been registered with the Care Inspectorate since 2002 to provide a care service to a maximum of eight children at any one time under the age of 16 years. A maximum of six will be under 12, 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 foster children, as well as children of the childminder's family.

The service is provided from the childminder's home within a residential area of Perth that is close to the local school, shops, parks and other amenities. The areas used to provide the service were the dedicated playroom, living room, kitchen and family bathroom. Children also had access to the rear garden.

Aims of the service include providing 'a child-centred environment where children are cared for in a safe, loving and stimulating way ensuring individual needs are met. I will offer a variety of stimulating learning activities that will encourage and challenge the development of children. I will emphasise this through the value of play. Our activities will include art and crafts, free play, structured play (for older children), imaginary play, music and stories.'

What we did during our inspection

We wrote this report following a short notice announced inspection, which took place between 10:00 and 12:30 on 23 April 2018, between 10:15 and 11:45 on 26 April 2018 and again between 10:15 and 11:30 on 5 May 2018. An inspector from the Care Inspectorate carried out the inspection.

During this inspection, we spoke to the childminder and observed the children present. We also spoke to a parent to gain their views and took account of a completed parent/carer questionnaire. We observed the care given by the childminder and looked at documents including care plans, medication and policies and procedures.

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 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. They are often referred to as the SHANARRI wellbeing indicators.

Views of people using the service

The children present were observed to be calm and settled in the service. Children could move around the childminder's home freely and select from the toys available. Due to the age of children, we were unable to gain their opinions.

One parent returned a questionnaire to us. The parent strongly agreed that they were happy with the quality of the care their child received. We spoke to a parent by telephone who also confirmed they were happy with the care and support their child received. Comments from parents included:

'Maureen is an excellent childminder. She is very kind-hearted and goes above and beyond to care for the children.'

'Maureen has helped myself out a lot recently.'

Self assessment

We did not receive a self assessment from the childminder.

The childminder had no plans in place to identify areas for improvement or develop the service further.

Issues relating to the quality of the services are considered below.

What the service did well

Children's basic care needs were recorded in newly introduced personal plans.

Children were supported to be inducted into the service through settling in sessions.

Children received some simple interactions with the childminder, which met their basic needs.

Children received healthy snacks, lunches and dinners, which took account of their likes and dislikes.

There were clear expectations in place in relation to behaviour that the children were encouraged to follow.

Children had access to some basic play resources, which provided some challenge and enjoyment.

The childminder had recently introduced learning and development records for children.

What the service could do better

Children's personal plans must be developed further to ensure that the childminder had detailed information about children's needs, especially where children required additional support or medication.

Children's medication information and protocols must be robust to ensure children are kept safe.

The childminder must ensure that children are prevented from leaving her home unaccompanied. The childminder should ensure she conducts risk assessments of her home, garden and regular outings to keep children safe.

Children would benefit from accessing resources in the local community, which would enable children to socialise with other children as well as taking part in a wider range of activities.

The childminder should review the equipment and resources available to ensure they meet the needs of the children attending the service and that these are of good quality.

The childminder should develop processes to ensure all equipment and resources are kept clean, especially those that children are likely to put in their mouths.

The childminder should consider what she would do in the event of an emergency and have an associated procedure in place.

To protect children from harm, the childminder should update her knowledge, understanding and procedure for managing child protection concerns.

The childminder should also identify training needs that she may have and attend appropriate courses. The childminder should ensure she keeps up to date with best practice and implements this in her service.

Parents and children should have opportunities to provide feedback on the quality of the service they attend.

The childminder should review and develop her policies and procedures as they currently do not reflect the service that is being provided. This should also include the services aims and objectives.

The childminder must keep records of all accidents and incidents in the service.

The childminder should also make herself familiar with the Care Inspectorate's notification guidance so she knows when to notify the Care Inspectorate; such as when there has been serious accidents, incidents, or when asked for information such as self assessment and annual returns.

From this inspection we graded this service as:

Quality of care and support	1 - Unsatisfactory
Quality of environment	1 - Unsatisfactory
Quality of staffing	not assessed
Quality of management and leadership	1 - Unsatisfactory

Quality of care and support

Findings from the inspection

The childminder provided unsatisfactory care and support to children. This meant that there were major weaknesses in critical areas of the service that required immediate action to improve experiences and outcomes for children.

All children had a personal plan in place. These had been introduced since the last inspection. They contained basic information such as toileting support needs, food allergies, likes and dislikes as well as contact details for parents/carers. Where children required additional support, the childminder did not hold any additional information. Through discussions with parents and the childminder, it was clear the childminder had not considered how she kept children safe or promoted their health or wellbeing. As a result, children's needs were not being met. A requirement was made. See improvement notice issued 14 May 2018, available at www.careinspectorate.com.

Interactions between the childminder and the children were observed to be minimal. It was clear that children often played with the other children and were comfortable with minimal interactions. The childminder should reflect on how she engages with children to ensure she is providing high quality care and support to children. There were however no negative interactions.

The childminder shared important information about each child's session with parents and carers. This was done through informal discussions during drop off and collection times. The childminder told us about a previous family who requested a daily diary be completed as a way of sharing information, however this was not routinely offered to parents.

The childminder had a clear routine in place that children followed. This centred on staying at home and allowing children to play. Some children attended short sessions, with others spending the majority of the day with the childminder. The childminder should evaluate her routine and consider whether this provides the best possible care for children. It would also be beneficial for children to have opportunities to take part in activities within the local community on a regular basis. See recommendation one.

We audited the medication paperwork and procedures in place to ensure these supported children's safety and health. The childminder had updated her paperwork since the last inspection; however, some work was still required on her policies and procedures. We found that information held was not clear about the circumstances when children should receive medication, what the potential side effects were and what procedures to follow in an emergency. We discussed this with the childminder and found she was not confident. We signposted the childminder to the 'Management of medication in daycare of children and childminding services'. This was available on the Care Inspectorate Hub at www.hub.careinspectorate.com. We provided the childminder with a copy of this after the inspection. See requirement one.

Children's achievements have started to be recorded and recognised by the childminder. The childminder had begun using paperwork purchased from the Scottish Childminding Association. These had been written with input from parents and a small level of input from children. As these documents had recently been put in place, we were unable to identify how the childminder would continue to develop children's learning, especially as she had no plans in place to review or update these records.

We asked the childminder how she supported children's behaviour to ensure this followed best practice, was respectful towards children as well as being supportive. The childminder did not have a clear policy in place but felt that children knew the boundaries well. Due to the ages of children present during the inspection, we were unable to ask their opinion of the rules and boundaries. The childminder had clear consequences in place, which would result in technology being taken away or children not being allowed to play in the garden. This was not respectful and did not support children to understand why their behaviour was not appropriate. We asked the childminder to ensure a clear policy was in place that followed best practice guidance and took account of the wellbeing indicators as described above. See recommendation two.

Requirements

Number of requirements: 1

1. In order to ensure that children are kept safe and healthy, the childminder must ensure that she has a clear administration of medication policy, procedure and paperwork in place.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which state, 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24).

It is also necessary to comply with Regulation 4(1)(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, SSI 2011/210.

Recommendations

Number of recommendations: 2

1. To ensure children receive care that is focused on meeting their individual needs, the childminder should enable children to have opportunities to access activities and resources within the local community.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, 'I experience care and support free from isolation because the location and type of premises enable me to be an active member of the local community if this is appropriate.' (HSCS 5.9).

2. To ensure children's behaviour is supported well, the childminder should have clear procedures in place that are respectful and help children to reflect on and discuss and learn from any incidents.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, 'I have agreed clear expectations with people about how we behave towards each other, and these are respected.' (HSCS 3.3).

Grade: 1 - unsatisfactory

Quality of environment

Findings from the inspection

The environment provided by the childminder was unsatisfactory. This meant that there were major weaknesses in critical areas of the service that required immediate action to improve experiences and outcomes for children.

The service operated from the childminder's family home. This was a first floor flat near the centre of Perth. Children had use of the childminder's living room, playroom, kitchen and family bathroom. Children could also access the rear garden.

The childminder had a range of toys, which children could access independently. Children were able to move around the childminder's home freely, with minimal supervision by the childminder. Children enjoyed playing with the baby and buggy, tractor, musical shakers, small cars and the car track. We discussed with the childminder how she could develop the resources available to children, which would stimulate their natural curiosity, learning and creativity. See recommendation one.

We found that some of the resources would benefit from being cleaned. We signposted the childminder to the 'Infection prevention and control in childcare settings (daycare and childminding services)'. This was available on the Care Inspectorate Hub at www.hub.careinspectorate.com. This document provided guidance on how to effectively clean resources. We provided the childminder with a copy of the guidance after the inspection.

At the previous inspection, we noted that the childminder's kitchen was very cluttered and presented risk and hazards in relation to food preparation. We asked the childminder to ensure that areas used in her childminding service were uncluttered to ensure that these were safe for children. See requirement one.

The childminder told us that she was providing meals and snacks to children in her care, although she had not registered with the environmental health department. We signposted her to the application for Perth and Kinross Council. We saw this had been completed by our second visit. The childminder told us that children received healthy meals and snacks including crackers with cheese, cereal bars, fruit, mince and potatoes. The childminder told us she followed 'Setting the Table', which provides guidance on providing healthy meals and snacks for children.

We had asked the childminder on two separate occasions to put in place robust risk assessments covering all aspects of her service. This would demonstrate how the childminder ensured that children in her care were kept safe. The childminder had not attempted to address this recommendation. The childminder's policy stated that risk assessments would be updated daily to ensure no hazards were present in the service. Through our observations of the children, discussions with the childminder and taking account of information relating to a serious incident, we have made this a requirement. See improvement notice issued 14 May 2018, available at www.careinspectorate.com.

Children were able to be active on a regular basis. The childminder had a garden with appropriate play equipment and toys such as a climbing frame, swings and slide. The childminder also told us she sometimes took children to the park in the summer holidays or to the local church hall to play. We expect children to have daily opportunities to play outdoors, and not just as part of a daily routine when walking to collect children from school or nursery.

We asked to look at the childminder's records of accidents/incidents that had taken place within the service. The childminder told us that she had not had any serious accidents/incidents so there were no records. The childminder told us that where children had small bumps or scrapes these were informally shared with parents. This was different to the information in the childminder's policy, which stated that all minor cuts and abrasions would be recorded. We discussed a specific incident that had taken place but the childminder was not clear on why this was not recorded. See recommendation two.

Where children required support with toileting the childminder had basic procedures in place, however these did not follow best practice guidance. We again signposted the childminder to 'Infection prevention and control in childcare settings (daycare and childminding services)' that was available on the Care Inspectorate Hub at www.hub.careinspectorate.com. This included detailed information on how to provide safe and hygienic personal care. As detailed above the childminder should also ensure that children's toileting needs are fully discussed with parents and clear plans are put in place.

Requirements

Number of requirements: 1

1. In order to ensure that children are cared for in a safe and hygienic environment, the childminder must ensure that all areas used to provide care are kept clean, tidy (including equipment and resources) and free from clutter.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which state, 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.22).

It is also necessary to comply with Regulation 10(2)(d) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, SSI 2011/210.

Recommendations

Number of recommendations: 2

1. To ensure children can choose from a range of stimulating resources and activities, the childminder should review all equipment and resources available.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity.' (HSCS 2.27).

2. To promote children's safety and health, the childminder should ensure all accidents and incidents are recorded and shared with parents/carers.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, 'I use a service and organisation that are well led and managed.' (HSCS 4.23).

Grade: 1 - unsatisfactory

Quality of staffing

This quality theme was not assessed.

Quality of management and leadership

Findings from the inspection

The quality of management and leadership was unsatisfactory. This meant that there were major weaknesses in critical areas of the service that required immediate action to improve experiences and outcomes for children.

The childminder must review her policies to ensure these accurately reflect the service being provided. As detailed above, the majority of policies did not reflect the practices of the childminder and on some occasions directly contradicted these. This was also evident from reviewing the childminder's aims and objectives. Only one element of the childminder's aims and objectives was being met. This should also now be reviewed. We highlighted to the childminder that a number of policies were missing such as a complaints policy. This must be introduced so that parents and carers are clear about how to make complaints about the service. See recommendation one. We signposted the childminder to 'Health related policy and procedure - Template for all services' that was available on the Care Inspectorate Hub at www.hub.careinspectorate.com. This provided guidance on writing robust policies and procedures.

Children had little opportunities to provide feedback on the quality of activities, equipment/resources and outings. The majority of decisions were taken by the childminder. This was in contrast to the childminder's policy to support the participation of children. The policy stated that children would be actively consulted and their views would be valued, and opportunities would be provided through questionnaires, mind maps and feedback sessions. We saw no evidence of how the childminder was supporting children to share their views or how she was meeting her own policy. See recommendation two. There were some informal ways of parents sharing their views; however, these were not actively sought by the childminder.

The childminder had not submitted a self assessment as required. We discussed with the childminder how she assessed the quality of the service provided and what she had developed since the last inspection. The childminder had introduced very basic personal plans since the last inspection; however, there was no evidence that this had improved the quality of the service for children. There were no other developments identified or planned.

The childminder had some knowledge about what important events she must notify to the Care Inspectorate. This included any serious accidents/incidents. These notifications should be made immediately. Because of a serious incident, we had to contact the childminder on multiple occasions before a notification was submitted. The childminder must ensure these are submitted when required and within the timescales provided. See requirement one. We provided the childminder with the notification guidance that was available on the Care Inspectorate website at www.careinspectorate.com/index.php/notifications.

We previously asked the childminder to update her knowledge and understanding of child protection, including local guidance. This would ensure that children's health, safety and wellbeing could be protected. The childminder had not addressed this, however she had plans in place to access an online child protection refresher course, therefore we made a recommendation. See recommendation three.

The childminder had access to a wide range of best practice guidance. This included through the Scottish Childminding Association, Care Inspectorate Hub, regular newsletters and a good working relationship with a local community nursery. It was therefore disappointing to see little if any evidence of how best practice guidance had been used to provide a good quality service.

We discussed with the childminder the procedures she would follow in the event of an emergency. The childminder had nothing in place. We discussed the options the childminder had, which included using a neighbour as a safe place or the local community nursery. If the childminder needed to evacuate her home, in an emergency, she had no idea how this would be achieved safely and how children's needs would be supported during this. This presented a potential hazard to the safety and health of children especially those who required additional support. See recommendation four.

Requirements

Number of requirements: 1

1. The childminder must submit information or notifications to the Care Inspectorate when requested to do so and in line with the publication 'Records childminding services must keep and guidance on notification reporting'. This is available on the Care Inspectorate website.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, 'I use a service and organisation that are well led and managed.' (HSCS 4.23).

It is also necessary to comply with Section 53(6) of The Public Services Reform (Scotland) Act 2010.

Recommendations

Number of recommendations: 4

1. To ensure children, parents and carer are clear about the service that is being provided, the childminder should:

- (a) review the services policies, procedures, aims and objectives
- (b) ensure these are in line with the service provided
- (c) follow best practice guidance in writing policies.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, 'I use a service and organisation that are well led and managed.' (HSCS 4.23).

2. To ensure children, parents and carers are consulted on the quality of the service provided; the childminder should actively seek feedback and act upon any areas for improvement where appropriate.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, 'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions.' (HSCS 2.11).

3. To ensure children's health, wellbeing and safety is promoted, the childminder should update her skills, knowledge and procedures in relation to child protection.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

4. To ensure children are kept safe, the childminder should have clear procedures in place to follow in the event of an emergency. This should take account of the individual needs of children and how these will be supported.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state, 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14).

Grade: 1 - unsatisfactory

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

Previous requirements

Requirement 1

To support children's care, learning and development, the childminder must ensure children's personal plans and learning and development records accurately reflect each child's care needs.

To achieve this, the provider must ensure:

- a. All personal plans accurately reflect children's health, safety and wellbeing needs.
- b. Personal plans are reviewed with parents and/or children at least every six months.

In accordance with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Scottish Statutory Instrument 2011/210 Regulation 4 (1) (a) - Welfare of Users.

National Care Standards, Early Education and Childcare up to the age of 16: Standard 3, Health and Wellbeing, Standard 7, A Caring Environment and Standard 14, A Well-managed Service.

Timescale: 01 April 2018.

This requirement was made on 23 February 2018.

Action taken on previous requirement

The childminder has introduced basic care plans since the last inspection, however these do not accurately reflect children's individual needs.

Not met

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

Previous recommendations

Recommendation 1

We have recommended that the childminder develop a risk assessment and policies which identify the potential risks and hazards associated with her service.

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

This recommendation was made on 23 February 2018.

Action taken on previous recommendation

The childminder had not developed any risk assessments and we saw little evidence of how risks and hazards were being addressed. This recommendation had not been met.

Recommendation 2

We have recommended that the childminder become familiar with her regulatory responsibilities to ensure she is complying with the Public Services Reform (Scotland) Act 2011.

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

This recommendation was made on 23 February 2018.

Action taken on previous recommendation

The childminder had not submitted an action plan following her last inspection, or a self assessment when requested to do so. This recommendation had not been met.

Recommendation 3

We have recommended that the childminder access a course in Child Protection to refresh her skills and knowledge and ensure children's safety in the service.

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

This recommendation was made on 23 February 2018.

Action taken on previous recommendation

The childminder had not accessed training around child protection. This recommendation had not been met, and has been repeated.

Recommendation 4

It is recommended that the childminder access the latest best practice guidance about medication and update the service's policy, practice and paperwork to ensure children's safety.

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

This recommendation was made on 23 February 2018.

Action taken on previous recommendation

The childminder had not accessed best practice guidance about medication nor updated the service's policy, practice or paperwork around medication. This recommendation had not been met, and has been repeated.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

Please see Care Inspectorate website (www.careinspectorate.com) for details of enforcement action taken against the service.

Inspection and grading history

Date	Type	Gradings
10 Jan 2018	Announced (short notice)	Care and support 3 - Adequate Environment 3 - Adequate Staffing Not assessed Management and leadership 2 - Weak
12 Dec 2016	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing Not assessed Management and leadership 3 - Adequate
3 Dec 2015	Unannounced	Care and support 4 - Good Environment 3 - Adequate Staffing Not assessed Management and leadership 3 - Adequate
28 Nov 2014	Unannounced	Care and support 3 - Adequate Environment 4 - Good Staffing Not assessed Management and leadership 4 - Good
15 Apr 2014	Re-grade	Care and support Not assessed Environment Not assessed Staffing 2 - Weak Management and leadership Not assessed
11 Nov 2013	Announced (short notice)	Care and support 3 - Adequate Environment 4 - Good Staffing 4 - Good Management and leadership Not assessed

Date	Type	Gradings	
19 Nov 2010	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
11 Sep 2008	Announced (short notice)	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good

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