

Stewart, Andrea

Child Minding

Type of inspection: Unannounced
Inspection completed on: 12 June 2018

Service provided by:
Stewart, Andrea

Service provider number:
SP2004915815

Care service number:
CS2004059176

The service

Introduction

Andrea Stewart registered with the Care Inspectorate on 1 April 2011.

The childminder is registered 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.

The service is provided from a terraced property in the Aberdeen suburb of Kincorth. The childminder's home is close to local schools, parks and amenities. Children have access to the living room, upstairs bathroom and garden, which is situated to the rear of the property. The aims of the service are to "ensure a variety of activities are organised for each day taking into consideration the age of each child, and to look after the children in my care to the best of my ability".

What we did during our inspection

We compiled this report following an unannounced inspection, which took place between 13:20 and 14:35 on 29 May 2018, and 09:30 and 13:00 on 12 June 2018. We gave feedback to the childminder on 12 June 2018. A practitioner inspector carried out the inspection.

We spoke with the childminder and three minded children who were present across the duration of the inspection. We observed the childminder's interaction with the children, and looked at the environment, children's care plans, policies and insurance documents.

We check services are meeting the principles of Getting it Right for Every Child (also known as GIRFEC). This is Scotland's national approach to improving outcomes and wellbeing for children by offering the right help at the right time by 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 GIRFEC. They are: safe, healthy, achieving, nurtured, active, respected, responsible and included. They are often referred to as the SHANNARI wellbeing indicators.

Views of people using the service

The three minded children present appeared settled and happy in the childminder's home. Two of the children were too young to give their views. One older child told us he "liked the number one" (puzzle).

We provided the childminder with three Care Standards Questionnaires; however, we did not receive any completed questionnaires before the inspection. We asked the childminder to provide us with parent contact details in order to seek feedback on the service provided.

Self assessment

We did not receive a self assessment from the childminder.

What the service did well

The childminder had a nice nature with the children in her care, and was responsive to their requests. She had good relationships with families, which supported her in meeting individual children's needs.

What the service could do better

The childminder should prioritise training, in particular food hygiene. She should also ensure that she has the relevant health professional details for appropriate children. The childminder should consider developing her environment, including the range of resources both indoors and out. She should also continue to develop different methods of engaging with parents and children in order to evaluate and improve her service.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	3 - Adequate
Quality of staffing	not assessed
Quality of management and leadership	3 - Adequate

Quality of care and support

Findings from the inspection

The childminder had a friendly and warm nature with the minded children in her care, engaging with them in a fun manner. Children appeared comfortable and settled in the childminder's home which supported them to feel safe. Good relationships existed between the childminder and families, which encouraged a positive and inclusive atmosphere.

Children's individual needs were known by the childminder. She gave examples of how she supported them, which promoted their wellbeing. Basic care plans in place documented children's preferences and contact details. A previous recommendation suggested that the childminder should record health visitor details for children. These were not in place. The childminder should record these details to support children's care needs.

(See recommendation 1.)

The childminder had a good knowledge of child protection, which supported her in keeping children safe. To further safeguard children's wellbeing, the childminder should develop her child protection policy to include up-to-date information in line with best practice guidance.

Using chronologies would support the childminder in documenting and assessing significant information. These can be used to identify any action that is needed.

Guidance can be found below:

Chronologies:

<http://hub.careinspectorate.com/media/468617/practice-guide-to-chronologies-2017.pdf>

Children had opportunities to be sociable at meal and snack times. The childminder had a table that children could use to sit at whilst eating which encouraged respect and inclusion. Food provided was in line with best practice guidance and included sandwiches, crackers, rice, fruit, and toast. The childminder was aware of food swaps to encourage healthy alternatives such as 50/50 bread. This encouraged children's health and wellbeing. Diluting juice being provided to children was not in line with current nutritional guidance. We encouraged the childminder to offer only water and milk to support children's dental health.

The childminder was using the Scottish Childminding Associations (SCMA) medication sheets to record parental permission and the administration of medication, which supported children's health and wellbeing. No medication policy was in place within the service. We discussed developing a policy in line with current guidance to support children's ongoing health needs. The childminder should also ensure that long-term medication sheets are in place for appropriate children and checked by parents. This will assist her in ensuring that current information on medication is being held.

Medication guidance:

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

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. In order to meet children's health and wellbeing needs, the childminder should ensure that she has relevant information within children's care plans, including health visitor details. This ensures care and support is consistent with the Health and Social Care Standards, which state 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)

Grade: 4 - good

Quality of environment

Findings from the inspection

The childminder's living room presented a space for children to relax and play in, offering a secure environment. Resources however, were limited and very few opportunities existed for children to be creative or imaginative. We suggested that the childminder consider incorporating natural and real life resources into the indoor environment. This will encourage children to be more creative and will support the development of their imagination skills. She should also consider extending on the types of experiences she provides to children overall. 'Loose parts guidance' and the 'Building the Ambition' document will support her with this. **(See recommendation 1.)**

Loose parts:

<http://hub.careinspectorate.com/media/405223/loose-parts-play-toolkit.pdf>

Building the Ambition:

<http://hub.careinspectorate.com/media/201173/national-practice-guidance-on-early-learning-2014.pdf>

Children had daily access to fresh air via walks to and from nursery and school. Children could be active at the park or on trips to the local playing fields and soft play. The childminder took children to various groups that encouraged their social skills, as well as supporting them in accessing a variety of experiences. The childminder felt that these groups were beneficial to younger children, particularly as a support in their transition to nursery. The rear garden housed a large trampoline that children could use. This however restricted physical activity due to lack of space. The childminder was considering removing this in order to create more room for children to use. We agreed this would be beneficial, and would allow her to utilise space to provide different experiences outdoors for children.

A previous recommendation had been made in relation to safer sleeping and the use of buggies. The childminder discussed how children would only sleep in a buggy now if out walking. A small portable bed used was deemed age appropriate for the children attending. The childminder should ensure that this is cleaned after every use.

Children were encouraged to wash hands before eating and after using the toilet, which minimised the risk of infection. The childminder washed her hands before preparing food, supporting children's health needs. Gloves and aprons used for nappy changing were in line with current best practice. To reduce the risk of infection further, the childminder should remove her gloves at the correct point in the changing process.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The childminder should ensure that children have access to a wide range of activities and experiences in order to support their learning and development. This ensures care and support is consistent with the Health and Social Care Standards, which state that "as a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open-ended and natural materials." (HSCS 1.31)

Grade: 3 - adequate

Quality of staffing

This quality theme was not assessed.

Quality of management and leadership

Findings from the inspection

The childminder communicated with parents via daily discussions, phone and online communication apps. This encouraged their involvement in their child's day. She discussed how she had asked parents for suggestions on outings during school holidays and had implemented some ideas that she had received. Children's views were sought by the childminder verbally and were acted upon. She had facilitated outings to parks and other places of interest. This promoted parental and child involvement within the service. The childminder should consider other ways in which she could involve parents and children further in evaluating her service, such as questionnaires or via email.

The childminder was registered with the SCMA, and used their emails to support her in keeping up to date with current best practice guidance in relation to childcare. She was also a community childminder, and used emails from a link person to assist her in developing her knowledge.

The childminder was a member of a mums' group that met every week at various places with children. She felt that this was a good source of support for her, and gave allergy awareness as an example of an area she felt her knowledge had improved in as a result.

The childminder discussed how she had used an attended playgroup to assist her in providing new experiences for the children, for example in messy play. This provided children with some different play opportunities in her home. We discussed using the Care Inspectorate Hub to support her in developing her knowledge and skills. This will encourage the development of her service whilst promoting better outcomes for children.

Core training in child protection and first aid was up to date. This was however, due for renewal this year. The childminder should ensure that she sources appropriate training to refresh her knowledge which will support her in meeting children's health and wellbeing needs.

No additional training had been accessed since the last inspection. A previous requirement made relating to training and food hygiene in particular was not met. This limited the development and improvement of the service, and increased the risk of infection to children. The childminder should ensure that she access relevant training including food hygiene in order to continue to meet children's overall needs. **(See requirement 1.)**

Requirements

Number of requirements: 1

1. To ensure positive outcomes for children and the development of her knowledge, skills and service, the childminder should source and access training, including food hygiene by 25 October 2018.

This ensures care and support is consistent with the Health and Social Care Standards, which state that "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes." (HSCS 3.14)

It also complies with Regulation 15 (b) (i) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011

Recommendations

Number of recommendations: 0

Grade: 3 – adequate

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

Previous requirements

Requirement 1

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) and GIRFEC.

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 is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2001/210) Regulation 15 – Staffing, in particular 15(b)

Timescale: within four months of receipt of this report.

This requirement was made on 20 July 2017.

Action taken on previous requirement

The childminder held first aid and child protection training, but had not sought a food hygiene course. A new requirement has been made.

Not met

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

Previous recommendations

Recommendation 1

To ensure that the childminder can meet children's care and support needs, care plans should contain all the correct details, including name of child's health visitor or named person.

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

This recommendation was made on 20 July 2017.

Action taken on previous recommendation

No health visitor or named person details were included in children's care plans. This recommendation has not been met. A new recommendation has been made.

Recommendation 2

To ensure children's safety whilst sleeping, suitable arrangements for sleep should be in place. Best practice for sleeping is in a cot or as an alternative to a buggy a sleep mat.

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

This recommendation was made on 20 July 2017.

Action taken on previous recommendation

The childminder now had a small portable bed for children to use if they required a nap whilst in her home. This recommendation has been met

Recommendation 3

The childminder to 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 20 July 2017.

Action taken on previous recommendation

The childminder discussed how she had verbally sought feedback and suggestions from children and parents for outings and activity ideas. The childminder should continue to consider other methods of involving parents and children in assessing the service. This recommendation has been 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
15 Jun 2017	Unannounced	Care and support 4 - Good Environment 3 - Adequate Staffing Not assessed Management and leadership 3 - Adequate
26 Jan 2017	Unannounced	Care and support 2 - Weak Environment 3 - Adequate Staffing Not assessed Management and leadership 2 - Weak
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

Date	Type	Gradings	
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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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