

# Somerville, Allison

## Child Minding

Type of inspection: Unannounced  
Inspection completed on: 2 August 2018

**Service provided by:**  
Allison Somerville

**Service provider number:**  
SP2003902889

**Care service number:**  
CS2003005040

## The service

### Introduction

The Care Inspectorate (CI) regulates care services in Scotland. Information in relation to all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

This service was previously registered with the Care Commission and transferred its registration to Care Inspectorate on 1st April 2011.

Allison Somerville provides a childminding service from her home in the town of Prestwick, South Ayrshire. She is registered to care for a maximum of 6 children under the age of 16 years, of whom a maximum of 6 will be under 12, of whom no more than 3 are not yet attending primary school and of whom no more than 1 is under 12 months. Numbers are inclusive of children of the childminder's family.

A full statement of the childminder's aims and objectives are available.

The childminder was seen to provide a warm, welcoming and homely environment for children in her care. We found her friendly and approachable. We viewed the one child who was present during inspection to be relaxed, happy and enjoying their time there.

### What we did during our inspection

We wrote this report following an unannounced inspection that took place on Thursday 2 August 2018 between the hours of 10.30am-1.00pm. We provided the childminder with feedback on 2 August 2018.

To assess how well the childminder had been providing care to the children using the service we gathered information from a range of sources. Getting It Right For Every Child (GIRFEC) quality indicators were used to ensure a holistic approach. More information about the GIRFEC approach can be found at [www.hubcareinspectorate.com](http://www.hubcareinspectorate.com).

During this inspection process, we looked around the areas of the childminders home used by the minded children and we gathered evidence from various sources, including the following:

We spoke with:

- The childminder
- One minded child present during inspection

We looked at:

- Children's information records
- Children's personal plans
- Service policy and procedures
- Risk assessments
- Parental permissions
- Accident recording forms
- Registration certificate
- Insurance certificates
- Medication records

- Self-assessment
- Training records
- Attendance register.

## Views of people using the service

We sent out three care standards questionnaires and asked the childminder to give them to families who used her service. Prior to inspection, we received two completed questionnaires. Responses in the care standards questionnaire told us that the parent strongly agreed that they were happy with the overall quality of care their child received. Comments they made included:

"My daughter is very happy coming to her childminder. She has built up a lovely relationship over the years and has made nice friends with the other child minded kids"

"I am more than happy to leave my daughter with Allison and go to my work worry free"

"My childminder speaks to me at drop off/pick ups and we discuss any issues/changes/ concerns. She talks about events that have happened and she tells me how she handles situations in regards to my child. I am very happy with how involved I am".

## Self assessment

The Care Inspectorate received a completed self-assessment document from the provider. We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade services under. The provider identified what it thought the service did well, some areas for development and any changes it had planned.

## What the service did well

The childminder provided a warm, welcoming and homely environment for the children she minded. She was friendly and approachable and the child present was seen to be relaxed and comfortable in her care throughout our inspection.

## What the service could do better

During this inspection we repeated recommendation to the childminder and asked her to address this.

1. The childminder should further develop children's personal plans.
2. The childminder should update administration, recording and storage of medication procedures.
3. The childminder should complete written risk assessments for her home environment.

## 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

The childminder had daily discussion with the minded children's families to ensure that their child's needs were met. This meant that important information was considered and care decisions made in partnership with families. The parents who returned our care standards questionnaire told us that the childminder asked for their view about how they wanted their child to be cared for.

The childminder gathered a range of information on each child. This information was used to plan how she would care for each child. We found the childminder used this information to plan her daily routines around the individual needs of the children. Discussions with the childminder demonstrated she knew the children well. We discussed how the childminder should further develop the children's personal plans to ensure that they reflect the current legislation including the frequency of reviewing them. To provide guidance on developing personal plans we emailed the childminder information on personal plans ( recommendation 1).

Healthy lifestyles were promoted with regular opportunity for physical play, both indoors and outdoors, contributed positively to children's health and wellbeing. The childminder was confident in her role and responsibilities for protecting children and keeping them safe and healthy. To support her practice the childminder told us that she planned to undertake a child protection awareness course. Children who were unwell did not attend the service. The childminder provided good opportunities for children and parents to be involved in the development of the service.

We asked the childminder to tell us what she did when she had to administer medication to a child in her care. The childminder showed us her medication policy and her recording procedure which she had shared with parents. We felt that the childminder had considered how she would manage the administration of medication to the minded children. However, we asked the childminder to review her medication procedures to reflect the 'Management of Medication in Daycare and Childminding Services' guidance (recommendation 2).

We observed the childminder working with the child present. She had a nurturing approach that was appropriately affectionate offering cuddles and using language to praise and encourage the child. During the inspection, the child present was settled in the care of the childminder confident their needs would be met.

### Requirements

**Number of requirements:** 0

## Recommendations

### Number of recommendations: 2

1. The childminder should further develop children's personal plans to ensure that the information recorded identifies how she will meet a child's needs whilst in her care, this should include contact details for the child's doctor. The information should be reviewed in consultation with parents at least once in every six month period or earlier if required.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: My personal 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)

2. The childminder should update administration, recording and storage of medication procedures in line with the current health guidance on the 'Management of Medication in Daycare and Childminding Services'.

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

**Grade:** 4 - good

## Quality of environment

### Findings from the inspection

On the day of inspection, we found that the childminder's home was clean, safe and welcoming for children attending the service. The childminder had a playroom within her home there was space for the children to play and space for them to rest. A low table and chairs created dining area, this was used for snacks and for organised craft activities.

There was a good range of toys and resources available that children could access. We found these to be clean and in good condition. We saw that the minded child present selecting toys and resources that they wanted to play with. This allowed them to make choices and promoted their independence.

The bathroom used by minded children was clean. The childminder provided individual hand drying resources for the minded children, reducing the risk of cross infection. Children's own nappy mats and wipes were used during nappy changes. The childminder had disposable gloves available to use however on the day of inspection the childminder did not have disposable aprons for nappy changing. The childminder agreed to obtain these.

The childminder told us that there had been no accidents since her previous inspection. We asked the childminder to show us the paperwork she would use for recording accidents and incidents. The childminder was unable to provide this. We advised the childminder that she should obtain an accident recording form. The childminder agreed to do this.

We found that the childminder carried out daily visual checks to ensure that the environment was safe, hazard-free and child friendly. We asked to view the childminders risk assessments. The childminder did not have up to date written risk assessments available, we have asked the childminder to update her risk assessments (recommendation 1).

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 1

1. The childminder should complete written risk assessments for her home environment.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that; My care and support is provided in a planned and safe way (HSCS 4.14).

**Grade:** 4 - good

## Quality of staffing

This quality theme was not assessed.

## Quality of management and leadership

### Findings from the inspection

We asked the childminder to tell us how she ensured that she was aware of and up-to-date with best practice and legislation. The childminder told us she keeps up-to-date with best practice through a variety of ways, including using the internet and a childminder Facebook page. To support the childminder to locate and access current best practice guidance we demonstrated the Care Inspectorate Hub during our inspection visit.

The childminder evaluated her service on a regular basis. She consulted with parents and children through regular discussion with them. We saw that the childminder had purchased resources to accommodate children's interests. This ensured that the children were actively involved in planning the service they received.

During our inspection, we asked the childminder if she had undertaken any training since her previous inspection. The childminder told us that she had not attended any training. The childminder told us she planned to undertake a child protection awareness update in the near future. We discussed the benefit of continuing accessing relevant professional learning and training with the childminder.

During our inspection we asked the childminder to show us her daily attendance register. We discussed with the childminder that she should expand her daily attendance register to include actual times of minded children's attendance.

The childminder had registered her service with the Information Commissioners Office (ICO). We emailed the childminder information about General data protection regulations which we asked the childminder to use to review the records she had held for minded children.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0

Grade: 4 - good

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

## Previous requirements

There are no outstanding requirements.

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

## Previous recommendations

### Recommendation 1

The childminder should expand the personal plans for each child in her care. These should show how the children's health, welfare and safety needs are to be met and must be reviewed at least once every six months.

This is in order to comply with SSI 210 The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 Regulation 5 - Personal Plans.

Timescale - Within 28 days of the date the child starts using the service.

**This recommendation was made on 15 August 2014.**

### Action taken on previous recommendation

The childminder submitted an action plan to Care Inspectorate on 25 August 2014. They wrote: A personal care plan using the example supplied will be completed for every child in my care.

During our inspection visit on 2 August 2018 we saw that the children's personal plans needed further development.

Recommendation repeated

## Recommendation 2

The childminder should update administration, recording and storage of medication policy in line with the current health guidance on the Management of Medication in daycare and childminding services.

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

**This recommendation was made on 15 August 2014.**

### Action taken on previous recommendation

The childminder submitted an action plan to Care Inspectorate on 25 August 2014. They wrote: Using the current health guidance on management of medication I have updated my admin, recording and storage of medication policy.

During our inspection visit on 2 August 2018 we saw that the childminders medication recording procedures needed to be expanded.

Recommendation repeated.

## Recommendation 3

The childminder should review and update her service risk assessment. These should reflect steps she has taken to minimise the identified risk.

National Care Standards for Early Education and Childcare up to age 16: Standard 2 – A Safe Environment.

**This recommendation was made on 15 August 2014.**

### Action taken on previous recommendation

The childminder submitted an action plan to Care Inspectorate on 25 August 2014. They wrote: To review and update service risk assessment.

During our inspection visit on 2 August 2018 we saw that the childminder needed to further develop her written risk assessments.

Recommendation is repeated.

## Recommendation 4

The childminder should review and update her service policies and procedures to ensure that they reflect best practice guidance and current legislation.

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

**This recommendation was made on 15 August 2014.**

### Action taken on previous recommendation

The childminder submitted an action plan to Care Inspectorate on 25 August 2014. They wrote: Review and update service policies and procedures as outlined above.



During our inspection visit on 2 August 2018 we saw that the childminder had up dated her service policies.

Recommendation is met.

## 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
15 Aug 2014	Unannounced	<div>Care and support</div> <div>5 - Very good</div> <div>Environment</div> <div>5 - Very good</div> <div>Staffing</div> <div>Not assessed</div> <div>Management and leadership</div> <div>5 - Very good</div>
17 Apr 2012	Re-grade	<div>Care and support</div> <div>Not assessed</div> <div>Environment</div> <div>Not assessed</div> <div>Staffing</div> <div>4 - Good</div> <div>Management and leadership</div> <div>Not assessed</div>
6 Mar 2012	Re-grade	<div>Care and support</div> <div>Not assessed</div> <div>Environment</div> <div>Not assessed</div> <div>Staffing</div> <div>1 - Unsatisfactory</div> <div>Management and leadership</div> <div>Not assessed</div>
24 Aug 2010	Announced (short notice)	<div>Care and support</div> <div>5 - Very good</div> <div>Environment</div> <div>Not assessed</div> <div>Staffing</div> <div>5 - Very good</div> <div>Management and leadership</div> <div>Not assessed</div>

Date	Type	Gradings	
4 Feb 2009	Announced (short notice)	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	Not assessed

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