

# Laurie, Sharon

## Child Minding

Type of inspection: Unannounced  
Inspection completed on: 12 June 2019

**Service provided by:**

**Service provider number:**  
SP2009976239

**Care service number:**  
CS2009234552

## Introduction

The Care Inspectorate regulates care services in Scotland. Information about all care services can be found on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

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

The service is registered to provide a care service to a maximum of 6 children under 16, of whom no more than 3 are not yet attending primary school and of whom no more than one is under 12 months. Numbers include children of the childminder's family.

The childminder currently cares for three minded children, aged eight, nine and ten years: mainly after school. On the day of our inspection, all three children were present. We were satisfied that the childminder adhered to the conditions of her registration.

The service operates from the childminder's family home in the Clydebank area of East Dunbartonshire. Minded children have access to Mrs Laurie's lounge, kitchen and upstairs toilet. Children have regular access to a large enclosed rear garden which provides opportunities for fresh air and physical play as well as growing fruit and vegetables..

The childminder's main aim is to provide a "safe, caring and stimulating environment for every child in her care."

## What we did during our inspection

We wrote this report following an unannounced inspection that took place on Wednesday 12 June 2019 between 3.15pm and 4.30pm. The inspection was carried out by an early learning and childcare inspector from the Care Inspectorate. We gave feedback to the childminder on the same day.

We issued three questionnaires to the parents of the children who used the service and received two completed responses before our inspection. We observed the childminding environment and the care given by the childminder to the three children present. We talked to the childminder and sampled a range of other evidence, including certificates, checklists and evidence of the childminder's training.

The Care Inspectorate is committed to improving the health and wellbeing of all children receiving a care service. We want to ensure they have the best start in life, are ready to succeed and live longer, healthier lives.

We check services are meeting the principles of Getting it right for every child (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. GIRFEC supports children and their parents to work with the services that can help them. There are eight wellbeing indicators at the heart of GIRFEC: safe, healthy, achieving, nurtured, active, respected, responsible and included.

## Views of people using the service

We saw that minded children were relaxed and settled in the care of the childminder. There was plenty of natural conversation and laughter as the childminder joined them in their play. Two of the children agreed to complete

one of our questionnaires and their responses indicated that they were happy with all aspects of the service. They did not offer any suggestions for what might improve their experience at the childminder's.

Both parents who responded to our questionnaire had taken time to write additional comments about the quality of the childminder's service, these included:

"My daughter is happy and relaxed when attending the childminder, she talks fondly of Sharon and they have a secure and happy relationship. I have never had any issue while my daughter has been in Sharon's care, and Sharon has been helpful and accommodating to changes in my circumstances."

"I am very happy with the care my son receives. Sharon provides an excellent service. She is organised, flexible and reliable. She interacts well with the children, who clearly enjoy attending. I'm so glad that we chose Sharon to be our child's childminder. I feel confident that when he is collected from school he has a safe and welcoming place to go where his needs are met."

Parents' views have been taken account of in the relevant sections of this report.

## Self assessment

A self assessment had not been submitted for the service, therefore we discussed the importance of this task with the childminder. The self assessment process would enable the childminder to work in partnership with families while evaluating and monitoring the quality of her service. Evaluation of outcomes for children could then be measured and improved.

## What the service did well

We saw that the childminder was very skilled in providing a caring and nurturing environment for the minded children. They knew children's individual personalities and responded attentively to their needs.

## What the service could do better

The childminder should implement children's personal plans to make sure that she has recorded information about children's individual needs and that these are reviewed at least every six months. This will help the childminder to work with families in supporting good outcomes for children.

The childminder should establish a manageable system for monitoring the quality of her service and to make improvements, such as meaningful risk assessments and the management of children's medication. The childminder should continue with plans to identify training to support her in her childminding role. She should prioritise child protection, GIRFEC and First Aid.

## 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

One of the strengths of the childminder was the relationships she had built with families, many of which lasted long after the family no longer required to use her service. The childminder had daily discussions with parents to ensure that children's individual needs were properly met. Parents commented positively in their questionnaires about the level of communication they shared with the childminder. However, because the childminder knew children so well she did not feel it was necessary to keep regularly reviewed personal plans for them. We discussed legislation which states that each child's personal plan should be in place within 28 days of them starting the service then updated at least every six months. The GIRFEC national practice model provided by Scottish Government would assist the childminder with this task. <https://www.gov.scot/policies/girfec/> (Please see recommendation 1.)

The childminder was playful and naturally modelled cooperative play for the children so that games were inclusive and fun. Children played together outdoors every day, which meant they benefited from fresh air and exercise. The childminder also contributed to children's healthy lifestyles by talking to them about healthy eating and giving them home grown fruit and vegetables to take home. Parents confirmed that the childminder provided healthy snacks and drinks for their children that took account of their dietary needs, for example:

"My son receives a variety of balanced and healthy snacks after school. He requires a dairy and egg free diet; Sharon provides healthy but satisfying snacks that are suitable for him."

We could see that the childminder's home had been issued with a food hygiene certificate by the environmental health department of her local authority. This meant that the childminder was aware of the importance of preparing food safely for children to help prevent food poisoning.

The children appeared to feel safe and secure in the care of the childminder, confident their needs would be recognised and met by her. The childminder should continue with her plan to prioritise child protection training as this will ensure that she is up-to-date with the most recent guidelines for safeguarding children. We have made a related recommendation about the childminder's continued professional development under the management and leadership section.

### Requirements

**Number of requirements:** 0

### Recommendations

**Number of recommendations:** 1

1. The childminder should ensure that each child has a personal plan in place that is reviewed with parents, and where appropriate children, at least every six months.

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 4.11).

Grade: 4 – good

## Quality of environment

### Findings from the inspection

We found the childminding accommodation to be clean and homely with plenty of resources that were suited to children's interests and stage of development. Comfortable sofas provided children with space to relax and enjoy quiet time when needed. Children made good use of the garden to play together, explore and express their individuality.

We observed that children knew the importance of washing their hands at significant times, such as after playing outdoors or before handling food. We asked the childminder to ensure that separate towels to those used by her family were available for minded children to use. This is to prevent any cross infection and keep everyone healthy. We advised the childminder that Health Protection Scotland's guidance, 'Infection Prevention and Control in Childcare Settings' had been revised several times since her last inspection: most recent edition May 2018. The childminder could access this document on the HUB area of our website – <https://hub.careinspectorate.com/media/1538/infection-prevention-and-control-in-childcare-settings.pdf>

Combined logs for cleaning and risk assessing her home helped the childminder identify what action to take to limit potential hazards to children's health and safety. There was building work underway to insulate the outer walls that had required scaffolding to be erected and the front garden was filled with building materials that people had to pass to enter the house. We acknowledged that, as landlord, the local authority had risk assessed the work. However, the childminder could not provide evidence of how she minimised risks to children, for example so they knew how to keep themselves safe near scaffolding. We have therefore repeated an earlier recommendation about risk assessments. (please see recommendation 1) and given a related recommendation about notifications under the quality of leadership and management section.

The childminder had participated in training on paediatric First Aid, which meant that she was well equipped to take appropriate action in the event of an accident or medical emergency involving a minded child. She was aware that her first aid certificate was due for renewal and should continue with plans to source training. One of the minded children occasionally needed to use an inhaler, which was self administered. We advised the childminder that she should still hold records for this, for example as part of the child's personal plan highlighted under the section on the quality of care and support. We have repeated an earlier recommendation, (please see recommendation 2).

### Requirements

Number of requirements: 0

### Recommendations

Number of recommendations: 2

1. The childminder should ensure her written risk assessments are responsive to any changes to the childminding environment, including the addition of new resources.

This ensures care and support is consistent with the Health and Social Care Standards which state that: 'My environment is secure and safe.' (HSCS 5.17)

2. The childminder should review her medication procedures to reflect the Care Inspectorate's publication - Management of Medication in Daycare of Children and Childminding Services (2014).

This ensures 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:** 3 - adequate

## Quality of staffing

This quality theme was not assessed.

## Quality of management and leadership

### Findings from the inspection

The childminder had not provided us with a self assessment prior to the inspection therefore we asked about any other monitoring measures that were in place. The childminder showed us health and safety checklists, including registers for children's attendance. She kept details of children's emergency contacts should their parents not be available. This contributed to positive communication for children's continued wellbeing.

Both parents who completed questionnaires for us agreed that overall they were happy with the quality of care their children received at the service. They believed the childminder listened to their opinions. Their comments included:

"Childminder will involve me on any changes to the service in advance and will discuss improvements and changes as and when required."

"I feel that I would be able to speak to her about any concern I had."

Two children also completed questionnaires, which confirmed that they were involved in making decisions about the service. We observed that the childminder responded to children's interests and conversations by providing additional resources or activities.

We encouraged the childminder to reflect on what was working well for her service and what could be improved. We signposted her to national guidance that would support her understanding of self evaluation 'Your childminding journey' - <http://www.childmindingjourney.scot/>

We reminded the childminder about records that she should be keeping under the conditions of her registration set by the Public Services Reform (Scotland) Act 2010. This includes notification reporting of any changes to her service, such as the recent building work that had the potential to impact on the childminding environment. Guidance on notification reporting can be found at this link - <https://hub.careinspectorate.com/media/1600/>

[records-childminding-services-must-keep-and-guidance-on-notification.pdf](#)

(Please see recommendation 1.)

The childminder intimated that she had difficulty sourcing training that fitted around her business as well as family commitments. We have repeated and extended a previous recommendation about the childminder's continued professional development. She should prioritise training in child protection, GIRFEC and first aid (please see recommendation 2). In the meantime we signposted the childminder to the Hub area of our website where she could source current best practice documents, news and information related to childminding. For example, 'My Childminding Experience' is a resource exploring and sharing good practice examples from across Scotland of how childminding can benefit children and their families. This will provide parents with reassurance that the childminder is competent in the skills needed to look after children and keep them safe.

<https://hub.careinspectorate.com/how-we-support-improvement/care-inspectorate-programmes-and-publications/my-childminding-experience/>

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 2

1. The childminder should develop systems for monitoring the quality of her service as a whole.

For example, the childminder should ensure that she notifies us of any changes to her service and ensure that she submits a self assessment for her service when requested to do so by the Care Inspectorate.

This is to ensure management and leadership 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)

2.

The childminder should access training relevant to her role and responsibilities and that keeps her up-to-date with policy guidelines and best practice. This should include Child Protection; GIRFEC; Paediatric First Aid.

This ensures management and leadership 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).

**Grade:** 3 - adequate

## 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 ensure her written risk assessments are available for inspection purposes and to evidence the frequency of which they are undertaken.

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

**This recommendation was made on 6 May 2014.**

#### Action taken on previous recommendation

We acknowledged that the childminder had some risk assessments in place, for example the Council had advised on risk assessment of the building work in relation to their own responsibility as landlords. The childminder had not informed us of the building work and there was no written evidence of how she was keeping children safe during this period. We have repeated the recommendation in the context of the HSCS.

This recommendation is not met.

#### Recommendation 2

The childminder should review her medication policy and procedures to reflect the Care Inspectorate's publication- 'Management of Medication in Daycare and Childminding Services'.

National Care Standards early education and childcare up to the age of 16. Standard 3: Health and wellbeing.

**This recommendation was made on 14 July 2015.**

#### Action taken on previous recommendation

The childminder was not currently required to administer medication to any of the minded children. However one of the children had an inhaler, which was self administered. We advised the childminder that she was still required to keep a record to this effect and have repeated the recommendation in the context of the HSCS..

This recommendation is not met.



**Recommendation 3**

The childminder should access training in relation to GIRFEC and use this knowledge to help care for the children attending her service.

National Care Standards for Early Education and Childcare up to age 16. Standard 13: Improving the Service.

**This recommendation was made on 6 May 2014.**

**Action taken on previous recommendation**

The childminder was not a member of Scottish Childminding Association (SCMA) and had not been able to source training, for example any training provided by the local authority did not fit with her work and family commitments. As the childminder had not attended training in any topics recently, we have repeated this recommendation within a wider one about the childminder's continued professional development.

This recommendation is 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](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
28 Apr 2015	3	Care and support 5 - Very good Environment 4 - Good Staffing Not assessed Management and leadership 4 - Good
6 May 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing Not assessed Management and leadership 3 - Adequate

Date	Type	Gradings	
9 May 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 3 - Adequate Not assessed
9 May 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate Not assessed
25 Jul 2011	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate Not assessed
6 Jun 2011	Announced (short notice)	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 3 - Adequate Not assessed

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