

Records childminding services must keep and guidance on notification reporting

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Records about people who use a service

There must be a record detailing their name, address and date of birth.

The date a person started using the service.

Details of the next of kin or of any person authorised to act or consent for the person using the service, including their name, address, telephone number and email address. Where necessary the information should also include details of their relationship with the person using the service and where the person has power of attorney that has been activated, what type, for example, welfare or financial guardians.

The name and address of their General Practitioner

The date they stopped using the service

If someone dies while in the service, or subsequently dies in hospital following admission to hospital at the point of receiving a service, the record must include the date, time, cause of death and name of certifying doctor of anyone who died while in the care of the service.

Where restraint or control is applied, the record should include details of the form of restraint or control, for example physical or chemical. The record should show the reasons for using the restraint or control, risk and benefits assessment, the name of the person authorising it, discussions with relatives, carer, guardian etc and arrangements for monitoring and ongoing assessment.

Detail of any incident that is detrimental to the health and welfare of a person using a service. This should include, but not be restricted to:

- Child leaving the service unaccompanied without permission
- Person given wrong medication and/or wrong dose
- Any incident resulting in serious injury
- Any incident that would be described as a 'near miss' that could have led to serious injury or harm to a service user.
- Any incident that could be considered as a child protection matter.

The detail should include any lesson learned and action taken.

Staff records

A record of all staff employed in the provision of the service. This will include: Their full name, address, date of birth, qualifications, training and experience.

Date of commencement in post and where applicable date of termination of employment.

Details of each person employed each day in the provision of the service. This should include details of their role and responsibilities, and where they work in the service.

Keep a record of any disciplinary action and outcomes taken against any member of staff.

Keep a record of PVG membership and PVG records.

Records of the training needs analysis for each member of staff and details of delivery of training.

Keep records of all staff meetings, including details of the date, agenda and decisions.

Keep records of individual and group supervision sessions of all staff employed in the service. This should include date of meeting, record of discussions and any agreed actions.

Environment and safety

Keep maintenance records of all vehicles used in the service.

Keep records of the procedure and any review of the procedure that staff must follow in the event of an emergency. This includes emergency closure.

In rented property, keep a copy of the lease agreement and permission from the landlord to operate a childminding service.

Complaints

Keep records of any complaints made by people who use the service, representatives, relative or other person. The record should include details of the date received, issues raised, action taken, outcome of the investigation, and details of how the service informed the complainant about the outcome.

Medication

Keep an accurate and up to date record of the medicines people who use the service take, which the service are responsible for storing on the premises. 'Medicines' includes homely remedies and those supplied by or for a person using the service.

Keep records detailing any incidences that a service gave medication to a person using the service without their consent or that of a person duly authorised to consent on the person using the service's behalf.

Details of any incidence where a person has not had prescribed medication available to them when the service has responsibility for the medication being administered.

Finance

Keep certificates of public liability insurance, employer's liability insurance (where childminding assistants are employed) and car insurance (where the childminding service uses a vehicle to transport minded children).

Staffing levels and deployment

Maintain a record of children's attendance to show the total number of children in the childminder's domestic premises at any one time, including all the children who live in the premises. The maximum ratio of 1 adult to 6 children, as stated in the National care standards, early education and childcare up to the age of 16, Annex A, must be maintained unless stated otherwise on the certificate of registration.

Guidance on notification reporting for Childminding services

Circumstances	Information Required	Timescale
<p>Accidents, incidents or injuries to a person using a service.</p>	<p>The Care Inspectorate regards accidents requiring notification as unforeseen events resulting in harm or injury to a person using the service which result in:</p> <ul style="list-style-type: none"> • a GP visit • a visit or referral to hospital • an injury reportable under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). <p>Note: record all other accidents and make the information available for inspection.</p> <p>An incident is a serious, unplanned event that has the potential to cause harm or loss, physical, financial or material.</p>	<p>Report the incident within 24 hours.</p>
<p>Outbreak of infectious disease.</p>	<p>Providers must notify the Care Inspectorate of a suspected or known outbreak of infection.</p> <p>We define an outbreak as the occurrence of two or more, or a higher than expected number of cases of confirmed or suspected infection, affecting people using the service and/or staff in the same area.</p> <p>A higher than expected number of cases may be a single case if the confirmed or suspected infection is rare or the suspected or confirmed case poses or may pose a significant risk to public health, for example, E.coli 0157, tuberculosis or those described in Appendix A of the Public Health etc. (Scotland) Act 2008, Part 2.</p>	<p>Report immediately.</p>
<p>Death of a person using a care service.</p>	<p>All deaths must be reported.</p> <p>For childminding services, this means while children are using the service.</p>	<p>Report immediately.</p> <p>Registered care providers should also retain records of all deaths and</p>

		circumstances of death, including any underlying illness that may have contributed to death and be prepared to submit this information on request.
Allegation of abuse in relation to a person using a service.	Report all allegations of abuse (as defined in adult support and protection and child protection legislation) involving someone using a service, including: <ul style="list-style-type: none"> • details of occurrence • persons involved (initials only) • actions taken. 	Report immediately.
Allegation of misconduct by provider, any persons employed in the childminding service or any member of the childminding household.	The Care Inspectorate defines misconduct as intentional wrongdoing, deliberate violation of a law or improper behaviour. The Care Inspectorate expects notification of all reportable misconduct of behaviour that warrants investigation, dismissal or other disciplinary action. The regulations do not limit this only to acts directed at people using a service, but also any involving staff or a service provider.	Notify the Care Inspectorate within 24 hours of receiving an allegation. Do not provide personal details of those involved at the initial reporting stage.
Criminal convictions resulting in unfitness of childminder or manager.	The regulations require that services report all convictions with the relevant information. Specific details must include the date and place of conviction, the offence the childminder/manager was convicted of and the penalty imposed.	Notify the Care Inspectorate within 24 hours of provider awareness.
Absence of the childminder or manager.	This covers: <ul style="list-style-type: none"> • any absence of more than 28 days. The notification must detail the following: <ul style="list-style-type: none"> • length or expected length of proposed absence. • the arrangements that are in place for the running of the care service during the absence. 	Notify the Care Inspectorate as soon as provider becomes aware.
Planned refurbishment or alteration or extension of premises.	Providers must notify the Care Inspectorate of any intention to refurbish or make changes to existing premises at least three months before commencement. Information required includes:	Notify the Care Inspectorate three months before work starts.

	<ul style="list-style-type: none"> • the date the intended works will start • timescale for completion • type of work to be done, for example, structural • the action taken to minimise disruption to everyone using the service. 	
Change of registration details.	<p>Notify the Care Inspectorate of changes to any of the following:</p> <ul style="list-style-type: none"> • name of service • name of provider • change of relevant individual, for example change of partners • manager of service. 	Report immediately.
Persons living at the registered premises.	<p>Providers should notify the Care Inspectorate of any changes to who is living at the premises used for providing the service, including:</p> <ul style="list-style-type: none"> • anyone living at the premises becomes 16 years of age • anyone who is 16 or over, ceases to live at the premises. • anyone 16 or over, begins to live at the premises. 	Report immediately.
Adverse event involving a schedule 2, 3, 4, 5 controlled drug	<ul style="list-style-type: none"> • Prescribing or dispensing error by e.g. pharmacy or doctor/dentist • Prescribed medication not available to be administered • Person given wrong medication or dose • Medication not recorded as given and no recorded explanation or justification • Medication incident/error resulting in injury, referral to the police or Procurator Fiscal • Medication incident/error requiring input or advice from healthcare professional, resulting in hospital admission, or considered as an adult or child protection matter. • Medication incident/error: 'near miss' that could have led to injury of harm • Medication missing or stolen • Medication or controlled drug records falsified 	Within 24 hours

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| | <ul style="list-style-type: none">• Staff referred to professional registration body re: medicines management• Staff left during or before investigation re: missing or stolen medication• Staff left during or before investigation re: poor practice in management and administration of medication | |
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