

Caley's Childminding Service

Child Minding

Buckie

Type of inspection:
Unannounced

Completed on:
9 June 2021

Service provided by:
Caley Shepherd

Service provider number:
SP2019990378

Service no:
CS2019373125

About the service

We carried out an unannounced inspection of Caley's Childminding Service on 20 April 2021. Following this we tried to use virtual technology such as email, text and calls to engage with the childminder and parents. This proved difficult due to issues for the childminder in sending the information and was delayed due to the childminder's holidays. We therefore made a second unannounced visit to the service on 8 June 2021.

Caley's Childminding Service has been registered since June 2019. The childminder may care for a maximum of 6 children up to 16 years of age these numbers include the children of the childminder's family:

Of those 6, no more than 3 are not yet attending primary school;
Of those 3 no more than 1 is under 12 months.

The service is delivered from the childminder's home in Buckie, close to local amenities such as schools, shops and parks.

The childminder's aims include:

- to provide a warm and welcoming environment for all children and their parents/carers. This shall be a safe environment where children will feel safe and free to play with adequate supervision.

This was a focussed inspection to evaluate how well children were being supported during the COVID-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of children experiencing care during the pandemic.

Feedback was given to the childminder on 9 June 2021.

This service registered with the Care Inspectorate on 19 June 2019.

What people told us

We asked the childminder to forward an email to all parents providing our contact details and asking for their feedback on the service. We received no responses.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care and support during the COVID-19 pandemic?	2 - Weak
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Further details on the particular areas inspected are provided at the end of this report.

How good is our care and support during the COVID-19 pandemic?

2 - Weak

Quality Indicator 5.1: Children's Health and Wellbeing are supported and safeguarded during the Covid-19 Pandemic.

- Children are nurtured and supported throughout their changed experience in their early learning and childcare setting.
- Effective communication with families enables responsive care to support children through changing circumstances.

During our visit there were two minded children present. The children were well settled and comfortable in the childminder's home. They were confident in approaching the childminder to request her help or for comfort and reassurance. Interactions between the children and the childminder were gentle and encouraging. This supported the children's confidence and encouraged them to feel valued and respected.

The childminder spoke confidently of the children's interests and preferences and seemed to know the children well. However, the childminder did not have any records of children's needs or experiences while attending the service. Legislation requires that personal plans be in place for all people accessing care. These should contain information needed to identify and meet children's individual needs. Personal plans should be reviewed in partnership with parents and/or children at least every six months. We discussed this with the childminder who agreed to put these in place as a priority. **(See area for improvement 1.)**

In discussions the childminder was confident in identifying the potential impact of the pandemic on older children's wellbeing. She was able to tell us how she had supported children when they shared their feelings of anxiety or isolation. The childminder recognised the benefits to children's self-esteem and confidence of simply listening when they wanted to discuss anything. We discussed the importance of keeping a record of any concerns. This would support the childminder in identifying children's needs and accurately sharing information with parents or other agencies involved in the child's care.

The childminder was aware of her responsibility to safeguard children and spoke about symptoms that may cause concerns. She was less confident in discussing her actions in recording or reporting these concerns. The childminder had a Child Protection Policy in place. We suggested that the addition of contact numbers for other agencies and a clear description of the actions required should there be a concern would support the childminder in her practice. We suggested that accessing national guidance at <https://hub.careinspectorate.com/media/1280/national-guidance-for-child-protection-in-scotland-2014.pdf> and some further training would support her in developing this policy and increase her confidence.

We discussed the importance of communication with families and the childminder told us that she had kept in touch with families using telephone calls and messaging platforms during the pandemic. This helped maintain the relationships built between the childminder, children and their parents.

Quality Indicator 5.2: Infection Prevention and Control Practices support a Safe Environment for Children and Staff.

- Children are protected as staff take all necessary precautions to prevent the spread of infection.

The childminder had provided an inviting and homely environment for children. However, during COVID-19, the application of strict infection control procedures are important to keep people safe. When changing the children's nappies, the childminder did not use a mat, or wear disposable gloves and apron. This meant that children were exposed to potential risk from infection as infection prevention and control guidance was not being followed. We discussed this with the childminder during the visit and directed her to guidance. **(See requirement 1.)**

Children washed their hands under running water and for the recommended time to support the control of infection. However, they were not encouraged to wash their hands after nappy changing took place. This would have supported the control of infection and provided opportunity to promote children's understanding of the importance of good hygiene procedures. We raised this with the childminder who agreed to develop her practice in this area.

The childminder told us that parents were no longer allowed in the house at handover times, in order to minimise the risk of infection. We also discussed how she adheres to social distancing during pick up or drop off times at schools with older children. The childminder's COVID-19 policy asks parents to limit the amount of items children bring from home. These routines supported a reduction of the risk of infection.

Children had access to the childminder's garden for outdoor play and were also able to walk to local play areas. The childminder understood the benefits of outdoor play to children's wellbeing and in reducing the risk of infection during the pandemic.

A COVID-19 policy was in place to support the childminder's practice during the pandemic. This was shared with parents to raise their awareness of the processes used to reduce the risk of infection. We suggested the childminder develops this to include links to Scottish Government guidance and a list of the symptoms of COVID-19. This would support parents in knowing when to keep their children at home and what to do should they or their child display symptoms. We spoke about the importance of accessing the latest guidance regarding local restrictions and infection control. This would ensure that the childminder is basing any changes to practice on the most recent advice.

Requirements

1. By 30 June 2021 in order to ensure that children are cared for in a safe and hygienic environment and reduce the risk of infection the childminder must access and implement relevant guidance with regard to infection prevention and control during nappy changing. The childminder must ensure that the appropriate personal protective equipment (PPE) is available and used during nappy changing.

<https://hub.careinspectorate.com/media/1538/infection-prevention-and-control-in-childcare-settings.pdf>

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

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11);

'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); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI/2011/210) Regulation 4 (1) (a) Make proper provision for the health, welfare and safety of service users and Regulation 4 (1) (d) Where necessary, have appropriate procedures for the prevention and control of infection.

Areas for improvement

1. To ensure children's needs are met, the childminder must establish and maintain personal plans for every child attending the service. In order to achieve this, the provider must:

- (i) Ensure every child has a fully completed personal plan, created in partnership with children and parents/ carers.
- (ii) Identify the child's needs and wishes and set out how these will be met.
- (iii) Review at least once every six months whilst the child is attending the service.
- (iv) Maintain information that impacts on the health, safety and wellbeing of children and how children will be supported.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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).

Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	2 - Weak
5.1 Children's health and well being are supported and safeguarded during COVID-19	3 - Adequate
5.2 Infection prevention and control practices support a safe environment for children and staff	2 - Weak

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