

Forrest, Irene Child Minding

Type of inspection: Unannounced Inspection completed on: 29 March 2022

Service provided by: Irene Forrest

Care service number: CS2003001503 Service provider number: SP2003900258



Introduction

Irene Forrest provides a childminding service from their property in a detached house in the central area of Aberdeen. The childminder is registered to provide a care service to a maximum of 7 children at any one time under the age of 16 years, of whom a maximum of 6 will be under 12 years, 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 the childminders own children.

The service has a fully enclosed garden at the rear of the house. The childminder provides a drop off and pick up service from a local school nearby.

What we did during our inspection

This was an unannounced inspection which took place on 24 March 2022 between 15:30-17:15 and 11:30-12:30 on 29 March 2022. Two inspectors carried out the inspection.

To prepare for the inspection we viewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service.

To inform our evaluation we spoke with the childminder and the child present. We observed the care given by the childminder. We observed practice and daily life, and reviewed relevant documents.

Views of people using the service

We spoke with one parent during the inspection. They were happy with the service provided.

Self assessment

The service submitted a self assessment. We assessed the service's quality assurance processes which needed improvements to be made.

What the service did well

The childminder had introduced individual personal plans for each child since the last inspection. However, these need to be developed further.

The children and childminder spoke about accessing local parks regularly. This helped the children to keep active and get fresh air to contribute to their overall health and wellbeing.

The childminder had undertaken core training since the last inspection.

What the service could do better

Personal plans needed to be developed to provide additional meaningful information in relation to caring for children and reviewed regularly.

Children were not being adequately challenged to reach their full potential.

The childminder's knowledge was limited in relation to policies and practice especially medication and child protection.

The environment for children was not always safe.

The childminder did not quality assure the service to ensure high quality childcare was being provided.

From this inspection we graded this service as:

Quality of care and support	2 - Weak
Quality of environment	2 - Weak
Quality of staffing	not assessed
Quality of management and leadership	2 - Weak

Quality of care and support

Findings from the inspection

We made an evaluation of weak for quality of care and support. Whilst some strengths could be identified, these were compromised by significant weaknesses.

The childminder had not met the outstanding recommendation in relation to children's personal plans from the last inspection. Individual personal plans were in place for the children, however, these contained basic information and were not reviewed and dated every six months or sooner if needed. We discussed the importance of having this up to date information when caring for children as it contributes to their safety and needs being met. (See requirement 1)

The childminder was not knowledgeable on the management of medication to ensure medicines were stored and administered to children in a safe way. The medication policy was very limited as it only consisted of one sentence. We observed unsafe management of medication practice during the inspection. **(See requirement 2)**

The child protection policy contained very little detail and the childminder's knowledge regarding child protection procedures was very limited compromising children's safety. **(See requirement 3)**

During the inspection some children looked disengaged, bored and unsettled at times. There was very limited interactions between the childminder and the minded children. Some children were at times uneasy with other children within the service. At times the childminder displayed poor interactions with some children during the inspection. We discussed how to role model best practice and consistency with all the children. Positive interactions support the development of strong nurturing relationships.

The minded children's' experience was poor. The children were not appropriately challenged and activities and experiences did not provide them with sufficient stimulation to keep them engaged. There was no evidence of planning to support children's learning and development needs. A mind map or a keeping a record of what children would like to do would support this. **(See recommendation 1)**

We did not observe snack time during the inspection. The childminder does not provide food and the children take their own snack.

We were satisfied that the childminder had appropriate infection prevention and control procedures in place to support a safe environment for children, the childminder, and families. The childminder understood the new arrangements for cleaning within the service. Risk assessments had been thought about that addressed the specific areas within the national Covid-19 guidance.

Requirements

Number of requirements: 3

1. By 31st May 2022, the childminder must ensure that she maintains accurate and readily accessible records for each of the children attending their service. To do this, the childminder must, at a minimum:

a) record the date on which the service was first provided to each child

b) ensure there is an accurate personal plan for each child which indicates their health, welfare and safety needs and how these are to be met.

c) Plans to be reviewed with the parents/carers at least every six months or earlier if there are any significant changes.

This is in order to comply with Scottish Statutory Instrument 2002/114 Regulation 19(1)(a)(b)(c)(d) and 2011/210 Regulation 4(1)(a) - Welfare of Users, and Regulation 5 - Personal Plans.

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)

2. By 31st May 2022, the childminder must ensure they are knowledgeable and skilled in relation to the safe administration of medication:. To do this the childminder must, as a minimum:

a) ensure they have an appropriate recorded policy and procedure for the safe administration of medication.b) ensure that they understand and record the process to be followed should a parent request that they administer medication to their child.

c) ensure that they understand and follow current practice guidance in relation to the safe, storage, recording and administration of medication and that this is shared with parents.

This is in order to comply with Scottish Statutory Instrument 2002/114 Regulation 19(1)(a)(b)(c)(d) and 2011/210 Regulation 4(1)(a) - Welfare of Users

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)

The childminder may find the following guidance useful to support them in meeting this requirement:

'Management of Medication in Daycare and Childminding Services' (https://hub.careinspectorate.com)

3. By 31 May 2022, the childminder must ensure to have the skills and knowledge necessary to protect children from harm. The childminder to be knowledgeable about national and local child protection procedures and 'Getting it Right for Every Child' (GIRFEC).

This is to comply with Regulation 4(1)(a) (Welfare of users), Regulation 7(2)(c) (Fitness of managers), and Regulation 9(2)(b) (Fitness of employees) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying, and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

The childminder may find the following documents useful to support them in meeting this requirement:

'National guidance for child protection in Scotland 2021' (https://www.gov.scot/publications/national-guidance-child-protection-scotland-2021/)

Recommendations

Number of recommendations: 1

1. To support children's progress and achieve, the childminder should engage effectively with children and ensure they experience a range of activities and resources which stimulate their curiosity, imagination, and creativity.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "As a child, I can direct my own play and activities in the way that I choose and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning, and creativity." (HSCS 2.27)

Grade: 2 - weak

Quality of environment

Findings from the inspection

The quality of the environment was assessed as weak. Whilst some strengths could be identified, these were compromised by significant weaknesses.

The living room, where children watched television was clean and tidy. A selection of toys were stored in boxes. The majority of these were not age-appropriate or suitable for younger children and did not provide interest and stimulation. The children watched television and read books they had taken from home. The childminder spoke of having games, jigsaws and art and craft activities available for children. However, these were not observed during the inspection or evidenced.

Other areas of the home were clean but cluttered, causing potential for tripping hazards and access to items unsuitable for children. The bathroom was easily accessed and the childminder had installed a contactless soap dispenser and paper towels to promote good hygiene and infection control. Children walked through

the kitchen to reach the bathroom where medicine was not stored out of reach posing a potential safety risk to children. **(See requirement 1)**

The children played in the garden. The childminder told us that the raised grassy area was not in use because it became muddy in the winter. This restricted space to a narrow path running along the house, limiting opportunities for meaningful outdoor play experiences. Items awaiting removal such as old wood and roof guttering were placed on the path and we discussed with the childminder the potential for them to pose a hazard should children fall against them. **(See requirement 1)**

Play equipment was stored in a large crate on the path. It consisted of sit and ride toys which were unsuitable for school aged children. A space hopper was available for sharing. This did not provide children with opportunities for developing physical skills. The childminder and the children spoke of accessing a local park at times and we encouraged the childminder to make regular use of this facility to increase opportunities for children to engage in active play.

The childminder would benefit from accessing guidance such as My World Outdoors to enhance experiences provided for children.

http://www.careinspectorate.com/images/documents/3091/My_world_outdoors_-_early_years_good_practice_2016.pdf

The childminder had two pet dogs who were kept apart from the children for most of the inspection. They appeared friendly and the children were comfortable with their presence.

There was no evidence of risk assessments in place for indoors, outdoors, pets and for trips with the children, potentially compromising children's' safety. **(See recommendation 1)**

Requirements

Number of requirements: 1

1. By 31st May 2022, the childminder must ensure that she makes proper provision for the health, welfare and safety of the minded children. In order to do this she must:

a) Store medication safely in line with the management of medication guidance.

b) ensure that hazardous items are removed and are inaccessible to the children.

This is 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) and regulation 10(1)(2)(a).

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that:' I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.' (HSCS 5.22)

Recommendations

Number of recommendations: 1

1. The childminder to ensure that they maintain comprehensive and effective, recorded, risk/benefit assessments for all areas of her service.

This ensures care and support is consistent with the Health and Social Care Standards, which state that 'My environment is secure and safe.' (HSCS 5.19)

Grade: 2 - weak

Quality of staffing

This quality theme was not assessed.

Quality of management and leadership

Findings from the inspection

We made an evaluation of weak for quality of management and leadership. Whilst some strengths could be identified, these were compromised by significant weaknesses. As these weaknesses concerned the welfare and safety of children, we made some requirements for improvement.

We did not see a current copy of the registration certificate on display. The childminder did not operate their service in a professional way with records and relevant information being difficult for them to access or find.

Core training had been completed since the last inspection on food hygiene, paediatric first aid and child protection. We found the childminder had limited knowledge and understanding of current practices and guidance such as child protection. It is important to keep up to date with current guidance and best practice to ensure a high quality experience for children. Regular, comprehensive training and development helps to support current knowledge, influence best practice and promote good outcomes for children. **(See requirement 1)**

The childminder communicated with parents verbally and by phone. This encouraged their involvement in their child's day. The childminder did say that she asked the children what they want to do. The childminder should consider other ways in which she could involve parents and children further in evaluating the service, such as termly questionnaires and post it notes.

We found no evidence of the childminder evaluating their services or any development plan. The childminder demonstrated a weak understanding of the importance of developing and quality assuring their service in order to continually provide, safe outcomes for children. The childminder should evaluate their service, recording any areas for improvement and taking into consideration families' and children's views and ideas. **(See recommendation 1)**

We signposted the childminder to The Hub on the Care Inspectorate's website which includes many documents relating to best practice which the childminder can use to develop the service and provide good, positive outcomes for the minded children.

Requirements

Number of requirements: 1

1. By 31st May 2022, the childminder to ensure that they undertake training to support positive outcomes for children. For example, GIRFEC training.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) - regulation 15(b).

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)

Recommendations

Number of recommendations: 1

1. By 31st May 2022, in order to improve and progress the service, and secure good outcomes for children, the childminder should:

a) Further develop methods of consulting with parents and their children to involve them in assessing the service and suggesting any areas for improvement.

b) Undertake a detailed self evaluation of their service using feedback from parents and children and the wellbeing indicators, in line with the Care Inspectorate's self assessment format. Guidance available at:

https://hub.careinspectorate.com/media/3783/self-evaluation-for-improvement-your-guide.pdf.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

Grade: 2 - weak

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

To continue with plans to introduce a personal plan for each child. Each plan must be reviewed every six months or sooner should the need arise. The plan will detail the care and support she will give to each child to ensure their care needs are met.

Reference: National care standards, early education and childcare up to the age of 16 years. Standard 3: health and wellbeing; standard 14: well-managed service.

This recommendation was made on 15 December 2015.

Action taken on previous recommendation

The personal plans contained basic information. They were not reviewed regularly.

Recommendation 2

To update the administration of medication policy and procedures in line with current guidelines.

Reference: National care standards, early education and childcare up to the age of 16 years. Standard 3: health and wellbeing; standard 14: well-managed service.

This recommendation was made on 15 December 2015.

Action taken on previous recommendation

We saw unsafe medication practices during inspection. The medication policy consisted of a single sentence.

Recommendation 3

To update all childminding records, policies and procedures to reflect details of the regulatory body: the Care Inspectorate.

Reference: National care standards, early education and childcare up to the age of 16 years. Standard 14: well-managed service. This recommendation was made on 15 December 2015.

Action taken on previous recommendation

The policies and procedures did not meet acceptable standards.

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	Туре	Gradings	
17 Jan 2020	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed 3 - Adequate
26 Nov 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed 4 - Good
16 Feb 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed Not assessed
12 Nov 2010	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed

Date	Туре	Gradings	
5 Feb 2010	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good Not assessed
10 Mar 2009	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good Not assessed

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