

Mulvey, Kelly Ann

Child Minding

Stevenston

Type of inspection:
Unannounced

Completed on:
28 June 2022

Service provided by:

Service provider number:
SP2014985641

Service no:
CS2014323467

About the service

Kelly Ann Mulvey provides a childminding service from her property in a quiet residential area of Stevenston, North Ayrshire. The childminder is registered to provide a care service to a maximum of six children at any one time under the age of 16, of whom no more than three are not yet attending primary school and of whom no more than one is under 12 months. Numbers are inclusive of the childminder's own family. The children are cared for in the living room, dedicated playroom and upstairs bathroom. Children also have access to an enclosed rear garden space. The service is close to local primary schools, shops parks and other amenities.

About the inspection

This was an unannounced inspection which took place on 9 June 2022 between 09.45am and 11.30am. The inspection was carried out by one inspector from the Care Inspectorate. We provided our details to the childminder and asked her to share with all parents/carers using the service to contact us to gather their views. We did not receive any response from parents/carers. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with two children using the service
- spoke with the childminder
- observed interactions and the environment
- reviewed documents.

Key messages

- Childminder is caring and nurturing in her approaches
- Children had opportunity to participate in a range of suitable play activities
- Children were settled comfortable in the environment
- Personal plans must be in place for all children who attend the service
- Training or self study is needed to help the childminder develop her knowledge and skills
- Quality assurance systems need to be developed to support improvement
- National and local guidance should be used to review the childminders policies and procedures to inform best practice.

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, play and learning?	3 - Adequate
How good is our setting?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning?

3 - Adequate

1.1 Nurturing care and support

Children presented as happy, settled, and content in their childminding setting. Positive interactions between the childminder and the children promoted children's confidence and self-esteem. The childminder had formed attachments with the children in her care working in partnership with parents to ensure that the children's needs were being met.

Children were supported to develop a positive view of themselves as the childminder offered praise and encouragement. They were also developing warm relationships with the other children with the support of the childminder who made sure all were included, helping them to form relationships.

Food is provided by parents and the childminder. We observed the children eating their snack and found that whilst they had opportunity to sit at a table food was not transferred to plates. As well as being good practice for controlling infection and promoting independence it also makes the experience more sociable.

Children benefitted from a childminder who knew them as individuals. The childminder used her experience of caring for children to plan their sessions and play activities. However, although the childminder ensured she worked together with parents when making decisions regarding children's care, written personal plans for all children had not been put in place or reviewed within a six-month timescale as required. See Area for improvement 1.

Whilst no children were receiving regular medication the childminder should update and review her policy and procedures for the administration, record keeping and storage of medication. See Area for improvement 2.

1.3 Play and learning

Children participated in play activities of their choice to support their learning and development. The childminder used her knowledge of their interests, likes and dislikes when planning play experiences. This included singing and dancing, mark making and playing with bricks. The childminder joined in play taking a playful approach with the children whilst allowing them to make choices. As a result, children were able to make developmental progress having fun.

Children had regular opportunity for outdoor play helping their physical development as they played energetically or took local walks. Children enjoyed joining in with activities motivated to learn and find out more about the world around them included in their local community. They told us how they enjoyed going to feed the swans.

Mark making and drawing was a favourite with the children attending. We observed the childminder responding to children's requests for play resources helping to develop early literacy. Further use of books stored in the playroom would help children to foster an interest in reading helping to develop their vocabulary and understanding.

Areas for improvement

1. The childminder should ensure that written personal plans for all children who attend the service are in place detailing how children's health, welfare and safety needs will be met. The plan must be reviewed with parents or if appropriate children within a six-month period or before if needed. This is to ensure that the childminder has all the necessary current information to provide personalised care.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which states 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. The childminder should review her policies and procedures for administering and storing medication to ensure children's health, safety and wellbeing needs are met. This is in order to ensure care and support is consistent with the Health and Social Care Standards which states that 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24).

How good is our setting?

3 - Adequate

2.2 Children experience high quality facilities

Children were cared for in a homely environment that was clean, ventilated and organised to allow them to play and move around freely.

Toys and resources were suitable for the children attending and organised to allow choice. A separate playroom displayed children's work helping them to have ownership in the environment. This helped children to develop creativity and a sense of security. The childminder checked that toys were safe and suitable for children before she bought them and supported them to develop knowledge, skills and interests.

Two comfortable sofa's meant children could choose to relax or have some quiet time away from the playroom. Children benefitted from fresh air and exercise through having regular outdoor experiences including being able to free flow to the garden. The childminder had some understanding of the benefits of exploratory play. We suggested that she develops her learning in the benefits of different play types for example loose parts play to support play and learning opportunities for children.

Children's information should be more safely stored. We suggested that the childminder should develop a policy informing families about her practice and their rights in using and protecting children's data. We signposted the childminder to the website of the Information Commissioners Office at <https://ico.org.uk/>. See Area for improvement 1.

Previously we asked the childminder to update her risk assessments to include her garden and specific activities such as swimming. The service did not have appropriate risk assessments in place to support consistent and safe practice. These should be created in line with relevant guidance and monitored, to ensure they are effective and working as planned. This will ensure any potential hazards are identified allowing the childminder to take steps to reduce any risks to children's safety. See Area for improvement 2.

Areas for improvement

1. An appropriate system should be in place for children's information to be securely stored and managed to protect children's personal information. Information on how this is organised should be shared with parents. This is in order to ensure care and support is consistent with the Health and Social Care Standards which states that 'My environment is safe and secure.' (HSCS 5.17).
2. The childminder should ensure that they maintain detailed 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 5.17).

How good is our leadership?

3 - Adequate

The childminder engaged well with the inspection process. They were welcoming and willing to answer the questions required to support the evaluation of the service. The childminder was committed to ensuring the children in her service were well cared for.

The childminder used her observations and knowledge of the children to plan her day linking with home routines. Communication with parents was on daily basis using social media to send photographs and updates on children's session. Children's views were sought and used to plan any play activities and specific outings for example going to the park.

The childminder has not reviewed her aims of the service. As a result, the vision, values and aims for the service are unclear. Policies and procedures also had not been reviewed for some time. Keeping up to date with best current practice guidance will support the childminder to develop her skills ensure children receive a quality service. See Area for improvement 1.

There were currently no quality assurance systems in place to support self-evaluation of the service to develop or improve outcomes for children. The childminder had not yet implemented an improvement plan, however, following a discussion, she was able to reflect on her service and discuss future improvements. Although the childminder reflects informally on her work further work is needed to identify areas for improvement focusing on the impact on children's experiences. The childminder needs to reflect on her own practice considering what is working well, how does she know and what can be improved on. Effective evaluation of her service would enable her to identify areas for improvement. See Area for improvement 2.

Areas for improvement

1. The childminder should review her vision, values and aims of her service to ensure she is clear about the service she is aiming to provide, sharing this with families using her service. Any policies and procedures should also be updated as needed referring to best practice guidance. This is to ensure that care and support is in line with the Health and Social Care Standards which state 'I use a service and organisation that are well led and managed.' (HSCS 4.23).
2. The childminder should develop simple quality assurance systems for reflecting and evaluating her service to help identify areas for improvement including any specific training needs.

This is to ensure that care and support is in line with the Health and Social Care Standards which state: '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).

How good is our staff team?

3 - Adequate

During the inspection, we saw that the childminder used kind and nurturing interactions with the children. This contributed to them feeling loved and supported in her care. We found that children responded positively to the support provided by their childminder, and they were given an appropriate amount of time to listen and respond to instructions. As a result, children presented as settled and secure.

The childminder was a member of the Scottish Childminding Association (SCMA), who kept her informed of current best practice. We signposted her to some national practice guidance to research and further enhance her knowledge and build confidence and capability to provide a high-quality service. These included 'Realising the Ambition', 'My Childminding Journey' and 'A Quality Framework for daycare of children, childminding and school age care'

The childminder had been limited in accessing training or self-study having only accessed child protection training online. She had a limited knowledge of any current best practice documents to support her practice or improve outcomes and experiences for children. It was discussed that the childminder should access the Care Inspectorate Hub to develop her knowledge of these documents. The childminder should record the impact training or self-study has on her practice to support ongoing professional development. We asked the childminder to extend her knowledge by accessing a range of training prioritising first aid. Reflecting on her skills and knowledge gained during training or self-study, will support improvements in the service and lead to a good quality provision for children. See Area for improvement 1.

Areas for improvement

1. The childminder should undertake training/self-study to enhance her understanding of current guidance which is in place to improve outcomes for children. This is in order to ensure care and support is consistent with the Health and Social Care Standard 3.14 which states that, 'I have confidence in people because they are trained, competent and skilled, and are able to reflect on their practice and follow their professional and organisational codes.'

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

Requirements

Requirement 1

By 1 December 2021, the childminder must ensure that written personal plans for each child are in place detailing how children's health, welfare and safety needs will be met. The plan's must be reviewed with parents very six months. This is to ensure that the health and wellbeing of all the children is protected and

that all necessary information is available to the childminder.

This is in order to ensure that the quality of the care and support is consistent with the Health and Social Care Standards which state that: As a child, "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); and In order to comply with 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 Personal Plans - 5(1)(a).

This requirement was made on 18 October 2021.

Action taken on previous requirement

Personal plans using a diary method to record had been developed for younger children. The childminder should continue to develop these for all children registered to attend her service.

Met - outwith timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The childminder should include her garden area in her premises risk assessment and also risk assess specific activities/venues such as swimming, visits to the park etc.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "My environment is secure and safe" (5.17)

This area for improvement was made on 18 October 2021.

Action taken since then

The childminder had not included specific activities within her risk assessment process. This area for improvement is continued within this report.

Previous area for improvement 2

The childminder should develop a system to ensure parents and children have the opportunity to provide feedback on the quality of her service by asking what is working well and what can be improved.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership (4.7)

This area for improvement was made on 18 October 2021.

Action taken since then

Parents and children feedback on a regular basis by using methods that the childminder suited each family. Further work is needed to evidence this.

Previous area for improvement 3

The childminder should progress her own professional development by using self-evaluation and accessing training or self-study relevant to her role to further develop her practice updating her skills and knowledge.

This is to ensure that 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 (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" (3.14)

This area for improvement was made on 18 October 2021.

Action taken since then

Quality assurance systems had not been developed and is continued as an area to improve within this report.

Previous area for improvement 4

The childminder should develop an understanding of her responsibilities as a registered care provider. This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "I use a service and organisation that is well led and managed" (4.23).

This area for improvement was made on 18 October 2021.

Action taken since then

The childminder was clear in her responsibilities knowing when to notify the Care Inspectorate. However, further work is needed to understand the responsibility as a care provider to ensure all children have written personal plans to ensure their health, welfare and safety needs can be met whilst in the care of the childminder.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
1.3 Play and learning	4 - Good

How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate

How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate

How good is our staff team?	3 - Adequate
4.1 Staff skills, knowledge and values	3 - Adequate

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