

Alexander, Brenda Child Minding

Glasgow

Type of inspection:

Unannounced

Completed on:

23 June 2022

Service provided by:

Brenda Alexander

Service provider number: SP2003902107

Service no:

CS2003003907



Inspection report

About the service

The service operates from the childminder's home in Newton Mearns, in Glasgow. The service is registered to provide a care service to a maximum of five children at any one time under the age of 16, of whom a maximum of five will be under 12, 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 children of the childminder's family.

About the inspection

This was an unannounced inspection which took place on 23 June 2022 between 10:30 and 13:00. The inspection was carried out by one inspector from the Care Inspectorate. 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 to a parent who uses the service
- · spoke to the childminder and her husband
- observed practice and play experiences
- · reviewed documents.

Key messages

- The childminder had developed positive, strong relationships with children and families.
- The childminder had created a calm, homely and nurturing environment where children felt comfortable and safe.
- Children's learning opportunities were enhanced through strong connections with their own and wider communities.
- Quality assurance processes should be developed to cover all areas of practice and influence positive change to outcomes for children and families.
- The childminder should engage in training to support her own learning and development.

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?	4 - Good
How good is our leadership?	2 - Weak
How good is our staff team?	2 - Weak

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

Quality Indicator 1.1: Nurturing Care

We made an evaluation of adequate for this key question. While the strengths had a positive impact, key areas need to improve.

The childminder was nurturing and responsive to children. It was clear through interactions between the childminder and children in her care, that positive and trusting relationships had been formed. This supported children to feel safe and secure.

Children's personal care needs were responded to in a gentle and respectful way. We observed the childminder supporting children to go to the toilet. She ensured that other children did not enter and that the child was given time and privacy to use the toilet. In addition to this the childminder had improved how she manages nappy changing to ensure that infection, prevention and control measures were followed and that children had as much privacy and dignity as possible.

The childminder had basic important information about children such as parents emergency contacts, GP details and a note of children's likes and dislikes. At our last inspection we made a requirement that the childminder needed to develop personal plans for all children who attend the setting. The childminder had not made any progress in the development of personal plans. We supported the childminder to access information around personal planning and sign posted her to the Care Inspectorate document "Guide For Providers On Personal Planning Early Learning and Childcare". Personal plans should help to promote children's rights, needs and wishes. The childminder must develop in consultation with parents and children where appropriate, personal plans which take account of children's preferences, individual needs and wishes. (See requirement 1)

Although no children required medication at the time of our inspection, the childminder did not have appropriate paperwork to record parental consent for administration should this be required. We signposted the childminder to current guidance "Management of medication in daycare of children and childminding services" for more information. This would contribute towards children's health and safety. This was an area for improvement at our last inspection which had not been addressed. (See area for improvement 1)

Quality Indicator 1.3: Play and Learning

A range of toys and resources were available to children and we found these to be clean, in good condition and appropriate for children's individual needs and interests. The childminder should continue to review toys and resources as children grow. She should ensure resources available continue to promote children's curiosity, inquiry and creativity in order to challenge their stage of development. She should also provide more open-ended, natural resources for children to explore in their play.

The childminder regularly took children to places in the local community. For example, toddler groups and parks. Building connections in the community promoted children's wellbeing and sense of belonging.

The childminder did not have a good knowledge of child development, theory or practice to enable her to plan and support quality play and learning experiences for children. The childminder should seek opportunities to engage in training which would influence positive change to outcomes for children and families. We have made an area for improvement about this under the quality of staffing section of this report.

Requirements

- 1. By 30 September 2022 the provider must ensure children receive the right support at the right time by developing accurate personal plans. To do this, the provider must, at a minimum, ensure:
- a) personal plans are updated at least once in every six months or when there has been a significant change in the child's health, welfare or wellbeing needs
- b) accurate plans are in place to meet children's long-term health needs, for example, a plan for asthma
- c) children and families are consulted on their needs, rights and choices, recording this in their personal plan.

This is to comply with Regulation 5 (Personal Plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that the childminder's skills and knowledge is consistent with Care Inspectorate document, "Guide for Providers on Personal Planning: Early Learning and Childcare" and that 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)

Areas for improvement

1. To support children's health and well-being the childminder should develop an appropriate process for managing medication safely. This should include, but is not limited to:

Ensuring appropriate written permission is obtained from parents prior to administering any medication.

Accurately recording the administration of any medication and sharing this information with parents.

When developing this process the childminder should refer to "Management of medication in daycare of children and childminding services" which care be found at; https://hub.careinspectorate.com.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state; "Any treatment or intervention that I experience is safe and effective". (HSCS 1.24)

How good is our setting?

4 - Good

Quality Indicator 2.2: Children experience high quality facilities

We made an evaluation of good for this theme, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on the children's experiences.

We found that the childminder's home environment was clean, warm, and welcoming for children attending the service. The childminder used her living room and kitchen/dining area for the children to play in. The areas accessed by children were generally well maintained although we identified a potential hazard to children and families on the garden path. The childminder agreed to have this repaired.

Children were happy and moved around the childminder's home confidently. Patio doors led from the kitchen to a secure garden area. We observed children playing both indoors and outdoors during our visit. Providing children with the opportunity to play outdoors contributed to their health and wellbeing.

Resources were regularly checked and cleaned to ensure they were suitable for use. Children were supported to wash their hands at appropriate times such as before meals. This helped to reduce the potential risk of infection.

The childminder had good procedures in place to minimise the spread of infection, we observed as she supported children to wash their hands after playing outdoors, and before lunchtime. To support children's independence the childminder provided a step-up stool which supported children to wash their hands independently whilst being closely supervised by the childminder.

We were satisfied that the childminder had appropriate infection control procedures in place to support a safe environment. For example, the childminder ensured regular cleaning of toys, kept the rooms well-ventilated and encouraged good hand hygiene.

How good is our leadership?

2 - Weak

Quality Indicator 3.1 Quality assurance and improvement are led well

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

The childminder had made some progress in addressing some of the requirements and recommendations we made at our inspection in December 2021. Further information about the progress made can be found at the end of this report.

We spoke to one parent whose child attended the service. She told us that she was happy with the communication and information shared by the childminder. The childminder could formalise how she consults with children and families by developing methods of consulting with parents and their children to involve them in assessing the service and suggesting any areas for improvement.

The childminder had not yet thought about the self evaluation of the service she provided. As a result, she could have been more informed about expectations around best practice guidance which would support positive outcomes for children.

We discussed the value of self-evaluation as important in developing and improving the service offered to children and families. The childminder had a copy of the Care Inspectorate document "Self-evaluation for improvement"; we advised the childminder to consider the content of this document to enable her to begin her self evaluation of the service. This would help the childminder identify what she does well and what she needs to do better. (see area for improvement 1)

Areas for improvement

1. The service should develop a detailed quality assurance system that covers all areas of practice. This system should capture the ongoing continuous improvement work undertaken by the service and evidence the impact on outcomes for children and families.

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

How good is our staff team?

2 - Weak

Quality Indicator 4.1: Staff skills, knowledge and values

The childminder had accessed limited professional learning to keep her up to date with current best practice or develop her knowledge. She was not familiar with current best practice guidance and we discussed those that might be most useful at this time such as Realising the Ambition, Health and Social Care Standards and A Quality Framework For Daycare Of Children, Childminding and School Aged Children. A recommendation was made about this at the last inspection and will therefore be carried forward. (See area for improvement 1). A clear training plan would help support the childminder develop her professional knowledge in line with best practice guidance and continue to improve outcomes or children.

Areas for improvement

1. To support children's well-being, learning and development, the childminder should identify and access suitable training and self-directed study, and apply their learning in practice. The childminder should prioritise the areas that we have identified for improvement within this inspection report, including, but not limited to; child protection, first aid, personal planning, medication and infection prevention and control.

This is to ensure the service complies with the Health and Social Care Standards which states; "I experience high quality care and support based on relevant evidence, guidance and best practice". (HSCS 4.11)

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

Requirements

Requirement 1

By 31 January 2022 the provider must ensure children receive the right support at the right time by developing accurate personal plans. To do this, the provider must, at a minimum, ensure:

- a) personal plans are updated at least once in every six months or when there has been a significant change in the child's health, welfare or wellbeing needs
- b) accurate plans are in place to meet children's long-term health needs, for example, a plan for asthma
- c) children and families are consulted on their needs, rights and choices, recording this in their personal plan.

This is to comply with Regulation 5 (Personal Plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that the childminder's skills and knowledge is consistent with Care Inspectorate document, "Guide for Providers on Personal Planning: Early Learning and Childcare" and that 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)

This requirement was made on 11 January 2022.

Action taken on previous requirement

There had been no progress made in meeting this requirement. This requirement has been repeated.

Not met

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

To limit the risk of the spread of infection and ensure children's safety and well-being during the Covid-19 pandemic the childminder should improve infection prevention and control practice.

The childminder should develop a Covid-19 policy and review the risk assessment to reflect this guidance, and share these with parents of children attending her service. This will help promote a shared understanding of the guidance to keep children safe and well.

To support this the childminder should refer to the Scottish Government's current Covid-19 guidance for childminders; "Coronavirus (Covid-19): childminder services guidance", which can be found at:

https://www.gov.scot and "Infection Prevention and Control in Childcare Settings (Daycare and Childminding Settings)" which can be found at; https://hub.careinspectorate.com. Inspection report Inspection report for Alexander, Brenda page 4 of 11

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state; "I experience high quality care and support based on relevant evidence, guidance and best practice". (HSCS 4.11)

This area for improvement was made on 11 January 2022.

Action taken since then

The childminder was aware of the risks of the potential spread of infection, particularly in relation to Covid-19. Improvements had been made to personal care routines to minimise the spread of infection.

Previous area for improvement 2

To support children's health and well-being the childminder should develop an appropriate process for managing medication safely. This should include, but is not limited to:

Ensuring appropriate written permission is obtained from parents prior to administering any medication.

Accurately recording the administration of any medication and sharing this information with parents.

When developing this process the childminder should refer to "Management of medication in daycare of children and childminding services" which can be found at; https://hub.careinspectorate.com.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state; "Any treatment or intervention that I experience is safe and effective". (HSCS 1.24)

This area for improvement was made on 11 January 2022.

Action taken since then

There had been no progress made in this area, we have therefore repeated this area for improvement.

Previous area for improvement 3

To limit the spread of infection and promote children's health and wellbeing the childminder should provide opportunities for children to play and exercise outdoors daily.

This is to ensure the service complies with the Health and Social Care Standards (HSCS) which states that; "As a child, I play outdoors every day and regularly explore a natural environment". (HSCS 1.32)

This area for improvement was made on 11 January 2022.

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Action taken since then

We observed children playing outdoors during our visit. Additionally the childminder told us about places children play in their local community such as parks. We were satisfied that opportunities for children to play outdoors had improved.

Previous area for improvement 4

To limit the possible spread of infection the childminder should review her nappy changing practice and procedures to ensure they are reflective of Health Protection Scotland's guidance, "Infection Prevention and Control in Childcare Settings (Day Care and Childminding Settings)".

This is to ensure the service complies with the Health and Social Care Standards (HSCS) which states that; "I experience high quality care and support based on relevant evidence, guidance and best practice". (HSCS 4.11)

This area for improvement was made on 11 January 2022.

Action taken since then

The childminder had reviewed her practice in relation to nappy changing. We were satisfied that this area for improvement had been met.

Previous area for improvement 5

The childminder should ensure that she does not plan to operate outwith her registered numbers.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event". (HSCS 4.14)

This area for improvement was made on 11 January 2022.

Action taken since then

The childminder operated within her registered numbers. We were satisfied that this area for improvement had been met.

Previous area for improvement 6

The childminder should ensure that only people registered to care for children do so. If the childminder requires the support of her husband to care for children she should submit a variation to the Care Inspectorate to request that he is assessed and registered as an assistant.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event." (HSCS 4.14) and "I am confident that people who support and care for me have been appropriately and safely recruited". (HSCS 4.24).

This area for improvement was made on 11 January 2022.

Action taken since then

The childminder's husband continued to support the childminder with administration tasks. He did not provide personal care or be left in charge of minded children. We were satisfied that this area for improvement had been met.

Previous area for improvement 7

To support children's well-being, learning and development, the childminder should identify and access suitable training and self-directed study, and apply their learning in practice. The childminder should prioritise the areas that we have identified for improvement within this inspection report, including, but not limited to; child protection, first aid, personal planning, medication and infection prevention and control.

This is to ensure the service complies with the Health and Social Care Standards which states; "I experience high quality care and support based on relevant evidence, guidance and best practice". (HSCS 4.11)

This area for improvement was made on 11 January 2022.

Action taken since then

There had been no progress in meeting this area for improvement. It has therefore been repeated and will be followed up at our next inspection.

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	3 - Adequate
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	2 - Weak
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3.1 Quality assurance and improvement are led well	2 - Weak

How good is our staff team?	2 - Weak
4.1 Staff skills, knowledge and values	2 - Weak

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