

Mahon, Georgina Child Minding

Inverness

Type of inspection:
Unannounced

Completed on:
13 September 2022

Service provided by:
Georgina Mahon

Service provider number:
SP2003907838

Service no:
CS2003008134

About the service

Georgina Mahon provides her childminding service from her home in a residential area near the centre of Inverness. The minded children make use of the living room, hallway, kitchen and dining area and upstairs bathroom. Patio doors from the dining area open directly onto a large garden.

The service was registered in April 2011. The childminder may care for a maximum of six children at any one time up to 16 years of age, of whom no more than three are not yet of an age to attend primary school, and of whom no more than one is under 12 months.

About the inspection

This was an unannounced inspection which took place on 12 September 2022 between 10:30am and 12:45pm. 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 people using the service and received responses from two families to an online questionnaire;
- spoke with the childminder;
- observed practice and daily life; and
- reviewed documents.

Key messages

- Children received warm and nurturing care which supported them to feel relaxed and safe.
- The childminder had developed strong bonds with the children in her care.
- Children had daily outdoor play opportunities which supported them to be active.
- Children experienced a home from home environment where they felt safe and comfortable.
- Children would benefit from more opportunities to explore, create and problem solve with loose parts and open ended materials.
- The childminder should develop self-evaluation processes to ensure continuous improvement of the service.
- The childminder should develop her knowledge and understanding of child development and best practice and use this to improve her service.

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?	2 - Weak
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

We evaluated this key question as adequate, where there are some strengths, these just outweigh weaknesses.

1.1 Nurturing Care and Support

Children experienced warm and nurturing care. The childminder had developed strong bonds with the children in her care, some of whom had been in her care for a number of years. On the day of inspection, one child told the inspector that they "loved coming to Georgie's". Children were cared for with kindness and compassion which supported them to feel loved and valued.

The childminder spoke knowledgeably about children's individual care needs and what she did to support them. She confidently described children's preferences, routines, and personalities. Personal plans had recently been reviewed with families, which meant up to date information was available to meet children's needs. The childminder told us she was going to introduce daily diaries to improve the sharing of information.

Children experienced calm and unhurried mealtimes. The childminder recognised the importance of daily routines as an opportunity to promote close attachment. We discussed offering opportunities for children to develop more independence skills, for example, by setting the table, pouring water from jugs and tidying up. Children ate their lunch in the kitchen together, younger children were seated in a highchair or appropriate seat at the dining table. The childminder was focused on the children, this supported them to feel safe and secure.

Children were not supported to sleep in a safe environment. The childminder told us that children who required a nap, slept in a buggy or on the sofa located in the living room. We explained that this was not an appropriate arrangement, children were not supported to sleep safely or comfortably. We directed the childminder to good practice guidance including guidance produced by Scottish Cot Death Trust (see area for improvement 1).

1.3 Play and Learning

Children were relaxed and having fun with the limited resources available to them during this inspection. They were able to choose from a small selection of toys in the childminder's living room. This meant that children had limited opportunities to develop their imagination, natural curiosity and problem-solving skills. We discussed introducing more natural, and open-ended resources inside (see area for improvement 1).

The childminder supported children with language development and literacy. She provided mark making opportunities and books. She spent time with a younger child exploring a book during this inspection. This meant children were supported to learn some life long skills.

Children did not experience play and learning that was personalised or sufficiently challenging for their stage of development. The childminder did not use current child development theory to develop quality play and learning experiences for children, and there were missed opportunities to challenge children and build on their interests. As a result, children were not supported to reach their full potential.

The childminder did not have effective processes in place to record children's learning and progress. As a result, children and their families were not supported to reflect on their play and learning. We suggested ways in which the childminder could do this with children.

Children had regular trips within their local community such as local parks and places of interest. On the day of this inspection, they were going to walk to the shop to spend their pocket money. These opportunities supported children to explore the world around them.

Areas for improvement

1. The childminder should improve the children's environment for sleeping to ensure it is safe and conducive to quality sleep. This should include, but is not limited to, providing suitable equipment for children to sleep safely and comfortably.

This is to ensure 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)

2. To support and extend children's learning, the childminder should review and develop resources available. This should include, but is not limited to, real and natural resources, and loose parts.

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

How good is our setting?

3 - Adequate

We evaluated this key question as adequate, where there are some strengths, these just outweigh weaknesses.

The childminder's home was clean and tidy, offering a warm, home from home atmosphere for the children in her care. Children were able to access the childminder's living room where they could play, rest, and relax. This supported children to feel comfortable, relaxed and at home.

Children had regular access to a large garden area which contained a mud kitchen and a selection of toys. They could develop their gross motor skills running, playing on the slide, and the trampoline, which was used safely in line with the manufacturer's guidance. Some real-life resources were available for the mud kitchen. We discussed increasing these and introducing resources to support children's developing literacy and numeracy such as mark making materials.

The childminder demonstrated appropriate awareness of how to keep children safe while in the local community. For example, she told us she discussed road safety awareness with them and talked about keeping safe in local parks. However, they did not demonstrate awareness of the potential risk of harm to children presented by a gap in the garden boundary (see area for improvement 1).

Appropriate infection control measures were in place which prevented the spread of infection. Children were supported to wash their hands before lunch and hand sanitiser was available at the front door for any visitors.

Since the last inspection, the childminder had registered with the Information Commissioner's Office. She told us this had supported her with the management and sharing of information. As a result, children's personal information was stored correctly.

Areas for improvement

1. To support children's health and wellbeing, the childminder should ensure that, where risks are identified, these are appropriately considered and addressed. This should include, but is not limited, to the garden boundary.

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

'My environment is safe and secure.'(HSCS 5.17)

How good is our leadership?

2 - Weak

We evaluated this key question as weak. Strengths can be identified but these are compromised by significant weaknesses.

The vision, values and aims of the service were unclear, which meant that the childminder and families did not have a clear understanding of what the service hoped to achieve. Prospective families received very little information and were not well informed. As a result, children and their families did not have clear expectations.

Clear policies which reflected the childminder's practice and best practice guidance were not in place. As a result, the childminder was not developing the service to improve outcomes for children and families in line with current guidance. We discussed ways in which she could use her membership of Scottish Childminding Association (SCMA), along with the Care Inspectorate Hub and online resources, as a way of accessing guidance and practice documents to support this and the ongoing development of the service (see area for improvement 1).

The childminder had some self-evaluation systems in place but these were not meaningful. She did not evaluate her service against best practice guidance such as 'My childminding Journey'. This meant that she was not moving the service forward. We suggested that the childminder could introduce a self-evaluation approach to support the ongoing journey of improvement required in meeting children's care and development needs.

Overall, the pace of change was too slow. At the last inspection we made several recommendations, many of these have not been met. As a result, children are not experiencing high quality care. In order to support the childminder to focus on the areas that will make the biggest difference to improving outcomes for children, we have streamlined these into five areas for improvement at this inspection.

Areas for improvement

1. To support children to receive high quality care and support, the childminder should review and update the service's policies to reflect current best practice.

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)

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate, where there are some strengths, these just outweigh weaknesses.

The childminder was caring towards children and had developed nurturing, positive relationships which helped them to settle well at her home. Interactions were warm, sensitive and compassionate. As a result, children were clearly comfortable in her care.

Face to face communication with parents promoted good relationships and meant information was shared effectively to ensure children received the support they needed. One parent told us they valued the childminder's flexible approach and said, "Georgina is always able to take him an extra day on short notice."

The childminder had completed some core training, including child protection and first aid; these supported her to keep children safe. However, the childminder had accessed limited professional learning since the last inspection to keep her up-to-date with current best practice. As a result, the childminder was not developing her skills, knowledge and understanding, children were not accessing a broad range of stimulating resources, and policies were not kept up to date. We discussed the importance of continued professional learning to support improvement. We signposted the childminder to the Care Inspectorate Hub and 'Your Childminding Journey', a learning and development resource to keep up to date with current best practice guidance. A recommendation was made about this at the last inspection and will therefore be carried forward as an area for improvement (see area for improvement 1).

Areas for improvement

1. To support children's wellbeing, learning and development, the childminder should further develop her knowledge and skills, and use these to improve the quality of experiences for children. This should include, but is not limited to, accessing best practice guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) 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)

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

Personal plans should be fully completed, reflecting children's current needs and wishes. The childminder should work in partnership with parents and carers to review children's personal plans.

This is to ensure 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).

This area for improvement was made on 31 January 2020.

Action taken since then

The childminder had worked in partnership with parents to complete personal plans for the children in her care. These had been recently reviewed which ensured that information was up to date. This meant that children received care and support that met their current needs. This area for improvement has been met.

Previous area for improvement 2

The childminder should maintain children's scrapbooks to inform parents of children's experiences, progress and achievements when attending the service. Where possible, the childminder should involve the child in developing their scrapbook.

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

"I can maintain and develop my interests, activities and what matters to me in the way that I like" (HSCS 2.22).

This area for improvement was made on 31 January 2020.

Action taken since then

The childminder had not developed effective processes to share children's experiences, progress and achievements with parents. This area for improvement has not been met and will be followed up at the next inspection.

Previous area for improvement 3

The childminder should develop risk assessments for outings to maximise children's safety. We would also encourage the childminder to begin involving children in risk assessing to develop their awareness of safety.

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

"I am helped to feel safe and secure in my local community" (HSCS 3.25).

This area for improvement was made on 31 January 2020.

Action taken since then

To support children to feel safe and secure, the childminder had involved them in assessing risk when out in their local community. This area for improvement has been partially met. We had some concerns over the childminder's ability to consider and address concerns where these had been identified, therefore an area for improvement was made around this.

Previous area for improvement 4

The childminder should improve infection prevention and control practices to ensure children are kept safe.

This is to ensure 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)

This area for improvement was made on 31 January 2020.

Action taken since then

The childminder had reviewed her infection control procedures. Children were now supported to wash their hands before snacks and mealtimes. This reduced the risk of the spread of infection. This area for improvement has been met.

Previous area for improvement 5

It is recommended that the childminder attends training and accesses professional reading to ensure the service is working in line with current best practice guidance and meeting children's needs effectively.

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

This area for improvement was made on 31 January 2020.

Action taken since then

The childminder had completed core training in child protection and first aid. This supported her to keep children safe. However, she had not undertaken any further training to improve her knowledge and understanding, which meant that children were not receiving high quality care. This area for improvement

was not met, therefore an area for improvement was made to ensure the childminder accesses current best practice to improve her knowledge and support the development of the service.

Previous area for improvement 6

The childminder should review and update the service's policies to reflect current best practice.

This is to ensure 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)

This area for improvement was made on 31 January 2020.

Action taken since then

The childminder had not reviewed and updated the service's policies. This area for improvement has not been met and will be followed up at the next inspection.

Previous area for improvement 7

Children should be confident that any persons living within the childminder's home have been appropriately checked. The childminder should carry out relevant checks to ensure all members of the household, over 16 years old, are fit to be in the proximity of children.

This is to ensure 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)

This area for improvement was made on 31 January 2020.

Action taken since then

The childminder had carried out the relevant checks to ensure that all members of the household were fit to be in the proximity of children. This protected children from the risk of potential harm. This area for improvement has been met.

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?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	2 - Weak
3.1 Quality assurance and improvement are led well	2 - Weak
How good is our staff team?	3 - Adequate
4.1 Staff skills, knowledge and values	3 - Adequate

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