

MacFarlane, Angela Child Minding

Inverness

Type of inspection:
Announced (short notice)

Completed on:
24 February 2023

Service provided by:

Service provider number:
SP2010980115

Service no:
CS2010273675

About the service

Angela MacFarlane provides a childminding service from her detached home in a residential area of Inverness. The childminder is registered to provide a care service to up to six children under the age of 16.

The service is close to local amenities and parks. The children are cared for downstairs and use a dedicated playroom, the open plan kitchen, diner, sunroom and have access to a downstairs cloakroom. Children also have access to an enclosed garden to the rear of the property.

About the inspection

This was a short notice announced inspection which took place on 21 February 2023. We gave feedback on 24 February 2023. 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 one child using the service and received feedback from three families;
- spoke with the childminder;
- observed practice and daily life; and
- reviewed documents.

Key messages

Children benefitted from a home from home environment which supported them to feel safe and secure.

The childminder had developed very good relationships with parents, who told us they were very happy with the care they provided.

The childminder should review the range of resources available to children to promote imagination, curiosity and problem solving.

The childminder should further develop their processes to record and evaluate children's learning and progress.

The childminder should establish meaningful quality assurances and self-evaluation processes to support ongoing improvement.

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?	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

We evaluated this quality indicator as adequate. Whilst we identified strengths, these just outweighed areas to be improved.

1.1 Nurturing care and support

The childminder provided warm and nurturing care to the child in their care on the day of inspection. They were responsive to their needs and interacted with them down at their level. This supported the minded child to feel safe and comfortable in the childminder's home. The minded child was confident to seek support and reassurance when they needed it. As a result of this positive relationship, the minded child's overall health and wellbeing was supported.

Effective use of personal information supported the childminder to meet children's needs. They had gathered information from families about children's preferences, and likes and dislikes, which they used to tailor care to each child. Information was regularly updated in collaboration with families. This meant that children received the care and support that was right for them.

Snack and mealtimes were a positive and relaxed experience. Children sat at the family dining table, in appropriate seating, which kept them safe. On the day of inspection, the minded child was excited to select a place mat and sit at the table. The childminder sat with them, using the opportunity to talk to them about their lunch, and about what they might do in the afternoon. This meant the minded child enjoyed a positive, social experience.

The childminder ensured the minded child's privacy and dignity was protected. They used a private area to change nappies, following best practice guidance for infection prevention and control. Their interactions were positive and caring. This supported the minded child to feel secure in the childminder's care.

1.3 Play and learning

Children had access to a wide variety of toys, games, books and puzzles within the dedicated playroom. These were attractively displayed, and children could self-select resources which promoted independence. Children also benefited from direct access to the enclosed garden which contained large equipment for them to play on, for example, swings and a climbing frame. The childminder repeated words and colours in their interactions with the minded child when they were exploring the toys on offer. This supported the minded child to develop their language, literacy and understanding. However, there were limited loose parts available to children which would further support their imagination, curiosity and problem solving. We discussed with the childminder increasing the availability of these, along with real life items. We signposted the childminder to the 'Loose Parts Toolkit' (see area for improvement 1).

There were limited approaches in place to record children's play and learning. The childminder told us they shared photos with parents occasionally, and when asked. Although the childminder had completed progress records for some of the children in their care, there was little or no evidence to support these evaluations. We discussed ways in which the childminder could develop this to effectively support, and challenge children's play and learning (see area for improvement 2).

Children were supported to have strong connections to their local community. The childminder regularly took children to local parks, ponds and on walks. These opportunities enhanced children's play and learning experiences, and supported their health and wellbeing.

Areas for improvement

1. To support children's learning and development, the childminder should ensure children have access to open ended resources and toys appropriate for their age and stage of development. These should provide challenge as well as opportunities for children to develop their natural curiosity.

This is to ensure that care and support is consistent with 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).

2. To contribute to children's learning needs being met, the childminder should ensure individual progress is evaluated. This should include, but is not limited to:

a) children are supported to reach their full potential through observation and capturing children's progress and learning.

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

'My care and support meets my needs and is right for me.' (HSCS 1.19).

How good is our setting?

4 - Good

We evaluated this quality indicator as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

The childminder's home was bright, clean and tidy, and furnished to a high standard. Children had access to their own playroom, as well as an open plan kitchen, diner and sunroom and a downstairs cloakroom. Children had access to comfortable furniture where they could rest and relax. This meant that children had ample space for their needs.

The childminder had a good understanding of identifying and addressing potential risks to children. They supported children to stay safe when out in the local community, for example, discussing where to cross roads safely and where they could play. As a result, children were protected from risk of potential harm.

Children were protected from the potential spread of infection as the childminder followed appropriate infection prevention and control procedures. The environment was well maintained and secure. Resources were in good condition which kept children safe from harm.

Children would benefit from a broader range of resources to support their learning. We have made an area for improvement relating to this under Play and Learning.

How good is our leadership?

3 – Adequate

We evaluated this quality indicator as adequate. Whilst we identified strengths, these just outweighed areas to be improved.

The childminder had recently begun reviewing and updating their policies and procedures.

Parents told us they received a welcome pack when they first started using the childminder and could ask to see the childminder's policies. This helped them to know what they could expect from the childminder. The childminder ensured that children and families felt included through effective settling in procedures. We discussed with the childminder involving parents as they continue to review policies, and the settings aims and objectives (see area for improvement 1).

Informal feedback was gathered through regular parental conversations. The childminder had carried out quality assurance in the past in the form of a short questionnaire. We encouraged them to use this format moving forward, to allow families to give constructive feedback to support them to develop their service. We signposted the childminder to the Care Inspectorate bitesize guide to self-evaluation, available through the Care Inspectorate Hub.

There was limited self-evaluation in place. As a result, children were not receiving care and support based on the most recent guidance and best practice. The childminder told us they planned to use the Care Inspectorate document 'A Quality Framework for daycare of children, childminding and school-aged children' to self-evaluate the service she provides (see area for Improvement 2).

Areas for improvement

1. To support children to receive high quality care and support, the childminder should review and update the service's policies, and aims and objectives, 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).

2. The childminder should develop and implement an effective system of quality assurance to monitor and improve all areas of practice and improve outcomes for children.

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

'I use a service and organisation that are well led and managed.' (HSCS 4.23).

How good is our staff team?**3 - Adequate**

We evaluated this quality indicator as adequate. Whilst we identified strengths, these just outweighed areas to be improved.

The childminder was kind, warm and responsive in their approach, which enabled children to feel valued and secure. Their respectful interactions supported children's wellbeing and helped build strong attachments with the children in their care.

The childminder had completed core training in Child Protection and First Aid. They were confident in the measures they would follow if they had any concerns about a child. As a result, children were protected from the risk of potential harm.

The childminder had not accessed any additional training or professional reading to support and develop their knowledge, understanding or practice. This has resulted in gaps in the childminder's knowledge and skills. As a result, children did not experience high quality care and support based on relevant evidence, guidance and best practice (see area for improvement 1).

The childminder engaged well during the inspection process and told us they were keen to update their knowledge and understanding. We signposted them to recent best practice guidance and online resources to help them access materials, for example, 'Realising the Ambition' and 'My Childminding Journey'.

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:

a) 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).

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	4 - Good
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?	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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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