

# Williamson, Lesley Ann Child Minding

Thurso

**Type of inspection:** Unannounced

**Completed on:** 19 September 2023

**Service provided by:** Williamson, Lesley Ann Williamson, Lesley Ann

**Service no:** CS2003008157 Service provider number: SP2003904758



## About the service

Lesley Ann Williamson is registered as a childminder to care for a maximum of six children at any one time under the age of 16. Numbers are inclusive of the childminder's own children.

Lesley Ann Williamson provides a childminding service from her home in a quiet residential area of Thurso, Caithness. The children have access to the ground floor, which includes a living room, playroom, kitchen and hallway. The childminder makes use of local parks and outdoor resources.

## About the inspection

This was an unannounced inspection which took place on 5 and 19 September 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 children using the service
- · spoke with the childminder
- · observed practice and daily life
- reviewed documents.

## Key messages

- Children experienced warm, nurturing care to support their wellbeing.
- There were limited opportunities for high quality play and learning experiences.
- Children's wellbeing benefitted from regular trips to the park and woodland areas.
- There were no systems in place to evaluate the quality of the service and identify areas for improvement.
- The pace of change to improve the quality of care and support and overall outcomes for children and their families, was too slow.
- The childminder was not familiar with best practice guidance and did not use this to support the development of 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?	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

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

## Quality Indicator 1.1: Nurturing care and support

Children experienced warm, kind and caring interactions. Children sought comfort and were offered cuddles and reassurance which helped them to feel safe and secure. This demonstrated positive attachments between the children and childminder.

Informal communication systems were in place with families. This was done through daily discussions and text messages. This supported continuity of care and included parents in their child's day.

The childminder knew children well, which supported her to meet their care needs. Basic information was recorded in personal plans. However, these had not been regularly reviewed and updated with parents. Effective systems were not in place to ensure the childminder was kept up to date with children's changing needs. As a result, we were not confident the childminder had accurate and up to date information for all children. We highlighted this at the previous two inspections. The childminder had made limited progress in ensuring personal plan information was in place and up to date, to support her to meet children's needs. We signposted the childminder to 'Guide for Providers on Personal Planning: Early Learning and Childcare'. We made a requirement around this at the last inspection which has been restated. (See Requirement 1 under 'What the service has done to meet any requirements made at or since the last inspection?')

Mealtimes had been a key area for improvement within the service. We could see the positive impact for children. They benefitted from a relaxed and sociable mealtime experience. Their safety was promoted as the childminder had a greater awareness around choking prevention and ensured effective supervision at all times. The childminder sat with children, chatting and creating opportunities for children to develop their language and social skills.

Children's safety and wellbeing was compromised by poor sleep arrangements. For example, a child was sleeping on the childminders sofa and another child was sleeping in a buggy. This did not promote good habits around sleep. (See Area for Improvement 1)

## Quality Indicator 1.3: Play and learning

Children were not being fully supported to widen their skills and consolidate their learning through play. There were limited opportunities for high quality play experiences and few opportunities to develop skills in early numeracy. Children's creativity, problem solving skills and imagination were not being enriched through the play resources and experiences on offer.

We saw some interactions that extended children's play and learning through questioning and interactions. On occasion the childminder facilitated appropriate conversations supporting the development of skills in early communication and literacy. For example, the childminder got down to children's level and used eye contact to support communication. The childminder should consider extending this practice further to ensure its consistently embedded. Children were provided with some experiences to mix with other children and develop their social skills. For example, children attended toddler groups with the childminder on a weekly basis.

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

There were limited approaches in place to evaluate children's progress and achievements. The childminder did not have effective processes in place, to respond and plan appropriately to meet individual needs. As a result, children were not fully supported to reach their full potential.

## 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)

#### How good is our setting?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

#### Quality Indicator 2.2: Children experience high quality facilities

The premises were homely and welcoming which allowed children to feel safe, secure and loved. Children were able to move freely around the childminder's home and made good use of the space available. The living room provided a comfortable space for children to rest and relax. Additionally, children could access a dedicated playroom which offered an alternative play space. However, the playroom was cluttered with a significant amount of play resources. This had potential to distract and overwhelm children. The childminder should review provision within the playroom and reorganise resources. This would create better opportunities for children to self select resources of their choice.

There was limited use of open ended, natural play resources to promote curiosity and enquiry indoors. There was a reliance on plastic play resources with limited real-life items. This reduced opportunities to develop children's creative potential. The childminder should consider introducing more open-ended resources and ensure they are well presented to readily provoke interest or curiosity. This was identified at the last inspection and the area for improvement made in relation to this will be continued. (See Area for Improvement 2 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

Children's interests were extended by using community resources. Going to local parks and Dunnet Forest meant they benefitted from exploring their abilities and the natural environment. This contributed to children having opportunities to be active and lead a healthy lifestyle.

## How good is our leadership?

2 - Weak

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

#### Quality Indicator 3.1: Quality assurance and improvement are led well

The vision, values and aims reflected the service and were shared with families. This supported them to have clear expectations around how their child's needs would be met in the setting.

The childminder used informal daily discussion, to ensure that children and their families could be consulted on the day-to-day running of her service. The childminder ensured that parents were involved from the outset and through the settling in period. Policies and procedures were shared at enrolment and the childminder was willing to respond to ideas and suggestions if highlighted by parents.

There were no systems in place to evaluate the quality of the service and identify areas for improvement. The childminder was unable to give us an example of improvements made which had brought about improved outcomes for the children. We discussed the benefits of using quality audit tools, such as 'A quality framework for day-care of children, childminding and school-aged childcare' in order to support self evaluation. This was identified at the last inspection and the area for improvement made in relation to this will be continued. (See Area for Improvement 4 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

Overall, the pace of change was too slow. At the last inspection we made a requirement which has not been met and five areas for improvement. Only two of these have been met and we have made an additional area for improvement. As a result, children are not experiencing high quality care. The childminder failed to submit an action plan detailing how they planned to address these improvements.

The Care Inspectorate offered the childminder support in moving the service forward. The childminder has agreed to take up the offer for the Care Inspectorate to provide improvement support.

2 - Weak

### How good is our staff team?

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

#### Quality Indicator 4.1: Staff skills, knowledge and values

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

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 no professional learning since the last inspection to keep her up-to-date with current best practice. This has resulted in gaps in the childminder's knowledge and skills. Consequently children did not experience high quality care and support based on relevant evidence, guidance and best practice. To support the childminder in developing their practice, they should consider using best practice documents such as 'Realising the Ambition'.

During our last visit we directed the childminder to a variety of best practice guidance documents to support her practice and improve outcomes for children. The childminder had not yet explored any of these and was not able to demonstrate an understanding of them through our observations and discussions. This was identified at the last inspection and the area for improvement made in relation to this will be continued. (See Area for Improvement 5 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?')

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

## Requirements

## Requirement 1

By 28 April 2023, the childminder must ensure each child receives appropriate care and support and their needs are met.

To do this the childminder must at a minimum:

a) ensure personal plans set out children's current needs and how they will be met

b) ensure personal plans are regularly reviewed and updated in partnership with parents.

This is to comply with Regulation 5(1)(2) (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 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 requirement was made on 4 April 2023.

#### Action taken on previous requirement

The childminder had made limited progress in ensuring personal plan information was in place and up to date, to support her to meet children's needs.

## We have extended the timescale for meeting this requirement to 8 December 2023.

#### 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

The childminder should review and make changes to the lunchtime experience, to ensure children are safe and opportunities for social engagement are promoted.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can enjoy unhurried snack and mealtimes in as relaxed an atmosphere as possible.' (HSCS 1.35)

## This area for improvement was made on 4 April 2023.

## Action taken since then

The childminder had reviewed and made changes to the lunchtime experience. Children now benefitted from a relaxed and sociable mealtime experience. Their safety was promoted as the childminder had a greater awareness around choking prevention and ensured effective supervision at all times. The childminder sat with children, chatting and creating opportunities for children to develop their language and social skills.

## This area for improvement has been met.

## Previous area for improvement 2

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 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 chose 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)

## This area for improvement was made on 4 April 2023.

## Action taken since then

There was limited use of open ended, natural play resources to promote curiosity and enquiry indoors. There was a reliance on plastic play resources with limited real-life items. This reduced opportunities to develop children's creative potential.

## This area for improvement has not been met and remains in place.

## Previous area for improvement 3

To support children's health and wellbeing, the childminder should ensure that effective infection prevention and control practices are in place for children.

This should include but is not limited to:

Reviewing children's access to resources for animals.

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)

#### This area for improvement was made on 4 April 2023.

#### Action taken since then

The childminder ensured that effective infection prevention and control practices were in place for children. The storage of resources for animals had been reviewed to support children's health and wellbeing.

#### This area for improvement has been met.

#### Previous area for improvement 4

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)

#### This area for improvement was made on 4 April 2023.

#### Action taken since then

There were no systems in place to evaluate the quality of the service and identify areas for improvement. As a result children did not experience high quality care and support.

#### This area for improvement has not been met and remains in place.

#### Previous area for improvement 5

To support positive outcomes for children effective use should be made of learning opportunities and best practice guidance, to support the childminder to develop her knowledge and skills. She should use her learning from these to evaluate her service, identifying areas for development which will have a positive impact for the children.

This is to ensure that 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 4 April 2023.

#### Action taken since then

The childminder had completed core training but had not undertaken any additional training or wider reading, to update her knowledge and skills. This meant that children did not experience high quality care and support based on relevant evidence, guidance and best practice.

This area for improvement has not been met and remains in place.

# 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?	2 - Weak
4.1 Staff skills, knowledge and values	2 - Weak

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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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