

Hillside Tots Child Minding

Lanark

Type of inspection:
Unannounced

Completed on:
25 July 2025

Service provided by:
Katie Hobbs

Service provider number:
SP2023000088

Service no:
CS2023000133

About the service

Hillside Tots provides a childminding service from their property, which is situated in a rural area outside the village of Carnwath, South Lanarkshire.

The childminder is registered to provide care for a maximum of 6 children at any one time up to 16 years of age; of whom 6, no more than 6 are under 12 years; of whom no more than 3 are not yet attending primary school and; of whom no more than 1 is under 12 months. Numbers are inclusive of the childminder's own children. At the time of our inspection, 4 children were registered at the service.

The service is located within the grounds of a smallholding (a small piece of land used for farming). The service is close to farms, woodland areas and fields. Schools and shops are a short drive away. The children are cared for in the large open plan kitchen and living area. They also have access to a secure decking area and outside spaces.

About the inspection

This was an unannounced Inspection which took place on 23 July 2025 between 12:00 and 14:30. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous registration information, information submitted by the service and intelligence. In making our evaluations of the service we:

- observed children using the service
- gathered families feedback using a survey
- spoke with childminder
- observed practice and daily life
- reviewed documents.

Key messages

- Children experienced a homely and welcoming environment, helping them to feel safe and secure.
- Children were settled and happy in play spaces.
- Personal plans should be improved to ensure they help meets children's needs, wishes and choices.
- Children benefitted from regular access to outdoor play.
- The childminder should further develop risk assessments, to include all areas within and around the service, to help keep children safe.
- Approaches to self-evaluation and quality assurance should be further developed to support continuous 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?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	4 - Good

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 strengths only just outweighed weakness.

Quality indicator: 1.1 Nurturing care and support

Children were settled and happy in play spaces. They experienced kind and caring interactions, which helped them build positive attachments to the childminder. In addition, children had formed relationships with the childminder's family. For example, they played together and showed care for one another. This supported children to feel safe and included in the childminder's home. One parent told us "my [child] is really comfortable with [the childminder] and loves going. [The childminder] is very confident and caring".

Personal plans contained some information, which was gathered when children started at the service. This included health and medical needs. However, we found that personal plans had not been reviewed at least every six months in line with best practice. This meant that families had not reviewed and updated personal plans to reflect changes and current needs of children. For example, sleep routines. The childminder should improve how information is recorded within personal plans to reflect children's current needs, interests and wishes. This should include strategies for how their needs will be met. We signposted the childminder to Care Inspectorate (2021) guidance: 'Guide for Providers on Personal Planning: Early Learning and Childcare.' (See area for improvement 1).

Children experienced relaxed and sociable mealtimes that met their needs and dietary requirements. They enjoyed eating together at the table and were encouraged to try new foods. For example, dried papaya and vegetables grown in the polytunnel. Children were excited to share their home-grown carrots and peas, proudly offering some to the inspectors. They tasted the peas alongside their lunch, showing a sense of ownership and enjoyment in what they had grown. We suggested encouraging children to be more involved in the preparation of food. This would help develop their life skills.

Water was provided with food and snacks for children. We discussed ensuring drinks were easily accessible when outdoors. This would help ensure children remained hydrated and promote their independence.

We reviewed systems in place to support safe administration of medicines. We were satisfied these were appropriate to support children's health and wellbeing. For example consent paperwork.

Children could sleep and rest in response to their needs. The childminder was aware of their sleep routines, which helped support their wellbeing. Whilst minded children did not currently require a nap, the childminder told us buggies were available for children to sleep outdoors. We discussed further ways to support children during nap times that would enhance their comfort and wellbeing in-line with best practice guidance.

Children's personal care needs were met in a sensitive manner that promoted their privacy and dignity. For example, support with toileting and cleaning faces after meals.

Quality indicator: 1.3 Play and Learning

The childminder valued the importance of play to support children's wellbeing. They demonstrated a good understanding of how children learn through play. Children participated in cooking, gardening and dressing up as part of their play routines. This helped promote real life skills.

Children moved freely between indoor play spaces and transported toys within the areas. They enjoyed playing with small cars, figures and building blocks. The childminder told us they rotated toys to meet children's interest. We asked the childminder to consider increasing the amount of toys and materials and reviewing storage to ensure they are easily accessible to children. This would help support their curiosity, learning and creativity. (See area for improvement 2)

Children benefited from regular access to outdoors, which promoted their overall wellbeing, sensory skills and exploration. They used spaces within the poly tunnel where they planted vegetables and explored with natural materials. For example, mud, stones and water. Children excitedly showed us the carrots they had grown. We discussed where they could further enhance outdoor play by developing opportunities for experimenting with open-ended resources (items that can be used in a range of ways).

Children benefited from time outdoors in the natural environment where they enjoyed the space and fresh air as well as learning about the animals. This included seeing new born lambs and caring for and collecting eggs from chickens. One parent told us "It's lovely that they get to be around nature and animals and other kids".

The childminder promoted the use of the community with daily visits to nearby villages. This included book bug, soft play and meeting other children and at the local farm shop. This supported children to make connections within their wider environment and develop their social skills.

Areas for improvement

1. To support children's wellbeing and development, the provider should review personal plans to ensure they set out how their individual needs will be met, as well as their wishes and choices. This should include, but not be limited to, ensuring that personal plans are regularly reviewed with children and parents to ensure that information is up to date, to reflect children's current needs, wishes and choices.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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. To support children's play and learning, the provider should review the amount and accessibility of play materials. This should include, but is not limited to, more open-ended materials, books, and arts and crafts.

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 strengths only just outweighed weakness.

Quality indicator: 2.2 Children experience high quality facilities

Children experienced homely, clean and well furnished play spaces that helped them feel welcome and included. Natural daylight was plentiful and children could easily see out of large floor to ceiling windows, which supported their wellbeing. They could watch for changes in the weather and feel connected to the outdoors.

Children moved freely in the indoor environment where the space met their needs for movement. For example, children played on the floor and moved between spaces to suit their comfort and choices. In addition, children had free flow access to the balcony area with supervision from the childminder. Children were able to transport materials and toys helping them feel at home.

Outdoors provided an interesting space for children to experience the natural environment. They regularly played in the polytunnel which provided shelter from weather. However, this could get very hot at times and the childminder monitored this to ensure children were kept safe.

The childminder told us of potential plans to increase the space available, by using the additional outbuilding. We provided advice for the childminder to consider if they wish to use this space to provide care for children.

Infection prevention and control measures were in place to support the wellbeing of children. For example, children were encouraged to take part in regular hand washing and use of disposable gloves when changing nappies. However, children shared a hand towel, which did not support infection prevention and control. We discussed where further developments could be made to support effective hand drying. For example, individual drying materials.

The childminder had considered how to minimise some risks in the environment. For example, regular hand washing after touching animals, and monitoring temperatures within the polytunnel. However, we found gaps in risk assessments and discussed that these should be further developed to ensure potential risks are identified and control measures are in place to help keep children safe. This included risks within outdoor spaces in relation to animals, areas children can access and other farming or rural activities. Discussion took place about further risks and we have requested further information from the childminder. (see requirement 1).

During the inspection we found that there was hot tub stored in the polytunnel area. We identified potential risks to children as this had not been securely locked. In addition, chemicals, used to treat the water, were stored behind the hot tub. Whilst we acknowledge that the lid was down and children were supervised, we discussed the importance of ensuring this is locked at all times and hazardous materials are stored appropriately to help keep children safe. (see requirement 1).

Requirements

1. By 26 September 2025, the provider must ensure children receive care in a safe environment. To do this, the provider must, at a minimum:

- a) ensure hazardous materials are kept out of reach of children
- b) ensure the hot tub is kept locked at all times
- c) include how risks to children will be managed within risk assessments.

This is in order to ensure that care and support is consistent with the Health and Social Care Standard 5.19 which states that "My environment is secure and safe." (HSCS 5.19).

It is also necessary to comply with Regulation 4(1)(a) (Welfare of Users) and Regulation 10(2)(b) (Fitness of premises) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weakness.

Quality indicator: 3.1 Quality assurance and improvement are led well.

The childminder had a vision in place that was shared with families, which aimed to place play at the heart of the service. This included providing opportunities for children to explore the world around them as they made mess and had fun. They should continue to develop this approach as they move forward with improvements within the service.

Regular communication helped families feel their views were valued. This included, daily conversations, sharing photographs and updates through mobile apps and the use of questionnaires. One parent commented "I never have to ask for updates, [the childminder] is great at letting me know".

The childminder developed a wide range of policies and procedures in line with best practice guidance. We suggested where policies could be further developed to help families keep informed. For example, to include how they use areas within the community and play spaces in the outdoor areas.

At time of inspection the childminder stored some documents in another building. We reminded the childminder that some documents should be easily accessible to share with families. For example, registration certificate and personal plans.

The childminder was at the early stages of developing an approach to quality assurance and self-evaluation. Whilst the childminder sought some views of families and received positive responses about the service provided, we discussed where approaches to quality assurance and self-evaluation could be strengthened to support the overall continuous improvement of the service. They should now become familiar with 'A quality improvement framework for the early learning and childcare sectors' for childminders, which is available on our website. This would support self-evaluation processes, enabling the childminder to identify what is working well and areas that could be further improved. (see area for improvement 3).

Areas for improvement

1. To support positive outcomes for children and families, the childminder should develop approaches to self-evaluation to support them to reflect and evaluate the quality of the service. In doing so, they could consider how the opinions of children and families can help influence change, building on the communication and engagement already in place.

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?

4 - Good

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

Quality indicator 4.1: Staff skills, knowledge and values

The childminder demonstrated an in-depth knowledge of child-development and had a wide range of skills and past experience in early years which supported them in their role. This helped them provide a nurturing service for children. In addition, they valued the importance of play and recognised the benefits to children having freedom in natural spaces, which supported their development of real-life skills.

The childminder told us that they planned to undertake further training to support them in their role. This included first aid and food hygiene training. This will support them to stay up to date with current best practice. We signposted them to further information available on our website. For example, Guide for providers on personal planning, early learning and childcare and safer sleep for babies. This would further support positive outcomes for children.

The childminder was a member of the Scottish Childminding Association (SCMA) and had built relationships with other local childminders. This provided opportunities to help reflect on best practice and build on information sharing to support service improvements.

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?	4 - Good
4.1 Staff skills, knowledge and values	4 - Good

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