

Noble, Joyce Child Minding

Biggar

Type of inspection:
Unannounced

Completed on:
3 November 2025

Service provided by:
Joyce Noble

Service provider number:
SP2003908129

Service no:
CS2003009386

About the service

Joyce Noble provides a childminding service from their family home near the Scottish Borders villages of Broughton and Skirling. The childminder is registered to provide a care service for a maximum of six children up to 16 years of age 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.

Children have access to the living room, large hallway, toilet, porch and have supervised access to the kitchen diner. The children also have access to front and back gardens.

About the inspection

This was an unannounced inspection which took place on 29 October 2025 between 10:00 and 12:45. One inspector carried out the inspection.

To prepare for the inspection we reviewed information about this service. This included, registration information, information submitted by the service and intelligence gathered since registration.

In making our evaluations of the service we:

- spoke with children using the service
- considered feedback from five families through an online questionnaire
- spoke with the childminder
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents relating to the care of children and the management of the service

As part of our inspections, we assess core assurances. Core assurances are checks we make to ensure children are safe, the physical environment is well maintained and that a service is operating legally. At the time of this inspection, improvements were identified relating to core assurances. We have reported where improvement is necessary within Leadership heading.

Key messages

- The childminder demonstrated a commitment to creating positive experiences for children and families.
- Quality assurance systems should be strengthened to support effective service management.
- Children had regular access to a broad selection of resources and activities that supported their engagement.
- Children benefitted from regular opportunities to explore their local community.
- The childminder demonstrated a warm and nurturing relationship with the children, who were settled and comfortable in their care.

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

Leadership	3 - Satisfactory / Adequate
Children play and learn	4 - Good
Children are supported to achieve	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

Leadership 3 - Satisfactory / Adequate

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

Leadership and management of staff and resources

The childminder had clearly defined aims and objectives focused on achieving positive outcomes for children and families. These aims were communicated transparently at the outset, fostering a shared understanding of the service's values. The service aimed to provide a safe, fun, stimulating environment where every child felt valued, included and supported. These values were reflected in daily practice.

The childminder demonstrated a commitment to creating positive experiences for children and families. Families felt meaningfully involved in shaping the service and comments highlighted openness to feedback and collaboration. One family shared, "the childminder will often ask for input on various things". Feedback tools such as questionnaires were in place however, they had not been used recently, and no completed responses were available. Regular use of these tools would support effective self-evaluation and continuous improvement.

The absence of structured self-evaluation and improvement planning limited the childminder's ability to drive meaningful change. The childminder discussed key strengths in promoting children's happiness and safety. They also recognised areas for development, including improving documentation and reintroducing community-based experiences such as visits to toddler groups to enhance social connections. However, national guidance had not been used to support ongoing improvement in relation to nappy changing, medication and personal plans, which reduced opportunities to enhance practice and improve outcomes for children. The childminder should use national guidance and Care Inspectorate and HM Inspectors (2025) 'A quality improvement framework for the early learning and childcare sectors: childminding' to ensure they carry out self-evaluation processes that lead to meaningful improvements. This would support sustained improvements and improved outcomes for children and families (see area for improvement one).

Quality assurance systems should be strengthened to support effective service management. We identified an error the childminder was making by providing food without registration as a food business. Although families shared they were satisfied with the healthy meals and snacks provided, to ensure continued safe practice and regulatory compliance, the childminder should ensure they either cease food provision immediately or contact the local authority to register as a food business. Strengthening compliance and oversight will support safe and effective service delivery (see area for improvement two).

The childminder had a range of policies in place; however practice did not consistently reflect the procedures outlined. For example, the nappy changing policy specified the use of a wipeable mat, disposable gloves, and apron for each change, yet this was not observed in practice or available. Some policies also require updating to strengthen safeguarding measures. This included developing medication policies and the child protection statement as this referenced a written policy and clear procedures for reporting concerns, but these were unavailable. To support effective leadership and management, the childminder should review and update all policies to ensure they reflect current best practice and provide clear guidance for safeguarding children (see area for improvement three).

The childminder demonstrated a good understanding of potential risks and had completed environmental

risk assessments. These should be expanded to include all risks children may encounter, including those during community outings such as the daily school run. Accidents and incidents were recorded appropriately, including first aid administered and parental signatures. To strengthen record-keeping, we asked the childminder to ensure dates are recorded when parents are asked to sign accident reports. Enhancing risk management and documentation would support effective leadership and continued safe service delivery.

A variety of training opportunities had been completed. Training completed included, potty learning, working with attention deficit hyperactivity disorder (ADHD) and the Autism spectrum and neurodiversity. The childminder was aware their child protection and first aid needed updating and had a plan in place to refresh this training. This helped to build upon the childminder's skills and knowledge in caring for children and keeping them safe.

Areas for improvement

1. To consistently enhance outcomes for children and meet legislative requirements, the childminder should adopt a more structured approach to quality assurance, self-evaluation, and improvement planning. Using best practice guidance and the Care Inspectorate and HM Inspectors (2025) 'A Quality Improvement Framework for the Early Learning and Childcare Sectors: Childminding' would support the identification of meaningful improvements and promote sustained positive 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 that: 'I benefit from a culture of continuous improvement, with the organisation having a robust and transparent quality assurance processes' (HSCS 4.19).

2. Strengthening compliance and oversight through developing quality assurance processes would support safe and effective service delivery. The provider should ensure they either cease food provision or contact the local authority to register as a food business.

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).

3. To support children and families in what to expect from the service and to inform and improve practice the provider should develop, review, and update their policies and procedures in line with relevant best practice guidance. This should include, but not limited to, developing policy and procedure for nappy changing, child protection and administration of medication.

This is to ensure the quality of 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).

Children play and learn 4 - Good

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Playing, learning and developing.

Children had regular access to a broad selection of resources and activities that supported their

engagement. Children were confident, happy, and engaged in their play, freely exploring experiences across the lounge, corridor, and porch areas. Activities included Duplo, dinosaurs, books, jigsaws, role play, trikes, and cars. One family told us, "Our child is always engaged in a wide variety of fun, stimulating, and age-appropriate activities that support their learning and development." There were opportunities for children to lead their own play and learning supporting children's well-being and engagement. To further enhance imaginative thinking and problem-solving, increasing the range of open-ended materials such as natural items and loose parts would further support children's creative play and imagination.

Although children did not access the garden during the inspection, both the childminder and families confirmed that outdoor play was a regular part of the daily routine. This supported children's physical development and connection with nature. Families commented positively, saying their child had "plenty of opportunities to play outside" and that the childminder, "Makes great use of outdoor spaces."

Children benefitted from regular opportunities to explore their local community. Visits to nearby play parks and cafe supported children's social development, confidence and physical wellbeing. Visits to the farm shed during lambing and clipping supported the children's learning and gave children real-life experiences that built their curiosity and understanding of nature and caring for animals. One family shared, "My child goes out and about and to play groups". The childminder recognised that re-establishing visits to toddler groups would further support opportunities for children to develop social, language and communication skills.

The childminder's responsive and caring interactions supported children's social and language development. By engaging at the child's level, the childminder encouraged autonomy, experimentation, and meaningful interaction. Learning was extended through sensitive, developmentally appropriate responses, helping build communication skills and confidence in using language.

Planning for children's experiences was informal, with the childminder responding to interests through spontaneous, day-to-day interactions. A daily communication book was used to share care updates with families. We discussed with the childminder they could also share observations of children's play. This would offer greater insight into each child's progress, support planning around their interests and developmental needs, and help identify next steps in learning.

Children are supported to achieve 4 - Good

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Nurturing care and support

The childminder demonstrated a warm and nurturing relationship with the children, who were settled and comfortable in their care. Care and routines were delivered with kindness and compassion which supported children to feel safe, loved, and secure. The childminder responded sensitively to the children's cues and preferences throughout our visit, supporting their well-being and overall development. Families told us, "We are incredibly grateful for the wonderful care and attention our child receives. It's clear that they genuinely love their work and cares deeply about each child's happiness and development".

Children's wellbeing was supported through opportunities for rest and sleep in a calm, homely environment. A travel cot was provided in a quiet downstairs bedroom, creating a peaceful space for younger children. The childminder carried out regular checks to ensure children's safety and comfort. These arrangements met children's individual needs for rest and relaxation.

Children's safety and wellbeing were supported through the childminder's understanding of safeguarding procedures. However, the child protection policy needed further development. Strengthening this policy would help support clear and effective responses to any concerns. This has been identified as an area for improvement under the 'Leadership' heading within this report.

Although no medication was currently being administered, previous records were reviewed. Updating medication templates in line with the Care Inspectorate's guidance, "Management of Medication in Daycare of Children and Childminding Services", would improve accuracy and reliability, contributing to safer and more responsive care.

Children experienced relaxed and responsive mealtimes that supported their wellbeing. They sat comfortably with the childminder nearby to ensure safe eating, and water was readily available to support hydration. Independence was encouraged through self-feeding with appropriate utensils. Families provided lunches, while the childminder offered healthy snacks and occasional meals, which children enjoyed. Families commented positively on the quality of food, saying, "Our child is always offered a variety of healthy and nutritious meals and snacks. We really appreciate the effort that goes into providing such thoughtful and healthy options, it gives us great peace of mind". To ensure continued safe practice and regulatory compliance, the childminder was advised to seek registration as a food business. This will be recorded as an area for improvement under the 'Leadership' heading within this report.

Children's personal care needs were met in a way that supported their privacy and dignity. The childminder was attentive and encouraged good hygiene through consistent handwashing routines for both themselves and the children. However, current nappy changing practice did not fully reflect the service's policy or best practice for infection, prevention and control. For example, the use of a towel for changing children on and lack of available gloves on the day of inspection. To ensure effective infection prevention and control, the childminder should consistently use appropriate personal protective equipment and align procedures with best practice and their written policy.

Personal plans were in place for all children and developed with families, including key details such as health needs and routines. Informal communication helped the childminder stay responsive to changing needs. A family shared, "We are fully involved in our child's care. The childminder values our input and keeps us closely informed about our child's progress and needs". While updates were shared through conversations, these were not consistently recorded in the personal plans. Plans had not been reviewed with families every six months in line with legislation, limiting their effectiveness as working documents to support children's wellbeing. The childminder planned to begin formal reviews. To improve practice, they should use the Care Inspectorate's guidance, "Guide for Providers on Personal Planning - Early Learning and Childcare", to ensure plans are meaningful, regularly reviewed, and tailored to each child's needs. The area for improvement from previous inspection remains unmet and will be revised (see area for Improvement one).

Families spoke positively about the childminder, with one telling us, "We always feel genuinely welcomed into the childminder's home. She creates a warm, open environment where we feel comfortable discussing our child's care, development, and daily experiences". Families described feeling genuinely welcomed into the childminder's home, highlighting a warm and open atmosphere that encouraged meaningful discussions about their child's care and development. This inclusive approach supported strong relationships, family involvement, and a sense of belonging.

Areas for improvement

1. To support children's overall wellbeing, the provider should develop personal plans to be person-centred and promote positive outcomes. This should include but is not limited to:

- a) Recording any techniques or strategies used to support children's development.
- b) Celebrating children's achievements.
- c) Updating children's personal plans at least once in every six months or sooner if their needs change.

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).

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

We recommend the childminder ensures all information regarding minded children and their care needs is reviewed at least once every six months. She should begin to show how children's development needs are planned for using the next steps in their files. This will help to ensure that an appropriate personal plan is in place and remains up to date.

National Care Standards Early Education and Childcare up to the age of 16: Standard 3 - Health and wellbeing Standard 6 - Support and Development.

This area for improvement was made on 15 April 2016.

Action taken since then

The childminder used communication diaries and regular conversations to share children's care experiences in the service. Families spoke positively about their involvement and the tailored care their children received.

Personal plans had not been formally reviewed with families every six months. This limited their effectiveness as meaningful, working documents to support children's development. The childminder had a plan in place to begin reviewing personal plans.

This area for improvement had not been met and will be revised as an area for improvement under 'Children are supported to achieve' within the report.

Previous area for improvement 2

We recommended the childminder use the National document 'Building Ambition' to inform the service they provide.

National Care Standards for Early Education and Childcare. Standard 5 - Quality of experience, Standard 14 - Well managed service, Standard 12 - Confidence in staff.

This area for improvement was made on 15 April 2016.

Action taken since then

The childminder had available a new copy of the Realising the Ambition: Being me (Education Scotland, 2020) and shared they had plans to read this. This showed that the childminder was aware there was further guidance available since building the ambition and had plans to become familiar with it.

The childminder should ensure they continue to use best practice guidance to support their practice.

This area for improvement had 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

Leadership	3 - Satisfactory / Adequate
Leadership and management of staff and resources	3 - Satisfactory / Adequate
Children play and learn	4 - Good
Playing, learning and developing	4 - Good
Children are supported to achieve	4 - Good
Nurturing care and support	4 - Good

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