

## Pass, Mairi Child Minding

Alva

**Type of inspection:**  
Unannounced

**Completed on:**  
20 November 2025

**Service provided by:**  
Mairi Pass

**Service provider number:**  
SP2005951430

**Service no:**  
CS2005105943

## About the service

Mairi Pass provides a service from their home in Alva. The service is registered to provide care to a maximum of eight children under the age of 16 at any one time, of whom a maximum of six will be under 12, of whom no more than three are not yet attending primary school and of whom no more than one is under 12 months. Minded children can only be cared for by persons named on the certificate. No overnight care will be provided. The parts of the premises not to be used are the bedrooms on the upper floor.

The service is based in a residential area of Alva, in Clackmannanshire and is close to green spaces, schools, and other amenities. Children used the ground floor of the property for indoor activities and had access to a bathroom. Although not currently in use, the enclosed garden provided an outdoor play space.

## About the inspection

This was an unannounced inspection which took place on 20 November 2025 between 09:20 and 10:45 and 12:00 and 13:00. This 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 inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. To inform our evaluation we:

- spoke/spent time with three young people using the service
- received three completed questionnaires from families using the service
- spoke with the childminder
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents.

At the time of this inspection, improvements were identified relating to core assurances. We have reported where improvement is necessary within Leadership.

During this inspection we gathered specific information to help us understand more about how services support children's safety, wellbeing and engagement in their play and learning. This included reviewing the following aspects:

- staff deployment
- safety of the physical environment, indoors and outdoors
- the quality of personal plans and how well children's needs are being met
- children's engagement with the experiences provided in their setting.

This information will be anonymised and analysed to help inform our future work with services.

## Key messages

- Effective communication with families meant that they were valued, and supported positive outcomes for children.
- Robust quality assurance processes should be developed to promote high-quality care and children's wellbeing.
- Medication policies and procedures should be strengthened to align with best practice to support safe administration.
- Children were happy and confident within their chosen play experiences which reflected their interests.
- Warm and nurturing relationships supported children's emotional wellbeing within a caring environment.

## 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

### Leadership and management of staff and resources

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

Positive relationships had been developed with children and their families which demonstrated that they were valued. One parent commented, 'Mairi knows them very well and will always take into account their individual interests.' Verbal updates, daily diaries, and photographs were shared through digital online platforms, and enabled families to be included in their child's care. This supported them to build trusting and effective partnerships with children and their families. Questionnaires enabled families to share their views with the childminder about the service. We suggested methods the childminder could consider to ensure feedback was constructive and supported meaningful improvements. This would further promote family's involvement to inform change and promote positive outcomes for children.

Children experienced care and support from the childminder who reflected their vision to provide a 'warm, welcoming, caring and relaxed atmosphere.' We suggested that the childminder could revisit their aims, to ensure they were reflective of their current service, and they were responsive to this. This would enable them to promote shared aspirations, a sense of ownership and help to inform improvements within the service.

Quality assurance systems were not yet embedded to promote consistent high-quality care. These should be developed to ensure they are effective in supporting the childminder to manage their service. We discussed the benefits of streamlining paperwork to ensure that auditing processes were focused and manageable. Policies and procedures should be reviewed, in line with best practice and guidance, to support the effective management of the service. Children's personal plans should be updated, to reflect their current wellbeing needs, in line with legislation. This would support families' knowledge regarding the services processes and procedures and ensure children's needs were consistently met. (See area for improvement 1)

Self-evaluation and improvement were in the early stages and did not yet impact positively on the quality of children's care. We discussed how this could be developed to support the childminder to identify practical priorities, to evaluate and improve their service. This would include becoming familiar with the new shared guidance, 'A quality improvement framework for the early learning and childcare sectors: childminding.' This would promote positive outcomes for children and develop a shared understanding of the childminder's strengths and areas for development. The childminder should update their own knowledge and skills through appropriate and relevant training and include child protection and first aid. This would support the childminder to maintain children's wellbeing. (See area for improvement 2)

The medication policy and procedures should be reviewed to ensure that accurate information would be gathered, to support effective administration. Although, no children currently required regular medication, we found information was not fully completed, where it had previously been administered. Medication procedures should be reviewed to align with best practice, to ensure that children's health needs are effectively met. This would support the childminder's confidence in the safe administration of medicine and contribute to children's health and wellbeing. (See area for improvement 3)

## Areas for improvement

1. To support positive outcomes for children and families, the provider should develop their quality assurance processes.

This should include, but is not limited to:

- updating children's personal plans to ensure they meet their current wellbeing needs and wishes
- reviewing and implementing current guidance to ensure policies and procedures are reflective of the service.

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) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

2. To support positive outcomes for children and families, the provider should develop their approach to self-evaluation and improvement.

This should include, but is not limited to:

- becoming familiar with best practice guidance to support them to identify their strengths and areas for improvement
- maintaining relevant knowledge, skills, and training to support children's overall wellbeing, including child protection and first aid.

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, and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

3. To maintain children's health and wellbeing, the provider should review their medication policy and procedures.

This should include, but is not limited to;

- ensure administration of medication forms are completed in full, signed and dated by parents and the childminder
- ensure that medication is safely administered in line with appropriate medication dosages
- ensure that signs and symptoms where medication is required are detailed in full.

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

## Children play and learn 4 - Good

### Play learning and developing

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.

Children benefitted from a childminder who understood how they played, learned, and developed. They were happy and confident within their chosen play experiences, which meant that they felt safe and secure in the childminder's care. One parent commented, 'They always have a smile on their face.' Older children were empowered as positive role models, as they supported younger children to learn new skills. This meant that children developed skills for life and learning in a caring environment.

Children were given the time and space to persevere to develop their imagination and creativity. They were actively encouraged to participate in experiences that motivated their interests, for example drawing. One child was proud of their achievement and told us, 'It's a spaceship and it's going to space.' Positive interactions shared between the childminder and children enabled them to recognise and celebrate their successes. As a result, children's confidence was developed through their interactions and experiences.

Literacy, numeracy, and language skills were supported through meaningful play and positive interactions with the childminder. Sharing and turn taking were sensitively modelled across play experiences which supported children's development. Children's emerging vocabulary learning was promoted as the childminder repeated and commented on their spoken utterances and words. This meant that children's verbal and non-verbal communication was respected. The childminder spoke knowledgeably about younger children's recent developments within communication which valued them as individuals. Activities such as Bookbug, developed children's awareness of songs and rhymes and children commented positively on these experiences. One child told us, 'My favourite is Sleeping Bunnies.' This enabled children to develop their social skills and engaged them in meaningful play.

Children were able to choose from some toys and resources which were mostly age and stage appropriate. The childminder was consistently down at children's level, modelling positive interactions and play. Responsive interactions were warm and sensitive, which promoted children's overall wellbeing. There was scope to further develop resources to ensure that children had opportunities to enrich their experiences. This would support the development of children's curiosity, creativity and imagination at a pace that was right for them.

Planning approaches were informal and were in the early stages of development. Children were consulted daily on how they would like to spend their time with the childminder. A planned approach of intentional and responsive play and learning would enable the childminder to enhance children's development. This could take into consideration their interests and how activities and experiences could further develop and extend these. We suggested methods that the childminder could consider to record effective observations of children's skills, learning and development. This would provide opportunities to evaluate children's progress, plan appropriate next steps, and highlight achievements.

## Children are supported to achieve 4 - Good

### Nurturing care and support

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.

Children experienced kind, warm and caring attachments that supported their emotional wellbeing. Transitions effectively enabled children and their families to develop their confidence with the childminder through a personalised settling in process. One parent commented, 'Great communications, reliable and understanding.' This promoted the development of positive relationships and meant that children felt secure in their care.

Children were sensitively cared for which supported their wellbeing. The childminder was attuned to their needs and knew their individual personalities well. Cuddles and comfort were offered, when required, which demonstrated that children felt loved and secure. For example, when helping children transition between experiences such as getting ready to sleep. We signposted the childminder to the best practice guidance, 'Safe sleep Scotland' to support them to review safe sleep practices, in line with guidance. This would ensure children's safety and wellbeing were effectively maintained.

Nurturing interactions supported children to feel comfortable and confident with the childminder and their family. This meant that positive connections had been established. One parent commented, 'Mairi has a similar ethos to myself so it's like a home from home. I know they are safe and well cared for.' Families were warmly welcomed into the service, and the childminder was responsive to their individual family needs. The childminder shared that they felt proud of the relationships that they had developed with their children and families. This meant that children and families benefitted from a sense of belonging within a supportive environment.

Mealtimes were a calm and unhurried experience which enabled children to enjoy their food at a relaxed pace. Packed lunches were provided by children's families and supported their individual needs. Children's social skills were developed, as the childminder sat with them at the table, promoted conversation and their independence skills. The childminder was proactive to our suggestion to make the table a more nurturing and inviting space to eat by removing their boxes from the table. This would further respect mealtimes as a valuable and calming experience.

Personal plans were in place for each child and included information about their wellbeing, likes and dislikes at their registration with the service. We highlighted the importance of reviewing and updating children's information, in line with legislation, to ensure they remained accurate and met their needs. We signposted the childminder to the Care Inspectorate document, 'Guide for providers on personal planning: early learning and childcare.' This would support children's wellbeing and development and ensure consistency within their care. An area for improvement within Leadership has been made to reflect this.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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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