

# Jen's Childminding Services

## Child Minding

Falkirk

**Type of inspection:**  
Unannounced

**Completed on:**  
21 November 2025

**Service provided by:**  
Jennifer Singh

**Service provider number:**  
SP2017989386

**Service no:**  
CS2017360550

## About the service

Jen's Childminding Services operates from their family home in Falkirk. They are registered to provide a childminding service to a maximum of six children at any one time under 16 years, 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 childminders family.

Children have access to the living room, kitchen, toilet facilities on the ground floor and designated space in the back garden. The service is close to schools and nurseries, green spaces, local amenities and can be reached by public transport links.

## About the inspection

This was an unannounced inspection which took place on Monday 17 November 2025 between 09:00 & 11:00. Feedback was shared following the inspection. This 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 and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- Spoke/spent time with two children using the service
- received seven questionnaires from families
- spoke with the childminder
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents.

## Key messages

- Children were settled, happy and having fun as they engaged with resources
- The childminder knew each child's needs and wishes
- The childminder responded to children's requests for new resources
- Children and families had developed positive connections with the childminder
- Children benefitted from the childminders caring and nurturing approach.
- The childminder should engage with best practice guidance to support self-evaluation.
- Quality assurance processes should be improved to ensure appropriate safety measures are in place.
- Management and storage of medication should be improved to ensure children's healthcare needs are met.

## 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's vision was to provide a home-from-home environment that is safe and welcoming for children and families. We encouraged them to look at ways to review their vision, values and aims with children and families as they focus on improving the service.

Self-evaluation for improvement was at an early stage. The childminder shared they had consulted children, responding to their requests for new games. Families told us they had been involved in ways to develop the service. There was no evidence of this recorded. We encouraged the childminder to familiarise themselves with best practice guidance to support self-evaluation. We signposted them to the Care Inspectorate guidance 'A quality improvement framework for the early years and childcare sectors: Childminding (Care Inspectorate, 2025.) Evidencing self-evaluation could support them to recognise what was working well in the service and identify areas for development.

Quality assurance processes were not embedded and had the potential to compromise children's safety and wellbeing. The childminder had some systems in place to carry out checks of spaces and resources. There was no evidence these checks were current or steps had been taken to reduce potential risks. For example, there was hazardous materials in reach of children indoors that could cause risk to their safety and wellbeing. The childminder should ensure a more effective process is in place to identify risks and take appropriate measures to minimise these (see area for improvement 1.)

The childminder had begun to review and update policies to reflect the service. We encouraged them to continue to review these with detail to ensure practice reflects policy and best practice. For example, ensuring hand washing is embedded and carried out at key times throughout the session and hazardous substances will be stored safely.

The management and safe storage of medication needs to be improved. This should include, ensuring families complete relevant healthcare consents prior to medication being stored in the setting or administered. Having an effective system in place will support the childminder to meet children's healthcare needs in line with guidance. We signposted them to the Care Inspectorate guidance 'Management of medication in day care of children and childminding services (Care Inspectorate, 2024.) (see area for improvement 2.)

### Areas for improvement

1. To ensure all spaces are safe, potential risks identified and steps taken to minimise these. The childminder should carry out regular checks of the premises and evidence actions taken when risks have been identified as part of their quality assurance processes. This should include, but is not limited to all spaces indoors and outdoors that children have access to.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My environment is secure and safe.' (HSCS 5.19)

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.24)

2. To ensure children's healthcare needs can be fully met, the childminder should take appropriate steps to ensure all medical consents are completed in line with guidance. This should include, but is not limited to, ensuring medical permissions are completed with detail, reviewed with families and medication is stored safely and securely, out of reach of children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 experienced play and learning opportunities that promoted choice, creativity, and challenge. Resources were organised to support independence and reflected children's interests, such as dinosaurs and construction play. Families told us children were involved in a range of opportunities and fun experiences to meet their individual needs and support their development. Activities observed during the inspection encouraged literacy and numeracy skills through stories, counting games, and imaginative play. The childminder had a good awareness of what each child liked and was able to read their cues, offering different activities. Families comments included "always activities out and kids interacting with each other", my child has "been out walks, to parks, play areas, which suit [them] massively as [they] love playing and going on walks to just be outside" and "there is usually always a fun activity there for them to do, whether its drawing, playing games, doing arts and crafts or playing with toys". As a result, children were engaged and having fun.

Interactions between the childminder and children were calm and responsive, helping children to feel secure. Children enjoyed showing the childminder the toys they had chosen and picking stories to share. The childminder was able to read children's cues and responded appropriately when children became dysregulated. As a result, children benefitted from a nurturing and kind approach that helped them engage in their play and learning when they were ready.

The childminder had recorded some observations of learning and identified appropriate next steps for children's stage of development linked to their interests. They had recently completed child development training to enhance their knowledge and understanding of children's stages of development. This demonstrated a commitment to support progress at a pace that was right for each child.

Children had access to a secure, enclosed back garden that offered opportunities for them to move their bodies and develop skills for life. There was a selection of wheeled toys, ball games and large equipment. On the day of our visit, this space was not being used. To further enhance experiences, the childminder should continue to develop opportunities for outdoor play. We sign posted them to best practice guidance 'Space to grow and thrive' (Care Inspectorate, 2024.)

Planning approaches were informal, reflecting children's interests. The childminder was progressing towards using an online system. This will support them in tracking progress and sharing learning with families. We encouraged the childminder to ensure links to online best practice aligns with national guidance and the context of their service.

## 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

Children experienced warm, responsive, and nurturing care. The childminder knew children well and had built positive relationships that supported their wellbeing. During the visit, interactions were calm and reassuring, helping children feel safe and secure. The childminder checked how children were feeling and responded sensitively to their needs, including managing any conflict appropriately.

Children were involved in shopping for snacks and choosing menu options. The childminder had begun to introduce activities such as helping to prepare snacks, using safety equipment. This supported children to develop skills for life and understand how to use kitchen equipment safely. The childminder was registered as a food business and had completed training on food allergies and intolerances. This demonstrated a commitment to offer children a quality mealtime routine whilst meeting their individual needs.

Personal plans were in place for children. There were some inconsistencies in the completion of information. We encouraged the childminder to ensure plans are completed with detail. They were in the process of introducing an online system to support sharing and updating information with families. This was not fully embedded yet and will take time. The childminder used a 'what matters to me' document to support transition from home to the setting. Individual risk assessments had been developed for children where mobility or access to the full provision could be limited. This ensured they were able to attend the setting. The childminder had clear actions identified, agreed with children and families. Children's voices were included in these risk assessments, reflecting elements of a person-centred approach.

Families were welcomed into the setting and had daily opportunities to discuss their child's care and learning. Families strongly agreed they had a good relationship with the childminder. Comments included "[The childminder] always keeps us up to date with things going on, my [child] loves going there, she is very friendly and kind", "I know I can always ask [The childminder] questions when it comes to my [child] and she always helps me if I'm unsure, giving advice. It's an open line of communication and I'm grateful for that", "I've always found her to be approachable and accommodating to my child's needs" and "my children are very happy to attend the childminders." As a result, positive partnership working had been developed and families had confidence in the childminder.

The childminder shared observations and pictures through an online platform and families also contributed information from home. Feedback from families highlighted strong communication and trust in the childminder's approach. This meant, Positive relationships between the childminder and families contributed to a sense of security and belonging.

## 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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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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