

Baig, Nazneen Child Minding

GLASGOW

Type of inspection:
Unannounced

Completed on:
11 December 2025

Service provided by:
Nazneen Baig

Service provider number:
SP2006959721

Service no:
CS2006124859

About the service

The service is provided from the childminder's home in the residential area of Blantyre, South Lanarkshire. The childminder is registered to provide a care service to a maximum of six children at any one time up to 16 years of age. Children have access to the living room, kitchen/dining area and bathroom. There is access to a large garden at the property. The service is located close to local parks, amenities and primary schools.

About the inspection

This was an unannounced inspection which took place on Thursday 11 December between 11:30 and 13:45. 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 two people using the service and four families
- Spoke with the childminder
- Observed practice and daily life
- Reviewed documents

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, no improvements were identified relating to core assurances.

Key messages

- The childminder had developed sensitive, trusting and caring relationships with children and families.
- The childminder was focused on delivering nurturing, safe and responsive care to help meet children's individual needs.
- Interactions and opportunities were supporting rich experiences for children that took account of their interests.
- Personal planning records and reviews needed to be more formal to support sustained progress in learning.
- Some policies and procedures needed improvement to ensure they were robust such as the service outings risk assessment, medication policy and nappy changing procedure.

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	4 - Good
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 4 - Good

Quality Indicator: Leadership and management of staff and resources

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.

The childminder had developed an accessible and thoughtful approach to minding children that supported families and children to feel included in the direction of the service. There had been some involvement by families in reviewing the aims, quality and experiences of the service through questionnaires.

We observed the service aims in action. The policy stated that the childminder aimed to provide stimulating experiences, offer a happy environment and to work in partnership with families. Observations of the childminder's approach reflected that in practice. The childminder was actively engaged with both children and their families, and the ethos of the service was one of sensitive childcare. Parent feedback reflected our observations. One parent felt they had established positive bonds with the childminder and said that their child was "always happy which gives me a peace of mind knowing they are safe while I work".

Self-evaluation at the service was carried out informally. However, the childminder was aware of the strengths of the service such as outings, community learning and relationships with families. They also were able to discuss areas they needed to improve such as the need for robust documentation. We agreed that the childminder should ensure improvements lead to sustained positive outcomes for children and their families.

A variety of policies and procedures were in place. For example, outings, health and safety, child protection and settling in. These were accessible to families. The annual review of policies and procedures was overdue. We reminded the childminder of the importance of reviews to ensure information was up to date and relevant and they agreed such as updating the contact numbers for local child protection services.

The childminder had undertaken regular training since the last inspection that supported positive outcomes for children. A parent told us they felt they were "Always welcome to come along and see [my child] in [childminder's] house playing and to discuss anything I would like". We spoke about the importance of robust policies and procedures such as the management and administration of medication and the childminder agreed.

Children play and learn 4 - Good

Quality Indicator: Playing, 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.

Each child explored resources and played with toys at their own pace. A parent agreed and told us, "My child has a choice when they are with the childminder, and they always meet their needs". The childminder checked in on children and was able to gauge if children needed support or encouragement. For example, one child was exploring an interactive pop-up toy. The childminder encouraged the child to lead the play and gave meaningful praise to the child. They used suggestions and role modelling to show the child how to work the interactive toy. The child was smiling and giggling at the recognition offered by the childminder.

A child told us, "I like playing with all the toys and going outdoors whether that's to the park or soft play or any other adventures [childminder] takes us on". Parents also told us outdoor and community experiences were often, and one parent said, "I love how [childminder] is always doing things indoor and outdoor with my [child]". A large garden provided ample space for children to explore. Resources such as slide, swing, cars and balls were available. These experiences supported children's wellbeing, health and sense of community.

Children had various opportunities to learn within the community such as listening to stories at the library, attending soft play, toddler groups and trips to the park. On the morning of the inspection children had attended a music and singing group. Toys and resources were also varied such as role play prams and dolls, kitchen, musical instruments, books and blocks and interactive musical toys. These opportunities helped bring depth to play experiences.

Children were having fun, happy and confident in the childminder's home. The childminder encouraged children's choice and spontaneous play experiences. For example, one child was learning how to pull up to a standing position, and the childminder was supportive of this. The childminder helped the child to stand and hold on to a pram. This experience helped build the child's sense of achievement and confidence.

The childminder supported families with drop off and collections of children. Daily chats at drop off and pick up times were used to support successful communication. A parent told us, "[Childminder] does a lot with my [child] as it is. There really isn't much I would change or want to improve". The childminder used an app to share some photos and messages. This helped the childminder to maintain communication as a part of children's development and achievements.

Children are supported to achieve 4 - Good

Quality Indicator: 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.

Practice and approaches were in place to help keep children safe. The childminder was aware of their responsibility and were confident they would respond correctly if concerned about a child. Systems were in place to support children's wellbeing relating to individual dietary and medical needs. We also discussed the process being used for risk assessing outings to places such as soft play, Bookbug and a safari park. We encouraged the childminder to create a more detailed version of that process and share it with parents.

Arrangements were in place and agreed with parents for children's rest and sleep. The childminder knew children's cues for sleeps and rest and had established good habits and routines to support this. Sociable and healthy eating experiences were promoted at the service. Fresh water was available to ensure children remained hydrated. We observed a child's mealtime which was relaxed and calm and promoted involvement and social skills. Routines were effectively supporting children's needs and family wishes.

Information about children's individual significant needs and interests was in places limited and needed to be more organised. This included personal care information, likes and interests. Information was not recorded on specific targets, progress and reviews with parents to support positive outcomes for individual children. This meant children's current wellbeing, learning and development were not fully considered (see area for improvement one).

Children were relaxed and comfortable with the childminder. The childminder knew the importance of nurturing attachments and interactions. They used responsive approaches to caring for children. The childminder's relevant qualification, experience and use of guidance underpinned the care and support of children.

We discussed the importance of children's rights and voices being central to planning decisions. The childminder shared examples of children's success and achievements in play through photos and written messages with parents. Some strategies had been verbally agreed to support individual needs. These verbal discussions ensured families were involved in elements of their child's experience.

The childminder followed good hand hygiene to reduce the spread of infection. They confirmed use of a wipeable mat when changing nappies. The service procedure for changing nappies noted that they would also use single use plastic aprons and gloves. However, the childminder told us they had stopped doing this. We reminded the service of the correct personal protective equipment (see area for improvement two).

Reassuring and trusting relationships with families had been embedded and were helping to meet children's needs. Parent told us they had a good relationship with the childminder and were "in contact almost daily, always kept up to date with pictures when [my child] is in their care, [childminder] is very understanding and considerate".

Areas for improvement

1. To support children's wellbeing, learning and development the provider should ensure each child has a personal plan. These should include, but not limited to:

- a record of children's health and wellbeing needs
- information on how the service plans to support the children's needs
- being created in consultation with parents and where appropriate children.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "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 "my care and support meets my needs and is right for me" (HSCS 1.19)

2. To minimise the potential spread of infection, children's nappies should be changed in line with good practice guidance. This includes, but is not limited to, the use of disposable gloves and single use aprons.

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

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 update her current medication procedures to take account of the practice guidance document: Management of medication in daycare of children and childminding settings.

National Care Standards Early Education and Childcare up to the age of 16: Standard 3 - Health and Wellbeing.

This area for improvement was made on 23 August 2017.

Action taken since then

The childminder had created a policy relating to the management and administration of medication. However, this needed to be clearer, and they needed to review the wording used within the policy. The childminder was now using templates to record parent's requests to administer medication and to record when medication had been administered.

This area for improvement was partially addressed. However, it needed to be more robust and as such will remain as an area for improvement.

Previous area for improvement 2

The childminder should develop written risk assessments for places she visits regularly with the children.

National Care Standards Early Education and Childcare up to the age of 16: Standard 2 - A Safe Environment.

This area for improvement was made on 23 August 2017.

Action taken since then

The childminder had created a general risk assessment relating to outings. However, this was not specific to the various places they visited with children. We discussed the need for specific risk assessments for outings and places visited and the childminder told us they understood the needs for the details within risk assessments.

This area for improvement was partially addressed. However, it needed to be more detailed and as such, will remain as an area for improvement.

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	4 - Good
Leadership and management of staff and resources	4 - Good
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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