

Nicola's Childminding Child Minding

Girvan

Type of inspection:
Unannounced

Completed on:
27 February 2026

Service provided by:
Nicola McCutcheon

Service provider number:
SP2018989670

Service no:
CS2018364362

About the service

The childminder provides a childminding service from their home in the residential area of Girvan, South Ayrshire. The children have access to the downstairs area of the property including a living room and kitchen with an upstairs toilet. They also have access to an enclosed rear garden.

The service is registered to care for a maximum of six children at any one time under the age of 16. The service is close to local amenities such as schools and shops. There were three children present at the time of the inspection.

About the inspection

This was an unannounced inspection which took place on 26 February 2026 between 12:30 and 14:45. 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:

- gained feedback from six parent/carers through Microsoft Form questionnaires
- 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, improvements were identified relating to core assurances. We have reported where improvement is necessary within the headings Children thrive in quality spaces and Children are supported to achieve.

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

- Children benefitted from warm, nurturing interactions with the childminder.
- The childminder must ensure they are knowledgeable and confident in their procedures to safeguard children.
- To keep children safe the childminder should review their infection prevention and control procedures.
- To ensure children are kept safe the childminder must remove all risks and hazardous materials within their home.
- To ensure better outcomes for children the childminder should use the requirements and areas for improvements from this inspection to support improvements within the service.

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	2 - Weak
Children thrive and develop in quality spaces	2 - Weak
Children play and learn	2 - Weak
Children are supported to achieve	2 - Weak

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

Leadership 2 - Weak

Quality Indicator: Leadership and management of staff and resources

We made an evaluation of weak for this quality indicator, as there were some strengths, but these were compromised by important weaknesses.

Aims and objectives which were in place had not been reviewed since the service was initially registered. As a result, it was unclear whether they still reflected family's needs and expectations. Opportunities to reflect and bring about positive change for children and families were missed. Regularly reviewing the service aims would help the childminder keep them relevant and responsive to children and families changing needs. This would support consistent practice and assist the childminder in meeting the needs of families accessing the service.

Self-evaluation and improvement planning were not used consistently or effectively. Although the childminder shared images of children's experiences via WhatsApp and Messenger, this informal communication had not resulted in improved practice. This meant opportunities to enhance outcomes were missed, and practice was not reviewed or improved to meet children's changing needs. The childminder should introduce regular and robust self-evaluation, including structured review of aims, policies, and practice. This would support continuous improvement and ensure children experience better outcomes (see Area for Improvement 2 under What the service has done to meet the area for improvement since the last inspection).

Children did not experience consistently safe care because procedures for recording and monitoring accidents and incidents were not in place. Although appropriate recording forms were available, the childminder often relied on verbal communication with parents instead of completing written records. Without reliable accident and incident records, the childminder could not identify patterns that may signal emerging risks. As a result, children's safety and wellbeing were not effectively monitored or protected. The childminder was advised that all accidents and incidents must be recorded and shared appropriately. This would ensure transparency, support effective monitoring, and enable safe decision making. Strengthening these processes would help ensure children's safety.

Although policies were in place, some had not been reviewed or updated to support the childminder in their practice. The childminder also lacked confidence in procedures set out within their own policies. For example, the medication policy had not been updated to reflect current guidance, and the childminder lacked confidence in safeguarding children. This increased the risk of inconsistent and unsafe responses when supporting children's health and wellbeing needs. Regularly reviewing and embedding policies would help ensure practice was informed, consistent, and focused on positive outcomes for children.

Quality Indicator: Staff skills, knowledge, values and deployment

We made an evaluation of weak for this quality indicator, as there were some strengths, but these were compromised by important weaknesses.

The childminder had built strong relationships with children and families, and there were some positive, nurturing interactions. However, outcomes for children were affected because the childminder had not engaged in professional learning to develop their practice. Although the childminder's learning needs were

identified at previous inspections, these had not been progressed. This resulted in gaps in professional knowledge and inconsistencies in practice. As a result, children did not consistently experience care that was informed by current guidance. This limited their opportunities to benefit from safe, responsive, and developmentally appropriate experiences (see area for improvement 1).

Areas for improvement

1. To contribute to positive outcomes for children, the childminder should undertake training and professional development opportunities to enhance their skills and knowledge. This should include, but is not limited to, first aid training, relevant reading, and awareness of relevant guidance that deepens their understanding of infection prevention and control, self-evaluation and child development.

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).

Children thrive and develop in quality spaces 2 - Weak

Quality Indicator: Children experience high quality spaces

We made an evaluation of weak for this quality indicator, as there were some strengths, but these were compromised by important weaknesses.

Some areas of the childminder's home accessed by children contained significant hazards that created risks to their safety. We found items and harmful substances that posed significant risks within the kitchen and bathroom areas of the childminder's home. For example, alcohol was accessible, and tools were lying on the kitchen floor. A razor and antibacterial sprays were also accessible to children in the bathroom. The childminder must ensure all areas accessible to children are free from harmful and hazardous materials. This would help ensure children are kept safe (see requirement 1).

Infection prevention and control practices were not sufficient to minimise the spread of infection. Children were exposed to avoidable infection risks because hygiene practices were not consistently followed. This increased the likelihood of illness and did not help children remain healthy and safe. For example, the childminder did not support effective handwashing, increasing the risk of cross infection. Children's soothers were also left exposed at the bottom of a pram, creating further risk of contamination. The childminder should follow effective infection prevention and control procedures at all times. This would help reduce the spread of infection and keep children safe (see area for improvement 1).

Seating areas within the childminder's home were not safe or age appropriate. Children sat on high stools while eating and taking part in tabletop activities. This created a risk of falls from height. We asked the childminder to provide age appropriate seating for the children. This would help keep children safe during mealtimes and play activities.

The childminder had developed positive links within the community. Children regularly attended toddler groups and stay and play sessions, which supported their social development. However, children did not have access to the garden during the inspection. This was because hazardous materials, including paint and shed items, were being stored there, creating safety risks. The childminder told us this would be temporary and that local parks were used to provide outdoor play opportunities. However, the lack of immediate garden access meant children missed spontaneous outdoor play that supports activity, wellbeing, and choice.

Making the garden safe would enable children to access outdoor play more freely. Parents commented, "More playing outside would make the childminder's better."

Requirements

1. By 3 April 2026, to keep children safe and promote their wellbeing, the childminder must ensure that all areas children access within their home are free of risks. To do this the childminder must, at a minimum:

- a) Remove all harmful items and substances from the bathroom.
- b) Remove all harmful items and substances from the kitchen.
- c) Provide assurances to Care Inspectorate that these actions have been taken.

This is to comply with Regulation 4(1)(a)(b) (Welfare of users) and 10(2)(b) (fitness of premises) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

This is also to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My environment is secure and safe' (HSCS 5.16)

Areas for improvement

1. To protect children from the risk of infection, the childminder should ensure they implement robust hygiene practices. This should include, but not be limited to, effective handwashing and the appropriate storage of children's soothers.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My environment is secure and safe' (HSCS 5.17).

Children play and learn 2 - Weak

Quality Indicator: Playing, learning and developing

We made an evaluation of weak for this quality indicator, as there were some strengths, but these were compromised by important weaknesses.

Children had some play opportunities; however, their engagement was limited. The available resources and experiences did not support sustained curiosity, creativity, or problem solving. Although children accessed a small selection of resources linked to their interests, these only supported brief periods of play. The limited range and quality of resources meant children were not sufficiently stimulated or challenged. This resulted in children losing interest and having few opportunities to develop their play further.

The childminder responded when children asked for specific resources. For example, when children requested playdough, the childminder offered different colours along with rollers and cutters. The children enjoyed exploring textures, colours, and shapes. The childminder used the activity to prompt conversation by linking it to worms the children had previously observed. However, the experience was limited because the resources and opportunities did not extend children's curiosity, creativity, or imagination. The childminder should consider using more natural materials and offering opportunities for children to make their own playdough. This would provide greater challenge and support richer, more sustained play.

Children's opportunities to play, learn, and develop were sometimes limited because their experiences were interrupted. For example, while reading a story, the childminder paused to support another child but did not return to finish it. The child listening had been highly engaged, and the interruption disrupted their focus and emotional connection. This limited opportunities for children to develop concentration and language skills and affected the continuity of their learning.

Opportunities to explore natural materials, open ended resources and loose parts were limited. Loose parts are materials that can be moved, redesigned, and used in multiple ways. The available resources were mainly plastic. This meant that children's opportunities for creativity, problem solving, and imaginative play were restricted. Introducing a wider range of natural materials and loose parts would enhance the quality of children's play (see area for improvement 1 under What the service has done to meet the area for improvement since the last inspection).

Children are supported to achieve **2 - Weak**

Quality Indicator: Nurturing care and support

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

The childminder displayed nurturing interactions with children, which supported their wellbeing. For example, when children sought comfort, the childminder offered cuddles and reassurance. This supported children to feel safe and emotionally secure. Parents commented: "My child has a great relationship with the childminder they care for my child and give them an environment where they feel safe."

The childminder had developed positive relationships with families, and interactions observed during the inspection were warm and responsive. Parents commented: "(The childminder) is very approachable and friendly." The childminder told us they welcomed parents into the service at drop off and pick up times. However, during an observed handover, the family member was invited only into the hall area of the childminder's home. The living room door remained closed, with the childminder and all children gathered in the hall. This created a barrier to a welcoming environment and limited children's ability to move freely and continue uninterrupted play. While relationships were positive, reviewing the handover process would support a more open and inclusive experience for children and families.

Children's personal plans had been developed since the last inspection; however, not all children had a plan in place. Plans that were in place were inconsistent in the information they included. It was also unclear how children's personal plans had been reviewed with their parents. Some targets identified in children's plans were not reflected in the childminder's practice. For example, targets to support speech development were not supported because children continued to use soothers. This lack of structure and inconsistency resulted in an incomplete understanding of children's needs and preferences. Children did not always receive care that was planned, personalised, or aligned with their developmental needs. As a result, opportunities to support progress and wellbeing were missed, leading to inconsistent, reactive learning experiences. The childminder should review the information recorded in personal plans and ensure every child has a plan in place. This would support children's wellbeing and individual development (see area for improvement 4 under 'What the service has done to meet the area for improvement since the last inspection').

Quality Indicator: Safeguarding and Child Protection

We made an evaluation of weak for this quality indicator, as there were some strengths but these were compromised by important weaknesses.

The childminder lacked confidence and clarity in safeguarding procedures, which placed children at potential risk. Although the childminder knew some agencies they could contact, they were unsure of the correct procedures to follow if concerns arose. This meant children were not fully protected by a practitioner who understood their responsibilities in responding to child protection concerns. The childminder must source up to date child protection training to develop the skills, knowledge, and confidence needed to safeguard children. (see requirement 1).

Requirements

1. By 3 April 2026, the childminder must develop their skills and knowledge to ensure they are confident in safeguarding children and protecting them from harm.

To achieve this, the childminder must, at a minimum:

- a) Complete updated child protection training appropriate to their role.
- b) Demonstrate competence and understanding of national and local child protection guidance, including Getting it right for every child (GIRFEC), and be able to apply this knowledge in practice.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support are consistent with the Health and Social Care Standards (HSCS), which state: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

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

To support children's learning and development, the childminder should ensure children have access to open-ended resources and toys appropriate for their age and stage of development. These should provide challenge as well as opportunities for children to be creative and develop their natural curiosity.

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

This area for improvement was made on 29 November 2023.

Action taken since then

Children did not have access to a range of open-ended resources, and the toys and materials available to them were mostly plastic and premade. This limited the children's opportunities to develop their natural curiosity. They should be further developed to include more natural toys and materials as well as loose parts play materials for children to explore, providing opportunities for them to develop their curiosity and creativity. Therefore, this area for improvement has not been met.

Previous area for improvement 2

To improve practice and outcomes for children, the childminder should develop ways to include parents and children in the development of the service. Information received should be recorded and used to make positive changes.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: "I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve" (HSCS 4.8).

This area for improvement was made on 29 November 2023.

Action taken since then

The childminder had not developed ways to include children and parents in the development of the service. Therefore, this area for improvement has not been met.

Previous area for improvement 3

To promote positive outcomes for children, the childminder should develop their knowledge and understanding of their role and responsibilities. This should include, but not limited to, child protection training and becoming familiar with best practice documents to support high quality play experiences and outcomes for children.

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).

This area for improvement was made on 29 November 2023.

Action taken since then

The childminder had not engaged in any further learning to develop their knowledge and understanding in their roles and responsibilities. Therefore, this area for improvement has not been met. It has been reworded and included as part of this inspection.

Previous area for improvement 4

To support children's health and wellbeing, the childminder should develop personal plans for all of the children in their care and they should be individual to each child. These should be reviewed every six months, or sooner if needed, with input from parents and children (where appropriate).

This is to ensure that care and support are 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).

This area for improvement was made on 19 November 2024.

Action taken since then

Personal Plans were in place for most children. However, we found there were inconsistencies in the information included in these. It was also not clear how often plans had been reviewed with parents. Therefore, this area for improvement has not 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	2 - Weak
Leadership and management of staff and resources	2 - Weak
Staff skills, knowledge, values and deployment	2 - Weak
Children thrive and develop in quality spaces	2 - Weak
Children experience high quality spaces	2 - Weak
Children play and learn	2 - Weak
Playing, learning and developing	2 - Weak
Children are supported to achieve	2 - Weak
Nurturing care and support	3 - Satisfactory / Adequate
Safeguarding and child protection	2 - Weak

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