

Stewart, Gillian Child Minding

Turriff

Type of inspection:
Unannounced

Completed on:
6 March 2026

Service provided by:
Gillian Stewart

Service provider number:
SP2006957190

Service no:
CS2006116571

About the service

Gillian Stewart provides a childminding service, delivered from their home in a rural area near Turriff, Aberdeenshire.

The service is registered to provide care to a maximum of 6 children at any one time under the age of 16, of whom no more than 3 are not yet attending primary school and of whom no more than 1 is under 12 months. Numbers are inclusive of children of the childminder's family. Overnight care will not be provided.

Eight children were registered with the service, with six attending at the time of inspection.

Children play mainly in the living area with access to a downstairs toilet. Children have direct access to a garden at the rear of the property.

About the inspection

This was an unannounced inspection which took place on 5 March 2026 between 14:00 and 17:15. 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spent time with six children using the service and spoke with one of their parents/carers
- received four completed questionnaires from families
- spoke with the childminder
- observed practice and daily experiences
- 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 heading - Children are supported to achieve.

Key messages

- Children experienced warm, caring and nurturing interactions with the childminder.
- The childminder worked well with families and had known some over the course of many years.
- Children's individual information gathered in personal plans should be reviewed with children and families in line with legislation.
- Children would benefit from the childminder participating in training, to update and develop their knowledge and understanding of best practice.
- Children were busy and having fun as they enjoyed leading their play and learning.

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	3 - Satisfactory / Adequate

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.

The childminder had created a warm and welcoming environment for children and aims of the service included to provide a "home from home within a safe relaxed lovable environment". These were communicated to families when they registered and supported them to understand what to expect from the service. To strengthen inclusive practice, the childminder should involve children and families in reviewing the service's vision, values and aims. This would ensure that all views are considered and reflected in future developments.

The childminder had established positive connections with families and had known some over the course of many years. Daily discussions and updates about children's experiences supported communication. Parents told us they were happy with the service and one parent commented: "[The childminder] is always happy to discuss ideas." Children were encouraged to express what they wanted to do and the childminder told us about acting on children's suggestions when choosing and purchasing new resources. This supported their growing independence as they made their own decisions. The childminder should continue to gather feedback from children and families and use any suggestions to inform continuous improvement.

Self-evaluation and quality assurance processes had not resulted in significant change or improvement. However, during discussion, the childminder showed a willingness to develop their service. For example, they were keen to work with parents to add more natural open ended resources to improve children's outdoor play experiences. We signposted guidance such as - A quality improvement framework for the early learning and childcare sectors: childminding and self-evaluation guidance on the Care Inspectorate Hub. This will support them to use self-evaluation in a purposeful way that leads to better outcomes for children (see area for improvement 1).

The childminder had some relevant policies in place, however, these had not been recently reviewed and did not always support the childminder's practice. For example, information within the safeguarding and infection prevention and control policies was limited and the lack of a safe sleeping policy compromised children's safety. We provided the childminder with contact details for the Scottish Childminding Association (SCMA) and they agreed to seek support with updating their policies.

The childminder had many years of childcare experience. However, they did not keep up-to-date with current guidance to support their practice. For example, recent food hygiene and child protection training had not been completed and this was not planned at the time of inspection. This meant there were gaps in the childminder's knowledge. We signposted the childminder to the Care Inspectorate Hub, where they will find supporting guidance, and encouraged them to make use of organisations such as the Scottish Childminding Association (SCMA) for support (see area for improvement 2).

Areas for improvement

1. To support positive experiences and outcomes for children and families, the childminder should strengthen quality assurance practices. This should include, but is not limited to:

- a) self-evaluation of practice against recognised frameworks such as A quality improvement framework for the early learning and childcare sectors: Childminding quality indicators
- b) gather and make use of feedback from children and parents to support ongoing improvements to the service.
- c) ensure that all policies, procedures and risk assessments are reviewed regularly and updated to reflect current legislation and guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19).

2. To support children's wellbeing and development, the provider should access training relevant to their role and apply learning in their practice. This should include but is not limited to, reviewing best practice guidance and engaging in child protection training.

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).

Children play and learn 4 - Good

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.

Children enjoyed playing and having fun together. They chose how they wanted to play, enjoying dressing up for much of the inspection which encouraged children to use their imagination and social skills. They were supported by the childminder who encouraged them to share and help each other.

Parents were positive about the experiences available to their children. One parent commented: "[The childminder] does lovely things with and for the children such as baking, Halloween parties and Mother's day crafts." Another parent shared: "There is a wide variety of toys and items to play with which are changed over or taken out to meet child's interests at the time."

Children had some opportunities to develop language, numeracy and literacy skills. This included weighing and measuring when baking, and singing, dancing and performing their favourite songs. The childminder could create more opportunities for literacy by having a selection of different reading and mark making materials available such as fiction and non-fiction books, pencils, notepads, brochures and menus.

The childminder recognised children's abilities and facilitated spontaneous play well. However, there was limited planning to support individual learning and development. Progress was shared informally with parents through verbal updates and photos, but observations were not recorded in a way that supported identifying next steps. We asked the childminder to develop systems for recording children's learning and progress, and to use this information to plan experiences that meet their developmental needs.

Children had opportunities to play outdoors. While the enclosed back garden was not used during the inspection, parents commented favourably on the outdoor experiences provided. One parent commented: "My child loves playing outside in the rural setting and loves trips to different parks with the childminder." Some children attended toddler groups and gym sessions. These outings supported children's health, wellbeing and connection to their community.

Children are supported to achieve 3 - Satisfactory / Adequate

Nurturing care and support

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

Children benefited from kind, caring and nurturing interactions. The childminder was calm and patient and adapted their approach to suit the age and stage of development of each child. Children were relaxed and confident in the childminder's care, and parents told us their children were happy.

Children's care was supported through positive relationships with families. Parents described the childminder as "warm and friendly". One parent told us: "My childminder is very approachable and flexible and will always do what they can to help." Settling in arrangements were flexible and responsive to individual needs. Parents were invited to visit with their children, helping to build familiarity and trust.

Meals and snacks were eaten in the kitchen. Older children sat at the breakfast bar and younger children at a suitable table. This supported children's comfort and promoted the social aspect of eating together. Snacks were provided by the childminder and these included a selection of fruit. The childminder supervised children whilst they ate to reduce any risk of choking. We asked the childminder to further review some choices such as chocolate spread and biscuits to support children in developing healthy eating habits. Reference should be made to the document *Setting the Table*, available on the Care Inspectorate Hub.

Children were provided with drinks to ensure they were kept hydrated which included diluting juice. We discussed only providing water or milk to reduce sugar and promote good dental health.

The childminder knew children well, which supported them to meet their care needs. Personal plans were held for children which supported contact with families during an emergency and provided some key information. Although the childminder knew children and their families well, plans were not reviewed regularly. This meant they did not comply with legislation or reflect children's current health and wellbeing needs to support their care (see area for improvement 1).

Areas for improvement

1. To support children's wellbeing, learning and development, the childminder should further develop children's personal plans to show how their needs are being identified and met. Plans should be developed in consultation with families and reviewed when there is a significant change in a child's needs, or at least once in every six month period.

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

The childminder to further develop medication administration procedures in line with Management of Medication in Daycare of Children and Childminding services: <http://hub.careinspectorate.com/media/189567/childrens-service-medication-guidance.pdf>

National Care Standards Early Education and Childcare up to the age of 16. Standard 3: Health and Wellbeing and Standard 14: Well-Managed Service.

This area for improvement was made on 16 May 2018.

Action taken since then

The childminder was not currently administering any medication but a policy and consent forms were in place to support the safe administration of medication.

This area for improvement has 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	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
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