

Paula Simons Child Minding

Irvine

Type of inspection:
Announced (short notice)

Completed on:
31 March 2026

Service provided by:
Paula Simons

Service provider number:
SP2013985348

Service no:
CS2013320803

About the service

Paula Simons provides a childminding service from their family home which is located in the town of Irvine, North Ayrshire. The service is close to local schools, shops and parks. Children are cared for in the childminder's living room and have access to the kitchen, bathroom and fully enclosed large back garden.

The service is currently registered to provide a care service to a maximum of six children at any one time under the age of 16, of whom no more than three are not yet attending primary school and of whom no more than one is under 12 months. The numbers are inclusive of the childminder's own family. At the time of inspection, 11 children were attending the service.

About the inspection

This was a short notice announced inspection which took place on Tuesday 31 March 2026. 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:

- spent time with five children using the service
- spoke with the childminder
- observed practice and daily life for children
- reviewed documents
- assessed core assurances, including the physical environment.

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 following quality indicator headings: Leadership, playing, Children play and learn and and Children are supported to achieve.

Key messages

- The childminder knew the children and families well.
- Children were supported with warm, kind and caring interactions.
- In order to support children's safety and wellbeing the childminder should undertake training in first aid and child protection as a priority.
- Quality assurance, self-evaluation, policies, procedures should be reviewed and further developed to ensure children experience high-quality care.
- Medication permissions should be sought prior to receiving or administering medication within the service. This includes where children require emergency medication for health conditions such as asthma and allergies.
- Personal plans should be developed for all children attending 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	3 - Satisfactory / Adequate
Children play and learn	3 - Satisfactory / Adequate
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

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

Quality Indicator: Leadership and management of staff and resources

The childminder had established aims for the setting that prioritised a safe, caring and happy environment for children. Although these had not been reviewed or updated for some time, they were shared with families at enrolment. We discussed the benefits of refreshing the service vision, values, and aims in partnership with children and families to ensure they reflect current needs, preferences, and expectations. This collaborative approach should help families feel included and involved in shaping the service.

Children's and families' views were considered by the childminder, who listened to children's requests and incorporated their ideas into the activities and experiences offered. Families were invited to complete regular questionnaires, and recent feedback had been very positive, with parents confirming that their children were happy. Although no suggestions were offered, the childminder expressed a willingness to receive feedback and act on any ideas shared. This approach supported a responsive service that reflected the needs of children and families.

The childminder had previously reflected on their service, however, this had not been reviewed for a number of years. This meant there was no formal systems to evaluate the service in line with current guidance. We highlighted the value of using quality audit tools, such as The Care Inspectorate and Education Scotland (2025) guidance 'A Quality Improvement Framework for the Early Learning and Childcare Sectors: Childminding' to inform ongoing evaluation of their service. This should help the childminder identify strengths, target areas for improvement, and support better outcomes for children (see area for improvement 1).

The childminder had an area for improvement in place since 2018 to undertake professional learning opportunities; however, this had not yet been met. While some online webinars had been completed, these were not yet impacting practice. For example, although training in safeguarding policy writing had been undertaken, the updated policy was not fully reflective of current guidance and gaps remained in the childminder's understanding of current expectations. In addition, their first aid training had expired. To ensure children's safety and wellbeing, the childminder should complete up-to-date child protection training and renew their first aid qualification as a priority (see outstanding area for improvement 1).

Policies were shared with us and we highlighted that many of them would benefit from being reviewed to reflect current legislation, frameworks, and best practice guidance. We advised that practice, policies, and procedures should be routinely updated when new guidance is published. This would help ensure parents had access to accurate and relevant information that clearly reflected the care their child received. Implementing a process for developing and reviewing policies was area for improvement made in 2019 and remains not met (see outstanding area for improvement 2).

Risk assessments for the garden and Eglinton Park were in place; however, these had not been reviewed or updated for some time and did not fully reflect current risks, such as the requirement for children not to access the bottom section of the garden. Risk assessments should be routinely reviewed and updated to

ensure they remain accurate and relevant. The childminder should also extend risk assessments to cover all areas of their home and school pick ups to further support children's safety and wellbeing.

Some key documentation used to evidence regulatory compliance was not consistently available. The childminder's registration and insurance certificates were not displayed or easily available for families to view. Improving practice in these areas could enhance transparency, support safe and effective care, and help maintain families' confidence in the service.

Areas for improvement

1.
To support positive outcomes for children and families, the childminder should strengthen how they reflect on the quality of their service. This should include, but not be limited to: regularly seeking feedback from children and families, keeping a record of what is working well and what could be improved and using this information to make positive changes.

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

Children play and learn 3 - Satisfactory / Adequate

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

Quality Indicator: Playing, learning and developing

Children were happy, engaged and having fun in a nurturing environment where their right to play was respected. They independently chose and used resources, demonstrating growing confidence, while the childminder joined in purposefully to support language development during card games and to extend learning through hands on experiences such as planting sunflowers. As a result, children experienced enjoyable, meaningful play that supported their communication skills, independence and curiosity, contributing positively to their learning and overall wellbeing.

Children's learning and development were supported through the childminder's understanding of child development. They identified and responded effectively to individual learning priorities, including speech and language development and building children's confidence. A varied range of developmentally appropriate activities, such as craft experiences, small world play and peer games, were available to meet the needs of all children. This helped to ensure children experienced inclusive, responsive care that supported their progress, confidence and enjoyment in learning.

Children benefitted from regular outdoor play and spoke enthusiastically about visits to local parks and green spaces. They enjoyed spending time outdoors, exploring their surroundings and using the childminder's garden. Older children were able to challenge themselves using physical equipment such as the trampoline and treehouse, while younger children had access to age appropriate resources including a slide and seesaw. This supported children's physical development, confidence and wellbeing, while fostering a positive attitude towards outdoor play and active lifestyles.

Planning was generally responsive to children's interests and ideas. Children told us they enjoyed their time with the childminder, had fun playing, and were sometimes encouraged to share suggestions about their

play experiences. However, these ideas were not consistently captured or used to inform a formal planning process. We discussed how introducing clear planning documentation and an approach to evaluating children's learning would help demonstrate when experiences are planned directly in response to individual children's interests. Strengthening planning and evaluation processes would improve clarity, better evidence responsive practice, and ensure children are appropriately supported and challenged in their learning and development (area for improvement 1).

The childminder discussed plans to develop a closed social media page and to obtain the appropriate parental permissions to share children's learning experiences with families. We encouraged this approach, as it would provide a secure and accessible way to keep families informed, celebrate children's achievements, and further strengthen partnership working.

Areas for improvement

1. The childminder should develop and implement a consistent process for observing children and assessing their progress and learning. This should include using children's ideas and interests to inform planned play and learning experiences. This will help ensure children's learning is well-supported, purposeful, and reflective of their individual needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state: 'My care and support meets y needs and is right for me' (HSCS 1.19)

Children are supported to achieve 3 - Satisfactory / Adequate

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

Quality Indicator: Nurturing care and support

Children were happy, settled and confident in the care of the childminder, who knew them well and had formed positive relationships with them. The childminder offered praise and encouragement and recognised children's achievements. For example, one child successfully completed a cartwheel for the first time, which was celebrated by the childminder and the other minded children. The childminder engaged children in enthusiastic and playful conversations throughout the day. This helped to promote children's confidence and self-esteem.

The childminder worked closely with families to support consistency between home and the service. Younger children were supported with toileting and nappy changing in ways that respected their privacy and dignity. Older children were supported to develop new skills, such as learning physical movements and ball skills. Ongoing communication with families provided opportunities for them to share information about their child's care needs and any changes to routines or family circumstances. As a result, children experienced consistent, respectful care that met their individual needs and supported their wellbeing.

Children experienced mealtimes that were responsive to their individual routines and preferences. The childminder offered a choice of meals and respected children's choices, helping them feel listened to and involved in decisions about their care. To further strengthen practice, the childminder should consider developing a menu and sharing allergen information with families to ensure parents are fully informed about the food their child receives. They should also consider creating a healthy eating policy and offering meals that reflect best practice guidance, including The Scottish Government (2024) 'Setting the Table:

National Standards and Practical Guidance for Early Learning and Childcare Providers in Scotland.' This would contribute to children receiving balanced, nutritious meals that support their health and wellbeing.

Personal plans were in place for younger children; however, these were not consistently completed to fully reflect children's individual needs or to clearly identify appropriate support strategies. Personal plans were not in place for school-aged children. Personal plans should now be developed for all children and should clearly identify their strengths, any emerging needs, agreed support strategies, and review dates. Older children should be supported to share their views in age appropriate ways to ensure their voices are reflected in their plans. This will help ensure plans are accurate, individualised, and enable children to receive the right support at the right time (see Area for Improvement 1).

The childminder did not have appropriate parental permissions in place to safely administer medication. To ensure children's health and safety needs are fully met, medication permissions should be obtained prior to any medication being received or administered, in line with the Care Inspectorate's guidance (2025), 'Management of medication in day care of children and childminding services.' The childminder's medication policy should also be reviewed and updated to reflect this guidance. This should ensure practice is clear, consistent, and safely implemented to meet children's health and medical needs (see area for Improvement 2).

Areas for improvement

1. The childminder should ensure personal plans are in place for all children that reflect their health, welfare, and safety needs and include any individual support strategies. Plans should be developed and reviewed with meaningful contributions from parents and children to ensure they remain accurate, individualised, and effective in supporting children's wellbeing.

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).

2. The childminder should ensure clear, safe, and effective procedures are in place for receiving and administering medication. This should include, but not be limited to, obtaining appropriate parental permissions before any medication is received or administered, and reviewing and updating the medication policy in line with current best practice guidance. This will ensure practice is safe, consistent, and clearly communicated to families, meeting children's health and medical needs.

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).

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

In order to keep up to date with developments in childcare practice, the childminder should identify and attend suitable training opportunities and/or undertake appropriate self-directed study. This should include child protection training as a priority.

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 23 August 2018.

Action taken since then

The childminder had attended some online learning sessions to support them in refreshing their knowledge in childcare practices. The childminder had not undertaken child protection training or self-directed learning relating to safeguarding children and as a result gaps remained in their knowledge about what steps to take should a concern arise. The childminder should ensure child protection training is completed at the earliest opportunity.

This area for improvement was not met.

Previous area for improvement 2

To support the childminder in providing a quality service, they should continue to review and update their policies and procedures to reflect current good practice guidance. This information should be made available to parents.

This is to ensure a well managed service which is consistent with the Health and Social Care Standards (HSCS) which state that "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

This area for improvement was made on 4 September 2019.

Action taken since then

While we recognise that improvements have been made to some of the setting's policies, these were not fully reflective of current legislation or best practice guidance. The childminder should continue to implement a process to review and update these.

This area for improvement was not 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	3 - Satisfactory / Adequate
Playing, learning and developing	3 - Satisfactory / Adequate
Children are supported to achieve	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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