

Butterflies Childminding Child Minding

Pitlochry

Type of inspection:
Unannounced

Completed on:
14 April 2026

Service provided by:
Agnes Kiss

Service provider number:
SP2023000280

Service no:
CS2024000071

About the service

Agnes Kiss provides a service from their home in Pitlochry and operates under the name Butterflies Childminding. The childminder may care for a maximum of six children at any one time up to 16 years of age: of whom no more than six are under 12 years; of whom no more than three are not yet attending primary school and; of whom no more than one is under the 12 months. Numbers include the children of the childminder's family or household. Overnight care will not be provided. The total number of children using the service at the time of the inspection was nine.

Children have access to a designated playroom, living room, kitchen, and toilet. A safe and enclosed garden area provided children with opportunities for outdoor, physical play. The service is situated in a residential area of Pitlochry, close to schools, parks, and public transport.

About the inspection

This was an unannounced inspection which took place on 14 April 2026 between 10:20 and 14:00. 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 three young people using the service
- spoke with one family using the service
- spoke with the childminder
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents.

At the time of this inspection, improvements were identified relating to core assurances. We have reported where improvement is necessary within Leadership.

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

- The childminder provided warm, kind, and nurturing care, which effectively supported children's emotional wellbeing.
- Self-evaluation and quality improvement processes were at an early stage of development, with emerging changes beginning to support positive outcomes for children.
- Children were happy, confident, and fully engaged in their chosen play experiences.
- A child-led approach to planning supported children's play, learning and development.
- Families were recognised and valued as key partners in supporting and contributing to children's 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	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 established a warm and welcoming environment where children felt secure and settled. This demonstrated a clear commitment to their stated aim of providing a 'warm, friendly, nurturing and safe home'. However, the childminder's aims and objectives had not been reviewed since registration and did not fully reflect the current delivery of the service. We discussed the benefits of regularly reviewing the service vision and involving children and families in this process. This would support a shared understanding of the service values and promote high aspirations for continuous improvement.

Self-evaluation was informal and at an early stage of development. The childminder had begun to introduce opportunities for feedback from families, including the use of questionnaires and monthly newsletters. These were viewed positively by families and supported effective communication and inclusion in their child's experiences. We discussed how questionnaires could be further developed to gather more evaluative feedback to inform service improvement. Engaging more consistently with best practice guidance, such as the Care Inspectorate's 'A quality framework for the early learning and childcare sector: childminding,' would help the childminder to better identify strengths and areas for development. This would strengthen their approach and ensure they reflected the needs of children and families. (See area for improvement one)

The childminder had undertaken mandatory training, including first aid and child protection, which ensured their knowledge and skills were current. They showed a positive commitment to professional development, with plans to access further training alongside another childminder. Continued professional learning would further strengthen the childminder's skills to support children's play, learning and development effectively. (See area for improvement one)

Policies and procedures were in place and supported the effective management of the service. These were regularly reviewed and generally reflected current guidance and best practice. We discussed areas where further clarity would strengthen policies, including clear procedures for notifying the Care Inspectorate of significant events. This would help ensure families are well informed and have a clear understanding of the childminder's responsibilities and expectations.

Areas for improvement

1. To support positive outcomes for children and families, the provider should develop their approach to self-evaluation and improvement.

This should include, but is not limited to:

- becoming familiar with best practice guidance to support them to recognise their strengths and areas of development
- maintaining relevant knowledge, skills, and training to support children's overall learning and wellbeing.

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

'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 4 - Good

Quality Indicator: Play, 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 were happy, confident, and settled within the childminder's home. They quickly engaged in their chosen activities and were enthusiastic about sharing their experiences and interests. Children spoke positively about their time at the service, with one child telling us, "I like coming to play with my friends. We play mummy's and daddy's and schools." This demonstrated that children felt safe, secure, and emotionally supported.

A well-organised and dedicated playroom provided children with opportunities to explore, play freely, and use their imaginations. There was space for children to move confidently and independently between activities. Children were observed engaging in sustained imaginative play, developing storylines, and confidently taking on different roles. Younger children explored cause-and-effect toys, incorporating these into their play, such as pretending to use a laptop. Children were highly engaged and sustained their play for extended periods. This supported the development of independence, creativity, and ownership of their learning.

Children's views and choices were valued and respected. They were routinely consulted about the activities they wished to take part in, which helped ensure their experiences were meaningful and enjoyable. Planning for children's play and learning was responsive to their interests and included opportunities to explore seasonal changes. For example, children had recently shown interest in springtime, which was supported through planned discussions and activities about baby animals. The childminder had plans to extend this learning through growing and planting flowers. We discussed ways the childminder could further record children's experiences to support reflection and evaluation of their learning.

Observations of children's learning and identification of next steps were at an early stage of development. The childminder had begun to use these to support children's progress and to work in partnership with families. Developing a more consistent approach to observations would enable the childminder to effectively support children's learning and development. This would help children to recognise, reflect on, and celebrate their achievements.

The childminder demonstrated a strong commitment to outdoor play and recognised its importance for children's health and wellbeing. Children had regular access to a safe and secure garden where they were active and continued to explore their imaginations. They enjoyed climbing, sliding, and engaging in pretend play using outdoor resources. Access to natural, open-ended materials supported children's curiosity and sustained engagement as they filled, emptied, and transported items using trucks. Children benefitted from regular walks within the local community and visits to nearby forest areas. These experiences supported the development of gross motor skills, confidence, physical strength and appropriate risk-taking in a wider environment.

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.

Children experienced warm, consistent, and nurturing care from the childminder. Positive interactions were evident throughout the inspection. Smiles, laughter, and relaxed conversations were observed naturally between children and the childminder, as well as with their peers. The calm, welcoming and homely environment supported children to feel confident and comfortable to explore. Children's individual cues, preferences and needs were responded to promptly and sensitively, helping them to feel safe, secure, and emotionally supported. A family shared that they felt the childminder was "an extension of our family." As a result, children had developed strong, trusting, and secure attachments with the childminder.

Mealtimes were relaxed, unhurried and responsive to children's individual needs. Children sat comfortably at the table while the childminder remained close by, supporting safe eating practices. Natural and meaningful conversations took place during meals, further strengthening positive relationships and communication. Children were supported to develop good hygiene routines. This included washing their hands at appropriate times such as before meals and after using the toilet. This helped promote effective infection prevention and control and supported children's wellbeing.

The childminder knew children well and spoke confidently about their individual personalities, routines, and care needs. Children's 'All About Me' information was being updated in partnership with families. We discussed the importance of ensuring that children's personal plans, including core information and permissions, are formally reviewed and updated at least every six months in line with legislative requirements. This would further support continuity of care and strengthen positive outcomes for children.

Families were warmly welcomed into the childminder's home and positive relationships were evident. Verbal handovers had been introduced to ensure families were well informed about their child's day. Online platforms were used effectively to share photographs and information about children's daily experiences. Review meetings had recently been introduced to discuss children's learning, progress, and next steps in partnership with families. Families spoken with valued these meetings and felt the childminder understood their child well and responded effectively to their individual needs. This inclusive and respectful approach helped families feel valued, listened to and fully involved in their child's care.

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 overall wellbeing, the provider should undertake observations of children's play and learning, identify and monitor next steps in development. Children's achievements should be shared with their families.

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).

This area for improvement was made on 13 May 2025.

Action taken since then

Observations of children's play and learning experiences were in the early stages of being introduced. The childminder had plans to develop these further. We would support this and suggested methods to ensure a consistent and meaningful approach.

This area for improvement had been met.

Previous area for improvement 2

To improve outcomes for children, reflective practice and self-evaluation systems should be developed. The provider should become familiar with best practice guidance and use this to reflect on the service and plan for continuous improvement.

This is to ensure that care and support is consistent with the Health and Social Care Standard (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).

This area for improvement was made on 13 May 2025.

Action taken since then

The childminder had developed and made improvements to their practice and children's experiences. They had plans to begin to use self-evaluation and best practice guidance. This would support them to recognise their strengths and plan areas for development.

This area for improvement had been met in part and has been reworded to support improvement.

Previous area for improvement 3

To support continuous improvements the provider should develop systems to formally gather the views of children and families. They should use the information gathered to reflect on their practice and influence positive change within the service.

This is to ensure the quality of care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am actively encouraged to be involved in improving the service I use, in spirit of genuine partnership' (HSCS 4.7).

This area for improvement was made on 13 May 2025.

Action taken since then

Questionnaires and newsletters had been introduced to share updates and gather families views. We discussed how these could be further developed to support the continuous improvement of the childminders service. Children's views were informally gathered during their time with the childminder.

This area for improvement had been met.

Previous area for improvement 4

To continue to support children's learning and development, the childminder should access further training and professional development and apply their learning in practice.

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' (HSCS 3.14).

This area for improvement was made on 13 May 2025.

Action taken since then

The childminder had participated in core training within child protection and first aid. They had plans to participate in further training through the SCMA.

This area for improvement has been reworded within Leadership.

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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