

West, Beryl Child Minding

Macduff

Type of inspection:

Unannounced

Completed on:

18 June 2025

Service provided by:

Beryl West

Service provider number:

SP2005944850

Service no: CS2005093018



Inspection report

About the service

Beryl West operates from their own property situated in the coastal village of Macduff, Aberdeenshire.

The childminder is 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. Numbers are inclusive of children of the childminder's family. The parts of the premises not to be used are the four bedrooms and bathroom on the upper level of the house. Overnight service will not be provided.

The service is close to a local primary school, shops, parks, and other amenities. The children play in an open-plan kitchen, dining room, and living area with access to a downstairs cloakroom. Children have access to a spacious rear garden.

About the inspection

This was an unannounced inspection which took place on 18 June 2025 between 09:00 and 12:30. 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:

- interacted with two children using the service
- received six completed questionnaires
- · spoke with the childminder
- · observed practice and daily experiences
- · reviewed documents.

Key messages

- Children experienced caring and nurturing interactions.
- Children's personal plans should be improved and reviewed with parents.
- Play experiences to support children's learning and development could be improved.
- Children were able to play and rest in a clean and tidy environment.
- The childminder was beginning to use self evaluation and quality assurance processes to evaluate and develop the service.
- The childminder should ensure they engage with ongoing training and professional development.

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

| How good is our care, play and learning? | 3 - Adequate |
|--|--------------|
| How good is our setting? | 4 - Good |
| How good is our leadership? | 4 - Good |
| How good is our staff team? | 4 - Good |

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

How good is our care, play and learning?

3 - Adequate

We evaluated this key question as adequate, were strengths only just outweighed weaknesses.

1.1 Nurturing care and support

Children and families were welcomed and treated as part of the childminder's extended family. This led to some families attending for many years with some returning with children of their own. Parents commented, "Beryl is very warm and welcoming", "My child loves her, she is calm and gentle, easy going, provides a safe secure nurturing environment with lots of choice of activities", and "I fully trust and respect Beryl. It is clear she adores my child. She is very friendly, welcoming, and nurturing to both my child and me".

Children experienced kind interactions. Children were provided with water to drink when they looked hot and bothered and were soothed to sleep with a cuddle. The childminder was flexible in their approach when settling new children and provided visits tailored to meet their individual needs. This contributed to children who were comfortable and settled in the childminder's care.

Children's personal plans contained information to support their basic care needs. Information was collated from parents when children started at the setting, however for some children, this information had not been updated. For one child, there was no information available. This raised the potential for key details needed to support their care, health, and wellbeing to be missed. We asked the childminder to gather this information as a priority and completed forms were sent to us immediately after inspection. This was a previous area for improvement which has been rewritten to reflect current guidance (see area for improvement 1).

Children were provided with homecooked meals and snacks. Menus were nutritious and catered for children's preferences. This helped ensure children ate food they enjoyed. Children were encouraged to sit at a table or on a low chair with an attached tray. The childminder supervised the children to help keep them safe and to provide support. Parents commented, "There is a good selection of after school snacks and varied lunches when not at school" and "Our child loves the food they get at Beryl's".

Children were able to sleep and rest when they were tired. This supported their emotional health and wellbeing. However, arrangements for sleep did not always follow guidance to keep children comfortable and safe. One child was soothed to sleep in a pushchair and, at other times, we were advised children slept on the sofa. We signposted the childminder to Sleep Safe Scotland and immediate changes were made to ensure children slept safely on a mat on the floor.

1.3 Play and learning

Children were contented and enjoyed exploring the toys and games on offer. This included playing with ageappropriate toys designed to stimulate and intrigue. However, there were limited opportunities for sensory and creative play. We suggested adding more loose parts, natural materials, and sensory resources to encourage problem solving and learning using their imagination. The childminder advised this was promoted through trips to the woods and playing with sticks and stones.

Children watched their favourite programmes on the television. We discussed the benefits of limiting screen time to encourage children to explore, play, and learn without distraction. The childminder advised this was only used because one child was feeling poorly.

Children had fun interacting and playing with the childminder. The childminder modelled good listening and talking skills by getting down to the children's level. They were engaging in their interactions when playing a memory game to find colours and shapes.

There were a few opportunities to support literacy and numeracy development through play. There was a range of age-appropriate books stored in cupboards ready for children to choose. We were advised children enjoy a story after lunch. To help promote further opportunities for learning, we suggested introducing more resources, such as notepads, pencils, and crayons. The childminder agreed to action this.

Planning approaches were child-centred and responsive to children's interests. The childminder asked the older children what they wanted to do and used this to plan experiences they would enjoy. This included trips and outings to cafes.

Photographs recording children's achievements were sent to parents, providing them with an insight into their child's learning. The childminder completed reflections of the children's development, however these were not shared with parents. To support children's progress and development, we suggested adding observations with evaluations of their learning to their personal plans and the childminder agreed to action this.

Parents felt their child's development was always supported through interesting and fun play experiences and commented, "My child has access to a variety of toys and fun activities and also enjoys daily walks to school in the pram, which adds to their routine and learning".

The childminder made good use of the local environment and amenities and went for walks and visited the local park. Children benefitted from a recent planned Mini Highland Games with the other childminders in the area. This helped the children grow in confidence and build new friendships.

Areas for improvement

1. To promote children's care needs and emotional wellbeing, the childminder should ensure children's personal plans contain clear and detailed current information and parents are fully involved in this process of review

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).

How good is our setting? 4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Children were able to play and rest in a homely and welcoming environment. They were cared for in a spacious kitchen/living and dining area. This meant children had ample space for their needs. Colourful play mats on the floor provided a safe surface for young children learning to walk and move around. Large, comfortable sofas supported cuddles, rest, and relaxation. Photographs and children's drawings were displayed in the hall, providing them with a sense of belonging.

Inspection report

Children played in a secure environment. The front door was locked to ensure children could not leave the house unsupervised and children were able to play in an enclosed rear garden. Areas accessed by the children had been visually assessed and there were written risk assessments to help identify potential hazards and help prevent accidents.

Children were able to access some toys and games independently. Large clear storage boxes contained good quality toys and meant children could see the toys inside and find what they were looking for. However, they were not attractively displayed to encourage better choice and freedom of play. The garden looked pretty with some opportunities for climbing and planting.

Children played in a clean environment. Handwashing was embedded in practice and there were clean hand towels available for use. The childminder advised nappy changing took place in the dining kitchen. However, this does not meet guidance and increases the risk of illness through contamination. They agreed to support children with their personal care in a space away from food preparation and eating areas, supportive of children's dignity and privacy.

Children's personal information was stored confidentially in a safe location. We suggested creating individual folders for children to support improved confidentiality. The childminder agreed to do this.

How good is our leadership?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

The aims of the service included providing a safe, warm, happy, and stimulating environment with regular and good communication with parents. This was reflected in their practice and shared with families, helping them understand what to expect from the service.

A range of good quality policies and procedures were in place to support the childminder in their practice. An outdated condition remained on the childminder's certificate of registration. We asked the childminder to submit a variation to remove this and they agreed.

The childminder recognised the importance of seeking the views of children and families to influence change and support the development of the service. Opportunities to share information included daily discussions, daily dairy, text messages, and What's App messages. Questionnaires had been issued and parents responded very positively. Parents strongly agreed they were involved in a meaningful way to help develop the service.

Older children were asked what they wanted to do and where they wanted to play. This led to some trips and outings to their favourite places. Younger children were at ease in the childminder's company, contributing to them making independent choices which supported their play experiences.

The childminder was beginning to use self evaluation and quality assurance processes to evaluate and develop the service. They felt they provided a good service which met the needs of the children and their families. They felt appreciated for their kindness and patience. Through discussion they identified areas for further development. These included ensuring meals and snacks were fully reflective of the most recent guidance. We signposted the childminder to 'A Quality Framework for day care of children, childminding, and school-aged children' in order to support continuous improvement of the service.

How good is our staff team?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

The childminder was experienced in their role and wanted to do the best for the children and families in their care. Children's wellbeing was supported through respectful and compassionate interactions. The childminder had a good relationship with the children and talked to them in a kind and friendly manner. This approach supported children to feel happy and safe.

The childminder was a member of the SCMA (Scottish Childminding Association) and spoke positively about the support provided by the organisation. As a result, they used SCMA forms within their practice, including personal planning to support children's care needs. They were friendly with other childminders and together they shared ideas and discussed guidance and new initiatives.

The childminder had accessed core training, such as child protection, first aid, and food hygiene. Their clean and welcoming home was reflective of their knowledge and understanding of infection prevention and control. They were confident when discussing their processes to protect children and knew who to go to if concerned. This contributed to happy children who were safe and well cared for.

The childminder demonstrated a commitment to their professional development. They were beginning to research practice documents and guidance, such as 'Setting the Table', to support their practice. They had attended some webinars, such as introducing 'A Quality Improvement Framework for the Early Learning and Childcare Sectors', but had not yet used this to support their self evaluation. To support the childminder with their professional development, we signposted them to a range of resources on the Care Inspectorate Hub. Regularly accessing resources and best practice documents will help ensure good outcomes for children.

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

Plans should be in place for each child to show how the service will meet their health, safety, and welfare needs.

National Care Standards, Early Education and Childcare Up to the Age of 16 - Standard 4: Engaging with Children.

This area for improvement was made on 30 March 2017.

Action taken since then

Information was collated from parents when children started at the setting and used to create children's personal plans. This meant there was some basic information to help keep children safe and support the childminder meet their care needs.

Inspection report

However, for some children this information had not been updated to reflect changes in their progress and development. For one child, a personal plan was not available.

This area for improvement has not been met.

However, it has been rewritten to reflect current guidance under key question one ('How good is our care, play, and learning?').

Previous area for improvement 2

The childminder should review and update her policies and procedures to bring these into line with good practice guidance and legislation, as well as reflecting her service. This includes the child protection, complaints, and medication policies.

National Care Standards, Early Education and Childcare Up to the Age of 16 - Standard 3: Health and Wellbeing; and Standard 14: A Well Managed Service.

This area for improvement was made on 30 March 2017.

Action taken since then

A range of good quality policies and procedures were in place to support the childminder in their practice.

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

| How good is our care, play and learning? | 3 - Adequate |
|--|--------------|
| 1.1 Nurturing care and support | 3 - Adequate |
| 1.3 Play and learning | 3 - Adequate |

| How good is our setting? | 4 - Good |
|---|----------|
| 2.2 Children experience high quality facilities | 4 - Good |

| How good is our leadership? | 4 - Good |
|--|----------|
| 3.1 Quality assurance and improvement are led well | 4 - Good |

| How good is our staff team? | 4 - Good |
|--|----------|
| 4.1 Staff skills, knowledge and values | 4 - Good |

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.