

# Steele, Susan Child Minding

Erskine

**Type of inspection:**  
Unannounced

**Completed on:**  
5 June 2025

**Service provided by:**  
Susan Steele

**Service provider number:**  
SP2007963436

**Service no:**  
CS2007143083

## About the service

Susan Steele is registered for the following:

1. To provide a care service 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.

Any other conditions unique to the service:

2. Minded children cannot be cared for by persons other than those named on the certificate.

3. Overnight care will not be provided.

The service is provided from the childminder's home in the Erskine area of Renfrewshire. The children have access to the sitting room, dining/kitchen area, toilet facilities and enclosed garden.

## About the inspection

This was an unannounced inspection which took place on 4 June 2025 between 14:00 and 16:30 and on 5 June between 13:30 and 14:30. The inspection was carried out by two inspectors 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:

- Spoke with three people using the service.
- Gathered views of parents through an online questionnaire.
- Spoke with the childminder.
- Observed practice and daily life.
- Reviewed documents.

As part of this inspection, we undertook a focus area. We have 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 experienced kind and caring interactions from the childminder.
- Children were having fun and could make choices about their play.
- Relationships were strong between the children, the childminder and the wider family.
- Children had personal plans in place and the childminder should ensure these are updated every six months.
- Children would benefit from accessing more activities and spaces within the local community.

## 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?	4 - Good
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?

4 - Good

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

### Quality indicator 1.1: Nurturing care and support

Children experienced kind and caring interactions from the childminder. During our visits, we saw the childminder respond to children at the right time, cuddling or rocking them on their knee when needed. The childminder knew the children and their families well.

Children had strong relationships with the childminder and their family members. We saw warm, kind interactions that us children knew them well. For example, the childminder's husband chatted with the children about the sunflowers they had planted, showing a genuine interest in their experiences. This meant that children felt safe, secure, and comfortable within the childminders home.

Parents told us:

"My child is part of the childminder's family and is happy when they are there. My feels included at all times" and

"My child is treated like part of the family and my child loves being there. The care is outstanding and there is a genuine love of children throughout the family. It is a lovely environment for the kids to be in."

Children experienced a sociable snack time, washing their hands at the kitchen sink before eating. We suggested the childminder use a stepping stool, to make handwashing more comfortable for the children. The children were seated at the dining table, situated in the kitchen. Children shared that they liked snacks they received, for example a bun, yoghurt, and blackberries. The children had access to water. The childminder said that they sit together at all snack and mealtimes, this promotes safety whilst the children are eating.

Children were given the opportunity to sleep if needed. One child slept in a pushchair in the kitchen during the inspection. The childminder followed the child's preferences to ensure they were comfortable and said checked on them regularly. We did provide the childminder with safer sleep information, directing them to our good practice documents.

No children attending the service required medication at the time of inspection. However, the childminder confidently spoke through the process and procedures which aligned with good practice.

Overall, children's wellbeing was supported through the childminder's knowledge of their individual needs. Personal plans were in place for each child documenting information about their health, preferences, and routines. However, they were not reviewed regularly, nor had families been involved. We encouraged the childminder to include parents in reviewing their child's personal plan to ensure information was relevant and agreed targets in place to support children.

### Quality indicator 1.3 Play and learning

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

Children made choices about their play and could independently access toys and games. These were suited to their individual interests and stages of development. For example, children engaged in imaginative play with small world toys and art activities. One child told us, 'I love (childminder), I always have fun, and we make really cool stuff.' As a result, children were happy and enjoyed spending time with the childminder.

Children benefitted from experiences that supported the development of their literacy and numeracy skills. For example, the children had recently read books and were able to retell the stories. During inspection we saw the younger children having access to music and rhyme in the background as they played. This meant that children were supported to learn and develop.

The childminder has recently created new learning journals, that will be shared with families periodically. They documented a range of pictures showing children taking part in activities and information about what they had been learning. We found evidence of how children's needs and interests influenced their play and learning experiences. This supported children to achieve. We encouraged the childminder to feature the child's voice throughout their journal. (See area for improvement 1).

The learning journals showed that the children had the opportunity to visit places in the community, including play parks. The childminder said that the children do not access the garden area however, plans are in place to change this in the near future. Due to the garden not being used one family suggested that the childminder make greater use out of the local area for example; accessing toddler groups and local libraries. This will help to extend the children's play and learning opportunities and to socialise with others. (See area for improvement 2).

### Areas for improvement

1. To improve outcomes for children, the childminder should embed a robust system for personal planning, ensuring that the plans are reviewed at least every six months. Families and children should be included in the process.

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) and 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

2. To improve outcomes for children, the childminder should make greater use of outdoor play and learning opportunities through strong connections to their own and wider communities.

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 I choose, and freely access a wide range of experiences and resources suitable to my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

## 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.

### Quality indicator 2.2: Children experience high quality facilities

Children had access to the living room, kitchen, and toilet facilities on the second floor. Spaces were comfortable and we could see children felt relaxed and settled, they had ownership of the spaces available to them. Families were welcomed into the home and shared they spend time talking with the childminder. This showed us that relationships were valued between the childminder and the families who attend the service.

Children had access to a selection of play resources. During inspection, the children engaged in imaginative play, primarily using a tent, and creating a 'taxi' with cushions. They also played with building blocks, small world toys, and explored art opportunities through drawing.

During our second visit we saw different resources which were attractively presented to promote play. The childminder selected different resources to reflect the ages and developmental stages of the children attending. The childminder discussed the challenges of storage and currently uses a large box which stays in the living room, this makes self-selection a challenge. The childminder should develop play resources further to provide children with new experiences, to promote curiosity and creativity for example, loose parts play.

Some areas in the kitchen were cluttered and not easily accessible. This meant that the risk to infection was increased. We asked the childminder to ensure that all spaces were easily cleaned and free from clutter. This was actioned promptly and clear of clutter on the second day.

The childminder's dog is often around the children. This led to further discussion in relation to obtaining written consent from families, and a robust risk assessment in place clearly showing the potential risk to children. The childminder should ensure good hand hygiene practices are followed when children touch the dog. This will ensure children are kept safe and healthy.

The childminder had basic environmental checklists in place. We highlighted the need for specific robust risk assessments for example; travelling in the childminder's car, walks around the local area and playing at the park. In doing so, this will promote the safety of children. We sampled accident and incident records and found these were in line with current good practice guidance.

During the inspection, we recommended that the childminder register with the Information Commissioner's Office (ICO), an organisation that provides guidance on data protection, including how to store children's personal information securely and lawfully. The childminder acted on this advice immediately and is now registered with the ICO.

**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.

**Quality indicator 3.1: Quality assurance and improvement are led well.**

The childminder gathered families' views through informal chats at drop-off and collection times. They also used WhatsApp throughout the day to keep families informed about their child's experiences. One family shared, "We use WhatsApp to communicate, and communication is always effective and clear. The childminder is always in contact with us, and we feel consistently updated on our child's progress."

The childminder had developed written policies and procedures and shared these with families, helping them understand what to expect from the service. We highlighted that some of these policies should be reviewed regularly and updated, as appropriate, to reflect current practice.

During our inspection, the childminder was open to ideas on how to further develop their practice, showing a commitment to contributing to positive outcomes for children. Family feedback from our survey showed high levels of satisfaction with the overall quality of the service. All agreed that both they and their children were meaningfully involved in shaping the service. One family suggested making greater use of the local area, a suggestion the childminder welcomed and plans to implement in the coming months by exploring local toddler groups. This showed us that the childminder valued the views of children and their parents.

The childminder had completed some self-evaluation of her service using templates from the Scottish Childminding Association (SCMA). We discussed ways to improve their approach to self-evaluation, with a focus on what was important for her service. For example, the development of documenting children's learning and development in journals. This will ensure improvements made will have a positive impact on children's experiences. (See area for improvement 1).

**Areas for improvement**

1. To improve outcomes for children, the childminder should embed a culture of self-evaluation and quality assurance to ensure positive outcomes for children. Families and children should be included in the process.

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).

## 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.

### Quality indicator 4.1: Staff skills, knowledge, and values

Children benefitted from an experienced childminder who helped them feel secure with a kind, caring and consistent approach. As a result, children were supported in their play and had positive experiences as they were happy and content in their care.

Parents responding to our survey agreed that their family had a good relationship with the childminder. Their comments included, 'The childminder is trustworthy, reliable, kind, an excellent communicator and very organised. Both of my children have always spoken very highly of her as do I. The childminder provides an environment that is safe, nurturing and a home from home with consistent high-quality care. I very much value the childminder and the relationship she has built with my children.'

The childminder has kept their membership with Scottish Childminding Association (SCMA). They told us they plan to re-engage with its resources to further develop their knowledge and understanding of best practices in supporting children's health, safety, and wellbeing.

The childminder held a childcare qualification. In recent times, they said that opportunities for training had not been easily accessible. We discussed ways the childminder could further develop their skills and knowledge, for example through professional reading of current guidance and legislation. The childminder had plans to prioritise their professional development to ensure they were up to date with the most current guidance and legislation. We would encourage the childminder to continue with these plans to ensure children's experiences were enhanced and their outcomes continue to improve. (See area for improvement 1).

### Areas for improvement

1. To support children's wellbeing, learning and development, the childminder should ensure they access training appropriate to their role, and apply their training in practice. This should include, but is not limited to, training in Child Protection 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 experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and '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).

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).



## Detailed evaluations

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	4 - Good
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

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