

MacDonald, Emma Child Minding

Inverness

**Type of inspection:** Unannounced

**Completed on:** 4 June 2025

Service provided by: Emma MacDonald

**Service no:** CS2009233770 Service provider number: SP2009975913



## About the service

Emma MacDonald provides a childminding service from her home in a quiet rural area close to the city of Inverness. The childminder is registered to care for a maximum of 6 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 service is located close to a local primary school and nursery, parks, and other amenities. Childminding takes place on the ground floor of the home, with children having access to the main lounge and dining area, kitchen area, toilet and rear garden. The children have access to an enclosed garden at the rear of the property and make extensive use of the local woods, parks and walks.

## About the inspection

This was an unannounced inspection which took place on Wednesday 04 June 15:30 to 16:30.

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:

- Observed interactions between the children and the childminder.
- Spoke with the childminder and to one family.
- Looked around the childminder's home and garden.
- Reviewed documents and records.

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

• The childminder was warm, kind and caring in her approach.

• The children were happy and relaxed in the childminder's care.

•Children were at the heart of the service and were cared for by a childminder who knew them and their families well.

•The childminder should self-evaluate her service against best practice guidance, to support her to make improvements.

•The childminder should further develop her knowledge and skills, and use these to improve the quality of experiences for children.

## 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?	3 - Adequate

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

The childminder supported the child in her care with warm and nurturing approaches. The minded child attended the service for a small period after school on certain days of the week. The minded child appeared happy and having fun. The childminder responded to the child in a compassionate and respectful manner. They had developed good relationships with minded child and their families. They were attuned to the child's needs, and were able to read their cues, providing cuddles to support emotional wellbeing. As a result, the child felt safe and secure.

The childminder knew the minded child and their family very well, which supported their wellbeing and promoted positive outcomes. Personal planning information was used effectively. Parents were central to sharing relevant information about their child's routines, likes and dislikes. Information was updated when care needs changed, supporting the childminder to provide the care and support children needed at the right time. The childminder was aware of the impact that events in children's lives could have on them, supporting children and families with sensitivity.

We did not observe mealtimes during the inspection. Meals and snacks were usually provided by families. However, fruit and access to fresh water was also available for the minded child if required.

The childminder was very aware of her responsibility to safeguard children. We were confident that the childminder was committed to her role and responsibilities in keeping children safe from harm.

The childminder had a medication policy in place, and a good understanding of the best practice guidance. We were satisfied medication would be administered and stored safely if a child required this.

#### Quality indicator 1.3: Play and learning

The child was able to lead their own play by choosing and exploring resources that they wanted to play with. They were enjoying the new resources that had also been purchased to take into account their interests, for example, some building magnets. The childminder supported children's play experiences through discussions, encouragement and guidance when needed, and as a result, the minded child was engaged and confident during their play.

The minded child was engaged in their play throughout the session. We saw the child smiling, chatting and laughing as they took part in a range of activities. Indoors, there were board games, playdough and arts and crafts. Resources were accessible, promoting children's independence and allowing them to choose how they spent their time. The pace of the day was relaxed and unhurried, giving the child time to play and learn.

The childminder was aware of the individual needs of each child and had information that supported her to evaluate their progress and development. Since the last inspection, the childminder developed a system in place to effectively assess observations to support children's progression. This provided stimulating experiences to help children reach their potential.

Planning was mainly child led and the minded child was able to choose what they wanted to do. We discussed ways in which to further develop planning. For example, gathering and recording children's ideas would support them to feel respected and included.

The childminder made very good use of the local area. This promoted children's wellbeing and sense of self in their community, for example, they visited the local woods and parks in their area. These rich and varied play experiences supported children to develop skills for life.

#### 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

The childminder's home was bright, welcoming and provided a homely environment for the minded child. The childminder's home was relaxed and safe for the child to explore and play allowing them to feel safe and comfortable. The minded child made use of all the available space and confidently moved around each area of the house. A range of toys were available for the child to choose from inside as well as the outdoor area.

The minded child had regular access to outdoor play which encouraged them to be active and to develop their physical co-ordination. The minded child had access to fresh air and energetic play in the fenced of area in the childminder's back garden, as well as walks to parks and woods in the area. The back garden had some loose parts to enhance children's play and learning experiences. The mud kitchen, water areas, and sand play area had created an intriguing outdoor area. This contributed to children having opportunities to be active and lead a healthy lifestyle.

The child attending the service was kept safe through the various systems the childminder had in place. The childminder explained that she completed daily visual checks before the minded child arrived as well as at the end of the day. We sampled the risk assessments the childminder had in place and found that she was vigilant in her care of the minded children. This approach helped to make the environment safe for children. It minimised risk and helped keep children safe from harm.

Appropriate infection prevention and control procedures were in place to support a safe environment. The home and equipment were clean and well maintained. Children's wellbeing was supported by a range of measures to limit the spread of infection such as ventilation and hand washing routines.

#### 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

Success and achievements were shared with families regularly. The childminder communicated with parents verbally at drop off and pick up times. The use of technology allowed the childminder to send photos of the

child's achievements and information relating to their care needs and successes to ensure parents felt included and involved in their children's milestones. This facilitates continuity of care for the children.

Effective self-evaluation and quality assurances were in the early stages of development. The childminder valued the views of the children attending her service, and their families, encouraging informal feedback through regular conversation and consultation. Evaluating her service was currently an ongoing process. The minded child were very much involved in the day to day running of the service and deciding what they would like to do while they were there. As a result the minded child and their family felt involved and respected as their views influenced the care provided.

The minded child felt able to express their views in age appropriate ways. For example, when the child had asked for some table top games, the childminder provided the materials to allow them to follow their interests. This helped the child feel respected and valued.

The childminder had policies and procedures in place. We suggested a few changes to policies which would reflect best practice guidance and relevance to her service. This helped parents to understand the work and ethos of the childminding service.

#### How good is our staff team?

3 - Adequate

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

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

During the inspection, we saw that the childminder had kind and nurturing interactions with the minded child. This contributed to them feeling loved and supported in her care. We found that children responded positively to the support provided by the childminder, and they were given an appropriate amount of time to listen and respond to instructions. The minded child presented as secure in the care of the childminder.

The childminder recognised the importance of maintaining her skills and knowledge in keeping children safe and protected. She had attended training on First Aid, Child Protection and also completed her Food Hygiene certificate. This meant that children were supported in all aspects of their care and development.

The childminder had not kept up to date with current guidance and best practice through professional reading, or wider training. This was a previous area for improvement and remains unmet. (See area for improvement 3 under 'What the service has done to meet any areas for improvement we made at or since the last inspection?').

As a result, she was not using best practice and relevant evidence to improve the quality of children's experiences. The limited opportunities for ongoing development had resulted in gaps in professional knowledge and skills, which impacted negatively on the quality of children's experiences. The childminder now needs to identify more time to engage with some of these documents in order to shape and inform their practice.

# 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 to reach their full potential, the childminder should review how she observes and captures children's progress and development and use this knowledge to support children's next steps and extend their experiences.

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

'My care and support meets my needs and is right for me' (HSCS 1.19).

#### This area for improvement was made on 25 September 2024.

#### Action taken since then

Personal planning information was used effectively. Parents were central to sharing relevant information about their child's routines, likes and dislikes. Information was updated when care needs changed, supporting the childminder to provide the care and support children needed at the right time. The childminder was aware of the individual needs of each child and had information that supported her to evaluate their progress and development. Since the last inspection, the childminder developed a system in place to effectively assess observations to support children's progression. This provided stimulating experiences to help children reach their potential

This area for improvement has now been met.

#### Previous area for improvement 2

To ensure continuous improvement the service should further develop quality assurance and self evaluation processes to identify service developments.

This should include, but is not limited to:

a) actively seeking the views from families and children to inform improvement;

b) implement a quality assurance process to identify what is working well and what could be improved.

This is to ensure that 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 a spirit of genuine partnership' (HSCS 4.7); and

'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 25 September 2024.

#### Action taken since then

Effective self-evaluation and quality assurances were in the early stages of development. The childminder valued the views of the children attending her service, and their families, encouraging informal feedback through regular conversation and consultation. Evaluating her service was currently an ongoing process. The minded child was very much involved in the day to day running of the service and deciding what they would like to do while they were there. As a result the minded child and their family felt involved and respected as their views influenced the care provided.

The minded child felt able to express their views in age appropriate ways. For example, when the child had asked for some table top games, the childminder provided the materials to allow them to follow their interests. This helped the child feel respected and valued.

This area for improvement has now been met.

#### Previous area for improvement 3

To support a culture of continuous improvement and positive outcomes for children, the childminder should increase their knowledge and use of current best practice in Early learning and childcare. This should include using the Care Inspectorate's website and 'The Hub' to support self-evaluation as well as the use of best practice documents including but not limited to:-

- Realising the Ambition (Education Scotland 2020); and

- A quality framework for daycare of children, childminding and school-aged childcare (Care Inspectorate 2022).

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).

#### This area for improvement was made on 25 September 2024.

#### Action taken since then

The childminder had not kept up to date with current guidance and best practice through professional reading, or wider training. As a result, she was not using best practice and relevant evidence to improve the quality of children's experiences. The limited opportunities for ongoing development had resulted in gaps in professional knowledge and skills, which impacted negatively on the quality of children's experiences. The childminder now needs to identify more time to engage with some of these documents in order to shape and inform their practice.

This area for improvement has not 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?	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?	3 - Adequate
4.1 Staff skills, knowledge and values	3 - Adequate

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