

# Sandy Pryde Childminding Service

## Child Minding

Livingston

**Type of inspection:**  
Announced (short notice)

**Completed on:**  
21 February 2025

**Service provided by:**

**Service provider number:**  
SP2008969891

**Service no:**  
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## About the service

The childminding service is delivered by Sandy Pryde from their home in East Calder, West Lothian. A care service can be provided to a maximum of seven children at any one time under the age of 16, 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 12 months. The numbers are inclusive of the childminder's own family.

The setting is in a residential area with access to local shops, services and transport routes.

## About the inspection

This was a short notice announced inspection which took place on 19 February 2025 between 11:00 and 13:50. One inspector from the Care Inspectorate carried out the inspection.

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.

This inspection was part of a pilot to test the 'Quality improvement framework for early learning and childcare sectors' developed jointly with Education Scotland. Because this inspection was part of a pilot, no new evaluations (grades) have been awarded.

During the inspection we:

- spoke with and observed three children using the service
- received seven completed online survey responses from parents
- spoke with the childminder
- observed practice and daily life
- reviewed documents relating to children's care and management of the service.

## Key messages

Children were safe, secure and comfortable in a home from home environment, which promoted their independence.

Children's development benefited from a wide variety of resources, opportunities and experiences both indoors and in the local community.

The childminders commitment to continuous improvement, meant that children received a relevant, up to date service, which took account of their needs, wishes and interests.

A rights-based approach permeated through daily practice, resulting in children being supported to thrive.

## Leadership

### Quality indicator: Leadership of management, staff and resources

Children received a service which supported them to have fun safely, be active and experience a wide range of opportunities. This reflected the aims of the service which parents made an active choice to participate in. Families benefited from the childminders flexibility in accommodating their needs. This also ensured continuity for children. A range of policies informed parents of what to expect from the service. These should be reviewed regularly to ensure they consistently reflect national guidance and best practice. A parent said, "Sandy's home is warm and friendly (a home from home). She develops excellent relationships with the children. She is very knowledgeable about up to date practice and is always working hard to make her service even more excellent".

The childminder continued to improve outcomes for children over time through continued development of their practice and service. Parents and children were involved in informing change in a number of ways, such as formally through questionnaires and informally through discussions. The childminder continuously reflected on the quality of the service, for example reviewing the condition of the resources. This meant that children had access to a well-maintained setting. It also meant that the childminder could be responsive to children's needs, wishes and interests. For example, developing experiences in the garden to include planting and imaginary play. Floor books were used as a visual way for children and parents to see the learning taking place and contribute to future plans. The childminder should continue to develop the floor books so they remain current, evaluative and purposeful.

Overall, quality assurance and self-evaluation activities were allowing the childminder to continuously improve aspects of the service. For example, by reflecting on the service using the 'Quality framework for daycare of children, childminding and school aged childcare' (Care Inspectorate 2022) and setting actions to achieve. To further enhance these processes, the childminder should identify the impact on children's outcomes from any changes. This would inform the next steps for the service.

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

A strength of the service was the childminders commitment to their profession and children in their care. This was demonstrated through their actions to upskill and enhance their knowledge in early learning and childcare. The childminder had accessed a variety of training opportunities and shared the learning and

which had improved their practice and experiences for the children. For example, infant mental health training had supported them to validate children's feelings more. In addition, working alongside other childminders offered opportunities to engage in reflective discussions and learn from each other. A parent said, "Sandy is a very gentle, caring and fun person who is always available at the end of the day to talk about my child's day".

Children's approval, involvement and permissions were sought during all interactions. This rights-based approach ensured children were active partners in their care. Interactions with children showed the childminders understanding of key developmental stages. This understanding was used to set high aspirations of children to reach their full potential. To further support this, the childminder should continue to develop the links between what children are doing in play and planning intentional outcomes for their learning.

Children's safety, independence and autonomy were supported through the childminder being observant and responsive in their supervision. Children were known well and so their non-verbal cues were noticed and understood. This meant that the childminder was anticipating the support needed and intervening when necessary to support children's development.

Children felt secure as the childminder communicated their movements, keeping them informed throughout the day. For example, going into the hall to change a nappy or making lunch in the kitchen. Transitions throughout the day were negotiated with children where possible, so they were involved and knew what was coming up. This was reassuring for children.

## Children thrive and develop in quality spaces

### Quality indicator: Children experience high quality spaces

Children were cared for in a homely environment which was well-ventilated and naturally lit, with comfortable furnishings. Space to store their belongings at children's height, made them feel welcomed and valued, as well as promoting their independence. Children used the livingroom and kitchen which provided sufficient space to play and spread out. A downstairs toilet was resourced for children's comfort and independence, while personal care protected their dignity and privacy. As a result, children felt confident and secure in the setting.

Children were safe in the setting as action was taken to minimise risks where possible. For example, car seats and table booster seats were used effectively. Toys, resources and equipment were well-maintained through regular checks. Choking hazards for children were understood and minimised, such as during the preparation and eating of food. In addition, children were involved in considering risk when the childminder used play and daily tasks as learning moments. This allowed children to practice making decisions and problem solving in a safe environment.

Infection prevention and control measures were in place to reduce infection risk to children. For example, regular cleaning and handwashing. Children of all ages were familiar with the handwashing routines at relevant points throughout the day. This promoted good personal hygiene habits. Further measures to reduce infection spread were the use of individual towels and sleep blankets. Children's health and safety needs were considered as the childminder adhered to current infection control best practice.

Day to day, children were empowered to make choices in their play, giving them a strong sense that their wishes mattered. A selection of toys and natural/open-ended materials were available and accessible to

them to choose from and explore. For example, shells and cardboard boxes. Resources were rotated to offer variety, spark interest and respond to children's interests. Children's literacy and numeracy development was promoted through written labels, stories, mark-making and interactions with the childminder. Concepts were naturally included in conversations to support children's development, such as sequencing, recognition and recall. The quality of spaces could be developed further by building on real and open-ended materials; and considering provocations in play. For example, planning intended outcomes for learning and inviting children to play through attractive and intriguing set-ups. Also, while the childminder understood diversity and equity in play, their plans to widen children's experiences further should be implemented to develop this.

Children were involved in making decisions about outdoor activities or attendance at local groups. This flexible approach meant that the service was child-led and respectful of their wishes. A large garden was accessible for children, providing fresh air and a natural environment to discover. Additional opportunities were available such as planting fruit and vegetables and engaging in the local community. A parent confirmed this, saying, "Sandy has an excellent outdoor space with a range of play equipment. In the summer the children do a lot of water and messy play as well as gardening. She often takes them to play areas and to a range of natural spaces for them to explore all year round".

This key question was not assessed.

## 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).

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