

Wright, Audrey Child Minding

Livingston

Type of inspection:

Unannounced

Completed on:

12 August 2025

Service provided by:

Audrey Wright

Service provider number:

SP2003909890

Service no: CS2003019801



About the service

Audrey Wright provides a childminding service from their family home within a residential area of Dedridge, Livingston. The service is close to local amenities including green spaces, the local nursery and primary schools, parks, woodland and local shops. The service is delivered from the ground floor of the family home and children have access to the lounge, dining kitchen and downstairs bathroom. Children also have access to an enclosed rear garden.

The service was registered to provide a care service to a maximum of eight children at any one time under the age of 16, of whom a maximum of six will be under 12, 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. Minded children cannot be cared for by persons other than those named on the certificate. Minded children shall not at any time be left unattended in motor vehicles during the provision of the care service.

About the inspection

This was an unannounced inspection, which took place on 12 August 2025 between 10:20 and 11:55 and 12:50 and 15:20 hours. Feedback was given later that same day by telephone call. 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.
- Intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Spoke with four children using the service.
- Spoke with the childminder.
- Gathered feedback from three parent/carers.
- Observed practice and daily life.
- Reviewed documents.

Key messages

- -Children continue to enjoy positive, warm and kind interactions from the childminder and families highly value the service.
- Children enjoy a variety of play and learning experiences which are fun and promote their knowledge and understanding.
- Personal planning needs to be improved to support the childminder in meeting individual needs.
- Approaches to safety and infection prevention and control need to be improved for children's wellbeing.
- A self-evaluation approach should be further developed to support ongoing reflection and improvement of provision.

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?	2 - Weak
How good is our leadership?	3 - Adequate
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, where strengths only just outweighed weaknesses.

Quality Indicator 1.1: Nurturing care and support

The childminder ensured children sat comfortably to eat, reducing their risk of choking and sat with them to support their understanding of the social aspects of eating. This resulted in a relaxed mealtime experience for children as they sat in the garden together to eat. Children were encouraged to access their drinks bottles throughout their play, which helped them remain hydrated on a very hot day. However these were all filled with juice. We asked the childminder to work with parents to support a change to milk or water. The childminder promoted some healthy eating through provision of a range of fruit at snack time. However, lunches could be enhanced. Food provided by the childminder was mainly processed. We asked the childminder to review this and support families in providing healthy lunch boxes whilst encouraging children to eat healthier items first. We signposted the childminder to the revised 'Setting the Table' guidance document to support menu planning and promotion of healthy eating (see area for improvement 1).

Personal plans were not supporting the childminder to meet children's needs. The childminder was aware of her requirement to update these every six months but had not managed to maintain this due to personal circumstances. This meant emergency contact information was potentially not up to date which could compromise children's care in an emergency (see area for improvement 2).

Children's individual progress and next steps, previously documented within their personal plans, had not been updated for some time. This reduced the childminder's ability to meet children's needs and interests and support their achievement. Although the childminder identified that some children needed some additional support, this information was not recorded. We asked the childminder to ensure that this was identified along with appropriate strategies for support (see area for improvement 3).

Children were very relaxed and happy in the setting. They spoke positively about the all the things they do with the childminder and told us, "She is the best and looks after us all." Children's efforts were respected and valued as appropriate praise and celebration of their efforts was given throughout their play enhancing their positive self esteem. Positive behaviour was promoted and physical comfort was provided when needed. The childminder had a developed a policy on positive touch and spoke about how this supported trust, attachment and regulation of stress hormones. This all contributed to children developing positive self esteem and resilience.

Children felt secure as they had developed close relationships with each other and spoke about their 'friends' in the setting. They were comfortable to interact with the inspector. Mindfulness activities such as yoga were occasionally offered which promoted children's positive emotional wellbeing.

Children's personal care needs were supported through appropriate nappy changing and toileting. The childminder ensured children's dignity was maintained at all times and responded quickly and sensitively to their calls for help, whilst promoting their independence. Although no current minded children slept during the day the childminder described some positive safe sleeping practices which would maintain children's comfort. We asked the childminder to ensure that sleeping children would be checked on at least every ten minutes for their continued safety.

Quality Indicator 1.3: Play and learning

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

The childminder was very responsive in the moment to children's requests and cues. For example, asking for specific coloured paper, choosing to be outside, choosing to move back inside and requests for different resources. The childminder discussed how she planned for their play and learning by remembering their specific requests which could not be addressed immediately. We discussed how simple planning and understanding of schemas (repeatable patterns of play) could now be developed to enhance provision to meet children's needs.

Children were being verbally consulted with and having opportunity to have their voices heard whilst learning to understand about democracy through verbal choices and discussions. A child told us how they had all taken a vote on whether to eat lunch outside or inside today and the majority was for outside. There was scope to further explore children's rights and build additional opportunities for consultation and participation. We signposted the childminder to reading materials online to support this and discussed using techniques such as mind mapping with children to gather their views more regularly on matters that affect them.

Children were achieving due to the promotion of language, literacy and numeracy through conversations and interactions in their play. Strong role modelling of language and access to a range of books and regular storytelling and singing supported children's language development and love of stories. Also, discussions about promoting recognition of colours, shapes and sizes contributed to their understanding of early maths. Interactions and effective questioning during play supported the children to problem solve whilst extending their learning and understanding, through sharing personal experiences. For example, sharing knowledge from a holiday to an active volcano, which extended children's knowledge and understanding as they explored this through crafting.

Children enjoyed variety in the day through the use of different resources within the local community. For example, visits to the library for bookbug sessions, childminding groups in the local centres and visits to local parks, woodland and a care home. These opportunities supported their language, social interactions, physical wellbeing, risky play opportunity and built respect for the elderly community. We asked the childminder to consider how they could further develop links within the community which would enhance children's civic responsibility such as community litter picks or linking with food banks.

Areas for improvement

1. To support children's healthy eating habits, the childminder should ensure food provided for lunch is reviewed to reduce the amount of processed foods and ensure nutritional balance. The childminder should work with families to encourage healthy packed lunches and promote healthier drink options. They should make reference to the guidance document 'Setting the Table' available on the hub section of our website.

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

'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning' (HSCS 1.33); and

'I can drink fresh water at all times' (HSCS 1.39).

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2. The childminder should ensure that personal plan information is reviewed and updated with families at least once every six months or sooner if there is any change to a child's health and wellbeing.

This is to ensure that care and support is consistent with the Health and Social Care Standards 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).
- 3. The childminder should develop personal plans to ensure they record identified additional support needs. These should record strategies for support in place and be used to enable children to achieve. These should also include recording children's achievements and identify relevant and meaningful next steps. This information should be regularly reviewed and updated with parents to support children's progress.

This is to ensure that care and support is consistent with the Health and Social Care Standards 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?

2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

Quality Indicator 2.2: Children experience high quality facilities.

Children's safety was compromised due to hazardous items being stored within their reach. Although the childminder provided reassurances that cleaning materials were natural and safe this does not eliminate the risk of harm or unknown reactions. We requested these items were moved out of children's reach during the inspection and to ensure better organisation and secure storage to ensure children's safety. A review of the written risk assessments should also be completed as these were not up to date or currently supporting effective safe practice. There was a brief moment when children were left in the presence of the inspector on the doorstep due to a pet escaping. Although the childminder described usual practice in this situation which was then later observed to be better, this still had the potential to cause emotional distress to children and put them at risk of harm. Management of the pet and supervision of children should be reviewed and recorded within a risk assessment. This is to support reflection on potential risks and actions needed to reduce possible harm (see requirement 1).

Children's health and wellbeing were at risk due to some inadequate infection prevention and control measures. Whilst regular handwashing and cleaning routines were in place, several items around the home and garden posed a risk of cross infection and impacted on children's play outside. These included an amount of unclean laundry on the floors which also limited effective cleaning, pet food scattered across the floor and dirty water in the paddling pool and containers of rain water in which toys were floating. Surfaces in the kitchen/diner were very busy which also limited effective cleaning. A family member helped to address some of this during the inspection, however this should be maintained at all times and a clean and hygienic environment ready for children's arrival. We acknowledged some personal issues had impacted on some aspects of provision highlighted in this report and the childminder recognised these were areas they needed to improve (see requirement 2).

Children benefitted from the freedom to explore and engage in different play activities as they moved between the garden, kitchen/diner, large hallway and living room. This enabled their independence and social interaction as they could choose where to play, relax or connect with others. We noticed children routinely left toys scattered and asked the childminder to encourage children to tidy up after themselves. This would build their sense of responsibility for the environment and others.

Children were supported to be independent and creative through freely accessible, age appropriate resources. Loose parts play materials both indoors and out, along with a mud kitchen in the garden and a range of craft materials were stored at child level. These resources supported children's exploration and imaginative play.

Requirements

1. In order to ensure children's safety and wellbeing and reduce their risk of harm, the childminder must review the storage and management of potentially hazardous items and materials within the home and garden by 1 October 2025. This includes ensuring; alcohol and other items such as boxes of matches and any cleaning materials are out of reach and that all hazardous materials are stored out of children's reach at all times. The garden area must also be safe for children to use at all times. Written risk assessments for the home and garden should be reviewed to support maintenance of a safe environment and close supervision of children maintained at all times.

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

'My environment is secure and safe' (HSCS 5.19).

It is also necessary to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210.

2. In order to ensure the cleanliness of the environment and reduce risk of infection, the childminder must ensure the space and resources accessed are hygienically improved and maintained by 1 October 2025. This should include regular cleaning and systems to ensure the maintenance of a hygienic environment. This should include improved management and storage of soiled laundry out with children's access, reducing cluttered surfaces to support cleaning and enhance children's play space, and improved management of pet feeding areas to reduce children's possible access to pet food. This is to reduce children's risk from cross infection and maintain their wellbeing.

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

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

It is also necessary to comply with Regulation 4(1)(a),(d) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210.

How good is our leadership?

3 - Adequate

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

Quality Indicator: 3.1 Quality assurance and improvement are led well

Children's provision was supported by the childminder carrying out self evaluation. Partnership with the local authority supported them in establishing some quality assurance methods. This included using the quality framework indicators to identify strengths and areas for improvement.

As a result, an action plan was in place to support improvements. However, issues found during inspection demonstrated that self evaluation was not yet supporting positive outcomes across all aspects of provision. The childminder shared their awareness of the impact of their personal circumstances on aspects of provision highlighted for improvement during the inspection. They were keen to address issues raised to enhance outcomes for children. Although the childminder was using the 'self evaluation toolkit for childminders', this was not yet addressing issues identified during inspection. Therefore they should continue to engage with this and the new shared framework to fully develop reflection and improvement (see area for improvement 1).

Families had the opportunity to influence provision as questionnaires were issued alongside general discussions. Parents were welcomed into the home enabling them to view provision, make assessment and give feedback. Cards received and the childminder's own questionnaires demonstrated that parents were very happy with the service. Parents told us they all either 'strongly agreed' or 'agreed' that they were involved in a meaningful way to help develop the service. We discussed how children could be more involved in providing their views on provision to support further improvement.

Policies and procedures to support children's care, play and learning were in place and were dated to demonstrate recent review. We pointed out some additional changes to be made to further improve some of these. These should be kept under regular review and changes made to ensure they remain relevant and reflect current best practice and legislation.

The childminder had established links with other local childminders which they used to support their shared discussions and practice reflection. The childminder demonstrated their knowledge of a key best practice document to support them with meal provision. However there was scope to become familiar with other key documents and best practice notes such as 'SIMOA' (Safety, Inspect, Monitor, Observe and Act) to further enhance practice and positive outcomes for children.

Areas for improvement

1. The childminder should ensure they carry out ongoing self evaluation of the service throughout the year to support improvements needed for children's health and safety. Reference should also be made to the 'Self evaluation toolkit for childminders' available on our website. This would help provide evidence of progress.

This is to ensure that care and support is consistent with the Health and Social Care Standards 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 the childminder's kind approach which children responded positively to. One parent told us, "I'd like to thank Audrey for her patience and kindness." Children were very relaxed and at home and enjoyed fun interactions and laughter with the childminder during their play. One child told us, "Kind and friendly, helped me come on a lot since starting gets me more interactions with other kids I'm always excited in the morning to go."

They spoke fondly of all the things they did with the childminder such as telling us, "Audrey taught us how to sew" and "I got to buy this necklace with my own money when I went shopping with Audrey." The childminder was responsive to their cues and enabled and promoted their independence as result of their understanding of each child's capability. The childminder's appropriate questioning and sharing of knowledge enabled them to extend children's play and learning.

Core training and learning such as first aid, food hygiene and child protection had been completed which contributed to children's wellbeing. The childminder demonstrated their knowledge of childcare practice which supported their positive interactions with children. Future training needs had been identified and were linked to specific needs of children and wider experiences to support their play and learning For example, by deepening their understanding of autistic spectrum disorders and developing outdoor learning. Reading and eLearning relating to childcare were regularly carried out along with attendance at annual conferences supporting their knowledge and understanding of children's play and learning. A log of training completed was maintained. We asked the childminder to ensure they also record their professional reading within their learning log. They should now be more reflective of the impact of this on provision to further support ongoing evaluation and improve outcomes for children.

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	4 - Good

How good is our setting?	2 - Weak
2.2 Children experience high quality facilities	2 - Weak

How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate

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

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