

Amanda's Childminding Child Minding

Edinburgh

Type of inspection:
Unannounced

Completed on:
20 March 2026

Service provided by:
Amanda Paterson

Service provider number:
SP2012983703

Service no:
CS2012309336

About the service

Amanda Paterson (referred to as the childminder in this report) provides a childminding service from her home in Balerno in Edinburgh. The areas used for the childminding service are the lounge/dining room, upstairs bathroom and the large enclosed garden at the rear of the property.

The childminder may care for a maximum of 7 children at any one time under the age of 16, of whom no more than 6 are under the age of 12 years and 3 are not yet attending primary school and of whom no more than 1 is under 12 months. The numbers are inclusive of children of the childminder's family.

About the inspection

To prepare for the inspection we reviewed information about this service. This included, registration information, information submitted by the service and intelligence gathered since registration.

In making our evaluations of the service we:

- Spoke with children and two families using the service
- Considered feedback from three families through an online questionnaire
- Spoke with the childminder
- Observed practice and daily life
- Reviewed documents relating to the care of children and the management of the service.

As part of our inspections, we assess core assurances. Core assurances are checks we make to ensure children are safe, the physical environment is well maintained and that a service is operating legally. At the time of this inspection, no improvements were identified relating to core assurances.

Key messages

- The childminder provided a caring, friendly environment with clear policies however, some policies needed updating to reflect current guidance.
- Families and children give verbal feedback to help develop the service.
- Children experience high quality play and learning, with varied outdoor and indoor activities that promoted wellbeing and engagement.
- Connections with children and families are nurturing and positive.
- Personal plans were in place for most children however, developing more formal review cycles would ensure compliance with national expectations.

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

Leadership	4 - Good
Children play and learn	5 - Very Good
Children are supported to achieve	4 - Good

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

Leadership 4 - Good

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Quality indicator: Leadership and management of staff and resources

The childminder had a clearly established mission statement, set out in the service handbook and shared this with families before children started, supporting transparent communication. The mission statement reflected a commitment to providing a warm, caring, friendly setting for children to grow and develop safely and a commitment to providing healthy snacks demonstrating a clear vision for practice. The mission statement had not been reviewed for some time. Regular review would have strengthened the clarity and accuracy of the service's direction and ensured they remained relevant and aligned with national expectations.

Families felt meaningfully involved in developing the service. The childminder effectively gathered views through daily conversations and children's questionnaires. They valued this feedback and used informal reflection to make improvements, such as enhancing the development and safety of garden swings. However, the self evaluation policy needed updating and the childminder should strengthen how feedback leads to change and improved outcomes for children and families. Further improvements were identified, including ensuring all children had personal plans in place that were regularly reviewed and aligning snacks with healthy eating guidance. Using current quality improvement tools and best practice guidance would support a more systematic approach to self evaluation, that would continue to build on existing strengths, support clear identification of improvement priorities and strengthen monitoring of progress and outcomes.

The childminder had a range of policies that supported best practice. The childminder informally reviewed them regularly however some had not been updated for many years. Some needed revisions to reflect current guidance and best practice. For example, complaints and child protection policies referenced outdated Care Inspectorate details and the allegations of abuse policy still stated a 14 day notification timescale instead of the required 24 hours. While the healthy eating policy aligned with best practice and fruit was offered, daily snacks did not meet national guidance. The lost child policy advised avoiding crowded areas and needed updating to reflect current practice. The childminder accessed the park during busy periods and during our visit an older child briefly hid. The childminder took immediate action and implemented their lost child policy and ensured the child was found safe in the park. Clearer procedures and boundaries in crowded environments would ensure children's safety. Overall, although policies existed, several required updating or more consistent implementation to ensure safe, effective practice and alignment with national guidance.

Environmental risk assessments were in place and contributed effectively to children's safety. Families told us, "Amanda's house is always clean and tidy and well organised". The childminder understood their responsibilities and maintained a safe environment for children. Established accident and incident recording procedures were used to document events and were completed appropriately and shared promptly with families. This ensured clear communication and supporting children's safety and wellbeing.

Children play and learn 5 - Very Good

We found major strengths in this aspect of the setting's work and identified very few areas for improvement, therefore we evaluated this quality indicator as very good.

Quality indicator: Playing, learning and developing.

Children were happy, confident, and engaged in the service. The childminder tailored their service to before and after school provision. After school, they accessed the nearby play park and large grass areas where children enjoyed physical play such as rugby, football and using the park apparatus. They socialised with school peers and interacted positively with members of the local community, including playing with a family dog. Families told us their children experienced a wide range of enjoyable and individualised opportunities, and commented, "There are outdoor play opportunities whenever the weather allows, craft activities, group activities with other kids, or time to do something individually if they prefer". The childminder described regular community experiences, including visits to local gardens, allotments, the Water of Leith and local parks. These opportunities supported children's physical development, social skills, communication and overall wellbeing.

On returning from school, children accessed the garden space and engaged in play using the swings, swing ball, a trike and spent time chatting together. One family shared, "They have a nice garden with toys and equipment and do things like planting flowers and vegetables". The childminder showed us the variety of outdoor resources stored in the shed, including tents, construction materials, fishing nets and ball games however, following recent stormy weather the outdoor space had not yet been fully re set. More routinely consulting children about which resources they wanted available outdoors and making fuller use of the equipment, would have increased choice and supported greater engagement, particularly for older children.

Indoors, the childminder provided a range of resources that supported children's engagement and promoted free choice. These included a miniature pool table, craft materials, computer games, board games and books. Screen time was carefully managed, with the childminder encouraging children to limit device use, particularly when outdoor play was possible. Families told us that enjoyable activities such as crafts and Hama beads were offered on wet days. Children confirmed that a cupboard of resources was available to them, demonstrating that choice and independence were supported.

The childminder's interactions with children was fun and responsive. They recognised when to step back and when to intervene, supporting children to resolve disputes and engaging in conversations that promoted wellbeing. Children clearly had strong, relationships with the childminder, those not attending that day greeted the childminder warmly in the street, demonstrating trust and connection. The childminder responded with warmth and reassurance, helping children feel safe, supported and valued.

The childminder's planning approach was informal. Children's questionnaires were used effectively to gather their interests and ideas and this informed the play opportunities provided. Photos and messages on a digital platform, as well as regular conversations at drop off, pick up and throughout the day contributed to a joined-up approach to children's play and learning. Children told us they were happy with the activities on offer, indicating that experiences generally met their needs and preferences.

Children are supported to achieve 4 - Good

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Quality indicator: Nurturing care and support

The childminder had established trusting, positive relationships with children and their families. Families described the childminder as kind, honest, and supportive, noting that they knew each child well and communicated openly about any concerns. The childminder's attuned approach balanced warm, nurturing care with clear, consistent boundaries. Families also shared examples of the childminder supporting children through challenges with peers outside of the service. As a result, children experienced a caring, secure environment where they felt safe, understood and well supported.

A sofa was available in the lounge to support children's rest and relaxation. Families shared there were opportunities for rest on the sofa indoors and commented on wet weather days they arrived to children under blankets on the sofa. Families confirmed children could use this space when needed and as a result children's wellbeing was being supported.

Children were kept safe from harm through established procedures in the service. Although no medication was being administered at the time of inspection, appropriate recording systems were in place in line with national guidance. The childminder demonstrated an understanding of procedures for reporting child protection concerns and shared appropriate steps to keep children safe from harm. Some aspects of the child protection policy required updating to ensure it remained current. To maintain safe and nurturing practice, the childminder should ensure their professional learning remained up to date, including regular child protection training, to continue to safeguard children's health, welfare and safety effectively.

As the service operated before and after school care, only snacks were provided. Children had access to fruit as a healthy snack, and families valued the choice provided. One family commented, "There is always fruit available and the kids get to choose a snack when they are there after school". However, other snacks offered did not align with best practice guidance or the service's healthy eating policy. Children sometimes ate snacks while playing. Encouraging children to sit at available seating areas and reviewing snack provision with them would have supported safer, healthier and more consistent practice. Overall, snack provision needed further improvements to fully align with national guidance and promote children's wellbeing.

Children were supported to follow effective infection prevention and control routines. Regular handwashing at key times took place, such as on returning from school, before eating and after using the toilet. When at the park, the childminder provided hand gel prior to children eating fruit, which helped maintain hygiene when running water was not available.

Personal plans mostly reflected each child's wellbeing needs and were developed in partnership with families. While most children had a plan in place, one child did not, documentation had been issued but not yet returned. Ensuring every child has a completed plan when they start would have supported their wellbeing from the outset. Families confirmed they were involved in discussions about their child's plan. The childminder reviewed information informally and positive partnership working was evident. However, a structured review cycle, was needed to ensure plans were updated consistently at least every six months in line with legislation. The use of Care Inspectorates 'A Guide for Providers on Personal Planning' would support the childminder to continue to develop their personal planning approach (see area for improvement one).

Families had a positive relationship with the childminder, with one parent commenting that "Amanda is always very welcoming." Families described the holistic support the childminder provided during challenging times and valued the reassurance offered through her extensive experience. The childminder engaged in regular discussions with families at drop off and pickup times. Communication was strong, with verbal updates helping parents feel informed and confident in the care provided. Families were welcomed into the childminder's home, which supported trusting relationships, a sense of involvement and belonging within the service.

Areas for improvement

1. To ensure children's personal information is current and up to date, the childminder should review their personal care plans with families at least once in every six months in line with legislation.

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).

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

Leadership	4 - Good
Leadership and management of staff and resources	4 - Good
Children play and learn	5 - Very Good
Playing, learning and developing	5 - Very Good
Children are supported to achieve	4 - Good
Nurturing care and support	4 - Good

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