

# Kinnaird Tots Child Minding

Larbert

**Type of inspection:**  
Unannounced

**Completed on:**  
2 April 2026

**Service provided by:**  
Dawn Averley

**Service provider number:**  
SP2013985179

**Service no:**  
CS2013319352

## About the service

Dawn Averley trading as Kinnaird Tots offers a childminding service registered to provide care to a maximum of six 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. The numbers are inclusive of the childminder's own family.

The service is close to local amenities, schools and parks. The children have access to the open plan kitchen/lounge area and bathroom facilities on the ground floor of the premises. There is an enclosed garden suitable for outdoor play at the back of the property.

## About the inspection

This was an unannounced inspection which took place on 30 March 2026 between 14:50 and 18:25. Feedback was provided on 02 April 2026. 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:

- spent time with six children in the service
- spoke with the childminder
- received six completed questionnaires from parents
- observed practice and children's experiences
- reviewed documents.

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

- Children enjoyed warm, kind interactions and approached the childminder with confidence, knowing they would receive support.
- Parents benefitted from the positive, trusting relationship the childminder had built with them.
- The childminder showed a commitment to improving standards by starting to address the areas needing improvement shortly after the end of the inspection visit.
- The service lacked clear direction and effective quality assurance, with aims not reflected in practice and no structured systems for continuous improvement.
- The limited variety of resources available meant that children's play lacked depth and meaningful engagement.
- Interactions did not fully support children's interests or development, highlighting the need for more responsive planning.

## 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	2 - Weak
Children play and learn	3 - Satisfactory / Adequate
Children are supported to achieve	3 - Satisfactory / Adequate

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

## Leadership 2 - Weak

We made an evaluation of weak for this quality indicator, as there were some strengths, but these were compromised by important weaknesses.

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

The childminder shared a statement of aims and objectives with families alongside the main policy set at the time of enrolment. This emphasised the importance of children being happy, safe and loved. It also outlined the childminder's intention to use the SHANARRI (Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible) wellbeing indicators to review personal plans, provide highly personalised care, and gather and act upon children's voices. These aims and objectives were not consistently reflected in practice. As a result, the service's focus and direction were unclear. The statement of aims should now be reviewed, taking account of areas for improvement identified in the report and ensuring that the aims and practice are aligned. This review should be carried out in consultation with children and their families to ensure a shared vision for the setting. **(see area for improvement one)**.

Parents had some opportunities to share their views during drop-off and collection times. However, these informal conversations were not being used to support meaningful development or evaluation of the service. The childminder should review methods for gathering families' feedback and ensure this information shapes ongoing self-evaluation and improvement. Best practice guidance, such as 'Me, My Family and My Childcare Setting' (available from the Care Inspectorate website), could support this.

The childminder described attempts to encourage children to share their views and make suggestions about activities and routines. However, these approaches had not achieved the desired outcome. The childminder should develop methods for seeking children's views that feel comfortable and appropriate for them, helping children feel confident to express their ideas. Children's views should then be used to inform decisions about resources to add in the provision and plan future experiences.

Quality assurance systems should be developed to ensure they effectively support the childminder to manage their service. This includes regular review of policies and procedures, personal plans, and risk assessments to ensure they remain current, meaningful, and effective in meeting children's needs. This will help ensure policies remain living documents that accurately reflect current practice and strengthen collaborative relationships with parents and carers.

We found that the childminder did not maintain a clear and formal record of children's attendance. We discussed the importance of consistently recording children's attendance, including reasons for any absence. This is required to evidence compliance with the conditions of registration as well as for health, wellbeing and child protection purposes. The childminder responded positively to this and created a template to support consistent record-keeping **(see area for improvement two)**.

There were no clear processes in place to assess the quality of the service or identify areas for development. As a result, the children did not benefit from a service that was meaningfully evaluated and developed in line with children's evolving needs and interests. We discussed the importance of having an improvement plan that sets out clear priorities and targets, includes a realistic timeline, and outlines how progress will be reviewed. A more systematic and structured approach to improvement planning would support ongoing development and enhance children's experiences **(see area for improvement three)**.

The childminder was responsive to this feedback and began working on an improvement plan shortly after the inspection visit. This demonstrated their motivation to enhance the quality of children's learning experiences. This commitment, if maintained, will support them to implement and embed sustainable changes that can strengthen practice and lead to better outcomes for children.

The childminder had recently completed some training relevant to caring for school-aged children, as well as paediatric first aid. We recommended they refresh their knowledge of child protection and familiarise themselves with the new 'A quality improvement framework, for the early learning and childcare sectors: childminding' to ensure they remain confident in their responsibilities and up to date with current practice guidance (**see area for improvement four**).

We highlighted the value of keeping a record of continuous professional development (CPD), including any online learning, webinars, or resources accessed, such as those available through the Care Inspectorate Hub. Maintaining a CPD record would support reflection on how learning influences and improves children's experiences.

### Areas for improvement

1. To promote high aspirations for children and their families, the childminder should review their vision, values and aims to include the views of parents and children so that the direction of the service reflects children's rights, needs and interests and a shared ethos with the families.

This is to ensure 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 am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve.' (HSCS 4.8).

2. The childminder should maintain a register of attendance, which clearly details start and finish times of all children for each day attended as well as reasons for not attendance. This is to evidence that the ratios are maintained for compliance with the conditions of registration and to support the overall health and wellbeing of all children attending the setting.

This is in order to comply with Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 - Regulation 4 Welfare of users (1)(a).

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which state that 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

3. The childminder should develop an improvement plan and quality assurance systems to systematically evaluate their service. This will help identify what they do well and areas for development and inform their improvement plan priorities.

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

'I have confidence in people because they are trained, competent, and skilled, are able to reflect on their practice and follow their professional and organisation codes.' (HSCS 3.14). and is consistent with the Health and Social Care Standards which state that

'I benefit from a culture of continuous improvement, with the organisation having a robust and transparent quality assurance processes.' (HSCS 4.19).

4. To support positive outcomes for children in their care, the childminder should further develop their skills and knowledge of best practice guidance and undertake professional development opportunities. This includes, but is not limited to:

a) Taking further steps to refresh their understanding of child protection, including their roles and responsibilities;

b) Familiarising themselves with best practice guidance such as 'Realising the Ambition', 'A quality improvement framework for the early learning and childcare sectors, childminding', and 'Infection prevention and control in childcare settings (day care and childminding settings)'. They should use this to identify and improve areas of their service to promote high quality play experiences and positive outcomes for children.

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

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes'. (HSCS 3.14).

## Children play and learn 3 - Satisfactory / Adequate

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

### Quality indicator: Play, learning and developing

At the time of the inspection, resources available to the children were sparse, which limited opportunities for sustained, high-quality play and exploration. This meant that children did not access a wide range of play experiences which met their interests and needs. To enhance the quality and duration of children's engagement, the childminder should expand the range and variety of play resources available (**see area for improvement one**).

Meaningfully reviewing the resources on offer in consultation with children would support this. We also discussed how introducing more open-ended resources such as large pieces of cardboards and pipes, would encourage children to collaborate, test ideas, explore and create.

After the transition from school to the childminder's setting, children were observed using their own personal technology devices, as well as one borrowed from the childminder, while having snack. We discussed with the childminder that technology can have an appropriate place and purpose within children's play and in the context of a wider range of play resources. However, a lack of variety in play resources along

with a prolonged use of technology can limit the quality of the children's engagement in meaningful play experiences.

Children responded positively when the childminder asked them to stop using their devices and moved either outdoors to play football or into the summer house to play a board game. However, some children returned to their devices after a short period, which further reduced the depth and continuity of their play. Short spells of engagement were noted across several activities, which can impact the developmental benefits of sustained play (**see area for improvement two**).

Children had opportunities to relax after snack and freely choose how they wished to spend their time. Some children told us they visited local parks with the childminder, which supported them to build friendships, develop social skills, and enjoy outdoor learning experiences.

Indoors, we observed other children creating a video through imaginative and role-play experiences and engaging in a board game for a period of time. This demonstrated that they felt comfortable and confident to participate in activities that interested them. The childminder described a range of activities available to children, including arts and crafts, board games and Lego. Parents told us: 'my [child] has the opportunity to draw, sing, dance or watch a kid's programme'.

We discussed with the childminder that children would benefit from a more planned approach to their play and learning. Two children shared with us that they would like more resources to play outdoors and would enjoy doing some baking and having some 'movie' afternoons. A child commented on the questionnaire: "we go to the park, and I do lots of craft stuff, drawing pictures and colouring. I like making things. Me and my friends like using the iPad to do yoga and dance". There is now scope to develop planning further to ensure it consistently takes account of children's interests and considers how activities and experiences can extend, challenge and support their learning and development. This would help ensure experiences are purposeful and promote progression.

The childminder had developed positive relationships with the children. Most interactions were kind and caring, helping children feel comfortable and secure. Some interactions, however, were task-oriented. Deepening learning-focused interactions would strengthen relationships further and help children develop a stronger sense of belonging within the setting.

## Areas for improvement

1. The childminder should improve the range of resources and toys available to children. This will help ensure they experience a wide variety of stimulating and engaging opportunities that reflect their interests and promote curiosity, imagination, and creativity.

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

'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials.' (HSCS 1.31).

and

'As a child, I can direct my own play and activities in the way that I choose and freely access a wide range of

experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity.' (HSCS 2.27).

2. To support children in having limited, planned periods of technology use, the childminder should develop a policy outlining clear rules, expectations, and responsibilities in this area in agreement with the children and their families. Involving children in developing and implementing the policy and procedure around this would support them to better understand how to use technology safely and responsibly.

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 meet my needs and is right for me.' (HSCS 1.19).

## Children are supported to achieve 3 - Satisfactory / Adequate

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

### Quality indicator: Nurturing care and support

Children experienced kind and caring interactions from the childminder. They approached the childminder confidently when they needed support, and the childminder responded with warmth. These positive relationships helped children feel comfortable within the setting. A child shared with us: "[I like] getting to see my friends and getting to play with them and that [childminder's name] is very kind". Another parent echoed: "[my child] likes going to [childminder's name] because [they] can play fun games and can spend time with [their] friends. [They] feel safe and happy there".

Snack time did not reflect best practice guidance as children accessed technology while eating on the sofa. Therefore, there were missed opportunities to have a relaxed, sociable mealtime experience around the kitchen table. No handwashing was observed before or after snack, and children were not encouraged to access their water bottles throughout the afternoon. This meant opportunities to support regular hydration and promote healthy routines were missed. Further consideration of effective infection prevention control procedures should be developed. This would ensure that children are protected from the spread of infection and that good hygiene routines are consistently embedded. Strengthening these aspects of practice would contribute to children's health and wellbeing.

We identified some concerns regarding food provision. We found that whilst snack provided took account of dietary needs and preferences, it did not promote an inclusive environment for all children. The childminder should therefore ensure that all food offered aligns with each child's agreed dietary needs and care arrangements, supporting a more inclusive, consistent experience and reflecting healthy eating guidance (**area for improvement one**).

Personal plans were in place but had not been meaningfully reviewed. The childminder was responsive to this feedback and began updating the plans following the inspection visit. Personal plans should clearly identify each child's unique and evolving needs, preferences and interests, along with tailored strategies to support their learning, development and wellbeing (**area for improvement two**).

The childminder had developed positive relationships with parents. A parent told us: "from our first contact, we quickly knew that [childminder's name] was friendly and welcoming". We observed warm exchanges at

pick-up time and an effective handover regarding a child who was feeling slightly unwell. Currently, parents drop off and collect their children at the door. Inviting parents into the home at appropriate times could help strengthen these connections further, enabling them to see the environment and the experiences their children engage in.

### Areas for improvement

1. To support children's health and overall development, the childminder should ensure that snacks and drinks provided are balanced, nutritious and aligned with best practice guidance. This includes giving careful attention to individual dietary requirements, allergies and intolerances. Strengthening this aspect of practice will help create an inclusive, positive mealtime experience where all children feel safe, supported and well cared for.

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).

2. To promote children's health, safety and wellbeing, the service should have a consistent approach to reviewing, recording and updating personal plans, including children's healthcare needs in line with guidance.

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).

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

'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24).

## 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

Leadership	2 - Weak
Leadership and management of staff and resources	2 - Weak
Children play and learn	3 - Satisfactory / Adequate
Playing, learning and developing	3 - Satisfactory / Adequate
Children are supported to achieve	3 - Satisfactory / Adequate
Nurturing care and support	3 - Satisfactory / Adequate

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