

# Cochrane, Dawn Elizabeth Wilson Child Minding

Tranent

**Type of inspection:**  
Unannounced

**Completed on:**  
13 December 2024

**Service provided by:**  
Cochrane, Mrs Dawn Elizabeth Wilson  
Cochrane, Mrs Dawn Elizabeth Wilson

**Service provider number:**  
SP2003906914

**Service no:**  
CS2003013195

## About the service

Dawn Cochrane provides a childminding service from their family home in the Tranent area of East Lothian. The childminder has an assistant to assist in the delivery of the service. This may include occasional sole charge of minded children with written permission from parents/carers. The childminder is registered to provide a care service for a maximum of six children up to 16 years of age.

The service is close to the local primary school and nursery, shops and parks. Children have access to the downstairs living room, kitchen, toilet and there is a secure garden to the rear of the property.

## About the inspection

This was an unannounced inspection which took place on 09 December 2024 between 10:30 and 12:30. Two inspectors carried out the inspection.

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:

- spoke with four children using the service
- considered feedback from five families through an online questionnaire
- spoke with the childminder and their assistant
- observed practice and daily life
- reviewed documents relating to the care of children and the management of the service.

## Key messages

- The childminder and their assistant had a kind and caring approach.
- Positive relationships had been built and children felt comfortable and confident within the service.
- The childminder needed to update their knowledge and practice to ensure they offered an environment that prioritises the safety, wellbeing and development of the children in their care
- Parents provided us with positive feedback regarding their child's care, play and learning
- The childminder's home was comfortably furnished.

## 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?	3 - Adequate
How good is our leadership?	3 - Adequate
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?

## 3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

### Quality Indicator 1.1: Nurturing care and support

With many years of experience in childminding, the childminder and their assistant had cared for numerous children since babies, establishing long-standing relationships with families. Children experienced warm, caring and nurturing approaches from the childminder and their assistant. They had developed good relationships with minded children and knew them well. The childminder spoke about what was important to each child in their care and was attuned to the children's emotional needs. They read their cues, providing cuddles to support emotional wellbeing. As a result, children felt safe and secure. One child told us, "Dawn is kind and is sweet to the babies" and when asked about what the child liked most about the service they said, "Just seeing Dawn".

Parents provided us with positive feedback regarding their child's care as they all confirmed they felt fully involved. One parent told us, "I trust dawn completely with my kids and know they are very well looked after". Whilst we acknowledged this feedback, and appreciated that the childminder knew children's care routines, the childminder did not maintain formal written records beyond information gathered when a child's placement started. To support children's individual needs, the childminder must develop children's personal plans to ensure they are a current reflection of the child. This must include, but not limited to, clear records of how their current wellbeing and development needs are supported. The childminder must review this information with parents at least every six months, or sooner if there is a change in a child's circumstances or wellbeing (see requirement one).

Children were provided with snacks and a packed lunch from home. Mealtimes for older children were relaxed, calm, sociable and safe as they were supervised whilst eating at the dining table in the kitchen. However, during the inspection we discussed with the childminder the safety of younger children eating meals in buggies. We observed that children could not sit fully upright in the buggy and a child got into difficulty when eating their lunch. The childminder shared they did not have enough space for enough highchairs for the number of young children in her care. This was a safety issue and did not encourage independence and social skills at mealtimes. We asked the childminder to reconsider the younger children's lunch experience and provide sufficient equipment to ensure the safe care and feeding of younger children. The childminder was receptive to this and when we returned for feedback they had already considered ways to develop the safety of mealtimes for younger children in the service. We have addressed this in requirement one under Quality Indicator 3.1: Quality Assurance and Improvement are led well, where we have outlined the need for the childminder to enhance their practice to align with best practice standards.

The childminder followed children's individual sleep patterns. We discussed with the Childminder their practice of children sleeping in buggies as this was not considered best practice. We acknowledged the childminder's efforts in ensuring the safety of the children, such as sitting with them on the sofa during nap times or checking on babies sleeping in buggies. To support children to be safe, we discussed with the childminder that they should review the safer sleeping guidance and in consultation with families agree a policy that supports safer sleeping in the service. When we returned to provide feedback, the childminder had already begun preparation to review and implement safer sleeping arrangements. We discussed that it may take time for children to gradually transition to the safer sleeping arrangements and the childminder

had begun consulting families around this. The childminder shared their ideas on developing a policy that would meet best practice guidance (see requirement one under Quality Indicator 3.1: Quality Assurance and Improvement are led well).

There had been no medication administered to any children attending the service. However, we saw that the childminder had the templates for logging children's medication if needed. These were in line with the Care Inspectorate guidance, 'Management of medication in daycare of children and childminding services'.

### Quality Indicator 1.3: Play and Learning

On our arrival in the service children were engaged in play on the carpet area in the living room. We saw children having fun as they played and interacted with each other. They were able to choose from a selection of toys that had been organised in the tubs at floor level. This meant that children were able to freely choose activities from the resources on offer.

Overall, we found planning for individual children's experiences informal. The younger children had ample toys available but not all children experienced learning that was relevant or sufficiently challenging for their stage of development. One parent told us their child, "likes to do puzzles and read books" at the childminder's house. During our visit there was no books available for children. However, the childminder told us that there were books and resources upstairs that could be rotated when needed. We discussed the importance of having books readily available to children and the benefits of this for children's literacy development. This would also ensure children had access to a wider range of resources. Three families said that their child's development was always supported through interesting and fun play experiences. The childminder planned Christmas crafts, visits to the local shop and baking. As a result, children were happy and confident within the service.

Garden access was restricted in December due to Christmas decorations and weather conditions. This limited children's opportunities to play outdoors. A child in the service told us they only go out in the summer. Children accessed the local community each day by being driven in the car to do pick-ups and drop offs at the local school. The childminder told us that children over the age of eight had an opportunity to play in the wider community with parental permission. The childminder should increase opportunities for outdoor play, in all weather types, for children's health and wellbeing. Children should be appropriately dressed for all weather types to maximise their outdoor experiences and to keep them comfortable (see area for improvement one).

Children had constant access to screens all day, this included television for younger children and older children after school had their own screens from home. This took away opportunities for other learning experiences and interactions. The childminder should reduce the amount of time the television is on throughout the day to promote conversation and increase literacy opportunities. The childminder told us that children after school usually choose between crafts at the table or most of them have their own screens to watch. The childminder should follow best practice guidance and limit the length of time children have access to screen time within the service. In consultation with families, they should develop a policy to set out clear expectations around the use of and limits to screen time, online safety and parental permissions. Clear ground rules should be discussed with families (see area for improvement two).

### Requirements

1. By 30th April 2025 the provider must ensure that all children have a personal plan which sets out how their individual needs will be met, as well as their wishes and choices. To do this, the provider must, at a

minimum:

- a) ensure that they understand the purpose of personal plans and are familiar with Care Inspectorate guidance 'Guide for Providers on Personal Planning, Early Learning and Childcare;'
- b) ensure that personal plans are written and regularly reviewed with children and families, at least every six months, and when necessary, to ensure that information is up to date to reflect children's current needs, wishes and choices;
- c) ensure consistent, effective recording of important information in all personal plans, including emergency contact details;
- d) ensure that all personal plans are meaningful, working documents that support children's care and include strategies of support and progress made.

This is to comply with Regulation 5(2)(b)(c) (Personal Plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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).

## Areas for improvement

1. To improve experiences and wellbeing for children, the childminder should increase the opportunities for them to participate in outdoor play and learning throughout the year. This should include opportunities to engage in activities within the wider community. Children should be appropriately dressed for all weather types to maximise their outdoor experiences and to keep them comfortable.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25) and 'as a child, I play outdoors every day and regularly explore a natural environment' (HSCS 1.32).

2. To ensure children are supervised and there is clear procedures on screen time within the service the childminder should develop a policy in consultation with families for the use of screens and the supervision of internet within their service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (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) and 'I am supported to achieve my potential in education and employment if this is right for me' (HSCS 1.27).

## How good is our setting?

### 3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

#### Quality Indicator 2.2: Children experience high quality facilities

Children were cared for in an environment that was homely and welcoming. There was plenty of natural light and ventilation. Children had access to a living room which had patio doors that opened out to an enclosed garden. This was not being used at the time of our visit so we were unable to evaluate the

experiences on offer outdoors. The kitchen and ground floor toilet facilities had recently been refurbished to give the children access to toilet facilities on the ground floor. Spaces were comfortably furnished with sofas and cushions and children enjoyed relaxing in spaces. As a result, children were familiar and relaxed in the home from home environment.

Children had their personal care needs tended to within the service. The childminder's practice of changing children on towels did not follow best practice guidance. We discussed with the childminder the importance of following best practices for nappy changing and hand-washing to prevent infection. The childminder was receptive and made some immediate improvements. This would prevent the spread of infection and keep children safe. We have addressed this in requirement one under Quality Indicator 3.1: Quality Assurance and Improvement are led well, where we have outlined the need for the childminder to enhance their practice to align with best practice standards.

The childminder was caring for young children during the day and provided school aged childcare after school. Children were transported to and from the school in the childminder's car. The childminder had the correct insurance in place and demonstrated that they transported children safely with the use of appropriate car seats.

The childminder told us there had been no accidents in the service for a long time. The childminder said if there was an accident she would record this in her diary and get the parents to sign. This was an informal approach and needs to be reviewed and formalised to ensure confidentiality.

Clear policies and procedures were in place for the storage of information. This ensured the childminder was following relevant data protection legislation and protected children and families' privacy.

## How good is our leadership?

### 3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

#### Quality Indicator 3.1: Quality assurance and improvement are led well.

The childminder had been operating their childminding service for many years and was experienced in minding children. However, the childminder had not kept up to date with current guidance and best practice through professional reading or wider training. While the childminder and assistant worked well together, we found there was room for improvement on how the childminder operated their service. Engaging in more reflective practices, such as regularly reviewing the Care Inspectorate updates and accessing the HUB, would enable the childminder to stay informed about current best practices and regulatory requirements regarding personal plans, nappy changing, mealtimes, safe sleeping and other aspects of early learning and childcare. Adopting this approach to ongoing learning and reflection into their practice would ensure the care provided meets with current standards, promotes the holistic development of each child, and ensures their safety. The area for improvement made at the last inspection asking the childminder to increase their knowledge of best practice had not been met. To support the childminder to improve we have now required that the childminder increases their knowledge of best practice guidance and use this to make the necessary improvements (see requirement one).

The childminder's policies and risk assessments, which informed their practice, needed updated in line with best practice guidance. The updating of these was important to ensure better outcomes for children through the implementation of current, evidence-based practices. To facilitate this, the childminder should use their

membership of organisations such as, the Scottish Childminding Association (SCMA). This would offer the childminder support, guidance, and resources. Such support would enable the childminder to improve and update their policies and risk assessments to support their practice, and offer an environment that prioritised the safety, wellbeing and development of the children in their care (see requirement one).

The childminder confirmed that key information about the service was shared with families, including aims, objectives, policies, and procedures. This helped families to understand the childminder's vision and ensured they were informed about the service provided. The childminder shared a vision of creating a home from home setting that was friendly and caring, and we observed that the childminder was successfully achieving this goal. This was echoed by parents who told us, "The kids are very happy and excited on going and coming home so I'm very happy with the service. Knowing my kids are safe and happy is everything" and "I trust Dawn completely with my kids and know they are very well looked after". Four parents strongly agreed that overall, they were happy with the care and support their child received at the setting. When asked what could be better in the childminding setting, comments from parents included, "Nothing to improve on" and "Overall a very friendly childminder who is flexible to my circumstances". This confirmed the supportive relationships between the childminder and families who expressed peace of mind knowing their child was receiving nurturing care.

Verbal and electronic communication supported information sharing. Families felt involved as they could share their views which informed the care provided. In the information leaflet it included, "I communicate openly with all parents regarding the care of their child. This is done daily, and parents are advised of their child's care and activities during their stay at my home". This enabled a flexible approach which met the needs of families. One parent said, "I just feel I can openly communicate nothing is an issue" and another said, "Communication is always very good".

During the inspection, we alerted the childminder to the conditions of registration for the service, and an error they were making when planning attendance. The childminder should display an up-to-date registration certificate and ensure they adhere to the conditions set out within their registration. The childminder took swift action to address this and provided assurances that going forward they would operate within their conditions of registration. To ensure children are safely cared for in numbers that reflect the childminder's conditions of registration, they should improve their system for recording attendance and allocating placements. This would ensure the wellbeing and safety of children using the service (see area for improvement one).

The childminder was open and receptive to our feedback, acknowledging some areas of their practice required updating. This, and their swift action to address some of our concerns demonstrated a dedication to the development of their setting. Moving forward, this approach coupled with our guidance through inspection and beyond, should help support the childminder to address our concerns and promote better outcomes for children.

## Requirements

1. By April 30th, the childminder must review their policies, procedures and risk assessments to ensure they reflect best practice guidance and prioritise children's safety. Priority must be given, but not limited to, the following:

- a) Nappy changing: Infection prevention and control
- b) Safer sleep practices
- c) Mealtime experiences, particularly for younger children.



This is to comply with Regulation 4(1)(a) and 4(1)(d) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

### Areas for improvement

1.

To ensure children are cared for in a group size that is right for them and to adhere to conditions of registration, the childminder should ensure they take a more formal approach to recording attendance in the service.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which states that: 'If I experience care and support in a group, the overall size and composition of that group is right for me' (HSCS 1.8) and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

### How good is our staff team?

**3 - Adequate**

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

#### Quality Indicator 4.3: Staff Development

The childminder and their assistant had built a strong and effective working partnership over the years. The assistant played a valuable role, particularly during school drop-offs and pick-ups, ensuring these transitions were smooth for children. It was evident that children had formed a genuine bond with the assistant, greeting them with excitement and warmth upon their arrival at the service.

To support the childminder to make the necessary improvements, they need to ensure their assistant was fully informed of any changes to policies, procedures, or practices, along with the reasons behind these updates. This will support the assistant in developing the necessary values, skills, and knowledge to effectively contribute to the provision of high-quality care and learning experiences. By ensuring consistent communication and a shared understanding of expectations, the childminder and their assistant would work collaboratively to create a positive, nurturing environment that promoted the best outcomes for children (see area for improvement one).

The childminder and their assistant kept their first aid training up to date and the childminder held a food hygiene certificate. This helped equip them with the general knowledge to support children in the event of accidents or incidents.

## Areas for improvement

1. To support an approach that ensures children receive consistent, high-quality care and learning opportunities, the childminder should support the assistant to develop the skills, knowledge, and values required to deliver a high-quality service.

This is to ensure 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).

## 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

We recommend that the childminder reflect on her practice in relation to national guidance, in particular: - Getting it Right for Every Child, specifically the wellbeing indicators (2010) <http://www.gov.scot/Topics/People/Young-People/gettingitright/what-is-girfec/children-adult-services/practitioners-info-pack> - Building the Ambition (2015) <http://www.gov.scot/Resource/0045/00458455.pdf> - Pre-Birth to Three (2010) [http://www.educationscotland.gov.uk/Images/PreBirthToThreeBooklet\\_tcm4-633448.pdf](http://www.educationscotland.gov.uk/Images/PreBirthToThreeBooklet_tcm4-633448.pdf) - My Childminding Experience (2017) <http://www.careinspectorate.com/images/documents/4026/Mychildmindingexperience.pdf> - Your Childminding Journey (2017) (<http://www.childmindingjourney.scot/>)

She should use these documents as the starting point for evaluating her practice and identifying areas for improvement, for example, remaining up to date, developing personal plans and providing age appropriate experiences. Referring to websites such as the Care Inspectorate Hub and Education Scotland's National Improvement Hub (<https://education.gov.scot/improvement>) will also support the childminder to see recent examples of guidance in practice.

Other sites such as Play Scotland ([www.playscotland.org](http://www.playscotland.org)) and Minding Kids ([www.mindingkids.co.uk](http://www.mindingkids.co.uk)) may support her to find practical solutions to any practice issues.

National Care Standards Early Education and Childcare up to the age of 16 - Standard 14: Well-Managed Service.

**This area for improvement was made on 22 January 2018.**

### Action taken since then

Self-evaluation could be used to develop the service, and we signposted the childminder to the Care Inspectorate Hub to further support this process. As this report, demonstrates the childminder must update their knowledge of best practice to develop their service and ensure the safety and wellbeing of children in their care. Therefore the previous recommendation had not been met. This is now a requirement in quality indicator 3.1: Quality Assurance and Improvement are led well.

## 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

How good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
1.3 Play and learning	3 - Adequate
How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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