

Helen Collins Childminding Service Child Minding

Edinburgh

Type of inspection:
Unannounced

Completed on:
28 January 2026

Service provided by:
Helen Collins

Service provider number:
SP2013985301

Service no:
CS2017360815

About the service

Helen Collins childminding service is a childminding service provided by Helen Collins. The service is provided from the family home in a residential area in the southwest of Edinburgh. Children have access to the lounge, diner, kitchen and downstairs bathroom. Children also have access to an enclosed rear garden for outdoor play. The service is close to local amenities including green spaces, libraries and local shops.

This service is registered to provide a care service to a maximum of eight children at any one time under the age of 16, of whom no more than six are under the age of 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 the childminder's family.

At the time of the inspection there were two children in attendance, and seven children registered with the service over different days.

About the inspection

This was an unannounced inspection which took place on 26 January 2026 between the hours of 11:00 and 13:15. 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:

- spoke with and observed children using the service
- received digital feedback using an online form from three families
- spoke with the childminder
- assessed core assurances, including the physical environment
- observed practice and daily life
- reviewed documents relating to children's care and development, and the management of the service.

As part of our inspections, we assess core assurances. Core assurances are checks we make to ensure that 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 demonstrated a strong child-centred vision, resulting in positive experiences and outcomes for children.
- Children benefited from a warm, emotionally nurturing environment that supported their wellbeing.
- A relaxed, free-flow environment enhanced children's engagement, and enabled them to make their own choices with confidence.
- The childminder knew each child very well. To further support developmental progress, they should consider additional ways to monitor and track children's development over time.
- Children's personal plans should be kept up-to-date and reviewed within required timescales, to ensure they remain relevant and effective.

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	4 - 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

Quality indicator: Leadership and management of staff and resources

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.

The childminder had a clear vision for the service, centred on children being happy, confident and eager to attend. This vision aligned with the aims outlined in written documentation and was evident in daily practice. Children presented as relaxed and content, reflecting the childminder's warm and responsive interactions. Their strong understanding of each child as an individual, including their preferences and routines, enabled them to provide care that was tailored, predictable and reassuring. This supported children to feel safe, secure and valued.

The clarity of the vision was further demonstrated through the way children's views shaped the rhythm and flow of the day. A flexible, child-led approach ensured that children were active participants in their own experiences. As a result, children confidently directed their play, and made meaningful choices in their play and learning. This meant children were empowered and well-supported.

Families were involved in some aspects of the service, particularly settling in processes, which were adapted to meet individual needs. The childminder maintained communication about children's experiences throughout the day using an App, as well as giving updates and daily conversations at drop off and pick up. They continued to work collaboratively with families on matters such as healthy eating and routines, helping to promote continuity of care and positive outcomes for children in line with their vision. To further demonstrate how feedback informed developments in the service, the childminder could gather more structured feedback from families to identify what was working well, and any potential areas for improvement.

The childminder's self-evaluation had been largely informal, drawing on conversations with families to adapt arrangements for individual children. This reflective approach had already led to positive outcomes, including supporting a previously unsettled child to become more confident and secure. The childminder had also started to use checklists from the new improvement framework to review elements of their practice. Moving forward, the childminder could now use this information to create a manageable improvement plan, that provides a structured and measurable approach to ongoing continuous development. This would strengthen their ability to track progress and evaluate the impact of changes, ensuring children continue to experience high-quality and continually improving care.

Some quality assurance processes were leading to improvements, such as the regular review of risk assessments. This supported children's safety. However, other key documents such as policies, personal plans and the service's vision and aims had not been reviewed for some time, which limited their relevance to current practice. The childminder should further develop quality assurance systems to ensure timely reviews of documentation remained current, and that required notifications were submitted to the Care Inspectorate. (See area for improvement 1).

Areas for improvement

1.

To enhance outcomes for children, and to ensure documentation, guidance and legislation remain current and relevant, the provider should develop effective quality assurance systems.

This should include, but is not limited to:

- considering the use of a quality assurance calendar or diary, to plan and organise timely reviews
- regularly reviewing documentation that supports high-quality outcomes for children, particularly when children's circumstances change, or when new children join the service
- updating knowledge and understanding of the notifications that must be submitted to the Care Inspectorate.

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

"As a child, I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance systems." (HSCS 4.19).

Children play and learn 4 - Good

Quality indicator: Playing, learning and developing.

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.

Children were happy, settled and engaged in their play because the childminder had created a nurturing, calm and responsive environment. The childminder demonstrated understanding of child development, which came through naturally in the way they supported children's play. Children's engagement was strengthened because of the freedom and space to play in ways that suited them. Joyful moments, including singing and dancing to nursery rhymes, enriched children's daily experiences.

These experiences contributed positively to early communication development, offering opportunities to hear language, follow instructions and benefit from praise and encouragement. The inclusion of a child's favourite song at the suggestion of a parent demonstrated thoughtful continuity between home and the setting, and supported children's sense of familiarity, belonging and joy.

Children's ability to make independent choices was supported by a thoughtfully organised environment. Resources were accessible at floor level, and soft furnishings supported comfort and shared stories. The childminder responded to children's preferences in a relaxed, encouraging way, which helped sustain their interest and confidence. Early social and emotional skills were promoted through warm and caring role modelling. This included gentle reminders about sharing, and calm support during minor disagreements.

The childminder was attuned to individual personalities and preferences. For example, when a child preferred solitary play, they were supported sensitively and without pressure, while still being offered chances for connection. When the childminder joined children's play, it created meaningful moments of shared thinking that supported early cognitive development.

To further promote children's creativity, curiosity and problem-solving skills, the childminder should consider increasing the range of sensory, open-ended and loose parts materials. The childminder had recognised a child's strong interest in sensory play, including fascination with water and tactile materials. There was potential to extend this interest more intentionally, to enhance learning and increase a sense of wonder in play. While water play was offered twice weekly, increased responsiveness to children's cues every day could support richer learning experiences.

To support further progress in children's communication and language development, we signposted the childminder to 'Let's Talk,' (NHS Lothian Speech and Language Therapy Early Years 2026). The childminder had begun to use simple signs during routines and interactions, and there was good potential to build on this practice. Expanding the use of signs, song or object signifiers, along with visual cues, could offer children additional support and strengthen their early communication skills.

The childminder had planned experiences around each child's interests and used a diary to support informal planning. Children's learning and development had been enhanced through planned regular trips into the local community, such as attending toddler groups and exploring different parks. These experiences offered children a broad range of learning opportunities and supported physical development, including activities like jumping and balancing. While this approach promoted responsive and child-centred planning, there was scope to make children's learning and achievements more visible.

Recording small observations of learning or development would help to track progress over time, and support clearer assessment. Developing a routine approach to tracking development would enable the childminder to identify meaningful next steps, provide appropriate challenge or support, and share children's progress more effectively with families. (See area for improvement 1).

Areas for improvement

1. To further promote individual progress in children's learning and development, the childminder should develop more consistent approaches to observing, planning for and tracking children's learning. This would enable the childminder to identify meaningful next steps, provide appropriate challenge or support, and share children's progress more effectively with families.

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

"My care and support meets my needs and is right for me." (HSCS 1.19).

Children are supported to achieve 4 - Good

Quality indicator: Nurturing care and support

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.

The childminder demonstrated consistent warm and nurturing practice with all children throughout their day. They knew each child well and followed individual care routines closely. Children felt loved and valued, because interactions were consistently kind and compassionate. If a child became upset, or had a minor fall, the childminder remained calm and provided gentle, reassuring support. This steady and reassuring approach helped children feel safe, supported and confident, and able to rely on the childminder's controlled responses to regulate their own emotions. One family told us, "Helen is always positive, supportive, caring and nurturing to our child."

Children felt secure in the childminder's care. They were relaxed, playful and confident as they moved around the environment. The settling in process had been thoughtful and based on the needs of each child and family, allowing children to build trust at their own pace. The childminder should now build on this practice to strengthen daily transitions, such as getting ready for meals, or preparing to go outdoors. Although the childminder communicated verbally, some children may have benefited from additional cues, such as simple signs, objects or songs to help them anticipate what would happen next. This predictability would support them to further understand smaller changes in their day and to feel more in control. We signposted the childminder to 'Realising the Ambition' (Education Scotland, 2020).

The balance of group and individual play worked well. Children had opportunities to spend time together, supporting social and emotional development, and also to play on their own, which helped them build regulation skills. Lunchtime was a positive, social experience where the childminder encouraged independence at a level suited to each child. There were natural opportunities to extend this independence further, such as allowing children to help pour drinks, clear plates or help with simple food tasks. This would support children's sensory interests, confidence, sense of responsibility and fine motor development.

Care routines were carried out respectfully without being rushed. Personal care and sleep routines were individualised according to each child's needs, showing that their preferences and views mattered. Personal care routines also protected children's dignity and followed good infection prevention measures, such as regular handwashing which helped to keep children safe. Risk assessments were in place and had clear review dates, demonstrating that safety considerations were being kept up-to-date.

Personal plans contained useful baseline information, which was a positive foundation. However, they were not being used effectively to support ongoing care and development, as information captured was not current. To strengthen the childminder's nurturing approach, and support consistent, individualised care, personal plans should be updated at least every six months in partnership with families. Using the personal plan as a live, working document will help track children's routines and preferences, and promote effective partnership working to support children's ongoing development. (See area for improvement 1).

Areas for improvement

1. To support individualised care, the childminder should ensure children's personal plans are current, accurate and used as live, working documents that clearly outline each child's needs. Strengthening these approaches will promote continuity of care, enhance partnership working with families and support children's wellbeing.

This should include, but is not limited to:

- recording all essential information
- reviewing personal plans within legislative timescales, or sooner where required
- updating them to reflect children's routines, needs, interests and effective soothing strategies.

This is to ensure 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) and 1.23 "My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected." (HSCS 1.23).

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	4 - Good
Playing, learning and developing	4 - Good
Children are supported to achieve	4 - Good
Nurturing care and support	4 - Good

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