

2796475

Registered provider: Azalea Care Ltd

Monitoring visit

Inspected under the social care common inspection framework

Information about this children's home

This home is owned by a private organisation. It provides care for up to 6 children with physical or learning disabilities.

The manager registered with Ofsted in October 2024. The manager is currently completing a level 5 qualification.

At the time of the inspection, 2 children were living at the home.

Inspection date: 19 December 2025

This monitoring visit

The home was inspected in November 2025 with a judgement of inadequate. There were compliance notices issued under regulations 12 and 13 of The Children's Homes (England) Regulations 2015. Following this inspection, additional concerns were raised to Ofsted about the safety of the children at the home. A monitoring visit was undertaken.

During the visit, we identified serious and widespread concerns in relation to the care and protection of children and the leadership and management of the home. As a result of the serious and widespread concerns identified, the registration of the home has been suspended.

Leaders and managers have failed to promote one child's rights. Staff have regularly used a measure of control by administering medication without clear processes or guidance in place. Staff have not recorded the details of the situation or circumstances leading up to the use of the medication, or the methods used or steps taken to avoid the need to use the measure. There have been no detailed staff recordings to include the staff members' details or rationale for administering the medication. Nor has the effectiveness or any consequences for the child from the use of the medication been noted. There has been no manager's oversight to determine the appropriateness of this measure or to identify any themes and trends

associated with the administration of the medication. The child is at risk of iatrogenic effects or conditions. The child has experienced low energy and fatigue, and as a result, their engagement with education has decreased.

Leaders and managers have not provided oversight of one child's physical health care needs. The child has complex health needs with a substantial history of significant health concerns. This child experienced a physical health symptom regularly for 17 days. Although medication was administered, no medical guidance was sought during this time. The child was taken to accident and emergency and was admitted to hospital for medical assessment when the child's symptoms increased.

Leaders and managers have not ensured that staff have the knowledge or skills or are provided with the correct guidance to administer medication to children. A medication error has occurred when a member of staff administered an incorrect dose of a prescribed medication to a child. The correct dosage was not recorded in all locations that staff would view. The child's behaviour changed following this error. Staff consulted medical professionals and inappropriately requested to administer additional medication. Medical professionals instructed staff not to do this, and an ambulance was arranged to transport the child to hospital for assessment.

Requirements from the last inspection were not explored. These have been restated.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
24/11/2025	Full	Inadequate
23/04/2025	Full	Good

What does the children's home need to do to improve?

Statutory requirements

This section sets out the actions that the registered person(s) must take to meet the Care Standards Act 2000, The Children's Homes (England) Regulations 2015 and the 'Guide to the Children's Homes Regulations, including the quality standards'. The registered person(s) must comply with the given timescales.

Requirement	Due date
*The protection of children standard is that children are protected from harm and enabled to keep themselves safe. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— assess whether each child is at risk of harm, taking into account information in the child's relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child; help each child to understand how to keep safe; have the skills to identify and act upon signs that a child is at risk of harm; take effective action whenever there is a serious concern about a child's welfare; and that the home's day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm. (Regulation 12 (1) (2)(a)(i)(ii)(iii)(vi)(b))	5 January 2026
The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that— helps children aspire to fulfil their potential; and promotes their welfare. In particular, the standard in paragraph (1) requires the registered person to—	5 January 2026

lead and manage the home in a way that is consistent with the approach and ethos, and delivers the outcomes, set out in the home's statement of purpose; ensure that staff have the experience, qualifications and skills to meet the needs of each child; ensure that the home's workforce provides continuity of care to each child; understand the impact that the quality of care provided in the home is having on the progress and experiences of each child and use this understanding to inform the development of the quality of care provided in the home; demonstrate that practice in the home is informed and improved by taking into account and acting on— feedback on the experiences of children, including complaints received; and use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(a)(c)(e)(f)(g)(ii)(h))	
The care planning standard is that children— receive effectively planned care in or through the children's home; and have a positive experience of arriving at or moving on from the home. (Regulation 14 (1)(a)(b)) In particular, ensure that children's moves into the home consider the significance of all known risks and vulnerabilities for children.	5 January 2026
The children's views, wishes and feelings standard is that children receive care from staff who— develop positive relationships with them; engage with them; and take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives.	5 January 2026

In particular, the standard in paragraph (1) requires the registered person to—

ensure that staff—

ascertain and consider each child's views, wishes and feelings, and balance these against what they judge to be in the child's best interests when making decisions about the child's care and welfare;

help each child to express views, wishes and feelings;

help each child to understand how the child's views, wishes and feelings have been taken into account and give the child reasons for decisions in relation to the child;

regularly consult children, and seek their feedback, about the quality of the home's care;

help each child to understand how the child's privacy will be respected and the circumstances when it may have to be limited;

help each child to prepare for any review of the child's relevant plans and to make the child's views, wishes and feelings known for the purposes of that review; and

make each child aware of and, if necessary, remind them of each of the matters in sub-paragraph (d)(i) to (iii);

ensure that each child—

is enabled to provide feedback to, and raise issues with, a relevant person about the support and services that the child receives;

is given appropriate advocacy support;

ensure that an explanation is given to each child as soon as reasonably practicable after the child's arrival about—

what advocacy support or services are available to the child, how the child may access that support or those services and any entitlement the child may have to independent advocacy provision; and

ensure that the views of each relevant person are taken into account, so far as reasonably practicable, before making a decision about the care or welfare of a child. (Regulation 7 (1)(a)(b)(c) (2)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(b)(i)(iii)(d)(iii)(e))	
The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. (Regulation 23 (1)) In particular, ensure that staff understand how to administer medication safely and have the knowledge and skills to do this safely.	5 January 2026
The registered person must ensure that all employees— receive practice-related supervision by a person with appropriate experience. (Regulation 33 (4)(b)) In particular, ensure that staff receive good-quality reflective supervision in line with the home's workforce development plan and policy.	5 January 2026
The registered person must prepare and implement a policy ("the behaviour management policy") which sets out— how appropriate behaviour is to be promoted in the children's home; and the measures of control, discipline and restraint which may be used in relation to children in the home. The registered person must keep the behaviour management policy under review and, where appropriate, revise it. The registered person must ensure that— within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes— the name of the child; details of the child's behaviour leading to the use of the measure; the date, time and location of the use of the measure;	1 February 2026

a description of the measure and its duration; details of any methods used or steps taken to avoid the need to use the measure; the name of the person who used the measure ("the user"), and of any other person present when the measure was used; the effectiveness and any consequences of the use of the measure; and a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure; within 48 hours of the use of the measure, the registered person, or a person who is authorised by the registered person to do so ("the authorised person")— has spoken to the user about the measure; and has signed the record to confirm it is accurate; and within 5 days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure. (Regulation 35 (1)(a)(b) (2) (3)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c)) In particular, the registered person must ensure that when medication is used as a measure of control, staff have clear guidelines to understand when to administer. The registered person must ensure that records are kept of all measures of control, including medication administration and that there is always leaders' and managers' oversight of all measures taken.	
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*These requirements are subject of a compliance notice.

Recommendation

- The registered person should ensure that staff provide a nurturing environment that is welcoming. In particular, ensure that repairs and general maintenance to the home are carried out without delay. ('Guide to the Children's Homes Regulations, including the quality standards', page 15, paragraph 3.7)

Information about this inspection

The purpose of this visit was to monitor the action taken and the progress made by the children's home since its last Ofsted inspection.

This inspection was carried out under the Care Standards Act 2000.

Children's home details

Unique reference number: 2796475

Provision sub-type: Children's home

Registered provider: Azalea Care Ltd

Registered provider address: Tax Assist, Unit 6, Minerva Business Park, Lynch Wood, Peterborough PE2 6FT

Responsible individual: Lyana Sinclair Russell

Registered manager: Peter Halaj

Inspectors

Sarah Cooper, Social Care Inspector
Deirdra Keating, Regulatory Inspection Manager

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