Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Bay Tree House (WXM) Limited

Bay Tree House, 99 Norman Road, Wrexham, LL13 7BG

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The inspection visit took place on 19/05/2026

Service Information:

Operated by:	Bay Tree House (WXM) Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	46
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

Well-being	Good
Care & Support	Good
Environment	Good
Leadership & Management	Good

Summary:

Bay Tree House is in a quiet residential area of Wrexham and provides accommodation and care for adults with personal care needs and living with dementia.

At this inspection, we found many people experience good well-being outcomes, supported by kind staff and a warm atmosphere. Staff interactions are friendly, meaningful, respectful and in line with people's plans. Positive relationships between staff and people contribute to a relaxed, inclusive environment. We also found safe care practices, appropriate safeguarding processes and improving systems for medication management.

People live in a comfortable, homely environment suited to their needs, with personalised rooms and communal spaces supporting well-being and social interaction. The provider has effective health and safety systems and is taking steps to make improvements they have identified across the home environment.

Governance and oversight are effective, supported by a positive culture, strong senior leadership support for management and a committed staff team. A new manager started during the inspection period and is already embedding positive improvements across the service. Staff told us they enjoy working in the home and feel well supported by the provider.

Findings:

Well-being — Good

People benefit from living in a welcoming and relaxed atmosphere, where care staff interact with them in a genuine and engaging way. We saw respectful, calm and well-paced supportive interactions and conversations between care staff and residents. These everyday interactions support people to maintain positive relationships that are important to them and feel part of the community. People told us care staff are friendly and approachable, reinforcing this positive culture.

People are supported to feel safe in their home. Care staff demonstrate confidence in raising concerns, and safeguarding processes are used appropriately to protect people from harm. This helps create a secure environment where issues are identified and acted upon promptly. Systems for gathering people's views are not yet fully effective, however. Although people are listened to through informal conversations and via resident meetings, structured approaches to capturing feedback, including for those with communication needs are being developed. A new manager has been appointed and will be taking this forward.

People can take part in planned activities and events, including visits from entertainers, organised games, singing and dancing, as well as planned social occasions in the coming months. These opportunities support people's emotional well-being, inclusion and a sense of connection with others. People are asked for feedback about the activities they would like to see. In response, the provider has begun sourcing mobile petting zoos and therapy animals to visit the home.

People's day-to-day experiences show that choice and control are not consistently promoted for people. While systems are being introduced to support more "in the moment" decisions, some people told us they are not always offered options at the time they need support. Some people described meals being brought to them without discussion, or at times that did not always reflect their preferences. We saw occasions where people were supported to eat in lounge areas using low tables, which affected their comfort and independence at that time. These experiences show further opportunities for the provider to embed person-centred approaches more consistently, so people are actively involved in decisions about their care and daily routines. The provider has introduced mealtime changes, including show plates, visual aids and suitable furniture, to support "in the moment" choices and dignified dining in lounge areas.

The service environment supports people's comfort and sense of belonging. Many people describe the home as welcoming and homely. Some aspects of the environment, including worn furnishings and décor, affect how people experience their surroundings. Although this does not detract from the overall warmth of the home, they may limit people's pride in their living space. The provider is taking steps to improve the environment, and to further enhance people's well-being by creating surroundings that better reflect a high-quality, personalised living environment.

Care & Support — Good

Many people receive appropriate and effective care from staff who know them well and treat them with kindness. Care staff support people respectfully and work together to meet people's needs. Much of the care we saw was person-centred, with staff using their knowledge of people to anticipate and respond to people's needs. However, some interactions were more task-focused, and care staff did not always recognise the smaller details that can affect people's experience of care. The provider is aware of this and of the importance of recognising and addressing these details to make care entirely individualised and enhance people's experience and well-being. The provider has identified a stronger management presence will help care staff build confidence and to recognise more opportunities to provide consistently person-centred care. A new manager is due to start following our inspection visits and will oversee this work.

Care plans are personalised and help staff understand people's needs, routines and preferences. Care staff spoke confidently about people's support needs, and we saw they were familiar with people's preferred routines. The provider told us the new manager will further develop care plans by getting to know people and meeting with them, their representatives and relatives. This will help ensure care plans include richer detail about people's life stories, preferences and how they wish to be supported. Risk assessments are individualised, provide clear guidance for safe care and are reviewed regularly, and when people's needs or risks change. Safeguarding concerns are recognised, recorded and escalated appropriately. Incident records show staff respond promptly and take suitable action to reduce risks to people.

Medication management arrangements are improving. Following the most recent external audit, the provider has introduced regular audits, refresher training and competency checks for staff who administer medicines. This supports safer practice and reduces risk. Staff we spoke with understood medication processes.

Infection prevention and control arrangements are effective. The service maintains cleaning routines, staff use appropriate protective equipment, and the provider has arranged deep cleaning of flooring, soft furnishings, sofas and chairs. People told us their rooms are "*nice and clean*", which reflected what we saw. The service has a level 5 food hygiene rating. Some worn furnishings, wall decorations and scuffed paintwork reduce how well some areas can be cleaned and affect the appearance of the home. The provider is taking action to address this and has employed a contractor to deep clean furniture, and decorating work is ongoing.

Environment

Good

People live in an environment that is comfortable and welcoming, and which supports their well-being. People told us they feel comfortable living at the service, and we saw that bedrooms are often personalised and contain personal possessions, photographs, books and furniture that hold importance for people.

The service has suitable communal areas where many people spend time with others or take part in activities and meet with visitors. There are two large lounges with comfortable seating, sofas and family-style dining tables. A separate quieter lounge, also used as a library space, gives people another place to relax and watch movies. A café-dining area has patio doors leading to an enclosed courtyard at the centre of the service. The courtyard is decorated with artistic murals of plants and bicycles, providing a safe and pleasant outdoor space and outlook from the dining area. Staff use the kitchenette in the café-dining area to prepare drinks and refreshments for people between meals. People can also access a lawned garden area from the quieter lounge. This is secure, with fencing and a locked gate to help keep people safe. These spaces support social interaction, choice and a positive living environment.

However, we saw parts of the environment are tired and require improvement. Decoration, furnishings and some fixtures show signs of wear, which affects the overall quality and presentation of the home. These issues do not relate to cleanliness but to upkeep and maintenance. Systems to identify and address environmental issues have not always been consistently applied. This has resulted in delays in addressing maintenance and refurbishment needs over time. However, we saw these systems are in place now, with a maintenance team employed to handle day to day repairs, some minor decorative work, and complete routine health and safety checks. Records in the home show the new systems are working well to identify issues and prioritise them. The provider has plans to refurbish the service, and maintenance staff have begun working through a prioritised list of areas needing attention, for example corridors where wallpaper needs replacing. The provider is aware how important it is that any improvements are made without causing too much disruption to people's lives.

Despite the decorative wear and tear issues, the environment retains a home-like and pleasant feel, which is important to people's well-being. People have access to the equipment they need, which is serviced and maintained appropriately. We saw staff receive training in health and safety matters and this is regularly updated, including ensuring fire marshals and first aid trained staff are on shift.

Leadership & Management — Good

People achieve good outcomes because the service has positive leadership, a supportive culture and appropriate governance arrangements in place. The provider is working to strengthen consistency and sustain improvement, so outcomes remain good for people. Senior leaders provide effective oversight and have taken prompt action to address issues identified in recent months. Records of their oversight show they have driven improvements and supported the service to respond to concerns, safeguarding issues, and day to day operational issues. The home has been without a permanent manager for some time. Interim leaders have provided good consistency and guidance for staff, and the new permanent manager will strengthen day-to-day leadership across the service. Staffing arrangements generally support the effective delivery of care. Rotas reflect an appropriate skill mix and good staffing levels, and staff are deployed in a way that enables people's needs to be met. Records and oversight systems are still becoming embedded following recent changes in management. We found some gaps in the consistency of audits and monitoring activity. Some recruitment and training records also did not always clearly evidence that all required checks had been completed, or that learning had been undertaken in a timely way. The provider has recognised these areas and has begun strengthening governance systems. This includes improving the frequency of audits, enhancing oversight of training and staff competencies, and introducing clearer monitoring arrangements. These actions support greater accountability and will help ensure systems remain consistent, effective, and focused on improving outcomes for people over time.

The service has a positive and supportive culture. Staff are welcoming, open and confident in their interactions with visitors and visiting professionals. They told us they feel able to raise concerns and are supported to do so. This helps issues that may affect people's well-being to be identified and addressed early. Leaders, including interim leaders, have shown appropriate oversight of safeguarding and medication management. When concerns have been identified, they have acted, including escalating matters to external agencies and developing action plans.

Records show the provider follows safe recruitment processes. New staff complete induction and shadowing following appropriate vetting to ensure they are suitable for the role. The provider routinely checks Disclosure Barring Service (DBS) information for permanent staff, as well as sponsorship and right to work in the UK. Staff are registered with Social Care Wales, the workforce regulator where required.

Staff receive training to meet people's needs. This includes practical in-house training and online learning. Training is refreshed regularly or when new needs are identified. Staff told us they feel well supported by the provider and by the interim management arrangements. They were positive about changes being made to develop the service and said they felt supported with their own professional development too.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

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