Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Cherry Tree Care Home Limited

Cherry Tree Care Home, High Street, Coedpoeth, Wrexham, LL11 3UF

01978759925

www.sferacare.co.uk

The inspection visits for this service took place between 09/06/2026 and 10/06/2026

Service Information:

Operated by:	Cherry Tree Care Home Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	37
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:

People living at Cherry Tree Care Home receive good care and support from trained staff who treat them with kindness, dignity and respect. We saw warm, friendly interactions and people being offered choices throughout the day. People can take part in social and recreational activities, and residents and relatives speak positively about the care provided. They describe staff as caring and management as responsive and approachable.

Since the last inspection, the service provider has made sustained improvements to staffing, supervision, training, medication management and the culture within the home. Staff told us they feel supported by managers and listened to when they raise concerns.

The home is welcoming and comfortable, but some maintenance and decoration issues still need attention to ensure the environment consistently meets people's needs. Managers and the provider are continuing to address oversight issues identified at the last inspection; however, records do not consistently evidence how improvement actions are identified, assigned, completed, evaluated or reviewed for effectiveness. The service has improved since the last inspection, and we have reflected this in ratings awarded. However, further improvement is needed to show consistently positive outcomes for people from a good environment, governance, and oversight.

Findings:

Well-being — Good

People experience care that promotes dignity, choice and well-being. During our visit we saw care staff interacting warmly and respectfully with residents. Care staff offer people choice throughout the day, using their knowledge of individuals to support decision-making where people have difficulty communicating their wishes directly. People told us staff are kind, responsive and provide support when needed. Relatives describe care staff as caring and compassionate and speak positively about the support provided during periods of change, grief and transition into residential care.

Residents are supported to maintain interests and engage in activities. Records showed a varied programme of opportunities including music, exercise, games, reminiscence activities, social events and one to one activities. We saw people taking part in bingo, chair-based exercises, music and social interactions. Care staff supported participation in different ways according to individual needs and abilities. The manager told us that exercise and movement activities have contributed positively to people's mobility and confidence.

People benefit from monitoring and support to maintain their health. Monthly weight monitoring and analysis take place, and healthcare professionals are involved when required. We saw evidence of district nurse involvement and ongoing monitoring of health needs. Care staff demonstrated their understanding of safeguarding responsibilities and were able to explain how concerns would be reported. They told us they feel listened to and confident in raising issues with the manager as they arise.

Although there have been improvements since the last inspection and outcomes for people are positive overall, opportunities remain to further improve how personal histories, preferences and life experiences are recorded and used within the service to inform person-centred care delivery. The provider supports the Active Offer of Welsh by making information about the service available in Welsh and by recognising Welsh culture through celebrating national festivals, sporting events and holidays. However, community inclusion and meeting people’s spiritual or cultural preferences, and environmental improvements are still required. These issues have the potential to affect people's experience of living in the home if not addressed fully. The provider continues to work on developing these areas.

Care & Support — Good

People receive care and support that is tailored to their individual needs. The care plans we reviewed covered key areas of support and were underpinned by individual risk assessments. Care staff know people's plans and can access them electronically using handheld devices, on which they record what support they provide. Records we saw show people receive care and support in line with their plans and care staff support them in ways that reflect their individual preferences and routines. Daily care records also demonstrate that care is provided consistently and that staff respond appropriately when people's needs change. Family members are involved in planning and reviewing care and support where appropriate.

People's nutritional and healthcare needs are monitored. Weight monitoring systems are in place, and records demonstrate regular review and analysis to ensure people remain healthy. Staff work with healthcare professionals, including district nurses and general practitioners, to support people's health needs. Mealtime observations showed a relaxed atmosphere where people could eat at their own pace and choose where they wished to dine. Alternative meal choices were available and meals were attractively presented.

Medication management arrangements are good and keep people safe. Regular audits are completed, and staff competency assessments are undertaken to ensure their practice remains safe. The manager ensures learning is taken from external audits of medication management and if medication related incidents occur. We saw records of detailed routine auditing and monitoring processes, supported by staff training and oversight from leadership in the service. Infection prevention and control processes have improved, with personal protective equipment readily available and in use. The home was being inspected by environmental health on the day we visited and was awarded a good food hygiene rating.

Some aspects of care planning require further development. We found examples of incomplete biographies, inconsistencies within care records and care plans that would benefit from more detailed information about people's preferences, routines and support strategies. End-of-life planning was not consistently recorded. The manager and leaders in the service are aware and working to improve this. This is not currently affecting the quality of care and support people receive?

Environment

Good

People live in an environment that is secure, comfortable, welcoming and decorated in a homely and pleasant style. The home is split in two on the ground floor and connected on the first floor by a communal area that provides dining and seating space and can be used to meet with visitors if people prefer not to use their rooms. People personalise their rooms with photographs, ornaments and soft furnishings that reflect their individual preferences. The main communal areas are on the ground floor, and we saw they are clean, comfortable, and contain plenty of seating and space for people to socialise and relax. The lounge and dining room layouts on both sides encourage social interaction while also providing quieter areas for privacy. People also have access to shared outdoor spaces which are secure and accessible from main living areas on both sides of the home.

Systems are in place to support people's safety and sense of security. Access to the building is controlled through secure arrangements and environmental risk management systems were in place. Visitors must sign a logbook as they enter and leave the premises; this is essential for fire safety and tracks who is in the building. We saw servicing and maintenance arrangements are in place for key equipment and facilities in the home, including fire safety systems, hoists, lifts and call bell systems. Fire safety arrangements are improving, although additional staff training and continued monitoring were identified following a recent drill. The manager is taking action to address this.

The provider has made good progress in relation to deep cleaning of communal areas since the last inspection. We saw evidence of deep cleaning in several areas of the home and saw systems for identifying and recording and actioning of repairs and maintenance issues. Some environmental issues remain since the last inspection. Issues across the home include worn flooring in some communal areas and decorative repairs and refurbishment required for some bedrooms. While leaders are aware of these matters and have plans to address them, further progress is required to ensure the environment consistently supports people's well-being, comfort and safety. At the last inspection in in December 2025, the rating awarded for environment was ‘Requires improvement’. Having considered the progress made to date, the improvements still required, and the provider’s plans to address them, on balance we consider outcomes for people in relation to the environment are improved and the environment is now rated as ‘Good’. We expect the provider to have sufficiently addressed the remaining improvements at the next inspection.

Leadership & Management — Good

The service has experienced positive changes in leadership and management since previous inspections. Staff, relatives and external professionals describe a more positive culture within the home. Staff told us they feel supported, listened to and valued by the manager and provider. We reviewed records of regular staff meetings, improved supervision arrangements and a strong focus on communication, teamwork and improving outcomes for people.

The provider has strengthened recruitment, supervision and training arrangements for staff. Staff files demonstrate safe recruitment practices, and supervision records show staff receive regular support from the manager, including consideration of their wellbeing. Staffing levels have stabilised, and agency use is much reduced. The atmosphere throughout the home is calm and relaxed, and staff work at the pace of the people they support. People's needs are met in a timely manner by good numbers of regular staff, including when agency staff are used, who are familiar to people. This supports consistency and continuity of care for people.

The provider has implemented a range of regular audits covering areas such as medication management, infection prevention and control, accidents and incidents, safeguarding, weight monitoring and health and safety. Oversight visits from leaders take place regularly and reports identify areas requiring improvement. This demonstrates a commitment to monitoring the quality of the service.

At the last inspection in December 2025 Leadership and Management was rated as 'Requires improvement' because of issues with quality assurance systems oversight of the RI (responsible person in charge of this service). We raised these issues as areas for improvement at the last inspection. Despite progress made since the last inspection, we saw governance and oversight arrangements require further strengthening. Oversight reports identify concerns and revisit previous issues, but do not consistently demonstrate clear action planning, completion of actions, evaluation of effectiveness or sustained improvement. A quality of care review has not yet been completed in line with the regulations and there was no registered RI in post at the time of our inspection visit. While there is evidence the prospective RI is actively overseeing the service and driving improvements, regulatory requirements relating to oversight, quality assurance and evidencing outcomes are not fully met still. These matters do not appear to be having an impact on people, and actions taken to date by the provider and prospective RI are reducing risks to their wellbeing. However, further improvement is needed to ensure governance systems consistently support high-quality care and positive outcomes. Therefore, on balance, and having considered all the information and evidence gathered at this inspection, we have decided that leadership and management are now rated as 'Good'. We expect the provider to have addressed these issues at the next inspection

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.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
People are at risk of harm because the Responsible Individual has not ensured regular and effective oversight of the service. Issues identified by the provider, such as environmental hazards, staff training gaps, and care planning deficiencies, have not been addressed in a timely manner, placing residents' well-being at risk.	26/11/25
People are at risk of harm because the provider has not ensured a robust system for reviewing and improving the quality of care and support. The absence of a formal quality of care review and inadequate analysis of trends and outcomes have resulted in persistent risks to residents' well-being not being address effectively or in a timely manner.	26/11/25
People may not achieve positive outcomes because the building and environment are not well maintained, and the environment is not consistently clean or safe. Improvements are required to ensure the premises support residents' well-being and dignity.	26/11/25

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

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