

Cherry Tree Court Care Home Service

Westcoats Road
Cambuslang
Glasgow
G72 8AB

Telephone: 01416 420 021

Type of inspection:
Unannounced

Completed on:
8 January 2026

Service provided by:
The Richmond Fellowship Scotland
Limited

Service provider number:
SP2004006282

Service no:
CS2009194187

About the service

Cherry Tree Court is registered as a care home to support 11 adults with learning disabilities, mental health and physical and sensory impairments. The provider is The Richmond Fellowship Scotland.

The home is situated in the town of Cambuslang. It has easy access to local amenities and transport links. The service aims to support people to develop their independent living skills and social inclusion in the local and wider community. People are supported with all aspects of their health and wellbeing and enabled to participate in a range of activities in order to reach their full potential.

The care home is a single level property and has 11 self-contained flats all with en suite bathing and/or shower facilities adapted to people's needs. The flats include kitchen and living space and are based in three separate court yards. The courtyards are separated with secured corridors, and each provide open air communal space.

There is an enclosed garden to the rear of the property which people can access. There are car parking spaces to the front of the property.

At the time of the inspection there were 11 people living in the home.

About the inspection

This was an unannounced inspection which took place 06-08 January 2026 between 08:00 and 17:00 hours. Feedback was provided on 08 January 2026. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about the 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 people using the service, for people unable to express their views, we observed interactions with staff and how they spent their time
- spoke with four relatives
- spoke with 14 staff and management
- observed practice and daily life; and
- reviewed documents.

Key messages

- People experienced kind, respectful care and strong, trusting relationships with staff.
- Referrals and partnership working supported people's health and wellbeing.
- People achieved personal goals and maintained meaningful connections in the community, through activities and family involvement.
- Restrictive practices were regularly reviewed and reduced, promoting dignity and choice.
- Environmental needs being actioned in a timely manner should be improved.
- We have made one area for improvement as a result of this inspection.

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 well do we support people's wellbeing?	5 - Very Good
How good is our setting?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

Quality indicator 1.3: People's health and wellbeing benefits from their care and support

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People were consistently treated with kindness and respect. We observed warm, positive interactions and strong relationships between staff and those they supported. People benefited from being supported by small, familiar teams who knew them well, and the consistency of staff enabled people to build trusting and meaningful connections. Relatives told us, "Brilliant staff. Very caring and committed." and "I feel our family and the team work together." As a result, people felt valued and secure in their relationships, which helped them to feel more comfortable, confident, and supported in their daily lives.

The service showed compliance with medication policies, supported by staff training and regular checks. Staff maintained their skills through induction, observations, and ongoing learning. Medicines were stored safely, and local pharmacy arrangements worked well. Some medication errors, gaps in paperwork and recording errors were identified. The service plans to further training and development for staff to continue reducing medication errors. As a result, people could be confident that their medicines were managed safely, helping to protect their health and wellbeing.

There was strong partnership working with external professionals, benefiting health and wellbeing outcomes. Professionals told us, "I am very impressed by the level of support provided, bespoke care plans and delivery of service to each individual." The service made prompt and appropriate referrals to meet people's health needs. For example, environmental assessments, occupational therapy, physiotherapy, and speech and language referrals. This had resulted in positive changes for people to support their health and wellbeing. The service identified to further support appointments or referrals being made when needed, observational staff training would be implemented. This will support staff development in recognising when changing communication or health needs require further support. As a result, people could be assured that their health needs were identified and responded to quickly, supporting their overall wellbeing.

People were supported to achieve personal goals through community outings. For example, attending football matches, going swimming, and hillwalking. Planners and communication aids helped maintain routine and structure, and people were able to reconnect with the community, as seen through visits to shops, garden centres and family events. Good news stories were documented with photos, and families reported feeling involved and connected, with positive engagement in personal planning and outcomes. Relatives told us, "I am very involved in decisions." and "They have been excellent and it has been less of a worry knowing my loved one is cared for." As a result, supporting meaningful activities and strong family connections helped people maintain a sense of belonging, purpose, and emotional wellbeing. This reduced isolation and improved quality of life.

The service completed restrictive practice plans for people alongside relevant people and reviewed these regularly, using monthly reviews to spot trends and reduce restrictions wherever possible. This proactive approach led to fewer restrictive interventions, ensuring support was always the least restrictive option. As a result, people experienced greater freedom, dignity, and choice in their daily lives, which significantly improved their wellbeing and quality of life.

Clear, detailed strategies were in place to help prevent and respond to stress and distress, with step-by-step guidance for staff. Positive Behaviour Support strategies were included and reviewed regularly, ensuring care was person-centred. Staff were encouraged to review these strategies often to maintain best practice. As a result, staff could respond effectively to signs of stress and distress, reducing escalation and promote safety and emotional wellbeing for people.

There was a proactive and person-centred approach to meeting people's health needs, making timely referrals and working closely with partners to support people's wellbeing. Staff were committed to promoting independence and meaningful connections, using effective communication strategies and robust protocols, all supported by training. Some areas for improvement were identified and are being addressed through ongoing development plans, including reviewing person-specific training where helpful. As a result, people benefited from positive outcomes and consistently high-quality care that reflected best practice.

How good is our setting?

4 - Good

Quality indicator 4.1: People experience high quality facilities

We made an evaluation of good for this key question, as several important strengths outweighed areas for improvement.

People's homes were decorated and furnished to reflect their individual needs and preferences, with adaptations made for accessibility and safety. As a result, people could enjoy living spaces that were comfortable, safe, and suited to their personal requirements, helping to promote independence and wellbeing.

There was a clear system in place to ensure all appliances and safety equipment were regularly checked and maintained, with up-to-date records. Equipment needs were assessed appropriately. The manager reviewed the repairs reporting process and implemented a risk-based system to prioritise and escalate issues. However, some repairs and maintenance were the responsibility of external partners, and these have not been resolved promptly. Steps were currently being taken with external partners to address these concerns. As a result, delays in repairs could compromise people's safety and comfort, increase health risks, and cause unnecessary anxiety for those living in the service. (See area for improvement 1)

The service maintained strong fire safety standards. Managers and staff carried out robust risk assessments and addressed all actions within their control, supported by regular fire alarm checks, fire drills, and fire warden training to ensure preparedness. Some actions from the fire safety audit required input from external partners, such as work on fire doors, these remained outstanding. Senior management continued to address all outstanding environmental actions with external partners. Staff were committed to ensuring the service was safe for people living there by carrying out regular checks and maintenance for fire safety. Their ongoing attention to safety helped to identify and address potential risks promptly. As a result, people could feel confident that their safety and wellbeing were prioritised.

Staff maintained a clean and tidy environment in people's homes, supporting effective infection prevention and control. Regular audits of cleaning schedules were in place, and any gaps addressed with staff teams during meetings. As a result, people could feel confident that their living spaces were hygienic, helping to protect their health and wellbeing.

The outdoor spaces offered varied and safe options for people to enjoy fresh air and social interaction. Shared courtyard areas were accessible and adapted to suit the needs of people. A secure garden area with seating and a swing provided additional choice, which was positively noted by people and relatives. Some living spaces featured patio doors leading to small secure gardens, creatively used for seasonal decorations, allowing people to enjoy festive elements without impacting their personal space. As a result, these arrangements promoted safety, choice, and inclusion, supporting individual preferences and wellbeing in their home environment.

Areas for improvement

1. To promote people's safety, comfort, and wellbeing, the provider should continue to work closely with external partners to ensure that all repairs and maintenance issues are addressed promptly and effectively. This includes, but is not limited to, maintaining clear communication and escalation processes with external partners so that outstanding repairs do not impact on people's living environment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state: "I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment." (HSCS 5.22) and "The premises have been adapted, equipped and furnished to meet my needs and wishes." (HSCS 5.16)

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

To ensure people experience high quality facilities all identified maintenance and repair tasks should be logged and carried out in a timely manner. The provider should maintain accurate and up to date records to monitor progress documenting action taken and the outcome.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment". (HSCS 5.22)

This area for improvement was made on 20 February 2024.

Action taken since then

The service had a process and system in place to log all maintenance needs. This had been used effectively. However, some ongoing maintenance and repairs that were the responsibility of external partners were not completed in a timely manner. The provider had maintained accurate and up to date record of monitoring progress, action taken and follow up requests.

This area for improvement is no longer in place and has been reworded under key question, "How good is our setting?".

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

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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