

The Grange Care Home Selby

Enter and View report

July 2024

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General information

Service address	28 Leeds Road, Selby YO8 4HX
Service provider	Stphillips care.com
Date of visit	23 rd July 2024
CQC rating	Good (25 February 2021)
Care home manager	Michaela Martin
Contact number	01757 210221

Healthwatch North Yorkshire authorised representatives:

- Linda Wolstenholme (Team leader)
- Diane Martin (Volunteer)
- Alison Wood (Volunteer)

The Healthwatch North Yorkshire team would like to thank Michaela and Tina for their cooperation and support in organising and facilitating the visit.



Background

What is Healthwatch?

Healthwatch North Yorkshire is the independent champion for people using local health and care services. We listen to people's views and experiences, especially those that don't feel asked or heard. It gives them the opportunity to express how they feel about a service.

What is Enter and View?

The aim of an Enter and View visit is to gather views and experiences of residents, friends and family and staff of a service and observe the environment to assess the quality of the service.

This visit was an announced Enter and View visit undertaken by authorised representatives who have the authority to enter health and social care premises, announced or unannounced.

The team compiled feedback and observations into a report highlighting good practices and areas for improvement. The home manager can respond before the report is published on the Healthwatch North Yorkshire website.

Where appropriate, Healthwatch North Yorkshire may arrange a revisit to check the progress of improvements. The report is shared with the Care Quality Commission, North Yorkshire Council, Healthwatch England and any other relevant organisations.

The care home selection process focuses on two main criteria: ensuring representative geographical coverage across North Yorkshire and avoiding providers already flagged for improvement by the Care Quality Commission or receiving support from North Yorkshire Council.

Pre-visit and location

Healthwatch representatives gathered information from the management of the home in a pre-visit conducted on the 4th July 2024.

The Grange is owned by St Philips Care Home Group UK. Their website <https://www.stphilipscare.com/home/the-grange-care-centre-selby> specifies their objective:

“We offer quality residential care to all of our residents, enabling them to live happy and fulfilling lives.”

Layout of the home

The home consists of two buildings: a vacant Victorian house for residential care and "The Mews" for dementia care. During the visit, 23 of 27 possible residents, aged 55 to 100, were in The Mews, with 18 females and 5 males.

Who were heard from

- **5** residents,
- **9** residents' friends or family members,
- **15** members of staff

All respondents were over 80, with 4 females and 1 male, all white British. Staff tenure ranged from 1 to 12 years. Resident-staff interactions and activities were also observed.

Please note, we would normally expect to speak with a larger proportion of residents but due to the predominance of dementia or some form of cognitive impairment we only were able to talk to a small number of residents on the day.

Key findings

Observation

Authorised representatives observed a warm, 'family home' environment with personalised care, where residents had active, social days and supportive relationships with staff.

Positive feedback

- Residents appeared **content and well looked after**, with food and drink tailored to their individual needs.
- Call bells were responded to **promptly**.
- A good number of residents were in communal areas of the home, instead of in their rooms, and were **interacting with each other and staff members**.
- Residents were encouraged to eat in the dining room or other communal areas and seemed to **enjoy their food** and social interaction.
- **Residents appreciated activities** available including the 'spa' days and the regular morning 'games session'.
- The **'bus stop' feature** to help disorientated residents have time to navigate their environment and get assistance from staff was an effective and well considered feature.
- The home accommodated family members for lunch allowing extended contact and a more **'home-like' environment**.
- Staff appreciated the **portable electronic system** for tracking residents' needs, which also enabled the manager to monitor care effectively on-site or remotely.
- **Regular coffee mornings**, open to anyone, helped people to understand the needs of residents with dementia/other cognitive impairments.

Areas for improvement

- **Outings:** There were no organised outings for residents, other than individual shopping trips. Although it was noted that the level of dependency of the residents would necessitate high staffing levels. An example of a positive alternative was when the home created on-site activities like 'beach days' where residents could spend time outside with beach themed activities and food.
- **Ensuite facilities:** Most of the resident's rooms did not have ensuite facilities. The management told the team that there were improvement works scheduled, aimed at the provision of more ensuite rooms.
- **Online:** Website needs updating. For example, at time of the visit the website did not make it clear that the main home was closed.



St Philips Care Home Group UK

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THE GRANGE CARE HOME SELBY

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No Top-Up Fees

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Enter and View observations

External environment

The Mews building is single storey and sits behind the main building. Parking is adjacent to the main home. Parking capacity is adequate for the Mews and the entrance is visible from the parking area. The Mews building is in a reasonable state of repair. We did not assess the main building as it was not in use during our visit.

The Mews is visible from the parking area, but the entrance is not. In future signage may need to be clearer if both the main building and the Mews were in use. Access is via a locked door with a ring bell.

There is no obvious reception area as the entranceway is a corridor. This is not an issue as visitors will need to be allowed access and can be assisted by whoever greets them.

In terms of outside space there is a terrace and small garden area accessible from one of the sitting rooms. The access is closed and not very visible but given the home is predominantly for dementia patients this may be a safety feature. There is some outdoor seating and shade, but it needs some repair after the winter, staff informed us that poor weather had affected progress.

On the day of the visit no residents used the outside space. Staff mentioned that they did occasionally offer lunch outdoors as well as themed events such as pretend beach days.

Internal environment

On entering the home there was a noticeboard in the corridor with some flyers. The corridor led to both a lounge and the dining room. After passing through the first lounge there is a corridor with residents' rooms and communal bath/shower rooms, there was an additional notice board on the wall here showing pictures of

residents engaged in activities and an activities schedule. The rest of the home follows an 'L shape' with residents' rooms leading to another lounge area with access to the garden. There is also a small conservatory. All communal areas were pleasant including homely features on the walls like murals, pictures and paintings/prints plus there was an attractive fish tank in the conservatory.

Communal areas contained a range of seating options with footstools available in the lounge areas. The two lounge areas had a TV and the conservatory appeared to be more of a quiet area. There was no variation in seating in the conservatory (it was all matching). One of the lounges had a clock showing the date and time. There are a variety of dementia friendly clocks available that can help residents orient themselves by showing date, time and part of the day i.e. morning or afternoon.

The corridors were clean with contrasting colours on the top and lower parts of the walls as well as on the handrails. The corridors and communal areas had sufficient lighting and clear signposting of bedrooms and bathrooms. One corridor did appear quite dark, but this was due to being narrow and having no natural light, the artificial light was sufficient, but the overall impression was a bit dull. There is not a lot of space, but it was sufficient to accommodate wheelchairs and walking frames.

A nice feature included in the corridor was a mock-up of a bus stop and shop including signage and seating. This allowed staff to engage confused or distressed residents that were trying to leave and give them time to settle by offering them a seat at the bus stop and a drink whilst they were waiting.

Accommodation

Residents' rooms were identifiable with the resident's name and a picture of a bed. There were also memory boxes outside each room. Rooms are single use, but do not currently all have ensuite facilities. Each room has a discreet commode chair. Residents said staff were responsive to calls to help them use and to empty the commode regardless of time of day. All rooms we witnessed looked clean and tidy.

Although rooms were on the small side there was adequate space for residents and carers to move around. There were also personal touches in the rooms, such as photographs.

There are communal showers and toilets plus a bath. The bathing facilities were large wet rooms with a chair below the shower and contrasting grab rails. Toilets along the main corridor cannot be easily seen from the communal areas but given the home is relatively small and staff are accessible this should not present too much of a problem. During the visit, no resident was seen to have a problem relating to access to a toilet. Any resident we spoke to in their room found use of their commode to be acceptable.

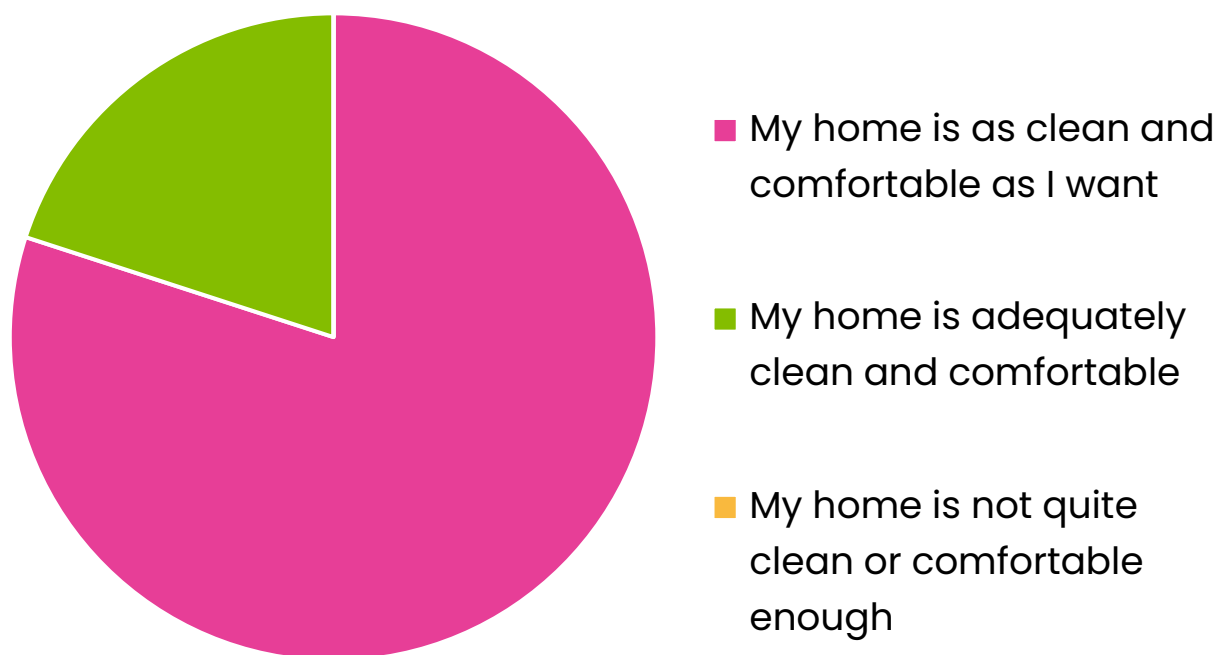
Cleanliness and hygiene

All areas of the home looked clean and tidy. We witnessed staff thoroughly clean up post lunch and promptly clean up when otherwise required.

Our representatives noted that there was a slight urine smell when entering the home in the pre-visit but there was no evidence of this on the day of the visit.

We asked residents about the cleanliness of the home.

How clean and comfortable is your home?



All 5 residents our representatives spoke to said the home was clean or adequately clean.

"The home is always very clean"

8 out of 9 friends and family felt the home was clean and comfortable.

"Always smells clean and fresh."

"Clean and comfortable environment."

The respondent that answered no, acknowledged that the rooms were cleaned daily but also mentioned the following:

"I feel the rooms are in need of some decoration."

Quality of life

General happiness

Residents were asked whether they were happy living in the care home and how much choice they had over their daily life. (By choice we meant could they get up/go to bed when they want, can they go where they like in the home, do they choose what to wear each day etc).

The home had a nice atmosphere with residents appearing well looked after and generally content. Despite the predominance of dementia or some form of cognitive impairment most residents were willing to engage with the Healthwatch team and with staff.

3 of the 5 residents who responded said they were happy living at the home. The other 2 were unhappy due to being unable to stay in their own homes rather than any negative feedback about The Grange.

All 5 residents said they had as much choice or adequate choice over their daily life as they wanted. 1 resident expressed that they were happy overall with the amount of choice they had but noted:

“It would be nice to have more visits outside of the home.”

All friends and family (9 out of 9) felt their loved one was happy at The Grange.

“They love the staff and other residents.”

“The home is clean and has a nice friendly atmosphere.”

“Well cared for and very content.”

Food and drink

Residents and friends and family were asked to share their views on the food and drink. Our representatives observed a mealtime in the home.

Most residents were in attendance for lunch in the dining room. The Healthwatch Representatives joined residents for lunch, as did one family member, and the food was plentiful and tasty. Residents ate well and fed back that they enjoyed the food. Some wished to eat less at lunch and have a warm meal later which was accommodated. Some residents required assistance which was provided, and all seemed to eat well.

Residents are offered a choice of 3 main courses selected in the morning for the main lunch meal and the menu is changed on a 3 weekly basis. One resident was pescatarian which was accommodated, and they mentioned that they particularly enjoyed when they had salmon. The cook ensures that there are spare portions available if residents change their minds or were unable to decide in advance what they would like to eat and those that wanted were also given additional servings.

There was juice and water available in the kitchen and lounge that residents could help themselves to. We also witnessed staff regularly asking residents if they required any drinks including hot drinks. Staff seemed knowledgeable about residents' preferences.

Do you get the food you like when you want it?



All 5 residents felt they got adequate food when they want it.

“Lots of choice of food. It is always good, and I enjoy it.”

One resident noted the food was acceptable but arrived without a choice. Staff explained residents are shown pictorial options for lunch, though not all make a selection. Residents were satisfied with drink availability, which Healthwatch representatives confirmed.

All 9 friends and family felt their loved ones got adequate or better food they like when they want it.

“Amazing food.”

“Beautiful food, cook bakes beautiful cakes and birthday cakes.”

“Always eats everything given.”

All 9 friends and family confirmed that drinks were readily available including being offered to friends and relatives when they visit. A couple of respondents elaborated that their loved one is provided with a table in front of them to make drinks accessible.

Activities

Residents were asked if they spend their time doing things they value and enjoy. Friends and family and staff were asked if residents have regular access to activities in the home.

The home had daily activities prior to lunch in the dining room which were well attended (17 out of the 23 residents). On the day of our visit the activity was dominoes and other games plus the option of colouring books and pencils. Having the residents in the dining room prior to lunch meant that most stayed there to eat, which was a positive aspect and encouraged socialisation. When we visited 2 residents ate in their rooms which was their preference.

After lunch residents mostly split themselves between the two lounge areas, some napping, others chatting or watching tv. Activities were also run later in the day and although we were not around to observe them some residents had expressed that they were looking forward to them.

Other examples of activities we noted were movies, balloon exercise and spa days which consisted of hairdressing and podiatry appointments for residents plus the opportunity for residents to have a manicure, with their nails painted.

The administrator said that one-to-one activities are available for residents who cannot or do not want to leave their rooms although we did not witness any when we visited.

3 residents said they were able to spend their time doing enough activities or as much as they wanted and enjoyed. Activities they expressed enjoying were playing games, socialising and watching television.

Do you spend your time doing things you value and enjoy?



Respondents that did not feel they did anything they enjoyed with their time did not express specifically why other than physical limitations. However, one resident did say they preferred 'peace and quiet', so didn't want to do any activities.

Staff respondents noted that residents are given a choice of activities whether they can move around the home or confined to their room. Activities cited by several members of staff include dominoes competitions, pamper sessions, balloon exercise, board games, iPad drawing and children coming into the home.

"Our activity coordinator is very person-centred and is passionate."

8 out of 9 friends and family of residents felt they had regular access to activities in the home. Highlights mentioned include sensory games, dominoes, balloon fit. A relative noted that they were able to visit as often as they wanted and dine with their loved one.

“There are lots of daily activities if they wish to join.”

“I’m unsure of activities as I feel my loved one sometimes does not get enough stimulation. But I’m not in the home all the time.”

7 of 8 friends and family who responded said that they received invites to participate in activities. For some residents the question was not applicable as they were unable to participate.

“We are always welcome.”

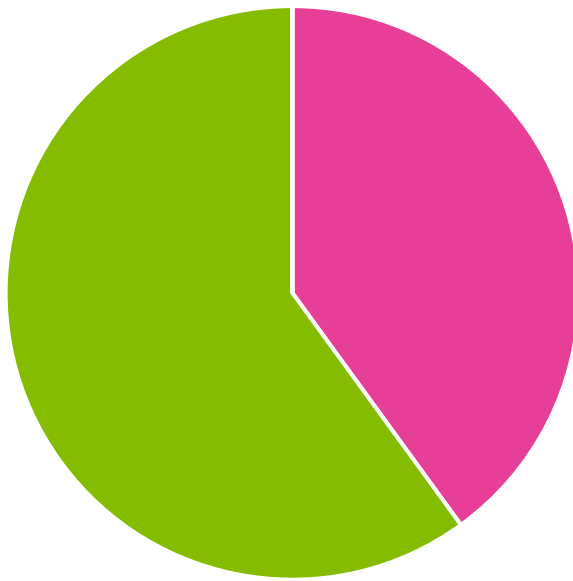
Social contact

Residents and their friends and family were asked about their social contact and our representatives observed interactions between residents, friends and family, and staff.

Given that a lot of residents had some form of dementia not all were able to interact with us or each other. Those that were capable were happy to engage with the Healthwatch authorised representatives including playing games and eating lunch together. They were keen to discuss their lives before the home and tell stories of their families and engage in some competition with other residents and staff during games.

The structure of having activities in the dining room prior to lunch facilitated social contact that seemed to persist throughout the day with residents playing and conversing in established social groups. This was not the case for all residents as some had limited ability for interaction based on cognitive impairment or personal preference.

How much social contact do you have with people you like?



- I have as much social contact as I want with people I like
- I have adequate social contact with people
- I have some social contact with people, but not enough



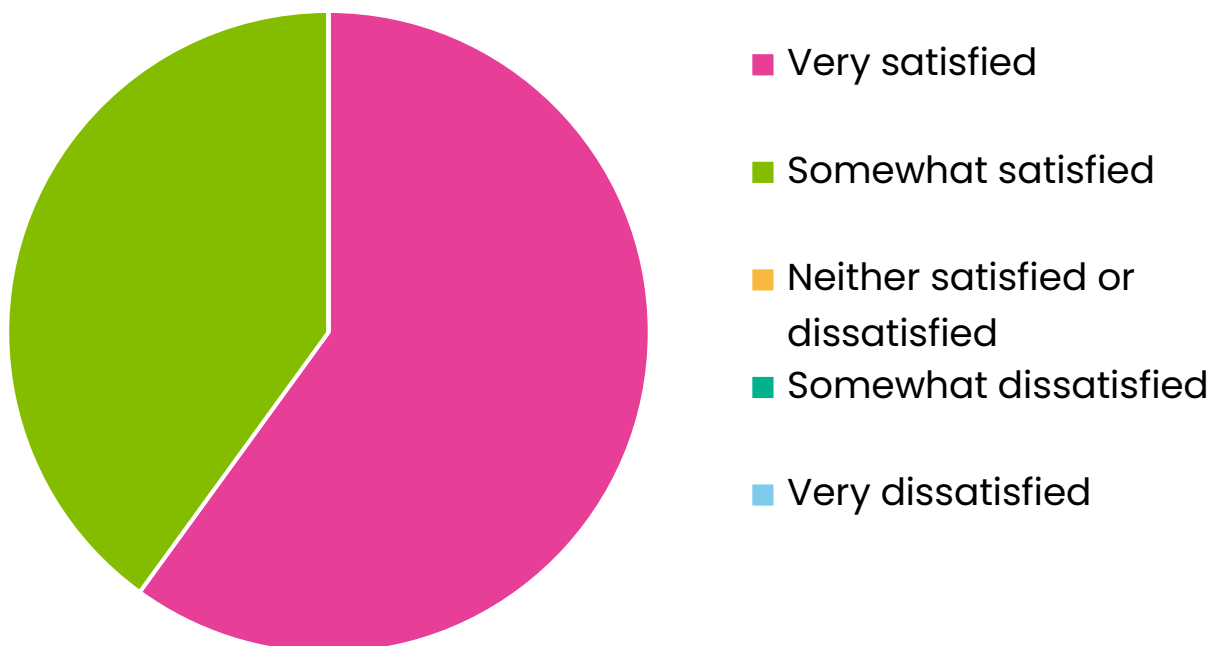
Quality of care

Residents and friends and family

They were asked whether they felt they/their relative was well cared for. We also observed whether residents looked well cared for during our visit.

All residents looked well dressed and well groomed. One of our representatives witnessed laundered clothing being returned to residents' rooms and all looked in good condition. Many of the residents enjoyed the spa days where they could have their hair done and a manicure/pedicure if they wanted.

Overall, how satisfied are you with the care that you receive?



All 5 residents who responded were somewhat or very satisfied with the care they received. Where residents were not completely happy, 1 would have preferred to be in their own home and another expressed frustration at delays getting help in the night when bedding needed changing.

All five respondents felt adequately presentable, with four feeling clean and able to present themselves as desired. Representatives noted all residents were well dressed and groomed.

We also wanted to know whether residents feel like they need additional help with anything, such as help to eat or drink, and if they receive enough help.

1 resident out of the 5 indicated that they required additional help and that they felt they were given enough help.

“Call bells are always answered straight away. I feel very safe here.”

Friends and family were asked how satisfied they are with the care their loved ones receive.

8 out of 9 said they were very satisfied with the care their loved ones received.

“It’s a very caring home with great staff.”

“I cannot fault the care they receive.”

Relatives and friends were asked if they contribute to individual care plans.

7 out of 9 relatives and friends reported that they contributed to their friend/relatives’ individual care plans.

“I was invited to the care plan assessment and annual reviews.”

“I have asked previously for my dad to have more help with personal care. I did ask for this to be put in his care plan.”

Staff

We also wanted to know how well informed the staff are about the residents they look after in terms of their individual likes and dislikes, food/drink requirements, hobbies/interests.

The staff group had mostly been there for some time, there was 1 agency worker in attendance when we visited. Staff noted that this was rare (there had been no other requirement for agency staff in the prior 3 months). The staff clearly knew the residents well and we witnessed caring and playful interactions between residents and staff. During the lunch service staff pre-empted residents' preferences for food and drinks including extra portions of favourite foods.

All 15 staff reported being somewhat or very informed about the residents they look after and their likes and dislikes. This is achieved through staff meetings and care plans accessible via the app. This includes dental care information plus sight and hearing requirements in addition to any other communication preferences or needs.

"Care plans are very detailed and person-centred."

Safety and staff levels

Residents, friends and family, and staff were asked whether they feel there are enough staff, and we asked the residents if they felt safe in the home.

4 residents felt there was enough staff to care for them. The resident that did not agree that staffing was sufficient expressed a general desire for there to be more staff without indicating where the shortfall was.

All 5 residents responded that call bells were answered in a timely manner. One of the respondents noted:

“Call bells are answered quickly, even when needing the commode overnight.”

All 5 residents that responded said they felt safe in the home.

13 members of staff agreed that there were enough staff for the home to function well. The other 2 responses were not gathered for this question due to time constraints.

Most friends and family (8 out of 9) felt there is enough staff within the home to care for their friend/relative. The 1 negative response is clarified below.

“I feel there is a lack of care assistants. This impacts the residents by not getting the full care or attention of staff as they are stretched, trying to meet everyone’s needs.”



Health checks

We asked residents and friends/ family if they had been able to access relevant health checks.

GP visits

3 residents indicated that they could access GP visits, when necessary, the other responses were not applicable, suggesting they had no requirement to access a GP. All residents in the home come under the care of a nominated local GP, who visits the home on a regular basis as well as when needed on an ad hoc basis.

All friends and family who responded to this question confirmed their loved one had access to a GP.

Eyesight checks

2 residents stated that they were able to access eyesight checks when needed. The other residents said that they did not require eyesight checks, possibly due to their existing eye health or care. 7 friends and family responses said their loved one had access to eye care, 1 respondent said it was not applicable.

Dentist appointments

None of the residents said that they had needed to access dental care while they had been in the home. 6 friends and family responded that they did have access to dental care, 1 respondent said they struggled to get their loved one an appointment.

Hearing checks

None of the residents said that they had needed to access hearing checks while they had been in the home. All 7 friends and family who answered this question said their loved ones had access to hearing checks.

Raising concerns and issues

Residents, family, and friends

We wanted to know if they had any concerns about the service, would they know what to do.

2 out of 5 residents said they would know what to do if they had concerns. Of the 3 that responded 'no' to this reflected that they did not or had not needed to raise any concerns.

"I would find the manager to complain to."

All 15 friends and family confirmed that they would know what to do if they had any concerns. Their first port of call would be management then others mentioned escalation to the Care Quality Commission if required although it has not been needed.

"I would speak to the manager who is very approachable and discuss any concerns."

"I would speak to the manager, but never had a problem."

We also asked if they had been happy with how the concern had been dealt with in the past.

5 of the 9 responses from friends and family said it had not been needed. The others said that any concerns they had raised had been dealt with. All agreed that they were able to contact the care home when required via phone and email and that in most cases a response was prompt.

Staff

How do they feel?

We asked staff about working in the care home.

All 15 staff who responded said that they enjoyed working in The Grange Care Home.

“I feel a valued member of staff and we are treated very kindly.”

We wanted to know if staff felt there was anything the home could put in place to improve their working environment

There were 9 responses out of a possible 15, all staff that responded said there is nothing additional they needed. 14 respondents also said they felt they were offered all the relevant training they needed to do their jobs. Time did not allow for the same question to be asked to the other staff member.

“I’m happy with everything.”

“I really enjoy it here.”

We wanted to know whether the staff feel well informed about changes to services in the home.

13 staff members agreed they were kept well informed about changes to services, 1 staff member felt they were well informed if changes related to their job role. Time did not allow the question to be asked of the other respondent.

In response to whether inputs from staff members had been acted upon we received the following:

“We have daily flash meetings and staff meetings and have a work communication app to cascade information out immediately.”

“The manager is very responsive and always there to guide you.”

Several staff members praised the use of the app to keep staff up to date. All staff members that responded said they would recommend the home to their own friends and family.

“I love my job and get satisfaction from working alongside the residents in their home.”

“Ourselves and the residents are very well cared for.”



Overall rating

We asked family and friends of residents, and care home staff how they would rate the home out of 5 (with 5 being the best).

Friends and family: (4.7/5)



Care home staff: (4.8/5)



Acknowledgements

The Healthwatch North Yorkshire Enter and View team would like to thank the manager, staff, friends and families of residents, and residents for letting us access the care home, and for sharing their views with us. Thanks also to our dedicated volunteers who helped support this Enter and View visit.

Disclaimer

This report is not a representative portrayal of the experiences of all residents, friends and family, and care home staff, but an account of what was observed on the day of the visit and shared with us by those who completed our survey. Note: Some of the residents we spoke with have cognitive impairment which can impact their ability to answer the questions.



We are committed to the quality of our information. Every three years we perform an in-depth audit so that we can be certain of this.

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