

The Grange

Enter and View

6th May 2026



Enter and View Report

Name of Setting: The Grange Intermediate Care and Rehabilitation unit.

Name of Manager: Samantha Bates (Registered manager) and Melanie Marshall (Quality Assurance Officer)

Insert address: Everest Road Scunthorpe DN16 3EF

Date of visit: 06/05/2026 Date of publication: 09/10/2026

HWNL staff involved in the visit: Karen Andrew (Project Officer) Wendy Chester and Denise Fowler (volunteers)

What is Enter and View?

Enter and View is the statutory power granted to every local Healthwatch which allows authorised representatives to observe how publicly funded health and social care services are being delivered. Healthwatch North Lincolnshire uses powers of entry to find out about the quality of services within North Lincolnshire.

Enter and View is not an inspection; it is a genuine opportunity to build positive relationships with local Health and Social Care providers and gives service users an opportunity to share their views in order to improve service delivery. Enter & View allows Healthwatch to-;

- Observe the nature and quality of services.
- Collect the views of service users (patients and residents) at the point of service delivery.
- Collect the views of carers and relatives of service users.
- Collate evidence-based feedback.
- Enter and View can be announced or unannounced.

Main Purpose of Visit

The purpose of Enter and View can be part of the Healthwatch prioritised work plan or in response to local intelligence. Broadly, the purpose will fit into three areas of activity:

1. To contribute to a wider local Healthwatch programme of work
2. To look at a single issue across a number of premises
3. To respond to local intelligence at a single premises

This visit forms part of the Healthwatch North Lincolnshire program of work and was carried out in response to a request from the provider during a regular engagement visit.

The Grange Intermediate Care and Reablement unit Background

The Grange Residential Home is a privately owned rehabilitation care home, owned by Heera Care and currently registered for a maximum number of 17 patients.

The current Registered manager has been registered since 20th June 2025 and was previously manager at The Grange since 11th November 2024.

The Quality Assurance Officer has been in post since December 2025 and was previously a senior carer at The Grange.

During the visit it was very evident that the Registered Manager and the Quality Assurance Officer had a good working relationship with one another.

There are currently 15 bedrooms, however two of the bedrooms have shared facilities. A further bedroom is being created which will enable The Grange to take up to 18 residents. This bed will be on a 'spot purchase' basis and will be funded by the Integrated Care Board (ICB) when it is occupied.

Specialist care categories registered with the Care Quality Commission (CQC) include accommodation for persons who require nursing or personal care, caring for adults over 65 years, caring for adults under 65, Dementia, mental health conditions, physical disabilities, and sensory impairments.

Latest Care Quality Commission (CQC) Report

The last CQC visit to The Grange was on the 13th of September 2023 with the report being published on 21st October 2023. The inspection was unannounced.

Concerns regarding the management of medicines, staffing levels, knowledge, and the management of the service were received by the CQC and as a result a focused inspection to review the key questions of safe and well-led only was undertaken. The overall rating for this CQC inspection was 'Requires Improvement'. Caring, Responsive and Effective domains were rated as 'Good' and Safe and Well led domains were rated as 'Requires Improvement'. The previous CQC inspection took place on 4th October 2022 where the overall rating was Good.

As part of this inspection the CQC looked at the infection control and prevention measures in place. This was conducted so they could understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice they could share with other services.

The Registered Manager assured us that following the CQC inspection in 2023 there were more robust Governance systems in place alongside increased oversight and monitoring which ensured improved management of the service.

Incident reporting, safeguarding concerns and regulatory reporting were more robust, and greater oversight was in place to monitor this.

Following the CQC inspection where Medicine Management was not deemed as proper and safe, a Medicine Management Team were invited in to ensure more robust processes were put in place. This includes weekly medicine stock checks which allow more timely detection of errors and medicine shortages. Monthly audits are now also undertaken to ensure policies and processes are being adhered to.

Regular supervision and appraisals are now undertaken, and new staff undertake a probationary period which is reviewed regularly. Training is more comprehensive for staff and competency assessments are undertaken to ensure staff feel supported and encouraged to develop their skills and knowledge.

All staff team meetings are held quarterly, and staff are encouraged to participate and offer feedback. During these meetings staff are updated on outcomes and developments within The Grange.

The Registered Manager felt that the overall impact of these improvements demonstrates a more structured and proactive approach to Quality Assurance, Risk management, staff engagement and regulatory compliance leading to safer care delivery and improved oversight of the service.

The Grange is commissioned by The Integrated Care Board to provide step down rehabilitation for people being discharged from hospital. The service is unique and stands alone in its provision in the North Lincolnshire area.

The visit – on arrival

The Enter and View visit (E&V) was announced. The Registered Manager and Quality Assurance Officer had requested that Healthwatch undertake the visit.

Our first impressions of the Grange were that it did not appear to be a particularly inviting building. This was mainly due to the drab, grey colour of the outside walls and the metal barriers around the edge of the building.

Additionally, the car park is quite small and one of the Healthwatch volunteers had to park across the street.

However, once we entered the building the environment was very light, clean with bold with appropriate signage. The extensive use of wall murals and themes were aesthetically pleasing and enabled residents and visitors to navigate the building. Each bedroom door was a different colour with bold print and numbers for easy identification. The rooms and bathrooms had clear, appropriate and dementia friendly signage. Dementia friendly clocks were observed around the building.





At the time of the visit The Grange had 16 patients with 1 planned discharge to Sir John Mason and 1 planned admission on that day.

The Healthwatch team were welcomed into the Grange by both the Registered Manager and Quality Assurance Officer, and we were asked to sign in. After a quick introduction the Registered Manager gave the Healthwatch team a tour of the facility including all communal areas. We were introduced to staff and residents as we met them around the building.

We spent time with the Registered Manager and Quality Assurance Officer to discuss the manager's questionnaire and clarify details regarding information provided.

The Registered Manager confirmed she has been Registered Manager since 20th June 2025 and is currently in the process of becoming Registered Manager for their sister home Norwood House.

The Grange was almost at full capacity when we visited and there was a positive vibe as there were lots of healthcare professionals visiting patients. There was a real sense of collaboration between staff and Healthcare professionals as a patient became unwell whilst we were visiting. The Registered Manager informed us that due to the patient's GP surgery being some distance away they were unable to visit their patient. After discussion with the PCN nurse, the decision was taken to contact the Virtual Ward at the hospital. An Advanced Care Practitioner (ACP) attended very quickly and reviewed the patient. The ACP informed the Registered Manager and Healthwatch that she would take over the care of the patient. Healthwatch and the ACP also discussed reviewing the patient's ReSPECT form whilst she was visiting.

Staffing Levels

The home employs 16 full-time staff and 4 part-time staff.

Registered Manager: Monday to Friday 8am – 5pm

Deputy Registered Manager: Monday to Friday 8am – 5pm

On call is shared by the management team

Day Senior care assistant: x 1 8am-8pm

Night Senior care assistant: x 1 8pm-8am

Day care assistant: x 3 8am -8pm

Night care assistant: x2 8pm-8am

Domestic and Kitchen staff:

Cleaner: x 1 daily 9am-2pm

Cook: x 1 daily 8am-3pm

Maintenance: x 1 9am-3pm 4 days a week

Both Seniors and Care assistants work the same shift patterns:

Week 1: Monday, Tuesday, Saturday and Sunday

Week 2: Wednesday, Thursday and Friday

All staff have access to an app called Rota Cloud which gives them access to their shifts and enables them to pick up shifts that become available.

Both managers felt that they had the right skill mix to enable them to deliver quality care to their patients. Staff absences are mainly covered internally by staff from The Grange or from the sister care home Norwood House.

Managers will ring staff as required to cover shifts and at times staff can be used from Norwood House if necessary.

The unit manager is very hands-on and will support staff with care giving as required.

A Huddle is held twice daily at 10.30am and 2pm with the Discharge Coordination team at Scunthorpe General Hospital, management team at Sir John Mason and the ICB Transformation officer. Staffing levels, admissions, discharges and bed availability are discussed during these huddles.

A weekly Multidisciplinary Team meeting to discuss bed capacity and current patients is held with a member of the ICB, Social Worker, Therapy team, Stroke Therapy Team and Sir John Mason.

Visible Leadership

Both the Registered Manager and the Quality Assurance Officer are keen to be visible leaders and they both undertake a daily walkaround which includes overseeing the 'tea trolley!' This enables patients and visitors to raise any concerns and give feedback about their care. It also enables staff to see their leaders as approachable and visible. During the walkaround the management team can verify that standards are being upheld and that processes are being followed.

Safety

The Grange uses Quality Compliance Systems (QCS) which is an online system to ensure all policies and processes are up to date and in line with CQC and government guidance. All policies are updated yearly. The system also has documents for working procedures and risk assessments. Staff also have access to the QCS which enables them to read and update themselves on policies.

An Electronic Medication Administration Record System (EMAR) is a digital platform that stores and manages medication administration records in care homes. The Atlas eMAR system is used by care staff at The Grange. Staff receive a robust training program prior to being able to administer medication.

When asked about how they manage risks such as falls, the managers told Healthwatch that all falls were investigated and documented. The management team completes a fall risk analysis monthly and looks at

themes and trends. Following risk assessments being undertaken crash and sensor mats are put in place as required. If a patient falls, they will be checked and if required medical help will be sought. Recorded information is used to review and update risk assessments and ensure that everyone is aware of the incident. It also helps to safeguard against further incidents in the future where possible. Actions taken and Lessons Learnt are shared with staff via Team meetings and regular communication with the team.

There have been 4 referrals to CQC since April 2025. Two were for 'significant injury' and two for 'alleged abuse'. This information is recorded on the Key Performance Indicators register.

Safeguarding information was clearly displayed around the building and was accessible for everyone to read.

Infection Prevention and Control

All staff are trained in infection control and follow reporting and recording procedures. The home liaises with the Infection control team on a regular basis. There is a full cleaning rota in place and regular audits take place. Daily and weekly cleaning schedules are completed by the cleaning team. The cleaner was wearing appropriate PPE during our visit and was knowledgeable about the correct colour coding for cleaning.

One patient was being nursed 'in isolation' due to having an infection. Staff were aware of what this meant, and the correct infection control measures were in place to manage this. There was signage on the patient's door to alert staff and visitors to this. There were also signs indicating how staff should 'don and doff' (putting on and taking off) of PPE. There was a good supply of PPE around the building.

Alcohol gel stations were seen around the building with clear instructions on how to use the gel.



There was a call bell system in place that patients and staff could use to alert others if they required support or in an emergency. There are call bells in each room and varying types of falls and sensor mats. It was observed by Healthwatch during our visit that call bells were responded to in a timely manner. The Grange was fully staffed on the day of our visit and staff were very attentive to patients. We observed patients being taken to the toilet by carers and Healthcare professionals.

Person Centred Software

Person Centred Software system (PCS) is in place within The Grange and is used by all care staff to record care given. Care plans are reviewed and updated via PCS. The system is also used for incident reporting, including falls and incidents. Staff access this system via an app on a mobile device which they all carry with them. This ensures timely recording of care given and can be completed at the patient's bedside.

The Registered manager allocates the daily workload each morning and staff are assigned tasks to undertake. Staff are allocated admissions and discharges for the day to ensure these run smoothly and all tasks around these processes are completed.

Tasks such as laundry, tea rounds, bowel chart checks, oral care and fluid balance are also allocated to carers, and these are then signed off by the senior carer on duty and the Quality Assurance Officer.

Staff breaks are also allocated to ensure staff are taking regular breaks throughout the shifts.

Training

All staff complete thorough training via Curve Training. The Manager can monitor staff training progress by logging into the system. Mandatory training was at 88% as of March 2026. This was due to two new members still undertaking their training. It was reassuring that Safeguarding Adults and Children Level 2 was 100%.

Communication	First Aid	Person Centered Planning
Health and Safety	MCA/DoLS	Falls Prevention including risk assessment
Choking awareness	Parkinsons awareness	Hand hygiene
Care planning	Food Hygiene	Positive behaviour support
Catheter Care	Health and Nutrition	Pressure Area Care
Continence	Infection Control including Barrier nursing	Record Keeping
COSHH	Medication Awareness	Report writing
Epilepsy	Moving and Handling	Safeguarding Adults
Fire Safety	Oral Hygiene	Autism
PPE including Donning and Doffing	Mental Health awareness	Understanding Dementia
Diabetes	Dysphasia	Equality and Diversity
Dignity in Care	End of Life Care	GDPR
Risk Assessment	Learning Disability Awareness.	Moving and Handling of objects

Key Performance Indicators (KPIs)

The Registered Manager was very happy to share the monthly Key Performance Indicator spreadsheet that they complete. This is a very comprehensive document and covers:

Compliments	Complaints	Falls Analysis
Incidents	Serious incidents	Training

Safeguarding and DoLS	CQC	Workforce
Audits and alerts	Deaths/discharges	Length of stay

The KPI data is shared monthly with the Integrated Care Board (ICB).

Audit Schedule

The Registered manager was able to show that they had a very comprehensive Audit schedule:

Medicine Management	Daily Walkaround	Dining experience	Patient/family surveys
Meal presentation	Infection Control	Laundry	PPE
Care planning	Dignity	First Aid	Pressure area care
Falls	KPI	Health and Safety	Environmental

Healthwatch was given access to findings and action plans from audits, and it was reassuring to see 'lessons learnt' and these were communicated to staff to ensure 'closing the loop' was undertaken. Staff received feedback from audits and incidents via regular staff meetings.

A monthly falls analysis is also undertaken by the management team to identify themes and trends.

Admission Process

Patients are transferred to The Grange from the hospital whilst they are waiting for a bed in Sir John Mason Rehabilitation Centre in Winterton. Patients will be seen and reviewed by the Community Therapy Team, and exercises and equipment will be provided as required.

On admission a checklist will be completed and an initial assessment undertaken by staff. As part of this assessment consent is obtained for record sharing purposes and for a care plan review.

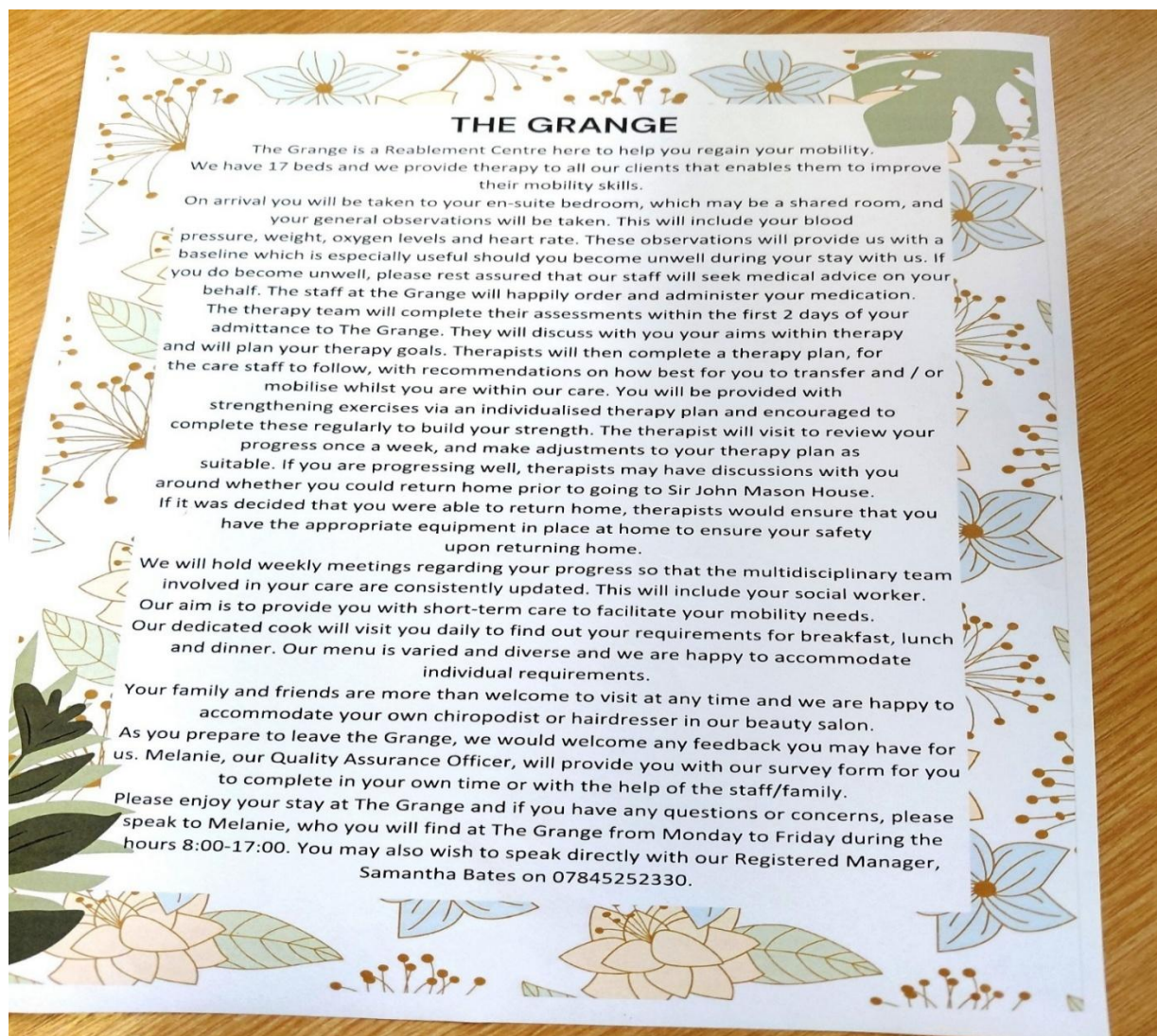
The assessment covers care needs including:

- Sensory impairments
- Communication needs
- Nutrition and Hydration
- Personal care
- Mobility
- Rest and sleep
- Religious/cultural needs
- Pressure area care
- Continence care
- Sexuality

The initial assessment also covers gathering information regarding whether the patient has a ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) form in place and whether they have a DNACPR (Do Not Attempt Cardiopulmonary Resuscitation) in place.

The admission checklist assigns roles to either Senior carers or carers. This checklist covers the documentation that is required on admission and checks that the room is ready for the patient to be transferred into.

Patients are given a welcome letter on transfer to The Grange which gives details on what is on offer and what to expect during their stay. Whilst this welcome letter gives information regarding the processes within the Grange it may be more beneficial to patients if it were in a more accessible form such as a booklet which could include photographs of the facilities offered within the Grange.



Discharge planning

As well as twice daily huddles and a weekly MDT taking place to discuss bed capacity and discharge plans a checklist is completed to ensure all documentation and tasks are undertaken prior to and at the time of discharge. This checklist includes ensuring the ReSPECT form is returned to the patient along with their medication and any equipment that they are currently using such as pressure relieving cushions and OT equipment. If the patient is being transferred to Sir John Mason House a copy of the discharge documentation is sent with them also.

Patient Experience and Feedback surveys

Regular surveys are undertaken with patients, families and visiting professionals and the questions follow the CQC Key Lines of Enquiry (KLOEs): Safe; Effective; Caring; Responsive and Well led for each of these surveys. The choice of ratings are Inadequate; Requires Improvement; Good and Outstanding.

The results of these surveys are fed back to patients and staff (via staff team meetings.)

Complaints are recorded on the monthly KPI spreadsheet. There are no recorded complaints since April 2025 and up to our visit. The management team work to review and resolve complaints within 28 days as recorded within the KPIs. Action plans and Lessons Learnt are recorded on the KPI spreadsheet.

Patient feedback – overall satisfaction

"Thank you so much. I can't complain about anything. The treatment I have received at The Grange has been first class. The staff, the food and help from everyone have helped me to have an early release from here, from where I am hoping to go home and live my life again."

"I would like to say a big thank you for my care and support. You have supported me through the highs and lows, and I will always appreciate what you have done for me. The people were outstanding and genuine, the food was home cooked and delicious, from myself, family and friends we would like to say a big thank you"

"Always kind and efficient" I have been very impressed the way things are explained and shared with me. I have been very happy here."

"I have been supported well. Any concerns I have had have been taken seriously"

"The staff work hard to make sure they care for you. Immediate response from the buzzer. The staff are caring and friendly. They spend time with you discussing your needs. The food is excellent. Good old-fashioned food. Drinks are available when you want them."

"I think the staff are amazing, happy and cheerful"

Family feedback – overall experience and satisfaction

"I have been impressed with the level of dedication demonstrated by the staff caring for my father and have found them to be approachable when asking questions/requesting updates relating to my father's care."

"My wife and I are grateful for the ongoing care and support being delivered in order to aid my father's recovery following serious illness."

"Staff have been great. Really lifted my mum up and kept her positive when she struggled. Whole team worked together it's lovely to see"

"I cannot recommend the Grange enough. My mum was very well cared for here."

"Staff are welcoming and friendly. It's a smashing place. Cannot fault anything. Really lovely friendly, clean place where you can feel confident that your relatives are looked after to the highest standards 24/7"

It was confirmed by the management team that there are no restrictions on visiting and that they have an 'open door' policy. Friends and family can meet in the patient's bedrooms, communal areas or use the outside areas.

Most people staying at The Grange have their own mobile phone and can independently contact friends and family but if they are unable to do so, staff will support them using the phone.

The Registered Manager explained that whilst there was no dedicated Activities Coordinator, patients are offered activities by care staff and as

requested by patients. Activities offered include Bingo, hoops, bowls, jigsaws, tea and cake afternoons.

It was encouraging to see staff sitting and chatting to patients. Whilst the lounge area did not feel particularly homely there is a new book area with comfy chairs. There was a varied selection of books and games in this area.



External Health Services

The Managers stated that patients staying at The Grange were usually seen by the single point of access G.P or Emergency care practitioners if needed.

Integrated Care System nurses visit the Grange daily to review patients.

Occupational Therapists visit at least weekly. The Therapy team will leave a care plan with exercises for staff to support patients with until they next visit. Staff will contact other services as and when they are required.

The Grange works closely with the Advanced Care Practitioners and they visit weekly. We witnessed this collaborative working on our visit with a patient who was deteriorating.

When asked if there have been any issues accessing healthcare in the last twelve months, the management team confirmed that they have encountered problems with accessing face-to-face appointments and also GPs declining to undertake home visits due to the location of the Grange.

17 patients have been transferred to Sir John Mason House in the past month and 5 have been transferred back to the hospital due to clinical need including hypotension, poor nutritional intake and deteriorating condition.

What did patients say?

During the Enter and View visit Healthwatch spoke to several patients. We asked questions to help patients reflect on aspects of their care at The Grange. Patients' length of stay ranged from one week to three weeks.

How do you feel about living here?

"quite happy. Feel In control"

"had enough – ready for out the door." This resident had no complaints about The Grange but just wanted to go home.

"staff are all great"

Do you feel safe? If yes, what makes you feel safe?

"the staff make me feel safe"

"help is on hand quickly"

"people around and aware"

"don't let anyone in. They have to sign in"

"feel secure"

How do you find the staff?

"lovely"

"lad sings-nice"

"some are impatient with me as I find things difficult to explain due to my speech problem."

"99% great"

"always got a smile"

How do you keep in touch with friends and family? Do they visit?

All the patients we spoke to replied that they had a mobile and could independently contact their loved ones and friends. They also had family and friends visit and they could see them in communal spaces or in their own rooms.

Do you ever feel lonely?

"I feel very lonely – wish the people I loved came more often"

"at night without my wife"

Other patients we spoke to said they did not feel lonely as lots of people were around and they could talk to staff.

How do you find the food and do you get a choice?

"lovely. Never not liked it"

"yes we get a choice-even in sandwiches"

"not keen. Cook is really good and gives you a choice"

"didn't like one meal – corn beef hash"

"bring menu sheet around in the morning"

"I eat in my room"

"alright. Nobody as good as my wife."

Overall, a mixed response was received around the food, but patients confirmed that they do get a choice of meal.

Have you been able to take part in any activities?

"Offered Bingo and painting by numbers"

"May Day activities offered"

"There is Bingo but I didn't go"

Some residents confirmed that activities had been made available to them.

If you wanted to raise concerns, who would you tell?

"not sure who to tell. I think I know who the manager is."

"the manager or her assistant"

"senior- have a quiet chat"

Several other residents responded that they would talk to the manager.

Wellbeing and Rehabilitation

All the patients that Healthwatch spoke to felt that they didn't see the therapy teams enough. They felt they were often left waiting to go to Sir John Mason House to receive therapies.

"Can we have a pool table - cards, dart board or table tennis table"

"Not enough to do. I get bored. The day goes very slowly."

"I see the physio but not very often."

"I haven't seen the physio or any activities."

What did family and friends say?

Healthwatch got the opportunity to speak to two family members. Overall they seemed satisfied with the care provided at The Grange, however, they did not seem aware of any activities taking place. Both of their relatives had been in The Grange for one week.

Please tell us about the standard of care your relative receives.

"Brilliant. There is always someone here, offering drinks etc."

"Very good"

If you wanted to raise concerns, who would you tell?

"I would speak to the manager or one of the staff. There is a list of staff"

"The manager"

How do you find the staff?

"Helpful"

"Very good. Polite and happy"

Does your relative have access to external health and care services when needed?

"Yes. Outpatient appointment to Fracture clinic arranged"

"Physio came to visit"

How do you keep in touch with your relative/friend?

"We all visit everyday"

"Visits and telephone. No restrictions"

Can you tell us about any activities or entertainment that take place in the care home?

"None happened but have a board with them on. Therapy dog"

"Hairdresser. Not aware of any activities. Books and games available"

Is there anything else you would like to tell us about the care home?

"Very clean. Lovely outside area"

"I was pleasantly surprised, especially compared to other homes I have visited"

What did staff say?

Healthwatch spoke with four members of staff who were very willing to let us know that they were very happy to work at The Grange and "enjoyed coming to work."

"pleased I walked through the door"

"amazing"

"good teamwork"

"I wouldn't change anything"

Management

All four staff we spoke to felt very supported by management and felt they were approachable.

"better since new management"

"management great"

"management will help if needed"

"very well organised"

Training

Very positive feedback was received regarding training. All four staff members felt supported when they first started at The Grange and felt they had a good induction. One carer appreciated the opportunity to 'shadow' other carers. Another carer appreciated that there were always lots of Healthcare Professionals in the building to get advice and learn from. The staff members liked that they undertook training both online and face to face. They all felt confident that they could request extra training if they wanted to develop their knowledge and skills further.

"can get extra training if we ask"

"really good to be able to shadow and learn from other carers"

"lots of training which helps me feel more confident to do my job"

Patient care

Staff members were unanimous in their response to whether they felt patient care was 'person centered'. They all felt they were encouraged to get to know patients and their preferences and choices from the point of admission. Staff felt that patients were treated with kindness, respect and compassion and that they could spend time with patients, delivering not only care but also improving patients' quality of life.

Following audits undertaken by the management team, it was observed that there was a noticeable improvement in ensuring care plans were up to date and reflective of current patient needs. Documentation and charts were being completed more accurately and in a timelier manner.

The chef was asked if she ever involved patients in food preparation as a means of assessing their readiness for returning home or to reinforce messages about diet change. She advised they were unable to due to health and safety constraints; however, residents could freely make themselves hot drinks. The Registered Manager informed us that the chef researches modified diets and liaises with patients and families to ensure preferences and choices are respected. The chef informed us that patients are involved in

menu planning. Feedback from patients has highlighted that meals are visually appealing and of high quality.

Visiting Healthcare Professionals

There was a Registered nurse in the building whilst we were undertaking our visit, who was very happy to talk to Healthwatch. When asked what the most enjoyable part of her job was, she responded **'being able to spend time with service users and see things through. Good to see people get better.'**

The nurse also responded that **'I feel really positive as so much has been done to improve things. Infection Control is much better. I am so much happier.'** The nurse also commented that she felt care was definitely patient centred and patients were given choices about their care.

There were various Healthcare professionals in the building during our visit including an ACP and registered nurses.

Healthwatch Observations

Healthwatch spent time observing interactions between staff and patients in the care home during the visit.

Control Over Daily Life

Healthwatch observed staff supporting patients to meet their needs. Healthwatch witnessed a member of staff supporting a patient who wished to use the bathroom. Another patient requested to return to his room. This gentleman was very unsteady when he stood up but the carers supported him to use his frame with minimal assistance. Healthwatch felt staff were very responsive to patient need.

Call bells could be heard very clearly around the building and were answered promptly.

As part of his rehabilitation a patient requested to make a cup of tea. He was able to do this independently.

Healthwatch witnessed staff supporting patients into the dining room for lunch. The tables were set with cutlery, placemats and condiments. The menu was also on each table with the daily choices. Most patients did come into the dining room which enabled them to interact with other patients. Patients can choose to dine in their own rooms if they wish.

The menus are quite small, and the writing could be difficult for those with sight or cognitive problems to read.

Personal Cleanliness and Comfort

Healthwatch observed that all patients looked clean and well cared for. They were all dressed in day attire and were wearing appropriate footwear.

Staff also looked clean and tidy and wore tunics.

All staff wore uniforms with various coloured tunics for the different job roles. It was not immediately clear what role they each had. Whilst most of the staff wore I.D badges there was no identification as to their role on the badge. Where staff had long hair, it was tidy and tied back. No false or painted nails were observed. All staff were wearing appropriate footwear.

The home has its own Hairdressing Salon, and the hairdresser was busy with patients during our visit.

Safety

During the visit, no safeguarding concerns were observed or raised with the Healthwatch team.

Healthwatch observed staff wearing PPE (gloves and aprons) to assist patients with personal hygiene. They also wore PPE whilst dispensing medication and offering drinks and snacks.

There was one patient being 'barrier nursed' and there was clear signage to alert staff and visitors to this. Appropriate infection and prevention control measures were in place for this patient.

There was no trip hazards observed during our visit, but the floor was quite uneven in places. The flooring was nonslip and very clean.

Accommodation and Cleanliness

Overall, the cleanliness and decor of the Grange was to a good standard. Cleaning was in progress whilst we were visiting and the home had a fresh aroma throughout. Furniture was well kept with just one chair in the lounge having a tear in it. There was a choice of different styles of chairs around the home including recliners. All furniture was wipeable. The main lounge was quite sparse with regards to comfort although the decor was bright with themes and murals on the walls. The conservatory space was light and airy and felt more inviting.

When invited into patient rooms, Healthwatch noted that they were simple in decoration. This very much gave a clinical feel to the bedrooms. Patients were able to have their own personal belongings. Several patients had photographs and small ornaments in their rooms.

Each patient room had a different colour door which enabled those living with Dementia and those with sight or cognitive difficulties to locate their room more easily.

One patient did comment about having to share a bedroom with another patient. As the Grange was at capacity this was not something that the Registered Manager was able to resolve.

All bathrooms and communal areas were clean and tidy.

There is a space outside where residents can sit, although it is not very inviting. This area could easily be improved with planting which patients could potentially get involved in as part of their rehabilitation. Several patients had been out into the garden and felt it could be improved.

There are some areas of uneven flooring throughout the building.

Food and Nutrition

The Grange has been awarded a 5 food hygiene rating by North Lincolnshire Council.

Healthwatch spent time in the food preparation area, and it was very clean and well organised. There were colour coded knives and chopping boards. The chef was able to explain clearly the process for the ordering and procurement

of ingredients for her menu. There was a whiteboard in the kitchen with details of patients' allergies and food preferences and the cook explained that this is updated daily and as required when new patients are admitted to The Grange.



There were menus on the dining tables with pictures and descriptions of the meals being offered Monday to Sunday. These were quite small and may be difficult for those with sight problems to see and read.

A drinks station is always available, and patients are regularly asked if they would like a drink.

Patients' food and fluid intake is recorded in their care plan and SALT (Speech and Language Therapy) assessments, own preferences, diabetic diets, soft diets, allergies and any equipment required will also be recorded in the care plan. Should a patient have a decline in weight, advice would be sought via the dietician.

Activities, Social Participation and Involvement

Healthwatch did not observe any activities during the visit although we were informed that various activities do take place daily. Patient and staff birthdays are celebrated with special buffets and cakes. There were photographs in the lounge of patients taking part in various activities.

It was reassuring to observe staff and patients interacting and laughing together.

Those patients we spoke to were happy to talk to Healthwatch about their experiences at The Grange.

Conclusion

Overall, the Grange offers a welcoming, safe and clean environment for people who need rehabilitation support whilst awaiting transfer to Sir John Mason House.

The exterior of the building and outdoor communal spaces do not present as well as the bright and welcoming environment maintained inside the property. The garden could provide valuable opportunities for rehabilitation activities and therapeutic engagement.

Patients were very happy to talk about their experience at the Grange and the staff. They were very complimentary about the carers but also very impressed

about the visibility of the Management team. Patients felt very safe and found the staff and management kind and approachable.

Staff stated that they are well supported by the Management team and appear to be happy in their roles. They have embraced the changes and welcomed opportunities to develop their skills by training and taking on further responsibilities.

Both the Registered Manager and the Quality Assurance Officer were open and transparent and were continuing to implement changes and improve the services they offered.

Healthwatch would like to thank the Managers and all the staff at The Grange for accommodating the Enter and View visit.

Highlighting Good Practice

Healthwatch would like to highlight the following good practice observed during the visit:

- The Registered Manager and Quality Assurance Officer were very open and transparent about how they work. Healthwatch saw examples of recent changes and ongoing plans for further improvement.
- Staff were very responsive to patients' needs.
- Healthwatch observed high standards of cleanliness and infection prevention and control processes in place.
- Patient Centred care was observed throughout the visit.
- The Grange has clear and appropriate signage. The doors are wrapped in colours and bold numbers for easy identification. The bathroom and toilet signs are dementia friendly.
- Visible leadership was evident throughout our visit.

Recommendations

The following recommendations are being made based on the feedback and observations made during the visit:

Theme: **Communication**

Recommendations:

1. The Registered Manager may wish to review the welcome information and consider producing it in an accessible booklet format, incorporating further details to help patients understand what to expect throughout their care and treatment.
2. The Registered Manager should ensure that all staff wear name badges to allow for easy identification by patients, visitors and colleagues.
3. The Registered Manager should consider reviewing the current menu to improve accessibility for people with visual impairments. Whilst there are photographs of the offered meals they are quite small.

Theme: **Environment**

Recommendations

1. The Registered Manager should consider enhancing the appearance of the front of the building to create a more positive first impression.
2. The Registered Manager should consider enhancing the garden and outside spaces to support patients' wellbeing and rehabilitation.
3. The Registered Manager should review the uneven flooring within the building.

Theme: **Wellbeing and Rehabilitation**

Recommendations

1. The Registered Manager should consider enhancing the activities programme to promote patient wellbeing and facilitate rehabilitation outcomes.

2. Healthwatch recommend a review of therapies offered to patients whilst they are awaiting transfer to Sir John Mason House.

Provider response to recommendations:

Providers have 20 working days to respond to recommendations. This can include why they may or may not take on board the recommendations.

Theme: Communication Recommendation 1	
Specific	What is the recommendation?
	The Registered Manager may wish to review the welcome information and consider producing it in an accessible booklet format.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	The welcome information will be reviewed to ensure it is clear, accessible and easy to understand. Feedback from service users and families/support networks will be considered, and alternative formats will continue to be provided where required.
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
	Yes. The existing welcome information can be reviewed and updated using the resources and staff already available. Where an individual requires information in a different format, this can be provided on an individual basis.
Relevant	Is the recommendation relevant?
	Yes. Providing accessible welcome information supports effective communication and ensures that service users, families and support networks can understand important information about the service.

Time-bound	When will the recommendation be completed?
	All welcome letters and information are provided in each bedroom and are accessible to all service users and families/support networks. If a service user requires information in a different format, this can be provided and staff explain to service users that they can request an alternative format. This is managed on an individual basis.

Theme: Communication Recommendation 2	
Specific	What is the recommendation?
	All staff to wear name badges to ensure they are easily identifiable by patients, visitors and colleagues.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Compliance can be monitored through regular staff observations and checks to ensure all staff are wearing their name badges while on duty.
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
	Yes. Name badges are already provided to staff and staff are expected to wear them while working.
Relevant	Is the recommendation relevant?
	Yes. Wearing name badges helps service users, visitors and colleagues to easily identify staff and supports clear and effective communication.
Time-bound	When will the recommendation be completed?
	All staff already wear name badges. This will continue to be monitored as part of routine management checks.

Theme: Communication Recommendation 3	
Specific	What is the recommendation?
	Review the current menu to improve accessibility for people with visual impairments
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Menus will be reviewed to ensure they are available in an accessible format. Service users will be asked whether the menu is easy to read and understand, and alternative formats will be provided where required.
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
	Yes. Menus are already available in large print and include pictures. Staff can provide further alternative formats according to individual service user needs.
Relevant	Is the recommendation relevant?
	Yes. Accessible menus support service users to make informed choices about their meals and promote independence and choice.
Time-bound	When will the recommendation be completed?
	All menus are provided in large print with pictures. If a service user requires a different format, this can be provided when required.

Theme: Environment Recommendation 4	
Specific	What is the recommendation?
	Consider enhancing the appearance of the front of the building to create a more positive first impression.
Measurable	How can you measure progress and know if you've successfully met the recommendation?

	Improvements to the front of the building will be monitored through regular environmental checks, with feedback from service users, families and visitors considered where appropriate.
Achievable	Is the recommendation achievable? Do you have the skills to achieve it? Yes. Improvements can be made through ongoing maintenance, landscaping and planned building works. Existing resources and contractors can be used to support further improvements.
Relevant	Is the recommendation relevant? Yes. A welcoming and well-maintained entrance can contribute to a positive first impression for service users, families, visitors and staff.
Time-bound	When will the recommendation be completed? The front of the building has had many improvements over the last year, including additional greenery and floral arrangements. Building works are currently in progress to replace the existing railings with a new wall. Further improvements will be considered as part of ongoing environmental maintenance.

Theme: Environment Recommendation 5	
Specific	What is the recommendation? Consider enhancing the garden and outside spaces to support patients' wellbeing and rehabilitation.
Measurable	How can you measure progress and know if you've successfully met the recommendation? The garden and outside areas will be regularly reviewed to ensure they remain safe, accessible, well maintained and suitable for service users to use. Feedback from service users regarding the outdoor space will also be considered.

Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
	Yes. The garden is already maintained regularly and improvements can be made through planned maintenance, additional planting and suitable outdoor furniture.
Relevant	Is the recommendation relevant?
	Yes. Accessible and pleasant outdoor spaces can support service users' wellbeing, social interaction, independence and rehabilitation.
Time-bound	When will the recommendation be completed?
	The garden space has been well maintained and new garden furniture has been purchased for service users. The area will continue to be reviewed and maintained as part of the ongoing environmental programme.

Theme: Environment Recommendation 6	
Specific	What is the recommendation?
	The Registered Manager should review the uneven flooring within the building.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	The flooring will continue to be monitored through regular environmental and health and safety checks. Any areas identified as requiring attention will be reported and addressed appropriately.
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?

	Yes. Regular environmental checks are already undertaken and any maintenance concerns can be reported to the appropriate maintenance team or contractor.
Relevant	Is the recommendation relevant? Yes. Regular monitoring of flooring helps to maintain a safe environment and reduce potential risks to service users, visitors and staff.
Time-bound	When will the recommendation be completed? The flooring meets current safety standards and is regularly maintained. Any concerns identified during routine checks will be addressed through the appropriate maintenance process.

Theme: Wellbeing and Rehabilitation Recommendation 7	
Specific	What is the recommendation? The Registered Manager should consider enhancing the activities programme to promote patient wellbeing and facilitate rehabilitation outcomes.
Measurable	How can you measure progress and know if you've successfully met the recommendation? The activities programme will be reviewed and monitored to ensure a range of meaningful activities are offered. Attendance and service user feedback can be used to evaluate engagement and identify opportunities for further development.
Achievable	Is the recommendation achievable? Do you have the skills to achieve it? Yes. A new Activities Coordinator has been employed to support the development and delivery of activities across both sites. The activities programme can be developed in

	response to service user needs, interests and rehabilitation goals.
Relevant	Is the recommendation relevant? Yes. Meaningful activities can support wellbeing, social interaction, independence and rehabilitation, while providing opportunities for service users to participate in activities that are relevant to their interests and abilities.
Time-bound	When will the recommendation be completed? A new Activities Coordinator has been employed and is due to start at the end of October 2026, working across both sites. The activities programme will be developed further following their commencement. Due to the nature of the service and the quick turnaround of service users, activities cannot always be planned significantly in advance; however, opportunities will continue to be provided according to service user needs and circumstances.

Theme: Wellbeing and Rehabilitation Recommendation 8	
Specific	What is the recommendation? Healthwatch recommend a review of therapies offered to patients whilst they are awaiting transfer to Sir John Mason House.
Measurable	How can you measure progress and know if you've successfully met the recommendation? The therapies available to service users while awaiting transfer will be reviewed with the ICS therapy team. Records of therapy assessments, recommendations and interventions will be reviewed to ensure service users are receiving appropriate therapy in line with their individual needs and clinical plans.

Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
	Yes. The service can work with the ICS therapy team to review individual therapy needs and ensure staff follow the recommended therapy plans. Staff can support service users with appropriate activities and movements within the guidance provided by the therapy team.
Relevant	Is the recommendation relevant?
	Yes. Ensuring appropriate therapy and rehabilitation support is available while service users are awaiting transfer can help maintain their abilities, promote independence and support continuity of care. Therapy must remain individualised and follow professional clinical assessment, particularly where specific movement management is required.
Time-bound	When will the recommendation be completed?
	The service can only offer therapies that have been assessed by the ICS therapy team and follow their plans, due to some injuries requiring specific movement management. Therapy provision will continue to be reviewed in line with individual assessments and recommendations from the ICS therapy team.
Signed on behalf of Healthwatch North Lincolnshire:	
<i>J. Allen</i>	
Date:	
14 th July 2026	