

# Leeming Bar Grange Care Home

Enter and view visit

July 2025

## **Table of Contents**

General information
Background1
Who is Healthwatch?1
What is 'enter and view'?1
Notification and location2
Key findings3
Positive feedback3
Recommended areas for improvement3
Observations4
Environment4
Cleanliness5
Accomodation5
Quality of life6
General Happiness6
Food and drink7
Activities and social contact9
Quality of care11
Resident care, health and wellbeing11
Safety and staff levels12
Raising concerns and issues 13
How do staff feel?14
Overall rating16
Acknowledgements17

## **General information**

Address	Leeming Lane, Northallerton, DL7 9AU
Provider	Barchester
Date of visit	22 July 2025
CQC rating	Good (April 2020)
Care home manager	Kathryn Billett
Contact number	01677 425594

Healthwatch North Yorkshire Authorised Representatives:

- Jill Pouncey (Team Leader and Healthwatch volunteer)
- Holly Joyce (Healthwatch staff member)
- Pat Southgate (Healthwatch volunteer)
- Alison Wood (Healthwatch volunteer)

The Healthwatch North Yorkshire team would like to thank Kathryn and her team for their cooperation and support in facilitating the 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 Healthwatch spoke with have cognitive impairment which can impact their ability to answer the questions.

# **Background**

#### Who is Healthwatch?

Healthwatch is an independent champion for people using local health and care services. It listens to people's experiences to help improve care.

#### What is 'enter and view'?

An 'enter and view' visit allows Healthwatch to see the quality of a health or social care service in-person. These visits provide an opportunity to hear from residents, their families, and staff while also observing the care environment.

Visits are conducted by trained Healthwatch staff and volunteers (authorised representatives) who have the legal right to enter health and social care premises.

During the visit, the team collects feedback and makes observations, which are then compiled into this report. The report is then shared with the care home, Care Quality Commission, North Yorkshire Council, Healthwatch England and is made available to the public via our website.

The process for selecting which sites to visit includes two main factors:

- 1. To provide representative coverage across North Yorkshire.
- 2. To visit those care homes that have not recently been visited by the CQC (for over 2 or more years) and rated as 'Good' or 'Outstanding' previously by the CQC.

## **Notification and location**

In preparation for the visit, Healthwatch North Yorkshire let **Leeming Bar Grange Care Home** know that they were visiting sometime between **the 14**<sup>th</sup> **of July and the 4**<sup>th</sup> **of August 2025**. Questionnaires were sent to the care home in advance for staff and family members to complete, which were distributed by the care home.

Leeming Bar Grange Care Home offers a range of services, including residential care, dementia care and respite/short stay.

At the time of the visit there were 55 residents out of a possible occupancy of 60. Healthwatch North Yorkshire heard from:

- 18 people who live there.
- 5 of their friends or family members.
- 6 members of staff.

The 18 residents ages ranged from 65 to 90+. Of these, 16 were women and 2 were men, the majority were white British ethnicity. As volunteers we also spent time observing the interactions between staff and residents, as well as the activities taking place.

We were encouraged by the number of responses from residents which offered valuable insight into life at the home. However, we would typically expect a higher response rate from family and friends and staff – usually around 10 and 15 respectively, for a home of this size. The lower response rate from these groups limits the breadth of feedback available.

It is also worth noting that the residents feedback was overwhelming gathered from those on the ground floor as it was not possible to get detailed feedback from most residents in the dementia unit, this should be taken into consideration when interpreting the feedback presented in this report.

# **Key findings**

#### **Positive feedback**

- The home is well managed, with positive feedback from residents, relatives, and staff. The general manager is highly regarded for her passionate leadership, clear understanding of residents' needs, and commitment to high-quality, compassionate care.
- The environment was observed to be clean, well maintained, homely and welcoming.
- Staff were friendly and welcoming and engaged positively with the residents who spoke favourably of them.
- Meals appeared appetising and residents provided complimentary feedback regarding the food.
- Residents were well presented and appeared content.

#### **Recommended areas for improvement**

- Review staffing ratios, particularly in the dementia unit.
   Although levels are consistent across both floors, residents on the first floor have more complex needs. Despite the home's flexible staffing model, feedback from staff, residents, and relatives suggests that current staffing may not always fully support the level of care required.
- While activities staff support both floors, residents on the ground floor—who are typically more mobile—appear to receive more engagement. We would suggest reviewing activity provision on the first floor, with a focus on increasing one-to-one interactions and sensory-based activities for those less able to join group sessions, such as increasing low-key activities that promote physical well-being as social connection, e.g. escorted walks locally.

# **Observations**

## **Environment**

The building is large with ample parking to the front and extensive grounds to the front and sides. The entranceway was clearly signposted, and a buzzer allowed for secure entry. There are enclosed outdoor spaces on both sides of the building which can be accessed by residents as they please. The outside areas have some seating and are well kept, attractive and seemed to be well used by residents.

Inside, the reception area is bright and spacious with a staffed reception desk. Near the reception area there was a board with information on activities, pictures of staff including employee of the month as voted by other staff members. There was also a picture of resident ambassadors/buddies whose role it was to welcome and guide new residents. On the day of the visit the area was in use for a pampering activity which made it feel sociable and lively. The reception area led to a lounge, dining room and connected to three corridors leading to bedrooms, stairs and further social areas. All communal areas were clean, tidy and attractively decorated.

Downstairs housed the residential care unit comprising 30 beds and upstairs a further 30 beds were available in the dementia unit known as Memory Lane.

We were greeted warmly by all staff and Kathryn the manager was very open and helpful.

# Healthwatch North Yorkshire asked residents about the cleanliness of the home.

All residents we spoke with shared their views on the cleanliness and comfort of the home. Sixteen people told us it was as clean and comfortable as they would like, while two felt it was adequately so. A few residents also mentioned that they appreciated being able to personalise their rooms and said they had been supported by staff to do this.

### **Accommodation**

Rooms were off the main corridors that were wide enough to allow for wheelchairs and people passing. There was a lift to the first floor but during our visit, it had a defect which was awaiting repair. It could still be used but required calling from the outside.

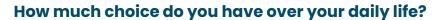
Marking of residents rooms was varied with some having just a name and others represented with pictures of the resident themselves or of something meaningful to them.

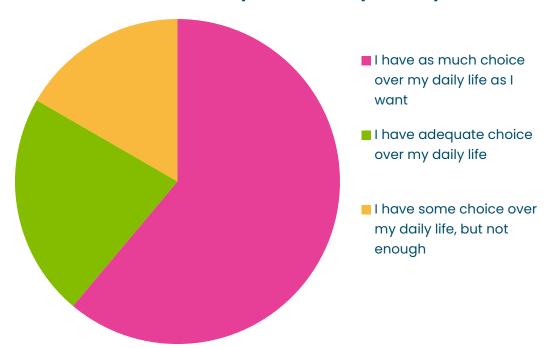
Internally the rooms looked well maintained with personal touches and individual decoration. Seating appeared appropriate for the resident's needs.

# **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, this 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).



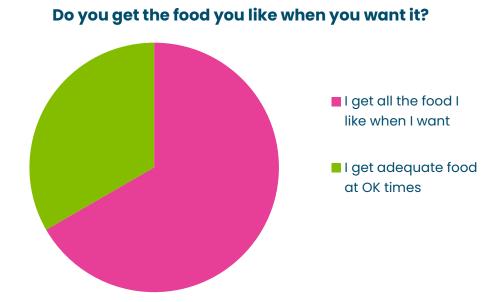


Residents shared a range of views about their daily routines and level of independence. Some acknowledged the impact of their physical health

on what they were able to do but said they were content with the freedom the home offered within those limits. Others expressed a wish for more to do, with one commenting, "I'd like to do more but there isn't anything to do." Several residents also told us they would welcome more outings, even simple trips to a coffee shop or a browse around the local shops would make a positive difference.

### 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.



Residents were largely positive about the food on offer. One resident mentioned that there were sufficient options available and that their preference to eat privately was respected. Several others also commented favourably on the variety of choices. Another resident felt the portion sizes were adequate and appreciated that additional servings were offered if desired. One resident who preferred to eat in their room said, "The food is generally very good. Sometimes it's a bit cold by the time we get it." However, one resident offered a contrasting perspective,

commenting that the food was "always soft" and that the portions were too large.

Some of our representatives observed the dining room during lunchtime. Meals were well attended, and the atmosphere was lively, with staff actively engaging with residents and residents interacting with one another. Some residents particularly on the dementia floor were reluctant to eat, it was unclear if this was due to a dislike of the food or other factors. On the same floor, several residents required extra support during lunch. While staff were attentive and provided the necessary assistance, the ratio of staff to residents meant there were delays in attending to everyone promptly.



Residents told us they could access drinks whenever needed, either with staff bringing them or by helping themselves. This included both cold and hot drinks. Representatives noted regular provision of drinks in the communal areas and various stations where residents could help themselves.

#### **Activities and Social contact**

We asked residents, staff, friends and family about access to meaningful activities and social contact, and our representatives also observed how these were supported during the visit.

The home employs two activities coordinators which allows for activities to run every day of the week. When we visited there was a pamper activity in progress and later in the day there was an outing scheduled. Both seemed well attended and lively. An activity schedule is visible on a notice board near the entrance to the home.



Residents we spoke with were generally enthusiastic about the offering, "they are always doing activities for us, I have a look each month and sign up for the activities I want to do". Residents

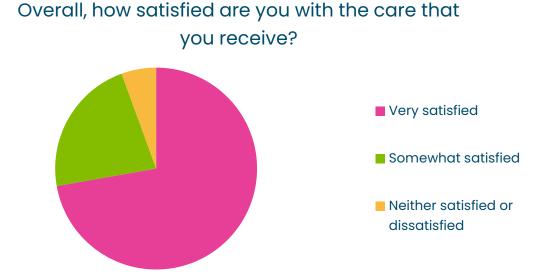
mentioned enjoying listening to the radio, sitting in the garden and walking with a friend. Some stated the activities could be a bit noisy. Relatives noted that their loved ones had access to activities but tended to participate if it was something they were interested in. Our representatives noted that on the dementia unit their appeared to be fewer activities, this was echoed by some staff feedback "there isn't much for less able residents".

We observed that social contact was generally positive, with 16 residents receiving regular visits from friends and family, which they clearly valued. However, 2 residents reported that they don't have enough engagement socially with other residents within the home. One individual living in the dementia unit expressed that they found it difficult to connect with others. Our representatives noted this as a limitation, highlighting the challenges that can arise when dementia care is delivered in a separate unit, particularly in assessing when a resident may be ready or suitable to transition into that environment.

# **Quality of care**

## Resident care, health and wellbeing

We asked residents and their friends and families about the quality of care, access to health checks and observed whether the residents appeared well cared for during our visit.



Residents all had adequate or high levels of satisfaction with the care they receive. 13 residents noted that staff were very proactive in meeting their needs, "they are always on top of everything I need". Others also mentioned the warmth and kindness of the staff. Feedback from family and friends was similar with everyone being somewhat or very satisfied with the level of care received, with one noting, "staff are kind and helpful". Contrarily, one resident was unhappy with the frequency of incontinence pad changes and would have preferred to be changed more often.

Residents were observed to be clean, well-cared for, and neatly presented, with clean clothing, hair, and nails. Although some required assistance during lunch, particularly upstairs, all were kept tidy and comfortable. Residents praised the laundry service and appreciated the availability of a weekly hairdresser. Both residents

and families reported good access to GPs, as well as vision, dental, and hearing care, or expressed confidence that staff would address any issues as they arose.

## Safety and staff levels

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

Most residents we spoke with expressed satisfaction with staffing levels in the home, indicating that their needs were generally being met. Two respondents indicated staffing was insufficient, "there aren't a lot of staff, and they are very busy". Another noted they would have liked to be able to go outside more but the extra help needed to facilitate this meant it happened less frequently. Nearly all (88%) residents were content with the response times to call bells, though a few (12%) mentioned that responses were slower during the night. Feedback from friends and family members was similarly positive, with all those we spoke to expressing confidence in the current staffing levels based on their experience.

When we asked staff the same question only one felt that the staffing levels were sufficient. This individual highlighted the flexible use of staff to cope with demand, for example, staff with other roles can step in when additional care is required.

Our representatives were made aware of a 'whole home' approach to flexible resourcing. It appeared to work well on the lower floor where residents were more self-sufficient but presented challenges on the dementia floor. Our representatives observed this with residents having to wait for assistance with eating. A member of staff noted, "the ratio in the dementia unit is not sufficient to deliver the care we would like".

None of the residents or friends and relatives we heard from had any concerns around safety with all noting they felt as safe as they would like.

# Raising concerns and issues

## Residents, family, and friends

Healthwatch North Yorkshire wanted to know if a resident, friend or family member had any concerns about the service, would they know what to do. Healthwatch also asked if they had been happy with how a concern had been dealt with in the past.

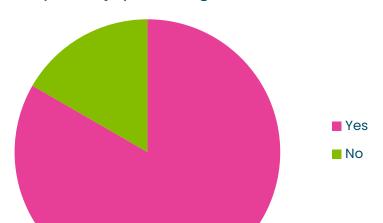
Among eighteen residents, fifteen were confident in the process of raising concerns, "Kathryn is brilliant, she helps with everything I need". Those that did not feel comfortable had entrusted their loved ones to deal with any issues. Any issues that had been raised had all being dealt with satisfactorily.

Similarly, friends and family were clear on the escalation process if any issues arose with one respondent noting a "very positive" response and outcome to their concerns. All felt communication with the home was clear and responsive.

## How do staff feel?

# Healthwatch North Yorkshire asked staff about working in the care home.

The staff we met had worked at the care home anything from nine months to ten years. We spoke with people who performed a variety of different roles.



Do you enjoy working at the home?

Five out of six staff members said they enjoyed working at the home. Comments ranged from "I absolutely love my job" to concerns about staffing levels limiting the quality of care they could provide. Staff reported feeling supported by both management and colleagues and said relevant training was available when needed. A recurring theme in staff feedback was that, while the 'whole home' approach to staffing offered flexibility, it often made it difficult for staff to manage their own responsibilities when called upon to support other areas.

Several staff also raised concerns about equal staffing ratios across both floors, despite the higher physical and emotional needs of residents on the dementia unit. One commented, "The essentials get done, but there's no time to talk to residents or involve them in decisions," while another noted, "They need more staff, particularly upstairs."

While Healthwatch representatives understand that staffing ratios are determined using standard formulae, it was clear that the increased demands of dementia care were not sufficiently accounted for in practice.

# **Overall rating**

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

**Residents: (4.3/5)** 



Friends and family: (4.4/5)



Care home staff: (4/5)



#### **Acknowledgements**

Healthwatch North Yorkshire 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 visit.



Healthwatch North Yorkshire is committed to the quality of their information. Every three years, Healthwatch perform an in-depth audit so that they can be certain of this.

Learn more.



## healthwatch North Yorkshire

55 Grove Road
Harrogate
HG1 5EP
www.healthwatchnorthyorkshire.co.uk

Phone: 01423 788 128

Email: hello@hwny.co.uk

Write to us (no stamp required):

Freepost HEALTHWATCHNORTHYORKSHIRE

Find us on X, Facebook, Instagram, LinkedIn