

# BrainKind Neurological Care Centre Preston

Tuesday 18<sup>th</sup> March 2025

1:15pm-4:00pm



**Disclaimer:** This report relates only to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and people who met members of the Enter and View team on that date.

# Contact Details

## Address

BrainKind Neurological Care Centre

Teal Ave,

Fulwood

Preston

PR2 9BN

## Practice Contact:

Nicola Murray (Head of Service for BrainKind)

## Date and Time of our visit:

Tuesday 18<sup>th</sup> March 2025

1:15pm-4:00pm

## Healthwatch Lancashire Authorised Representatives:

Emmy Walmsley (Senior Engagement Officer)

Jodie Carney (Healthwatch Lancashire Manager)

# Introduction

Healthwatch Lancashire is the independent public voice for health and social care in Lancashire and exists to make services work for the people who use them. We believe that the best way to do this is by providing the people of Lancashire with opportunities to share their views and experiences.

Healthwatch Lancashire has statutory powers to listen, act, challenge and gather feedback to improve local services and promote excellence throughout the NHS and social care services.

To help achieve this Healthwatch have a statutory power to 'Enter and View' health and social care services that are publicly funded. The purpose of an Enter and View is to listen to people who access those services and observe service delivery.

Following the Enter and View visit a report is compiled identifying aspects of good practice within the service visited along with any recommendations for any possible areas of improvement.

As we are an independent organisation, we do not make judgements or express personal opinions but rely on feedback received and objective observations of the environment. The report is sent to the service provider providing an opportunity to respond to any recommendations and comments before being published on the Healthwatch Lancashire website at:

[www.healthwatchlancashire.co.uk](http://www.healthwatchlancashire.co.uk)

The report is available to members of the public along with the Care Quality Commission (CQC), Healthwatch England and any other relevant organisations. Where appropriate Healthwatch Lancashire may arrange a revisit to monitor the progress of improvements and celebrate any further successes.

## General Information

"The Neurological Care Centre – Lancashire' is a specialist neurological care centre based in Fulwood, Preston. The centre is both a Nurse and Therapy led service providing specialist neurological rehabilitation, palliative and complex care. We have a fully integrated multi-disciplinary; consultant led neurological rehabilitation team, on site."

[BrainKind Neurological Centre Lancashire | Brain Injury Rehab](#)

## Acknowledgements

Healthwatch Lancashire would like to thank people using the service, staff and management, for making us feel welcome and for taking the time to speak to us during the visit.

# What did we do?

Healthwatch Lancashire Enter and View Representatives made an announced visit to BrainKind Neurological Care Centre on Tuesday 18<sup>th</sup> March 2025 and received feedback from:



## **Introductory meeting with Centre Manager**

At the beginning of the enter and view visit, Healthwatch Lancashire met with the Centre Manager to discuss the background and services delivered by the centre and to view the facilities.

## **One to one discussions with patients and their relatives**

Healthwatch Lancashire spoke with people using the service about their experiences including how they felt about the service and the care and treatment delivered by the staff at the centre.

## **Discussions with members of staff**

Healthwatch Lancashire Representatives spoke with members of staff about their experiences of delivering services to patients. Questions centred around support for patients and any improvements staff felt could be made to the service.

## **Observations**

Observations were made throughout the visit. This included patient and staff interactions, accessibility measures in place throughout the centre and the condition and cleanliness of the facilities.

# Summary



Healthwatch Lancashire Representatives made an announced visit on Tuesday 18<sup>th</sup> March and spoke with four people using the service, six members of staff and one relative.

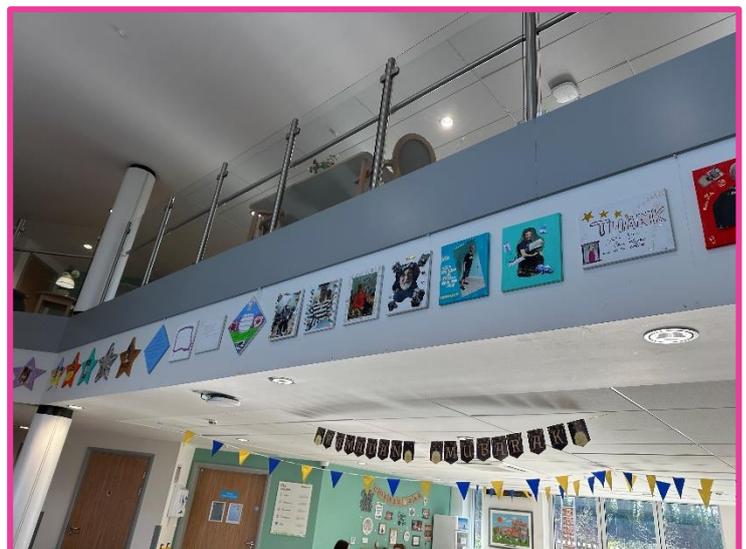
The building has three floors and supports people with long term neurological needs in a residential setting and short term with a rehabilitation function. All three floors are similar in layout with bedrooms, bathrooms and communal areas. The main reception area has a large area with seating and advice boards with what was happening within the centre. There is also a coffee bar for visitors and community groups to meet and help themselves to drinks.

Staff were observed to be kind and courteous towards people using the service and visitors during the visit. Staff were speaking to people and supporting them around the centre. One activity was observed during the visit which was a quiz in the social hub with four people participating and five staff supporting. People were observed to be supported in the gym area with exercises and conversations with relatives about their progress was observed.

Overall feedback from people using the service was positive with them commenting on the care they receive, the range of activities on offer and the support that they receive from all staff. Some recommendations made by people using the service included reminders of activities taking place on the morning and more one to one activities.

Relative feedback was also positive with comments around the quality of care and how they like the visiting times being so open. One suggestion was around the relative meet ups which they do find productive but they felt it would be beneficial to have a member of staff in the meeting. Another relative suggestion was to have a split meeting for people who are there for rehab and another for those who are there for long term residency.

Overall staff feedback was positive with many staff working at the centre for many years. Staff spoke about how supported they feel and how the training they receive is thorough. A recommendation made by staff was around the outdoor area and changes that can be made to improve this to encourage people using the service outdoors and engaged.



# Service Overview

## Location and public access



Brainkind is situated in a stand-alone building which was previously under the name of the Sue Ryder charity. This has now been rebranded under BrainKind. Brainkind has been in building for five years and has three floors supporting up to forty people who use the service. There was signage to the centre and a large car park at the front of the centre with disabled parking bays and a drop off point.

The entrance is secure with a key fob to enter and exit the building. Each area of the centre is also secure and access only via fob. There are lifts on all three floors alongside stairs in order to support all people entering the service.

The Centre is close to amenities such as shops and cafes. Brainkind is situated just off the M55 motorway in Preston.

## Services available

BrainKind offer support for people with acquired brain injury and a range of other neurological conditions such as Huntington's disease, Parkinson's and Multiple Sclerosis.

There are two floors for people who require long terms stays, which on average is approximately five years. This is one floor for rehabilitation where the length of stay is around twelve weeks.

There is a hydrotherapy pool, specialist gym area, specially equipped rehabilitation kitchen, activity rooms and specially adapted appliances and furniture.

"The person-centred programme may include:

- Multidisciplinary assessment of needs
- Educational and therapeutic sessions
- Support for personal, social, and domestic skills
- Community based activities
- Supported leisure activities
- Becoming more independent" (Taken from the website)

# Enter and View observations

## External Environment

The external environment was well maintained and pleasant with seating for people outside, there was a circular path in this area, and at the time of the visit a member of staff was supporting someone to walk around. Healthwatch Lancashire received comments from staff and people that more could be done with the garden including installing planters and a greenhouse which people can use as an activity and promote being outside more.

On arrival it was fully clear where visitors should report to and a sign to show reception would be helpful for new visitors. When Healthwatch Lancashire representatives arrived we were welcomed, asked to sign in the visitors book and asked to sanitise our hands.

## Internal Environment – first impressions

The ground floor of the building has a large area which is bright and welcoming. Here is a reception, drinks area, various seating areas which then leads to a residential area with fourteen ensuite bedrooms alongside a communal area with a kitchen, tables and tv area. The ground floor also housed the hydrotherapy pool and gym for people who require rehabilitation.

There is also a therapy kitchen on the ground floor to help support people using the service get ready for discharge back into their own homes. This area is used to support people to make meals, drinks and learn/re-learn basic tools to enable them to return home.

The ground floor had information boards for people using the service, relatives, staff and visitors. This included information about volunteers, staff shout outs, activities taking place within the centre, star plaques with people who have used the service and have now left. This area also showed visitors and people using the service any upcoming events or groups that they can join. There are coffee mornings taking place in the centre and this space is also offered out to charities to utilise, with a coffee bar that people can access at their leisure. posters displaying details about a



hairdresser and beautician that people can book on to were also displayed.

Situated here is a social hub where activities take place, this area was large and had different style seating, crafts and activities available. There was a piano and a pull-down screen to show films on. This room led directly into the outdoor area.

The first floor was for people using the service who require rehabilitation, they are usually placed here for around 12 weeks. There are twelve ensuite bedrooms alongside a large communal space which is used for meal times, occupational therapy, physio and for individual and group activities. There was enough seating in the area but was felt that the space wasn't being utilised to its full potential.

The top floor was another residential fourteen ensuite bed space for people who are staying for a longer period of time. There is also a communal space in this area with a kitchen, dining area and television.

Large interactive boards were found in the three areas for people using the service to access during the day and staff spoke about how they utilise this for a one to one activity.

Bedrooms on the ground and top floor were decorated with personal possessions of the people using the service. There were also quiet rooms on each floor to either receive visitors, have meetings or for some one to one activities.



## Lounges, dining, bedrooms and other public areas

There was an activities board present in the social hub on the ground floor and on the first floor which was large and explains what is happening that week and where this will be happening. The activities coordinator mentioned that all activities are sent to each floor to ensure the people using the service are aware of what is happening, and they get a personal invite to join the activities of their choice. This is also written in all the nurses diaries, so they are aware of what is happening and when.

Staff were identifiable throughout the visit but there was some confusion with some members of staff wearing Sue Ryder uniforms in some areas and no name badges present. (Recommendation 1)

Signage within the centre was good with words and arrows but these could be updated with dementia friendly signage (Recommendation 2) to make them clearer and with added pictures. This would help visitors to clearly find their way around the centre.

The centre was observed to be clean and free from clutter on all three floors. There was plenty of space to allow people using the service to move around the building.

There were BrainKind values on display in the main area of the centre, along with a 'captured moments' folder with pictures of people taking part in activities for anyone to view.

## Personal profiles and meals

When speaking with the head of service it was highlighted that people have a meal time passport to ensure their needs are catered for and the kitchen is aware of their likes and dislikes along with how they need their food preparing. A conversation with staff also highlighted that a personal file was being further developed with staff going round to all the people using the service and asking them about their likes, dislikes, favourite films, favourite destinations. By doing this the staff can cater personalised activities towards their interests.

When speaking with people on the visit it was highlighted that when it is meal time staff take a menu into their bedrooms to ask what they would like and where they would like to eat their meals. There was one menu present during the visit in the first floor communal kitchen area but this was not the day of the visit. A suggestion would be to put up a menu in the main areas so people can visually see the menu before meal times. (Recommendation 3)



## Staff and resident interactions



During the visit staff members were observed to be supporting the people using the service. Two members of staff were observed to be supporting someone in the gym with physical therapy and encouraging them throughout the session. This continued back into the main area of the centre where their relative was waiting for them. They were observed to be friendly with the relative and engaged in conversation about how they had done today.

At the time of the visit there was a quiz happening in the social hub with four people joining in with this activity. During this activity staff were heard calling out the questions on a large screen and waiting for people to give their answer before putting it down. Staff were observed to be cheering when they got the question correct. Healthwatch Lancashire representatives didn't observe staff reminding people on the three floors about the upcoming activity and if they would now like to join in with the activity.

Staff were also observed attending individual bedrooms supporting people into their beds or to come out into the communal area. There was a staff member speaking with people about an upcoming meeting to discuss their needs, they explained this to them and when it would be.

Towards the end of the visit there seemed to be a lot of staff in the communal area on two of the floors with people in their bedrooms. It was discussed with staff that an afternoon huddle happens for staff to talk about what has happened during the day, however we weren't present for this huddle. It wasn't clear whether staff were waiting for a huddle or whether it was less busy period. This time could be used for interacting with people on a one-to-one basis or engaging people out of their rooms if needs are suitable. (Recommendation 4)

There was also some confusion over what people using the service are called within the centre as staff were referring to them as residents, clients and people using the service.

Staff were observed to be kind and courteous to both people using the service but also visitors that were coming into the centre. Staff were observed to be talking to people by name and asking if they would like anything.



# People using the service feedback

Healthwatch Representatives spoke with four people using the service during the visit.

## Tell us what you think about the centre

When speaking with people, some of them had been at the Centre for no longer than a week but they felt very well cared for and commented on how they felt that staff had read their notes before speaking with them which made a big difference.

**“I have only been here a few days now, but I think they are really good here.”**

**“I am very impressed so far, all staff seem to be on the ball, and they have thoroughly read my notes which is good.”**

One person mentioned that they feel they can speak with anyone in the Centre, and they feel listened to.

**“I think it’s great here, I feel I can speak to anyone here and I feel listened to.”**

## How do you find the care you receive?

It was mentioned that staff are really good and help support them with anything that they need when they are in the Centre. Comments around feeling supported and listened to were reoccurring and they felt that it was a very well supported place.

**“They are really good here, they give you everything you need.”**

**“I do feel listened to here, I like Nicola I think she will do well running this place.”**

**“Its lovely here, they are really supportive.”**

## What activities are on offer and do you join in?

There were conversations about the amount of activities and how there is always something going on that they can join in with.

**“There’s something on everyday that I can get involved with.”**

One person we spoke with commented on how they asked about the breakfast club and someone came and spoke to him about it and how they could get involved.



**“I asked about the breakfast club and they came and explained it to me and spoke to me about how I can join it.”**

Some people talked to us about how they like to go out during the week and how they try to get out twice a week. One person did mention that they intended on going to the breakfast club but wasn't woken up in time to attend.

**“I watch films, I also go out twice a week.”**

**“I wanted to go to the breakfast club the other day, but no one woke me up in time to attend so I missed it.”**

One person mentioned how they are aware of what activities are taking place but they don't feel they want to get involved with them.

**“I don't want to get involved with group activities because it's not my kind of thing.”**

When speaking with people using the service there were a few comments around how they are not reminded about the activities. They are told what is coming up but a reminder in the morning or before the activity would be good in order for us to change our mind if we would like to.

“There are activities, but we aren't reminded about them, we are told at the beginning of the week, but we might change our mind.” (Recommendation 5)

## **How do you find the food provided?**

When speaking with people they mentioned that the food was good and that they get offered two choices and a pudding. There was also conversations about where they ate their food and if they got a choice of where they ate.

**“The food is lovely I can't complain, there is always a choice of two meals and a dessert, I can choose to eat in my room or in a communal area.”**

**“The food is alright but not my favourite.”**

We asked people how they decide what they would like to eat and it became clear that staff went into individual bedrooms everyday and shared a physical menu for the person to choose what they would like.

**“Staff come round and ask us what we would like, and we get to look at what we want.”**

## **Is there anything that could be improved?**

Most of the people spoken with said they didn't think anything could be improved but one comment around reminders of activities was suggested.

**“More reminders about activities that are happening on the day.”** (Recommendation 5)

## **Any other comments or feedback**

**“I have made loads of friends here and I feel I have been well looked after.”**

# Relative feedback

## How do you feel generally about the service?

When speaking with the relative they mentioned that the care was fantastic and they couldn't fault that but they mentioned how they feel communication could be improved with relatives.

**"it's a fantastic centre but I feel communication could be improved with the relatives. I cant complain about the care it is exceptional."**



## Are you happy with visiting arrangements?

A member of staff mentioned that visiting times for rehab is 10am - 9pm due to the rehab activity that they attend, but there are no restrictions to times for our residents and family members have their own access control pass so they can come and go as they please.

**"Yes, I visit every day, and I like the flexibility of the times you can visit."**

## Do you think that you are kept informed about your relative? For example, with their health and future care plans?

This relative felt that they are kept informed but communication between relatives can be limited at times and if a question is asked it feels as though it takes a while for a response.

**"Yes, I do but I feel communication is lacking at times and this could be improved. I have asked questions in the past, but I feel like you have to follow it up."**

## As a relative are you aware of any support that you can access offered by the centre for yourself?

During a conversation with this relative it became clear that the centre holds relative groups but this group is a mixture of long term relatives and rehab relatives which wasn't always helpful as they have different questions and needs.

**"There are regular relative groups, but I don't feel they are always very productive, I think it would be good for a member of staff to be there to facilitate the meetings and address any concerns we have." (Recommendation 6 A)**

**"A suggestion would be a change to the relative group, at the moment it's a mixture of people from permanent residents and rehab relatives, I don't think this is very beneficial as each relative will have different views on what they need. I think this should be split into two separate meetings and chance for us to speak to staff at the end of the meeting with any actions that need implementing as I don't always feel we are fully listened to." (Recommendation 6 B)**

**Are you aware of the social activities provided by the service? And do you feel that you are able to join in these activities?**

There are many activities happening within the centre for people using the service. These activities are open to relatives to join in but this relative mentioned that there are some limitations including charging relatives to join in with certain activities.

**“I have been here before when they have involved relatives in activities and there is a cost, I know they have to charge but I find this hard sometimes as I can’t always afford to join in. This is normally a themed activity like Christmas, Father’s Day, Valentine’s Day, staff get a discount so why can’t relatives.” (Recommendation 7)**

They also mentioned that there are a lot of activities happening for people in the centre but some more one to one activities for people who are there long term.

**“There are many activities taking place here but some more one to one activity would be good for people who are here long term. Some of the activities that are in place are not always relevant or there are not enough staff to take them to the activities.” (Recommendation 4)**

**Would you recommend this service to others?**

**“yes, I definitely would but at times I feel more could be done with relatives when they come.”**

# Staff feedback



Healthwatch received feedback from six staff members during the visit.

## Do you have enough staff when on duty?

All staff members commented that they felt they had enough staff when on duty, it was also mentioned that most of the people in the Centre can support themselves, so they don't need as much support as others do.

**"We have people living here that can support themselves and others need more support, so I feel the staffing is good."**

When speaking with staff it was mentioned that they do feel they have enough staff but with the implementation of volunteers it would mean that more one to one activities can take place.

**"I feel we have enough staff but with the implementation of volunteers I think it will help us do one to one activities."**

## Do you feel supported to carry out a person-centred experience?

All staff again said they felt supported to carry out their roles effectively. There was also discussions about the new documentation which will enable staff to have a better understanding of individual needs throughout the centre.

**"Yes, we always try our best here."**

**"Yes, very much so. We are currently updating our documentation; this will enable a much better understanding of peoples likes and dislikes. Through this we can create even more person-centred experience."**

## Do you feel you have enough training to carry out your duties well?

Staff members mentioned that there is a lot of training that they can take part in and these can vary from online, webinars and in person.

**"yes, we get lots of training."**

**"We have the pod for e-learning and we attend webinars."**

There were some suggestions made about care assistants requiring more training on the needs of the people using the service.

**"I feel the health care assistants could do with some more training on the needs of the people using the service." (Recommendation 8)**

## What is your experience of working here?

When speaking with staff members it was shared that a lot of them had worked for the company for many years. They were complimentary of the service and felt they had built good relationships with both staff and people using the service.

**“I have worked here for many years, and I would highly recommend this to anyone.”**

**“My experience so far has been amazing because we build very good relationships that are healthy and supportive.”**

One member of staff highlighted that the team really care and that a lot of changes have happened since it changed to BrainKind and staff have managed that change.

**“I think the whole team are fab and the care and ethos are outstanding. There have been lots of changes when we became BrainKind and there was a lot of adjusting for the staff.”**

## Are there any changes that can be made to improve the patient experience?

One recommendation was about the garden space and how it could be used more effectively for the people using the service.

**“The garden space could be improved so that people can go out and do some planting or some activities.” (Recommendation 9)**

One subject that was spoken about was the use of the gym and hydrotherapy pool for people who are there long term. How this could be improved and how people who are there long term could get a chance to use those facilities.

**“I know a lot of the people here would appreciate being able to use the gym and hydrotherapy pool, it would be nice to offer it to everyone and not just rehab.”**

# Recommendations

The following recommendations have been formulated based on observations of the environment and feedback gathered from residents, relatives and staff.

1. Ensure all staff are in the right uniform and badges are displayed that show BrainKind and not Sue Ryder.
2. Implement dementia friendly signage throughout the centre so that people using the service can find their way around the centre with ease.
3. Implement a visual weekly menu to communal areas so people using the service can see what it is for meal times before a menu gets brought around.
4. Ensure more one to one activities are taking place with people who are using the service especially those who are there for long term placements.
5. Ensure staff are reminding people about upcoming activities on the day so if they have changed their mind they can still attend.
6. A. ensure a member of staff is present at the relative meetings so that any concerns or questions can be dealt with effectively.  
B. look into the possibility of having separate meetings for relatives who have loved ones there long term and rehab relatives to ensure that everyone is involved. Put it out to relatives what time would be more suitable so more can attend.
7. Look at the activities that relatives are asked to join in with and see if they are suitable for all needs.
8. Look into specific training for staff around the needs of people who are using the service to ensure they are fully equipped to support them.
9. Consult with people using the service of how to maximise the outdoor space.

# Provider response

Recommendation	Action from provider	Timeframe	Comments
Ensure all staff are in the right uniform and badges are displayed that show BrainKind and not Sue Ryder.	Traditionally Brainkind do not have a uniform, the NCC Services have a working group that is currently looking to replace all Sue Ryder branding as they have voted to retain uniforms in our services. Staff are advised that they should wear their name badges over the top of the Sue Ryder logo so we will remind staff to do so in the interim. Unfortunately the name badges do take a long time from order to arrive but we will raise this internally. All new staff are in non-branded uniform	3 months	Ongoing working group
Implement dementia friendly signage throughout the centre so that people using the service can find their way around the centre with ease.	I will need to discuss this with branding team as this would be something that they would lead on. We will explore some temporary measures in the interim	1 month	Planned discussed will take place with the comms team
Implement a visual weekly menu to communal areas so people using the service can see what it is for meal times before a menu gets brought around.	This has been introduced last week and now the daily menu is up on the TV screens on the corridor.	Complete	Complete

<p>Ensure more one to one activities are taking place with people who are using the service especially those who are there for long term placements.</p>	<p>Our activities supervisor is putting together Activities care plans for all which will include 1:1 time. There is an element of 1:1 activities that take place already, this is always a competing challenge along side community visits due to the complexities of the people that we supports care needs. We have a working group that meets monthly to discuss planning and opportunities, these meetings also consider our volunteers</p>	<p>2 months</p>	<p>Care plans are underway for individual likes/dislikes and these are used and facilitate conversations with the people we support when planning activities.</p>
<p>Ensure staff are reminding people about upcoming activities on the day so if they have changed their mind they can still attend.</p>	<p>Activities have now been added to the corridor TV screens on a cycle so that all staff and the people we support can see what is planned for that day.</p>	<p>Complete</p>	<p>Complete</p>
<p>A. ensure a member of staff is present at the relative meetings so that any concerns or questions can be dealt with effectively.</p> <p>B. look into the possibility of having separate meetings for relatives who have loved ones there long term and rehab relatives to ensure that everyone is involved. Put it out to relatives what time</p>	<p>This meeting is a peer to peer meeting. We are reinstating the Friends and Family forum which is Chaired by the Service Manager and addresses any concerns.</p> <p>The last meeting took place in January and with recent changes in the service February and March's meetings were postponed. These will be reinstated with immediate effect.</p>	<p>1 week</p>	<p>Letter has gone out to families inviting them to the meeting in May</p>

would be more suitable so more can attend.			
Look at the activities that relatives are asked to join in with and see if they are suitable for all needs.	<p>We will discuss this at our next Family and Friends forum and seek interest. Our Activities Supervisor will make contact with the PWS families to see who would like to be involved.</p> <p>With regards to the fee for the special meal activity. This only applies to anyone over the 'plus one' as we don't have the budget. Residents are able to have one paid for person.</p>	1 month	This was discussed at the meeting held yesterday. It is an ongoing discussion
Look into specific training for staff around the needs of people who are using the service to ensure they are fully equipped to support them.	Discussed this with the Practice Educator who will explore the additional training. We do have condition specific training that is not part of the mandatory induction training but this is completed adhoc so we will look to introduce a regular slot for these sessions.	1 month	Ongoing
Consult with people using the service of how to maximise the outdoor space.	This is an ongoing project that regularly consults with the people we support at our Centre Committee – notes of these meetings are kept and shared with the people we support.	12 months	This is part of a larger piece of work that the residents have been involved in following a donation of £100,000 to the service

## Questions

### Is the report factually accurate?

Yes, there are a couple of points that I have added in the feedback.

### Did you learn anything new about residents' views and experiences, or anything else, as a result of the Enter and View undertaken by Healthwatch Lancashire?

Nothing completely new but it was extremely reassuring not to see anything we weren't aware of.

### Any other comments?

Just to say a huge thank you for taking the time to review our service and provide the valuable feedback. Jodie and Emmy were extremely professional and made themselves available to anyone that wanted to speak to them. It was a pleasure having them on site.



**healthwatch**  
Lancashire

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