



## CASE STUDY:

# Lynda's Story

Lynda's story provides an uplifting insight into how neurorehabilitation can have positive, long-lasting effects on an individual's physical and mental wellbeing, even when there is a significant time period between the brain injury occurring and starting rehabilitation. Lynda's story highlights her dedication and the commitment of the multi-disciplinary team towards her rehabilitation journey.



### Background

Lynda was an independent woman who had a job, family and friends. However, she has had a long history of battling with substance misuse. This has placed her at additional risk to the influence of others, up to an extent where she was known to the judicial system. The exposure to these negative influences resulted in her suffering a hypoxic brain injury following an overdose in 2010, from which she remained in a coma for three months.

### Behaviour on Admissions/Risks

On admission to Richardson Care in December 2014, Lynda was wheelchair-bound. She had been told that it would be very unlikely for her to walk again. Her ability to mobilise was minimal: she was only able to mobilise for extremely short distances and required a walking aid.

When she arrived at Richardson Care she expressed her wishes to be as independent as possible and walk again. However, she had little insight into her own physical limitations. Lynda also needed frequent prompting and encouragement with all aspects of daily living (such as personal care).

“ I love it here and I have grown as a person, but I am ready to move on all because of the decent services I have received here. ”



## Interventions

The multi-disciplinary team at Richardson Care adopts a person-centered and individualised approach when supporting adults with acquired brain injury. The team assessed Lynda and worked with her to devise a care and treatment plan that would meet her needs and address behaviours that could be described as challenging. The plan is reviewed on a regular basis to ensure it stays relevant and enables staff to support Lynda to the best of their ability. The therapies currently offered to Lynda based on her needs are:

- **Psychology input** - Lynda is offered various sessions facilitated by the psychology team. These consist of Cognitive Stimulation Therapy, Relaxation Group and 1:1 sessions that focus on improving and maintaining Lynda's emotional well-being. She is encouraged to use her coping mechanisms when facing challenges, and staff are aware of her early warning signs. These sessions also provide Lynda with the opportunity to discuss any issues or anxieties and receive reassurance and positive feedback on her behaviour.
- **Physiotherapy input** - Lynda engages in weekly physiotherapy sessions. These help her to maintain flexibility in her back and ankle and to continue to work on balance, strength and stamina. They focus on improving her physical well-being and strength, working collaboratively to reach her goal of independence.
- **Positive Behaviour Support (PBS) Approach** - care plans, risk assessments and intervention guidance; working with Lynda to recognise and reinforce positive behaviours and increase her independence.
- **Consistent support** from care workers enables Lynda to develop and maintain a good therapeutic rapport with staff, helping her to manage her surroundings and behaviour.
- **Social and environmental** influences offered at the placement allow Lynda to utilise her independence and build confidence. These include: meaningful activities, consistent structure and routine, trips to the community with staff support, opportunities to socialise and build positive relationships with other residents.

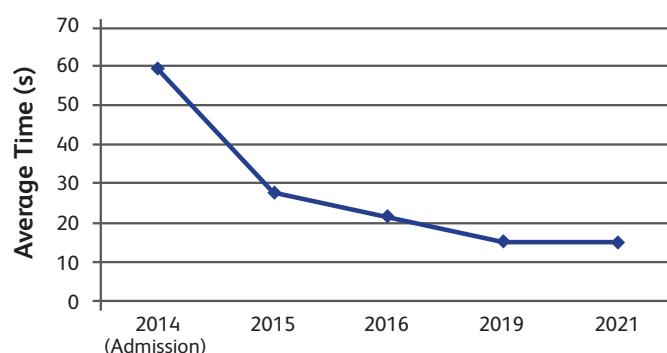
## Progress/Current Presentation

Throughout her time at Richardson Care, Lynda's strive for independence has been a prominent motivating factor for her. This is reflected in the significant progress she has made at every stage of her rehabilitation. Her determination was evident in her initial physiotherapy assessment where she stated she wanted to walk again. In 2019 (after being at Richardson Care for around four years) Lynda reached the stage where her strength, balance and confidence had been built to a level where she could walk independently with no aids. Throughout her physiotherapy sessions, staff adopted a person-centred approach to maintain engagement and compliance and to work with and around her cognitive difficulties. This approach has proved extremely effective with Lynda and has increased both her physical and mental well-being.

## Timed Up & Go Test

The graph below provides a visual representation of Lynda's substantial progress whilst at Richardson Care. The 'Timed Up and Go Test' is used to monitor Lynda's improvements in walking 12 metres unaided, where the average time is taken from three attempts. On admission in 2014, it took around 60 seconds for Lynda to complete the test. There was then a significant improvement in the following year and her average time decreased to 28 seconds. The years following have continued to see small improvements. The most recent test, completed in January 2021, reported an average time of 14.90 seconds. Despite Lynda's average time only being 0.35 seconds quicker than the previous year, it highlights how she is maintaining her mobility status and not showing decline. This is a vast achievement considering the restrictions in place due to the pandemic that has ensued between these two time points. Even with the limited access to physiotherapy and a reduced opportunity to go outside for walks, Lynda has remained consistent and motivated in her recovery with the support of her care team.

## Performance on Timed Up & Go Test





### Emotional Well-being

In addition to her physical progress, Lynda has been supported by care staff and the psychology team to ensure the quality of her emotional well-being and improve her resilience. Lynda still requires support to build a healthy resilience to stress by using effective management techniques, particularly regarding her experience of health anxiety, and this is less frequent. Through psychology sessions, such as relaxation and 1:1 coping skills sessions, Lynda has developed a good inventory of skills to use when experiencing frustration or anxiety. She appears to have developed more insight into her emotions, knowing when to seek out staff support. This has aided in the development of self-esteem, confidence and resilience.

### Daily Living Skills

Lynda continues to make significant improvements in her daily living skills; these include cooking her own meals with little support, attending the local swimming pool, visiting the local shops to complete her shopping, going to cafes for coffee, going to bingo and socialising

with staff and residents. Lynda is often observed to be encouraging other residents during group activities. Using these skills, Lynda secured a part-time paid job at The Richardson Mews, where she completes office tasks. This is in line with her ASDAN (Awards Scheme Development Accreditation Network) courses, which she thoroughly enjoys and shows dedication to.

“ I love having physio,  
the food is lovely,  
and the staff are very  
friendly and I have achieved  
a lot with Sallie (ASDAN  
coordinator) and gotten loads  
of certificates.”

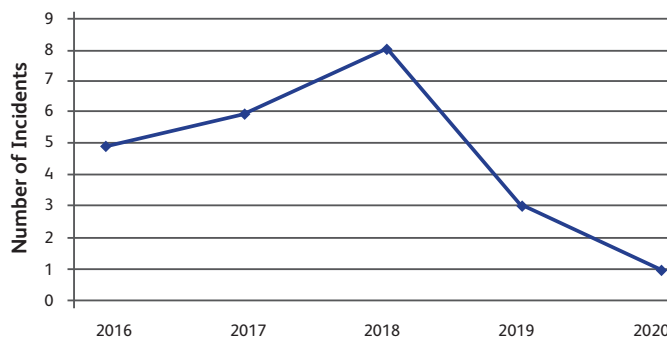
## Challenging and Risk Behaviours

Lynda is a caring and empathic lady. She is usually calm and pleasant. However, she at times presents with behaviours that can be described as challenging. These tend to be going out alone, thus placing herself at risk of accidental injury and vulnerability. Lynda experiences difficulties with budgeting effectively and is also at risk of absconding. These behaviours highlight her vulnerability associated with her impulsivity. However, the amalgamation of the positive interventions and consistent staff support offered at The Richardson Mews is reflected in the reduction of such behaviours.

Lynda could be viewed as a model resident at The Richardson Mews where she continues to progress in her rehabilitation journey. The continued staff support she

receives, coupled with her own determination means it is reasonable to say that her goal of moving on to supported living in the future is well within her reach.

### Recorded Incidents of Challenging Behaviour



### Staff comments:

“Lynda has become a part of The Richardson Mews family and I have witnessed her growth since her admission. When Lynda first came, she was told she would not be able to walk and would be wheelchair bound. Now she can walk without any support. Lynda is very bubbly and always welcomes new residents with open arms. The day she leaves will be a sad day for The Richardson Mews, but it will be good to see her progress and she deserves to live the life she wants.”

Gill Ayris, Admissions & Referrals Manager

“Lynda is the prime example of how a person living with a brain injury can still make considerable physical improvements given the right environment and therapy approach. Lynda was not in the early stages of her rehab and her injury was more than 12 months prior to coming to The Richardson Mews.”

Guy Stewart, Physiotherapist

“The day Lynda arrived she was withdrawn, unable to walk and had limited speech. Lynda has shown great determination throughout her rehabilitation. Today, she has a voice. It is a pleasure to be part of Lynda’s journey.”

Jane Payne, Operational & Clinical Officer



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