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the brain injury association

Reintegration in Action:

Community, Family and Technology in Brain Injury Care



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Video 1 **Welcome from the Sponsor** Richard Brooks, Partner, RWK Goodman & **Conference Introduction** Luke Griggs, CEO, Headway - the brain injury association

Video 2 **From Rehabilitation to Real Life: Rethinking Success After Brain Injury**

Dr David Shakespeare, Consultant in Neurological Rehabilitation Medicine, Lancashire Teaching Hospitals

The aim of this session is to open a reflective and critical discussion around how "success" is currently defined within rehabilitation pathways, which are the product of historical patterns of commissioning and current funding restrictions. Whilst the limitations of commissioning models and wider societal pressures can conspire to limit translation into meaningful outcomes in everyday life, there are many reasons for hope that we can together build better.

Delegates will consider the distinction between clinical rehabilitation gains and sustainable community outcomes, recognising why progress achieved in structured environments does not always transfer into everyday life. The session introduces a shared conceptual framework for viewing community integration as an important outcome in its own right, rather than simply a by-product of rehabilitation input. Providing a system-wide perspective, the discussion will establish a common analytical reference point for the biological, clinical, managerial and medico-legal themes explored throughout the wider conference programme.

Video 3 **Beyond "mild": understanding recovery and outcomes after mild traumatic brain injury**

Dr Ivan Koychev, Clinical Associate Professor in Neuropsychiatry, Imperial College London

This session will explore why the consequences of mild traumatic brain injury can vary considerably between individuals and why the term "mild" does not necessarily predict the course or outcome of recovery. It will consider current understanding of neurological recovery following injury, including the relationship between the initial injury, persistent cognitive and neuropsychiatric symptoms, and longer-term functional outcomes. The talk will address some of the challenges involved in assessing prognosis, distinguishing persisting effects of injury from other contributing factors, and interpreting clinical investigations that may appear normal despite ongoing symptoms. Case studies will be used to illustrate differing recovery trajectories and the practical implications for rehabilitation, case management and medico-legal decision-making.

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Video 4 **Beyond the 'good day': understanding fragile recovery after brain injury**

Dr Benjamin Marram, Neuropsychologist, Clarity Psychology

This session explores how psychological factors such as mood, anxiety, trauma and stress interact with cognitive challenges including fatigue, reduced insight and fluctuating capacity to shape recovery after brain injury. It highlights how these issues combine to influence behaviour, expectations and community reintegration, and why "good days" can be misleading when planning support. The session also considers the wider context in which recovery takes place, recognising the impact of family dynamics, social circumstances, health services, ageing and external pressures. It will explore the lived experience for families, including increasing stress, shifting roles and loss of identity, alongside themes such as participation without purpose and the importance of belonging. Drawing on neuropsychological thinking, the session will focus on recognising early signs of fragility, improving communication across clinical, commissioning and medico-legal contexts, and supporting earlier, more effective intervention.

Video 5 **Running on Empty: Fatigue, Routine and Support in Community Reintegration**

Natalie Mackenzie, Director & Cognitive Rehabilitation Therapist, BIS Services

Fatigue is one of the most common and persistent consequences of brain injury, and one of the least visible. It is associated with reduced participation, strained family roles and poorer employment outcomes, and it can quietly undermine reintegration long after formal rehabilitation ends.

In rehabilitation settings, routine, planned rest, a quieter environment and staff who notice when someone is flagging all help protect energy. At home, much of that structure falls away. Days are unpredictable, demands compete, and people are left to judge their own limits at a point when insight, planning and processing speed may be affected. Many are doing this without specialist support, with families filling the gaps.

Drawing on community cognitive rehabilitation practice, this session considers why fatigue management needs to run alongside any community rehabilitation, and what skilled support staff contribute by recognising early signs and adjusting sessions as they go. It looks at how fatigue presents in everyday life, why one-off questionnaires miss fatigue that shifts within a single day, and how simple activity tracking, on paper or with digital tools, builds a clearer picture of what an activity really costs.

The session sets out what current evidence and guidance support, including energy management, pacing and psychological approaches. Learners will leave with practical approaches that survivors, families and support workers can use, with or without formal services.

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Video 6

Connected Recovery: How Technology Helps — and Hinders — Brain Injury Rehab at Home

Sarah Daniel, Director & Consultant Neurological Physiotherapist, MotionRehab & Jennifer Benson - Founder and Independent Speech and Language Therapist, Jennifer Benson Speech and Language Therapy Ltd

This presentation explores the role of technology in supporting rehabilitation at home following brain injury, highlighting both its advantages and its limitations. It will examine how various technological solutions can enhance access to therapy, promote independence, and enable more consistent practice outside of clinical settings. At the same time, the presentation will consider key challenges, including issues with motivation and engagement, accessibility barriers, and the risk of over-reliance on technology. By considering both the benefits and potential drawbacks, the session aims to provide a balanced perspective on how technology can be effectively and safely integrated into home-based rehabilitation programmes.

Video 7

Living Within the System: Inequality, Access and Community Life After Brain Injury

Dr Caroline J. Bald, Lecturer in Social Work, The Open University, Chair of the Brain Injury Social Work Group

In this session, Dr Caroline Bald will consider inequality - who is able to access that support - and what happens when they can't? Focusing on the realities of statutory systems, this session explores how access to support is shaped by NHS pathways, local authority thresholds, interprofessional blocks and wider social inequalities. It highlights how people and families navigate fragmented provision, limited resources, and inconsistent decision-making - and how these conditions directly influence whether community reintegration is sustained or begins to break down. Drawing on practice, research and lived experience, the session will identify the early, often overlooked indicators that support is becoming unsustainable, and consider what this means for professionals working across health, social care and legal contexts.

Video 8

Spinning Plates in the Dark: Decision Making and Effective Practice in Community Reintegration - what ingredients help?

Dr Mark Holloway, Senior Brain Injury Case Manage & Expert Witness, Head First

In this session, Dr Mark Holloway will recognise early indicators that facilitate successful community reintegration and those that may more likely lead to breakdown during community reintegration after brain injury, by identifying bio-psycho-social, administrative, legal, and financial challenges that impact upon potential success. Utilising real-world longitudinal examples, his presentation will illustrate different long and short-term approaches required to address complexity. He will also reflect upon decades of experience of working with some individuals, and the varying challenges that present across a lifespan, to identify what does it look like when it works, and what to do if it does not.

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Video 9

Planning for the Case You'll Defend in the Future: Proving Need When Outcomes Are Human

Ian Brownhill, Barrister, 39 Essex Chambers

This session explores how rehabilitation, care and support decisions are scrutinised within different legal frameworks, touching on personal injury claims, Court of Protection decision making and safeguarding frameworks. It will examine how evidence is assessed when outcomes relate not only to clinical change, but also to participation, long-term sustainability, risk reduction, caregiver burden, non-linear progress and quality of life.

Learners will consider how principles of reasonableness and proportionality can be applied to the planning and justification of longer-term, participation-based support. The discussion will also address how short-term funding decisions and false economies may contribute to repeated breakdowns, escalating needs and increased long-term risk.

Practical focus will be given to how clinical and case management decisions are interpreted within legal processes, including areas of challenge or vulnerability. Learners will gain insight into articulating, evidencing and documenting long-term need in a way that is coherent across clinical, commissioning and legal settings.

Video 10

Panel Discussion: What We Missed, What Worked, What Changed: Community Integration Through Multiple Lenses

The presenters, Luke Griggs , Ben Marram, Caroline Bald, Ian Brownhill, Mark Holloway, Ian Carrier, Partner RWK Goodman, Alastair Wallace, CEO, Brainfood Ltd, Mark Kennedy Founder, Brain or Shine & Aidan Price - Trainer and Brain Injury Survivor

A multidisciplinary panel exploring one brain injury journey through different perspectives, highlighting where reintegration succeeds, struggles, or nearly fails.

The discussion focuses on critical decision points rather than personal narratives: where assumptions were made, early warning signs overlooked, or system responses unintentionally increased risk. Panel members reflect on how clinical judgement, therapy input, case management decisions and legal frameworks interacted in real time, (often under pressure and with incomplete information) and how alternative decisions might have altered outcomes.

Particular attention is given to tensions between autonomy and safety, optimism and realism, short-term solutions and long-term sustainability. By hearing directly from families and a brain injury survivor alongside those responsible for planning, funding and delivering care, delegates gain an integrated understanding of how professional decisions land in everyday life and how experienced practitioners can better anticipate consequences, align perspectives and prevent avoidable breakdowns.

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Biographies



Luke Griggs

Chief Executive of Headway UK

Luke was appointed Chief Executive of Headway UK in December 2022 having worked in various roles throughout the charity for the past 17 years, including Director of Communications, Acting Director of Services, and Deputy Chief Executive. Since being appointed CEO, Luke has been working on a programme of modernisation for the charity and the implementation of a new long-term strategy, which was launched in August 2024.



Dr David Shakespeare

Consultant in Neurological Rehabilitation Medicine, Lancashire Teaching Hospitals

Dr Shakespeare has been a consultant in neurological rehabilitation for more than 20 years, looking after both level 1 and 2 neurorehabilitation units and working closely with community rehabilitation services, colleagues in social care and the voluntary and independent sector. Travelling around Lancashire and South Cumbria to see patients in the community and spending some years in clinical leadership in his Trust have given him insights into how the neurorehabilitation system both functions and dysfunctions.

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Dr Ivan Koychev

Clinical Associate Professor in Neuropsychiatry, Imperial College London

Ivan Koychev is a clinical academic psychiatrist at Imperial College London where he leads a research group working on the identification and intervention in preclinical dementia. In this context he leads a multi-site clinical trial testing the effects on tau accumulation of a glucagon-like receptor-1 agonist (semaglutide) in amyloid positive ageing adults with no dementia. His group also leverages digital therapeutic approaches to develop non-pharmacological methods to reduce dementia risk through lifestyle modification and cognitive remediation. He is the co-lead on a large study funded by Alzheimer's Research UK, Alzheimer's Society, NIHR and the People's Postcode Lottery aiming to establish the clinical utility of blood biomarkers in dementia. This work builds on his PhD at the University of Manchester (optimisation of proof-of-concept clinical trial methodology for cognitive enhancers) and subsequent NIHR Integrated Clinical Training in London and Oxford. His clinical work is focused on the assessment and management of patients with neuropsychiatric presentations in acute medical settings.



Dr Ben Marram

Consultant Clinical Neuropsychologist, Independent/Associate of Clarity Psychology

Dr Ben Marram is a Consultant Clinical Neuropsychologist and Chartered Occupational Psychologist with specialist expertise in acquired brain injury, neurological conditions, and psychological rehabilitation.

He is an associate of Clarity Psychology, a team providing neuropsychological therapy, consultation, and rehabilitation services across the UK.

With a career spanning NHS, independent, and medico-legal contexts, Dr Marram has extensive experience supporting individuals and families affected by traumatic brain injury, stroke, and progressive neurological disorders.

His clinical approach integrates evidence-based neuropsychological assessment with tailored therapeutic interventions, drawing on cognitive behavioural, systemic, and third-wave psychological models. Alongside direct clinical practice, Dr Marram works closely with interdisciplinary teams—including occupational therapists, physiotherapists, and speech and language therapists—to deliver holistic, values-based rehabilitation.

He also provides supervision, training, and consultation to clinicians and organisations seeking to develop neuropsychological services. Dr Marram is committed to advancing compassionate, person-centred care, with a focus on helping people rebuild their lives after neurological illness or injury.

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Natalie Mackenzie

Founder and Director BIS Services, Cognitive Rehabilitation Therapist

Natalie Mackenzie is a Cognitive Rehabilitation Therapist, Certified Brain Injury Specialist Trainer, and Certified ADHD Coach with over 25 years of experience in neurorehabilitation. As the Founder and Director of BIS Services, an award-winning organisation, Natalie has worked with hundreds of clients an Services is recognised as the UK's leading provider of cognitive rehabilitation, offering innovative, evidence-based solutions to support individuals with brain injuries, spinal injuries, neurodiversity, and other neurological conditions.

Natalie is also known as The Brain Injury Therapist, a global platform providing online education, one-to-one cognitive rehabilitation programs, and group memberships for individuals unable to access statutory services due to location or funding barriers. She is the author of the Fatigue Management Journal, a six-month education and tracking resource for managing brain injury fatigue, and regularly delivers training to professionals, workplaces, and educational institutions on brain injury and ADHD and fatigue management.

In addition to her clinical expertise, Natalie is the Chair of the International Society for Cognitive Rehabilitation, where she works to advance global standards and practices in the field. She has been proud to serve as a Trustee for Headway SELNWK and sits on the steering committee for KBIF, contributing to the development of neurorehabilitation services and advocacy. Natalie's academic background includes a BSc in Psychology and an MSc in Cognitive Neuropsychology, alongside extensive training in working with both adults and children across the spectrum of traumatic brain injuries, from concussions to severe injuries. Her leadership at BIS Services has also extended to integrating AI into operations, enhancing recruitment, training, onboarding, and therapy delivery to improve accessibility and outcomes for clients worldwide.

Beyond neurorehabilitation, Natalie works as a Business Strategist for health and wellness businesses, helping entrepreneurs prioritise brain health and long-term cognitive performance. She is passionate about equipping business owners with strategies to optimise focus, mental energy, and decision-making while safeguarding their brain health for the future.

Natalie's contributions to the field have earned her numerous accolades, including the NR Times Neuro-Rehab Leader of the Year and the Leadership and Management Award at the Kent Women in Business Awards. A regular contributor to industry publications such as NR Times, Natalie's expertise has been featured in The Times, The Guardian, The Independent, Stylist, Daily Express, The Sun, Medium, I Paper, The Telegraph, and more. She has also been interviewed on the BBC and local radio stations, raising awareness of brain injury, ADHD, and cognitive health. Through her leadership at BIS Services, her work with entrepreneurs, and her global advocacy, Natalie continues to push the boundaries of neurorehabilitation and cognitive performance, combining human-centered support with operational and technological innovation to deliver improved functional outcomes.

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Sarah Daniel

Director and Neurological Physiotherapist, MOTIONrehab Limited

Sarah Daniel is the Founder and Owner of MOTIONrehab Limited and a pioneering leader in neurological physiotherapy.

Driven by a clear vision to transform rehabilitation, Sarah launched her private neurological physiotherapy practice in Yorkshire in 2007. This later evolved into MOTIONrehab in 2017 - an innovative organisation dedicated to improving the quality of life for both adults and children living with neurological conditions.

In 2018, Sarah realised an ambition by opening the UK's first Intensive Robotic-Led Neurological Rehabilitation Facility in Leeds, integrating robotics and virtual reality into therapy. Her mission was bold yet simple: to accelerate recovery, helping individuals regain mobility, independence, and confidence faster than traditional approaches allowed. This innovation earned international recognition, including a prestigious digital innovation award from Google and the Financial Times.

Building on this success, Sarah has expanded MOTIONrehab creating a network of cutting-edge facilities that continue to redefine neurological rehabilitation in the UK. Her approach - combining advanced technology with high-intensity, evidence-based therapy - has challenged conventional models of care and delivered life-changing outcomes for patients from across the globe.

A recognised voice in her field, Sarah is frequently invited to speak at international conferences and advise on rehabilitation service development worldwide. She remains actively involved in academic research both in the UK and internationally. Alongside her clinical leadership, Sarah also works as an Expert Witness in Civil Litigation and contributes to the education of future clinicians as a guest lecturer at universities across the UK.

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Jennifer Benson

Founder and Independent Speech & Language Therapist, Jennifer Benson Speech and Language Therapy Ltd.

Jennifer Benson is an award-winning Speech and Language Therapist with over 25 years' experience in adult neurological rehabilitation, spanning both NHS and independent practice. Following a longstanding NHS career, she established her own specialist practice, which has grown over the past 7 years into a highly regarded service delivering bespoke, evidence-based intervention for individuals with complex communication and swallowing needs.

Jennifer has extensive clinical expertise in acquired brain injury, progressive neurological conditions, and complex neurodisability. Her work focuses on the assessment and management of communication within real-world contexts, with a particular emphasis on supporting clients to meet their functional goals. She has specialist expertise in augmentative and alternative communication (AAC), communication technology, and voice banking, supporting individuals to maintain identity, autonomy, and participation following neurological injury or illness. She leads a team delivering person-centred intervention across community rehabilitation settings, and works closely with multidisciplinary teams to ensure communication is effectively integrated into wider rehabilitation planning. Jennifer is actively involved in complex case management and acts as a treating therapist within the civil litigation arena, bringing a detailed understanding of how early decisions and communication support impact longterm outcomes. She also undertakes a select number of expert witness instructions. Jennifer holds a national advisory role as Clinical Advisor to the Royal College of Speech and Language Therapists. She is also a member of the Expert Core of the MND Association Community of Practice, contributing to national strategy, multidisciplinary education, and the development of clinical standards in MND care. Her work includes input into research, NICE guideline review, and the development of information based resources for people living with MND and professionals working with them. She is a recognised speaker and educator, contributing to teaching across clinical and multidisciplinary audiences. Jennifer has also engaged with national media on communication-related topics, particularly in relation to voice banking and the use of technology to support communication in progressive and acquired conditions. Jennifer is passionate about the central role of communication in rehabilitation and the risks associated with under-identifying communication needs following brain injury. She is a strong advocate for ongoing specialist intervention and for ensuring that communication is fully embedded within rehabilitation, to reduce the risk of breakdown and support meaningful, sustainable interaction and integration.

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Dr Caroline J. Bald

Lecturer in Social Work, The Open University

Dr Caroline J. Bald is a social work academic at The Open University with a professional background in probation and youth justice. Her work sits at the intersection of social work, criminal justice, and health, with a particular focus on acquired brain injury (ABI) and its implications for education, practice, and systems design. Caroline is Chair of the Brain Injury Social Work Group (BISWG) and a Director of the British Association of Social Workers (BASW), where she leads the Criminal Justice Special Interest Group. From her role as research fellow on the NIHR Heads Together project, she works to strengthen the visibility of social work and social care within interdisciplinary brain injury contexts and to promote more integrated responses across statutory, health, and third sector systems.



Dr Mark Holloway

Senior Brain Injury Case Manage & Expert Witness, Head First

Dr Mark Holloway is a social work qualified independent brain injury case manager and expert witness and has worked with individuals and families affected by acquired brain injury since 1991. He has been a Case Manager for Head First since 2001, working across the UK and further afield. Mark is Advanced Member of British Association of Brain Injury Case Managers (BABICM), a Trustee of the Brain Injury Social Work Group, and an Executive Committee member of the International Network of Social Work Acquired Brain Injury. He is a researcher on the Heads Together project and has published academic articles and book chapters relating to brain injury and co-authored a book on the family experience of brain injury. Mark has contributed to the writing of NICE Guidelines in relation to Supported Decision Making and Rehabilitation following Brain Injury. Mark has experience in providing evidence in civil, criminal and criminal injury compensation cases, has provided evidence to the Court of Protection and written evidence for the House of Commons Select Committee on Health third report on Head Injury and to the House of Lords Select Committee review of the Mental Capacity Act. He has acted as Single Joint Social Work Expert in cases for the Family Courts and the Court of Protection and acted as an expert witness in the Family and Coroner's Courts.

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Ian Brownhill
Barrister, 39 Essex Chambers

Ian was awarded the Legal 500 Bar Awards junior of the year for Court of Protection and community care in 2023.

He is one of the country's leading specialists in mental capacity, medical treatment disputes and has a broad practice in public, human rights and regulatory law. Ian sits as a Recorder of the Family Court and as His Majesty's Assistant Coroner for Kent and Medway. Ian authored, "An Introduction to Health and Welfare Disputes involving High Net Worth Individuals" in 2025.



Ian Carrier
Partner, RWK Goodman

Ian is a partner and head of the Thames Valley Personal Injury Team at RWK Goodman. He also heads up the Spinal Injuries Team. From the start of his career Ian has specialised in personal injury work and has been conducting claims of maximum severity for the past three decades. His work is focused on traumatic brain injury, spinal cord injury and other life-changing injury claims. He also has expertise in foreign jurisdiction cases and claims involving the MIB.

Ian has been a Chambers & Partners and Legal 500 Band 1 lawyer for many years. He is a member of the Association of Personal Injury Lawyers (APIL); Oxford Medico-Legal Society and former regional chair of the Motor Accidents Solicitors Society (MASS), an organisation which lobbies the Government to ensure and protect the rights of the accident victim.

Ian acts for children and adults and is passionate about his work. He understands the complex and specific needs of seriously injured individuals and the importance of achieving excellent outcomes for them. Chambers Legal Directory's independent research asserts that Ian has "a genuine interest in you as a person", while also stating that he "is admired for his considerable experience in catastrophic personal injury claims involving brain and spinal injuries".

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Biographies



Mark Kennedy
Founder of Brain or Shine

In 2012, Mark sustained a traumatic brain injury after blacking out in a toilet whilst on holiday. When he returned to the UK, he was told that over 90% of people don't survive this level of trauma, never mind walking and talking. After several scans, he was discharged from the hospital eight weeks later and told to live his life as normal. Unfortunately, nobody told him or his wife, Jules, about the long-term side effects. Jules noticed that he was becoming more and more withdrawn, anxious and snappy. He suffered from fatigue and was forgetful. After pushing and pushing at the hospital, they were referred to a support programme at a local brain injury community hospital. This gave them an understanding of what brain injury is and how it can have long-term hidden effects. At this point, Jules and Mark realised that support in the brain injury community was lacking, so they set up Brain or Shine, a project designed to help those affected by brain injury. This isn't just about the survivor, it includes partners, families, friends and work colleagues. Since sustaining a brain injury, this has made Jules and Mark have been determined to live their lives around brain injury and not be held back by the daily challenges. They've won multiple awards through their business, Mark has run over 100 half marathons and was also named Alex Richardson Achiever of the Year in 2022.



Alastair Wallace
Founder and CEO, Brainfood Ltd

Alastair Wallace, CEO of Brainfood Ltd, is a leadership expert, award-winning trainer, and brain injury survivor. He's helped over 23,500 leaders across 20+ countries become more confident, connected and human in how they lead. But after a single missed step at Oxford Circus station shattered his skull (and his identity), Alastair had to learn to rebuild himself from the inside out. After a decompressive craniectomy, cranioplasty and later on a subgaleal peritoneal shunt and corrective plastic surgery, he is here to talk about his journey as a TBI survivor. His fascinating and humorous TEDx Talk from 2025 tells us more about his recovery:https://www.youtube.com/watch?v=ej_AyUnu0bk



Aidan Price
Trainer and Brain Injury Survivor

In 2021 Aidan slipped and hit his head; he was rushed to a specialist brain injury hospital, where he spent 5 weeks in a coma. Upon waking his recovery started, he spent 3 months undergoing rehabilitation in hospital, where he had to learn to walk again. Just under two years later Aidan began a phased return to work and he's pleased to be working full time.

In addition to working, Aidan now delivers a number of talks and Training sessions on behalf of Headway.

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”Headway has shown me that brain injury isn’t the end, that we are still full of potential and have so much to give.“

Stef, brain injury survivor

Headway UK is the leading source of brain injury information, offering specialist help at all stages of injury.

Scan the QR code to learn more about our work, stay in touch and make a donation.

www.headway.org.uk

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Brain injury lawyers. Here to build a team around you.

At RWK Goodman, we understand the impact that a head or brain injury can have on individuals and their families.

Always by your side, our dedicated team of brain injury experts will guide you through the claims processes, ensuring you receive the compensation you are entitled to, and any long-term needs are fully taken care of.

Speak with our team on
enquiries@rwkgoodman.com

Or visit
rwkgoodman.com/brain-injury

