



Northwood Complex Care, Blackburn, BB2 6PN

[Enter and View Report](#)

Tuesday 9th December 2025

10.30am

# healthwatch

## Blackburn with Darwen

### DISCLAIMER

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

Contact Details:

**Northwood Complex Care**  
206 Preston New Rd  
Blackburn  
BB2 6PN

Staff met during our visit:

**Munawar Hussain (Manager)**  
**Heather Birchall (Home Coordinator)**  
**Tahir Hussain (Nominated Individual)**

Date and time of our visit:

**Tuesday 9<sup>th</sup> December 2025 10.30am**

Healthwatch Blackburn with Darwen  
Representatives

**Michele Chapman (Lead)**  
**Liz Butterworth volunteer**  
**Michelle Livesey volunteer**



## Introduction

This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Blackburn with Darwen who have the authority to enter health and social care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the view of those people using the services. The representatives observe and speak to residents in communal areas only.

This visit was arranged as part of Healthwatch Blackburn with Darwen's Enter and View programme. The aim is to observe services, consider how services may be improved and disseminate good practice. The team of trained Enter and View authorised representatives record their observations along with feedback from residents, staff and, where possible, residents' families or friends.

A report is sent to the manager of the facility for validation of the facts. Any response from the manager is included with the final version of the report which is published on the Healthwatch Blackburn with Darwen website at [www.healthwatchblackburnwithdarwen.co.uk](http://www.healthwatchblackburnwithdarwen.co.uk)

## Acknowledgements

Healthwatch Blackburn with Darwen would like to thank Heather Birchall together with staff, residents, and visitors, for making us feel welcome and taking part in the visit.

## General Information

Northwood Nursing Home is privately owned by Northwood Complex Care with places for 27 residents. There were 2 vacancies at the time of our visit. The person in charge is Munawar Hussain

Information obtained from carehome.co.uk states that the home provides nursing care for older persons, dementia and physical disability. Other care provided is palliative/ end of life and convalescent.

The CQC rating is:

**Good**

## Methodology

The Enter and View representatives made an announced visit on Tuesday 9<sup>th</sup> December 2025.

We spoke to 7 residents, 4 staff and 1 relative, where possible within the constraints of the home routine, people's willingness, and ability to engage and access to people in public areas. Discussion was structured around four themes (Environment, Care, Nutrition and Activities) designed to gather information concerning residents overall experience of living at the home.

The team also recorded their own observations of the environment and facilities.

Our role at Healthwatch Blackburn with Darwen is to gather the views of service users, especially those that are hard to reach and seldom heard, to give them the opportunity to express how they feel about a service regardless of their perceived ability to be able to do so. It is not our role to censor feedback from respondents.

We use templates to assess the environment of a facility and gather information from respondents, to ensure that reports are compiled in a fair and comparative manner.

Observations were rated on Red, Amber, Green scale as follows:

**Green** = Based on our observations and the responses gathered we would consider the experience of this home to be good.

**Amber** = Based on our observations and the responses gathered we consider the experience of this home to be need of some improvements.

**Red** = Based on our observations and the responses gathered we would consider the experience of this home to need significant improvement.

## Summary:

The staff and management at Northwood Complex Care are to be congratulated for running a clean, bright and homely environment. The staff team we met were clearly invested in quality, a person-centred focus in the organisation of the home, and the value in staff training.

Representatives observed that good connections had been made and maintained with local school's churches and professional organisations such as Headway. Heather, the Home Coordinator reported a positive relationship with the quality team at Blackburn with Darwen Council.

Despite there being a cross section of residents in age and care needs there was a high level of integration with residents regarding staff and each other as family.

It was pleasing to hear that residents regarded Northwood as home and were happy to contribute to the environment "*I help around the house it's my home.*" "*There's plenty to do here.*" "*I help with the activities.*"

Indeed, feedback from residents who responded to us was excellent. They told us, "*Everything is safe here.*" "*I know all the other people who live here, we are a big family. I love it.*" "*I settled immediately and loved it. We are all like a family.*"

Residents were treated as individuals with flexibility around mealtimes and choices. Those that wanted independence were encouraged and supported in this. "*I can go shopping into town on the bus and the staff come with me until I get used to the route so I can then go on my own. I'm going to see my family.*"

Staff were praised by every resident who responded to us remarking "*The staff are wonderful.*" "*The staff are kind and very caring*".

Similarly, a relative we spoke to reported "*I would definitely recommend the home to others.*"

Food too was universally praised. Residents told us, "*The food is excellent. I don't like soup, so I don't have that. I can choose what I have. Yesterday when I was hungry, they made me burger and chips. It was really good.*" "*The food is great.*"

However, on the day representatives felt the delivery of the meal service could be improved with minor changes.

We very much enjoyed our visit; both the staff and residents were warm and welcoming. The team would like to thank them for their hospitality.

Based on the criteria, the Enter and View Representatives gave the home an overall score of:

**Green**

## Enter and View observations

### Pre-visit and location

Before the visit, a letter and poster were sent out, and a follow up telephone call was made prior to the day. All our communications with the home were professional and positive and Heather the Home Coordinator was very welcoming. The team also looked at the home's website and found it to be informative and clear. However, there were few internal images such as rooms menus or activities, and we felt this would have been useful for prospective residents and an opportunity for the home to highlight its amenities.

Northwood Complex Care is prominently set on the main A677 into Blackburn. This is on a main bus route, and the centre of Blackburn is 5 minutes away by car. The area is well served by local shops including a Cooperative store, and a large public park. Corporation Park is close by. A children's nursery is across the road; a primary school is also nearby as is St Silas church. Indeed, the home has benefitted from this by forming links with their neighbours which have led to enjoyable shared social occasions between them. The home is easy to locate being very well signposted. A level parking area to the front and side of the building was large enough to accommodate approximately 8 cars and we observed a parking space signposted "Disabled" close to the main entrance.

### Green

#### The external environment

The building is one of three which have now been co joined forming an impressive turn of the century front elevation surrounded by extensive and mature grounds. Both the building and grounds presented as well maintained and we could see that the front garden was used for residents to sit out (weather permitting) as there were some wooden seating and tables. However, the team assumed that during the summer months the seating would have been supplemented so that a number of residents could sit out at once. Heather later told us that the back garden was used for events during the summer and amongst other events had hosted the Salvation Army band and a sports day with children from the nearby nursery.

When Heather took the lead outside to see the rear garden it was noted that the children from the nearby school had decorated one of the brick walls with a large and colourful mural titled St Silas with figures representing themselves.

The entrance to the grounds is from a side road but this is clearly signposted and the reception area is immediately obvious approached from either on foot or by car using the parking area. To avoid any doubts, the website informs visitors to approach the home via St Silas Road.

### Green.

## The internal environment/reception -first impressions

The Enter and View team had previously visited Northwood in 2022 when it was in the process of transition to the current owners. It was obvious from the outset that environmental and care outcomes had developed from that time. The front door was newly painted and welcoming with a Christmas wreath and a keypad kept the entrance secure. The reception was clearly defined, and Heather came to meet us at the door promptly. There was a digital sign in for both staff and visitors. We also observed a lift to upper floors was available directly from the reception area.

The reception was bright and warm with a display of the CQC report as required and an array of certificates that the care team had achieved. Staff were easily identifiable by uniform, and we observed the Healthwatch poster displayed as requested in a nearby lounge area.

A brochure about the home was available on request.

Our first impressions were of smooth efficiency, homeliness and cleanliness.

## Green

### The observation of corridors, public toilets and bathrooms

Since our last visit the corridors and public places had been redecorated and newly carpeted in appropriate floorcoverings which Heather told us were subject to a regular cleaning schedule. Walls were light in colour with colour contrasting dark handrails. The corridors were uncluttered and well-lit and signage was clear although not specifically dementia friendly. However, this was reflective of the occupancy of the home which is also not dementia specific. We looked at several of the bathrooms which were all complete with adaptions such as toilet frames and grabrails. Hand towels, toilet rolls and hand soap were fully stocked. The bathrooms we saw were very clean and modern with wipeable wall panelling and specialist nonslip flooring. We were also able to see bathing facilities which were fitted with bathing chairs, grab rails etc to aid getting in and out of the bath.

During our visit we were shown empty bedrooms being readied for new occupants; one of these was being deep cleaned and redecorated by dedicated maintenance staff. Doors to residents' rooms were not noted to be personalised as such but we saw the use of the butterfly symbol on some doors encouraging interaction from staff and doors were left open onto the corridor.

Northwood Complex Care offers palliative and end of life support. Whereas this was formerly in a dedicated suite this is now within the patient's own room supported by specialist adaptions such as appropriate beds. Heather told us that the upper floor bedrooms were designated for those needing the most nursing care many of whom were supported by PEG feeding. We saw that a dedicated carer was assigned to each floor. Heather told us that the current staff ratio was 1 to 5 or 1 to 6.

## Green

### The lounges, dining area and other public areas

There were 3 communal seating areas all noted to be warm, well decorated and homely. The Main Lounge, the Library and the Morning Room were similar in size and overlooked the gardens to the front of the building. Two of the areas had a TV in situ but this did not detract from conversation nor were they too intrusive.

Seating was noted to be around the edges of the room but was not uniform. Due to the size of the rooms and the mobility requirements of the residents (some of whom used large wheelchairs) it appeared the optimum arrangements had been made to preserve both social interaction and free movement around the home. The main lounge was also overlooked by a staff area where staff could observe residents and be readily available if required. All the public areas were noted to replicate domestic settings with attractive décor, quality soft furnishings and fireplaces.

The library was situated between the two lounges and offered a quieter experience complete with library themed wallpaper and books. There were easy chairs and a side table in here as was the home's Christmas tree. It was especially nice to see that a Christmas day menu was displayed for the residents' anticipation. Great care had been taken to produce an individual copy decorated with red ribbon and holly. Breakfast was described as hot or cold including cereal, pancake, eggs, pancakes and croissants. Lunch was the traditional turkey with winter vegetables and garlic roast potatoes. Dessert was Christmas pudding, mince pie and cream and chocolates to follow. The evening meal offered was lamb hotpot followed by chocolate yule log.

The dining room is a larger area with an ornate plaster ceiling with large windows overlooking the front of the home. Seating and tables were well spaced, and we observed a pictorial orientation board in here which was fully updated with the day, date, season year, and weather for that day's date Tuesday 13<sup>th</sup> December 2025. A radio was playing in the background. We also observed a cinema screen in here which could be rolled down for movie nights.

Heather was keen to show us the kitchen which could be seen from the serving hatch in the dining room. It was very impressive shiny stainless steel, clean, and well organized.

Taz, the cook, was very helpful and explained how in addition to the two daily choices she was able to offer individual home-made meals for residents who requested them. The younger residents often preferred meals such as burgers or Mac and cheese. We saw a resident eating an individually prepared meal during our visit. The choice of food was a particular strength of Northwood with an extensive menu supplemented by take away pizza nights for both residents and staff on request. We also observed a full winter menu on display with homemade soups, pies, casseroles traditional puddings such and popular dishes such as Fish and chips sweet and sour and homemade southern fried chicken.

## Green

### Observations of resident and staff interactions

The home does not have an activity coordinator, but some activities are provided by Alistair, a volunteer for the nearby St Silas church. It was evident that the home had excellent links with their neighbours and that visitors had included both the nursery and nearby school Pottery items that residents had made were on display as were barrels that had been painted for use in the garden. A notice in the dining room indicated that baking, massage, chair and yoga exercises and aromatherapy afternoons were on offer. A weekly activity schedule detailing knitting, quizzes, online shopping and Christmas decoration making. A daily activity of live music was displayed in the dining room; however, we did not observe any organised activities during the time of our visit.

Northwood presents a cross section of residents with some of the younger ones referred in from neighbouring areas due to relationship that the home had with Headway the acquired brain injury charity. The staff had worked hard to develop this relationship and has been runner up in a national competition for a poem “In the Quiet Halls.” The home also had a Headway choir day on Fridays.

During our visit we were introduced to a young resident with learning difficulties who had previously been in the care system. His individual needs were very well supported by the staff team, and he was encouraged to attend college outside the home and taken on day trips by the owner Tahir.

Likewise, we were told that residents who had previously had skills and hobbies were encouraged to continue with those. One resident was a former member of the Salvation Army band and another played guitar.

Whilst many of the residents requiring nursing care remained in their rooms the residents who we interacted with were happy, confident in their environment and eager to engage us in conversation. They moved around the home freely and clearly felt able to ask for support with their needs being met. When we observed care being delivered, we noted the use of handheld digital devices which updated records in real time.

On the upper floors, staff had a discrete presence and operated a system of dedicated staff allocated to each floor which gave them opportunity to be familiar with the residents. Staff were observed in conversation with residents on these floors.

The staff observed in the public rooms were noted to be unobtrusive and responsive however we saw little verbal interaction with the residents and the support they offered could have been described as operational. Some of the support delivered around meals seemed a missed opportunity to deliver person centred care particularly during one-to-one support with eating.

## The Lunchtime Experience

On this occasion, representatives chose to focus on the experience of residents during the lunchtime. We evaluated the lunchtime as a social experience, the quantity and quality of the food, the interaction between staff and residents, and the dignity afforded residents during this period.

In general, the food provided at Northwood was considered of high quality. All the meals were prepared freshly in house by Taz with a 5-star hygiene rating and a gold award for Recipe for Health.

Meal service was from a service hatch and there were 4 staff members wearing plastic aprons waiting at the hatch for trays. Food was plated up onto blue plastic plates and bowls and taken to each resident in the dining room. Drinks were in blue plastic mugs. Metal non adapted cutlery was given out to residents with their meal (there was no evidence that adapted cutlery was needed). Staff were also observed taking covered trays of meals to residents who could not come into the dining room. The staff also took adult bibs out with them when they left the room. The team also noted a senior member of staff dispensing medication at the mealtime as appropriate.

Lunch was served at 12 but because this was not a whole residence experience it was difficult to evaluate the social aspect as not all residents chose to eat together. Many residents could not eat due to PEG feeding and some of the younger residents preferred individually made meals. When the team approached one young resident in a wheelchair, she was eating alone looking over the gardens, however she reassured us that this was her preference. Three residents were sitting in the second sitting room at lunch time. When asked if they were going to have lunch two men told us they go when they are ready as they like to eat last. One lady told us she prefers to stay in the lounge and a carer arrived with her lunch on a tray. One resident had eaten his lunch and dessert and left before other residents were served. This resident transferred his hot drink to a thermos flask/cup and took it with him, presumably to his room. He did not seem to interact with any other resident or any staff member.

In all, we observed six residents eating in the dining room (but not all at the same time).

The dining room is large with high ceilings and the lack of diners and the space between the tables made it appear quite bare. However, it should be acknowledged that the mobility aids of residents may have dictated the positioning of the furniture. The dining room was very easy to navigate and exceptionally clean and bright. There were clear easy to read menus in prominent positions and light music playing in the background. Tables and chairs were modern and wipe clean.

The majority of tables were not laid for lunch, but one table was nicely presented with paper napkins and each table had salt and pepper. Residents were provided with a hot drink at the same time as their meal in a blue plastic cup. Whilst we did

not hear any conversation about hot drink preference it was assumed that staff may know each resident's preference regarding this, but it did not offer the opportunity for change. Likewise, the main course and dessert were served at the same time. If the dessert was a hot dessert, then optimum temperature may have been impacted when the resident was ready to eat it.

There was a water machine in the dining room, and we observed that residents were encouraged to help themselves whenever they wanted to.

The menu displayed for the day was the menu served namely salmon with lemon and parsley, sweet potato and vegetables. Dessert was cheesecake. A relative told us later that the menu was replicated online.

It may well be that our presence had made staff uncomfortable and forgo the usual interaction with residents, but the atmosphere was very "flat" and there was no general conversation, and meals were put down without comment. There was no asking whether residents had enjoyed the food or if they wanted more or wanted tea or coffee. This was notable as the same residents had been happily chatting with us earlier.

We approached a resident who had finished her main course. She told us that it was good. She had soup as she doesn't like salmon and was having yoghurt for dessert. We observed a carer giving her cheesecake and not yoghurt. The resident looked very disappointed but said nothing. She looked at the carer who just walked back to the serving area without noticing or saying anything. The resident attempted to eat the dessert but did not appear to enjoy it.

Notwithstanding, the quality and choice of food was very good, and the residents we spoke to clearly appreciated the flexibility around dining. All the residents seemed to enjoy lunch (except the lady who wanted yoghurt) and the kitchen staff made great effort to offer residents their personal preference.

Unfortunately, the team felt that the lack of social interaction between staff and residents rendered the mealtime "functional". Whereas it could have been experienced as a meaningful social connection with minor adjustments from staff.

We did not see residents hand washing before lunch but accept this could have been done earlier.

### Additional information

The team were grateful to the staff at Northwood who gave us their time on the day. It was clear from Heather's responses that the management format of separating the nursing care function from the administrative function (in her role as Home Coordinator) had been very successful. Likewise, the management team had a shared ethos of excellence for the home. Heather was passionate about her role and genuine in her care, telling us that her uncle had recently been resident at the home on an end-of-life pathway. Staff ratios were good and we were told that Northwood did not use agency staff. Training compliance was at 98% and the staff structure meant that staff were rotated between shifts and floors so that

they an overarching understanding of the residents' needs. Staff turnover at the home was reported as low.

Resident numbers at the home were kept within capacity and this was in part due to some of the specialist services provided namely palliative, end of life, brain injury, physical disability and complex care needs on discharge from hospital. Heather also told us that when referrals for new residents were received, they were personally assessed by the management team prior to admission.

Heather was rightly proud of the additional personal services offered to Northwood's residents telling us that hairdressing, audiology, and podiatry were offered. The home had also managed to secure the services of an NHS dentist (Eden Surgery), and the surgery were due to offer training to care staff on the delivery of oral hygiene.

The team at Northwood worked hard to keep connections with relevant support agencies and we were advised that Northwood was the only home registered with Headway in a 50-mile radius, Similarly the home was registered as a "Veteran friendly" home, and the staff had received training in this regard. We also noted that Northwood was accredited as a Disability Confident Employer.

## Feedback from residents

One resident was spoken with at length due to his difficulty communicating. It was also a little confusing in this room as both the TV and music were playing. When he was asked if he liked watching TV, he said he "*wasn't bothered*" but that he liked music. The resident was sat in a specialised wheelchair and looked very well cared for, appearing to have 1 to 1 support. When he started to move around uncomfortably for a change of position the carer noted this and said that staff were keeping an eye on his skin condition. When we asked the resident about the food on offer, he said it was "*rubbish*" but then followed up by saying how good the puddings were "*Oh yes, they are good.*"

### Environment

*"I have my own room."*

*"It's lovely."*

*"I don't have a TV in my room. I was going to have one but prefer to watch it here in the lounge."*

*"It is lovely and comfortable here."*

*"I love it here. I have my own room and it's exactly as I want it."*

*"I help around the house it's my home."*

*"I talk with people and I can go to my room when I want."*

*"I go outside in the summer. It's too wet now but I have no complaints at all."*

“I don’t like the TV on all the time in the lounge.”

“I have my family photographs in my room. They are very important to me.”

“I have a very nice room with my own things.

“Everything is safe here; there is no need to lock the room.”

## Activities

“There are craft activities and different events are held.”

“I like to watch films on my phone. I am not bothered by TV. I don’t have TV in my room”.

“There are activities, they do crafts and play some games. I can’t see to join in, but I like to listen”.

“There’s plenty to do here.”

“I help with the activities.”

“I can go shopping in town, I go on the bus, and the staff come with me until I get used to the route so I can then go on my own. I’m going to see my family.”

“There are things to do.”

“I like it here very much.”

## Care

“All the staff are very kind.”

“I am very happy here. The staff are excellent. I am well looked after.”

“I know all the staff by name and they all know me. I know all the other people who live here, we are a big family. I love it.”

“I settled immediately and loved it. We are all like a family”.

“I know everybody here”.

“The staff are kind and very caring”.

“I have my own mobile phone and like that I can speak with my daughter because she finds it difficult to visit because she has poor health. Staff help me to charge and use my phone.”

“I have lived here for 4 years now”.

“I came here from the hospital. I didn’t choose; the hospital did. I was made so welcome. My mum died and I cannot look after myself because I cannot see”.

“I’m well looked after.”

“The staff are wonderful.”

*“They look after me so well.”*

*“I can’t complain. The staff are good.”*

### **Food**

*“The food is very good. I like soup and can have soup as an alternative if I don’t want what’s on the menu.”*

*“There is always plenty to eat. You can have more and staff make different things for people, but I am happy with what I have.”*

*“The cook makes all the food I like every day. Halal chicken, lamb, all my favourites”.*

*“I can have drinks whenever I want. There are plenty of snacks if you want them.”*

*“The food is excellent. I don’t like soup, so I don’t have that. I can choose what I have. Yesterday when I was hungry, they made me burger and chips. It was really good.”*

*“The food is great.”*

*“I can’t complain.”*

*“I can have what I want for breakfast.”*

*“There is plenty to eat and they make things for me.”*

*“The food is good.”*

### **Relatives and friends’ views**

*One relative told us that her mum had moved from another care home following a serious fall and they could no longer meet her needs. She said it had taken a little while for her to settle. She was previously very independent and found it hard to leave her home. Staff are very supportive and the daughter feels confident that her mum is safe there.*

#### **How do you feel about the service?**

*“I can visit anytime.”*

*“Mum likes us to sit in this lounge when I visit as its quieter.”*

*“We could go to mum’s room, but she is happier in here.”*

#### **Do you think that you are kept informed about your relative e.g. Health and future care plans?**

*“Staff are very good, they keep me informed about mum especially if she is unwell or needs anything.”*

*“Communication with staff is good.”*

**Do you know how to make a complaint if you need to?**

*“I can speak to staff at any time if I have any questions or concerns.”*

*“I usually speak to Heather if I have anything to ask.”*

**Are you aware of the social activities at the service and do you feel welcomed to join in?**

n/a

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

*“I would definitely recommend the home to others.”*

## **Staff views**

**Do you have enough staff when on duty to allow you to deliver person centred care?**

*“Yes, staff to resident ratios are generally 1 to 5 or 1 to 6”*

*“We double up and always work 2 together to support each other*

**How does the organisation support you in your work?**

*“We have regular training and I have been encouraged and supported to undertake an NVQ level 5.”*

*“We have lots of training. We use online system called Flexi B. We learn about different conditions such as epilepsy. We also have face to face training for things like moving and handling, nutrition and feeding.”*

*“Managers listen to staff and we can go to them at any time.”*

*“We have a monthly staff meeting. We can raise anything. If staff cannot attend, we get minutes and they are e mailed to us”*

*“We have a staff meeting every morning. management have an open-door policy.”*

*“There is always a trained nurse available to help us if we need it”.*

*“If I have any concerns I can go to the nurse or manager”.*

*“The managers are really kind and supportive. They want the best for residents and we do too”.*

**How do you deliver care to diverse groups from diverse backgrounds and cultures?**

*“We have Equality and Diversity training in respect of both our residents and staff.”*

*Are you aware of residents’ individual preferences? Where do you find this information?*

*“We can look at the care plans; they are digital and updated in real time.”*

*Would you recommend this care home to a close friend or family.”*

*“I would recommend this home to any of my family or friends”*

*“A relative has been here for end-of-life care.”*

*I have worked here for 3 years”*

*“I get joy when I know residents are happy”*



## Response from provider

07/01/2026

Dear Michele

Happy new year and thank you so much for the wonderful feedback. We thoroughly enjoyed reading the report and have shared it with our families and the whole team at Northwood Complex Care. It is incredibly rewarding to hear such positive comments about our environment and the experience we provide, particularly that residents regard Northwood as a "big family" and their true home.

We truly value constructive feedback and have already made changes. Continuous improvement is vital to us, and your insights help us strengthen the support we offer:

- Mealtimes: We're chatting with our staff to help make mealtimes feel more like a social get-together and less like just another task. We're also looking at how we serve food so that desserts are brought out on their own to keep them at the right temperature.
- 
- Talking to our Residents: We've reminded everyone how important it is to really listen and double-check what residents want, so we don't have any more mix-ups with food choices like the one seen during your visit.
- 
- Our Website: We're busy adding more photos of our rooms, menus, and fun activities to our website so people can see exactly what we have to offer.

During our regular residents' meetings, we work closely with our Resident Ambassador and actively listen to the views and requests of all residents. We take pride in acting on their suggestions wherever possible, ensuring their voices shape the home they live in.

Thank you again for your time, your observations, and your encouragement. It means a great deal to us and to our community.

Kind regards,

Heather Birchall

Northwood Complex Care (*CQC Good Rated*)

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