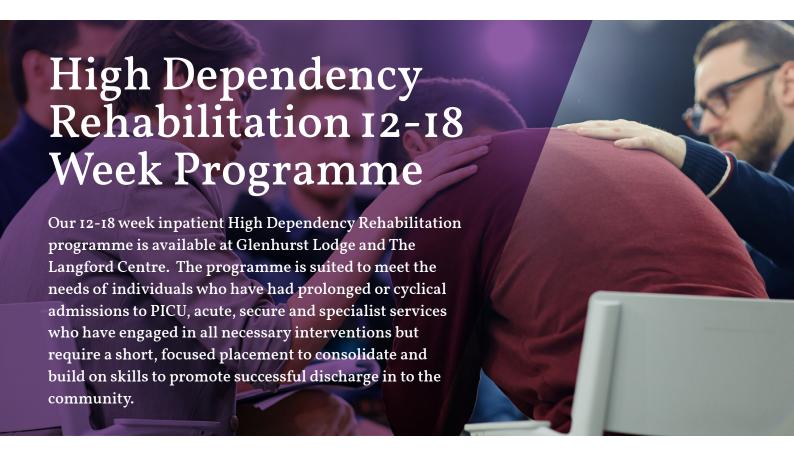


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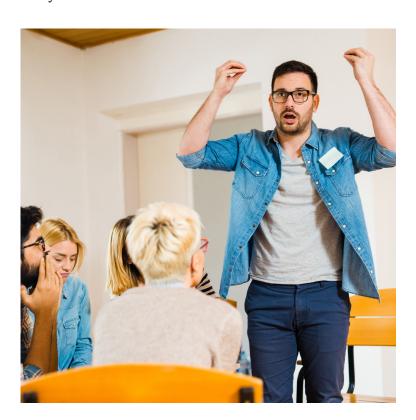


The programme is suited to meet the needs of individuals who have had prolonged or cyclical admissions to PICU, acute, secure and specialist services who have engaged in all necessary interventions but require a short, focused placement to consolidate and build on skills to promote successful discharge in to the community.

Alternatively, some individuals may simply be unready or unwilling to engage in the necessary interventions offered by long-term placements, rendering a long-term admission as ineffective due to the individual's current rehabilitation potential. This short-term admission could also support in repatriating Service Users to their home counties of Kent and Sussex to support with transitional discharge plans.

While these individuals are likely to continue to present with a level of risk to themselves, in the form of self-harm or self-neglect, these behaviours are not unmanageable in the community with the input from In Reach teams. However, their ability to manage in an independent or semi-independent environment is limited by their lack of skills, engagement with CMHT's or having a sense of routine, purpose and support to live a meaningful life.

During the short-term, time limited admission to our High Dependency Rehabilitation services, we will offer a 12-18 week programme focused on upskilling our Service Users through Nursing, Social Work, Psychology and Occupational Therapy interventions to understand and manage their Mental Health conditions and associated symptoms and risks. We would also aim to instill adherence and compliance to expectations for their continued care once discharged to a community placement.



Our Aims & Approach



BUILDING STRUCTURE AND ROUTINE TO THEIR DAY

Encouraging involvement in vocational and voluntary endeavors



HEALTHY EATING HABITS

Meal planning, food preparation and food shopping



PHYSICAL AND MENTAL WELLBEING Promoting medication compliance, self-medication, accessing the GP and sleep hygiene



BUDGETING AND MONEY MANAGEMENT

Understanding tenancy agreements, paying bills and working out disposable income



ENGAGING WITH CMHT'S

Adherence to meetings with professionals involved in their care, formulation and awareness of crisis management plans and promoting use of this support network to avoid readmissions



MAINTAINING A HOME ENVIRONMENT Upskilling and consolidation of skills to maintain a home environment



PSYCHOLOGY

Developing and building on coping skills, distress tolerance, mindfulness, meditation, pros and cons for problem solving

It is our expectation that the Service User, Bramley Health MDT and key members from the CMHT involved in their care will collaboratively formulate robust risk management and crisis plans for when the Service User returns to the community, in order to prevent unnecessary readmissions. Throughout the inpatient placement with us, it is expected that CMHT involvement will have incrementally increased and that the Service User spends increasingly more time in their discharge accommodation in line with collaboratively formed transition plans.

