

Improving lives together

Personality Disorder Services

- Medium Secure
- Low Secure
- Tier 4 PD (NHSE)
- PD Intensive Support
- Highly Specialised PD (ICB)
- PD / Disordered Eating Dual Diagnosis
- Community Rehabilitation



Welcome

Cygnnet was established in 1988. Since then we have developed a wide range of health care services for young people and adults with mental health needs, acquired brain injuries, eating disorders, autism and learning disabilities within the UK. We have built a reputation for delivering pioneering services and outstanding outcomes for the individuals in our care.



Our expert and highly dedicated care of 11,850 employees empower 7,500 individuals across 150 services to consistently make a positive difference to their lives.



Cygnnet Health Care is part of the Cygnnet Group which also provides social care services for adults in England, Scotland and Wales.



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral

Contents

Introduction	02
Our Model of Care	06
Our myPath Care Model	07
Our Outcomes	08-11
Example DBT Pathway	12
Medium Secure	
Cygnnet Hospital Bury, North West	13
Low Secure	
Cygnnet Hospital Clifton, East Midlands	14
Cygnnet Hospital Derby, East Midlands	15
Tier 4 PD (NHSE)	
Cygnnet Hospital Beckton, London	16
Cygnnet Hospital Ealing, London	17
PD Intensive Support	
Cygnnet Hospital Beckton, London	16
Highly Specialised PD (ICB)	
Cygnnet Acer Clinic, Derbyshire	18
Cygnnet Alders Clinic, Gloucestershire	19
Cygnnet Aspen Clinic, South Yorkshire	20
Cygnnet Maple House, Nottinghamshire	21
Cygnnet Hospital Kewstoke, South West	22
Cygnnet Hospital Maidstone, Kent	23
PD / Disordered Eating Dual Diagnosis	
Cygnnet Nield House, Cheshire	24
Community Rehabilitation	
Gledholt Mews and Coach House, West Yorkshire	25
Case Study	26-27
Service User Reviews	28
Map	29
How to Make a Referral	30





Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral

Introduction

Our national network of specialist personality disorder services offers over 225 beds across 14 services which provide medium secure and low secure, emergency, tier 4 inpatient, intensive support, highly specialised ICB funded personality disorder, dual diagnosis PD, disordered eating and community rehabilitation services.

Each of our personality disorder services offer a highly structured environment designed to promote recovery. Care and support is provided in therapeutic environments by comprehensive multi-disciplinary teams.

Our services offer a range of interventions including Dialectical Behaviour Therapy (DBT) and Schema Focused Therapy, along with a number of additional interventions to enhance service users' recovery journey. Managed Care Pathways are used to improve clinical effectiveness with a view to move service users through the integrated personality disorder pathway and back to independent community living.

Our service user profile:

- Diagnosis of personality disorder and associated mental health needs
- May have forensic history
- May present with co-morbid presentations:
 - Self-harm
 - Self-neglect
 - History of substance misuse
 - Complex needs
 - Disordered eating
- May have a history of trauma and / or abuse
- May have experienced previous placement breakdowns



18+ years



Male / Female



Mental Health Act Status:
Detained or Informal



Click the buttons to find out more about our Personality Disorder Services

Introduction

[Our Model of Care](#)

[Our myPath Care Model](#)

[Our Outcomes](#)

[Example DBT Pathway](#)

[Medium Secure](#)

[Low Secure](#)

[Tier 4 PD \(NHSE\)](#)

[PD Intensive Support](#)

[Highly Specialised PD \(ICB\)](#)

[PD / Disordered Eating Dual Diagnosis](#)

[Community Rehabilitation](#)

[Case Study](#)

[Service User Reviews](#)

[Map](#)

[How to Make a Referral](#)



Our services at a glance:

- High staffing ratios
- Dialectical Behaviour Therapy (DBT)
- Schema Focused Therapy
- Substance misuse / addictions treatment
- Self-harm treatment
- Daily living skills
- Cognitive Behavioural Therapy (CBT)
- Anxiety management
- Community and social involvement
- Vocational initiatives
- Specialist PD pathway

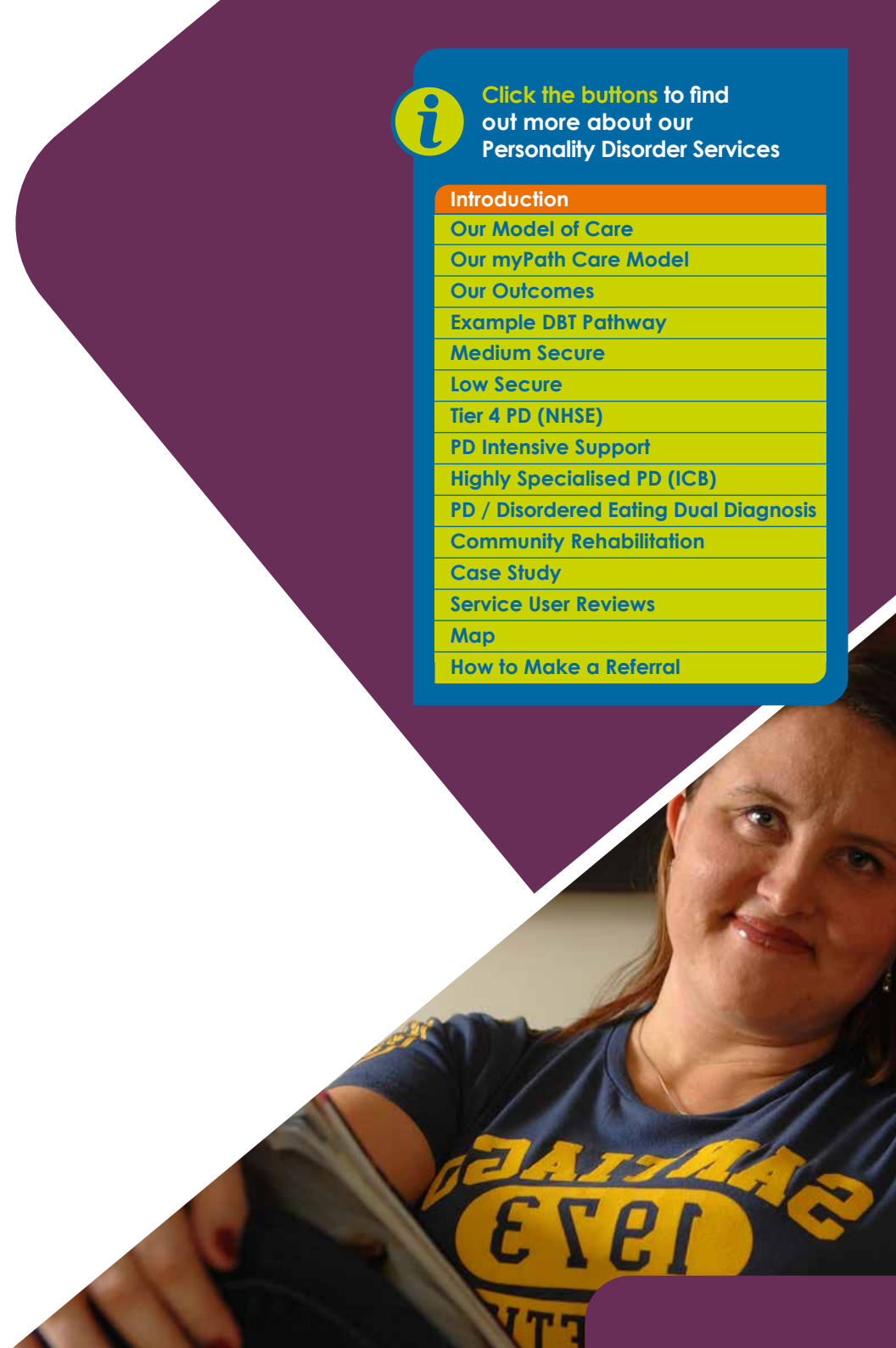
Our multi-disciplinary teams:

- Consultant Psychiatrists and Specialty Doctors
- Psychology
- Occupational Therapy
- DBT practitioners
- Nurses
- Health care support workers
- Social workers
- Substance misuse practitioners



Click the buttons to find out more about our Personality Disorder Services

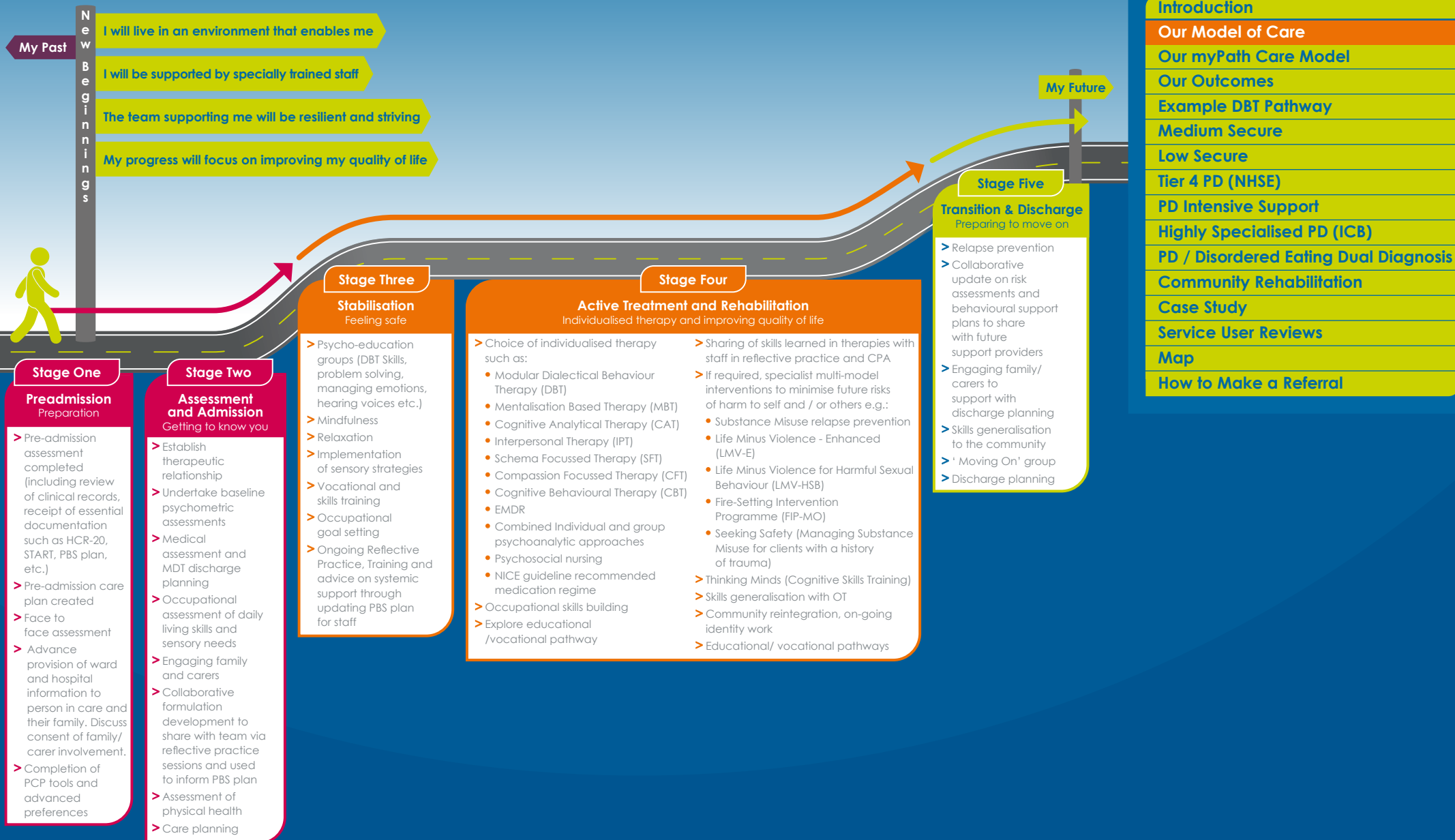
Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral



Our Model of Care



Click the buttons to find out more about our Personality Disorder Services



Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral

Our myPath Care Model

To ensure we cater for each person's journey and achieve long-term results, we have created a unique approach to care for people with personality disorder. Our aim is to support clients to work towards a goal of discharge in to the community or step down settings following completion of treatment.

myPath is our unique overarching care model which serves to monitor service user engagement levels, manage their records, assess individual progress and formulate a personalised and dynamic care plan with measurable targets.

Within our personality disorder services, **myPath** is structured to support individuals who require specialist therapeutic interventions including Dialectical Behaviour Therapy (DBT) and Schema Focused Therapy (SFT). It is designed to help service users tackle their symptoms and progress with their lives. In addition, these services support with preparation for an independent life within the community, or for moving on to mainstream rehabilitation.

For each individual, a daily risk assessment is completed, which enables dynamic responses to individual presentation within any 24 hour period enabling immediate support to be provided. Each individual is offered a minimum of 25 hours meaningful activity a week, which is evidenced and documented within an individualised activity timetable based around understanding mental health needs, effective coping strategies and reinforcing daily living skills. Each individual's care pathway is reviewed in full by the multi-disciplinary team on a weekly basis and guided by a dynamic care plan which is closely linked to our specialist outcome tool, the Global Assessment of Progress (GAP). In our personality disorder services, the GAP allows us to measure an individual's progress during their admission, plot the positive developments and changes in well-being whilst formulating plans over potential future risks for longer term management. In applying **myPath**, the team around the individual is able to be responsive in their approach and use **myPath** to determine length of stay, ensuring that people move as quickly as possible to the most appropriate and least restrictive environment.



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral



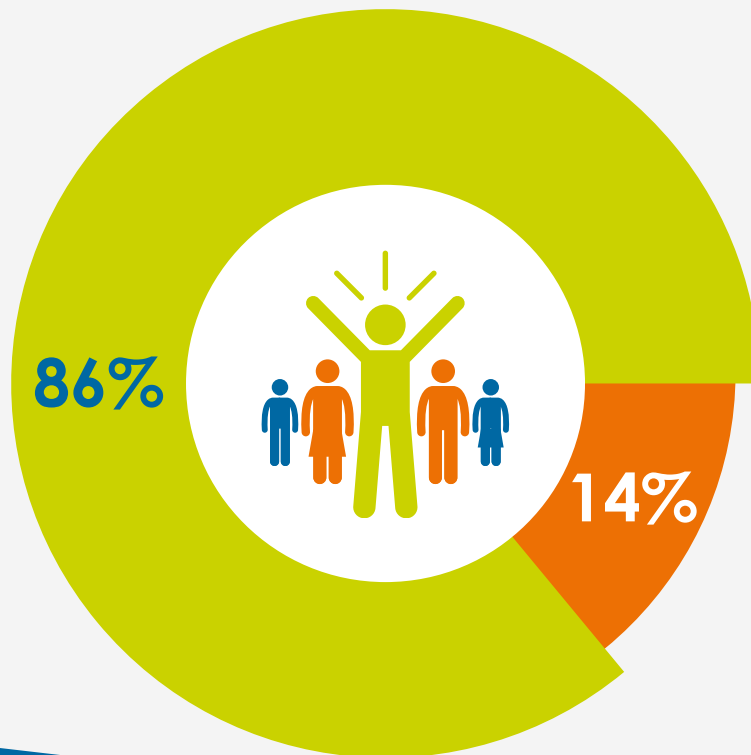


Discharge Destinations



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral



Moved into the community or closer to home



Moved to a higher level of support

86%

of the individuals discharged from our Highly Specialised Personality Disorder (ICB) Services in 2023 were able to move closer to home or step down along their care pathway

Data relates to period January 2023 - October 2023 for our Highly Specialised Personality Disorder (ICB) Services

Average length of stay is

11 months

across our Highly Specialised Personality Disorder (ICB) Services

Sample DBT outcomes from New Dawn Ward - Cygnet Hospital Beckton

The outcome measures collected map to the difficulties associated with Emotionally Unstable Personality Disorder and the areas that the DBT programme aims to address.

Data is collected before enrolment in the DBT programme, at 6 months (following the first cycle of DBT skills modules) and again at 12 months (following completion of the second cycle of skills modules).



The Rosenberg Self-Esteem Scale measures a person's level of self-esteem based on their perceptions of themselves, both individually and in comparison with others. Scores range from 0-30, with higher scores indicating a higher level of self-esteem.

An increase in scores may suggest that individuals have developed a more positive orientation towards their self-worth over the course of the DBT programme.

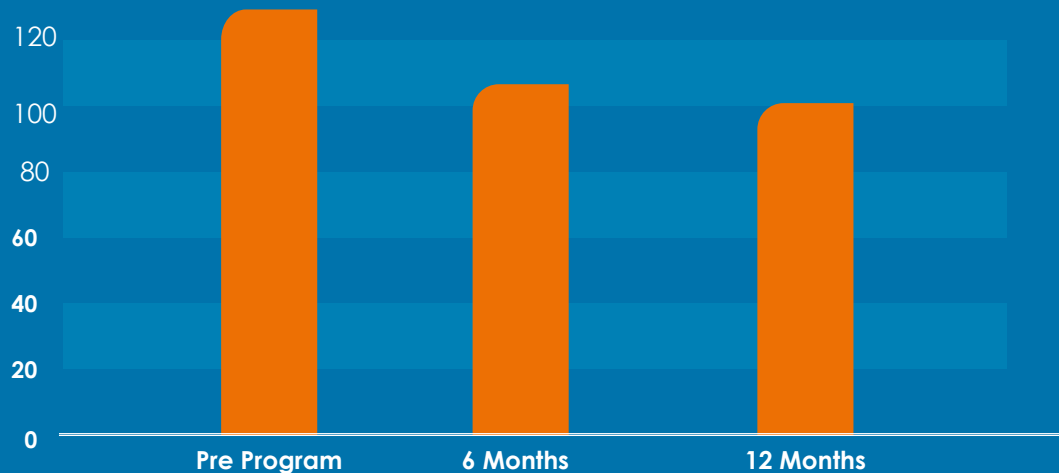
Data presented from 20 service users who completed 12 months of DBT



Click the buttons to find out more about our Personality Disorder Services

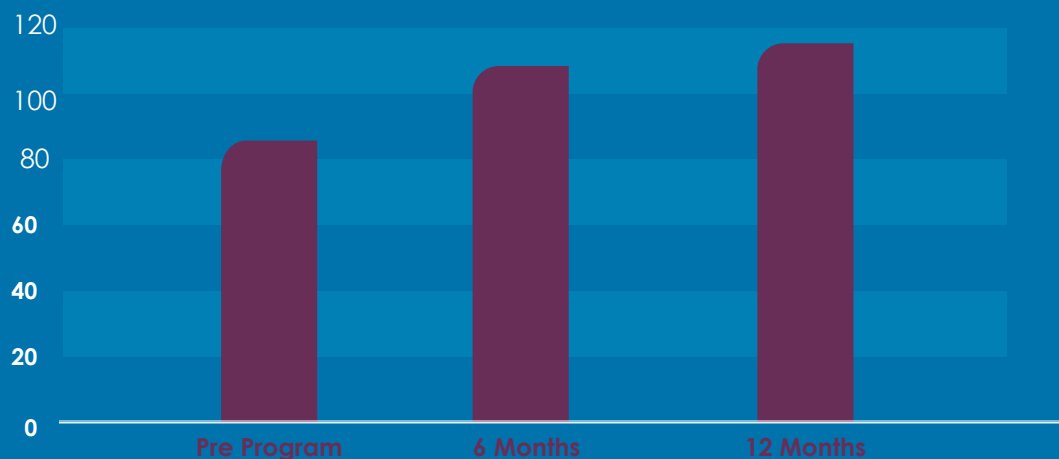
Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral





The Difficulties in Emotion Regulation Scale (DERS) assesses typical levels of emotion dysregulation across 6 domains. Higher scores indicate higher levels of emotion dysregulation.

Overall scores indicate a reduction in overarching emotion dysregulation difficulties, also noted on each of the measured domains. This suggests that individuals have a greater awareness, clarity and acceptance of their emotions.



The Five Factor Mindfulness Scale measures five facets of mindfulness: observing, describing, acting with awareness, non-judging of inner experience and non-reactivity to inner experience.

Overall increases are noted in relation to mindfulness and this is found across all five measured facets.

Data presented from 20 service users who completed 12 months of DBT



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral

Example Dialectical Behaviour Therapy (DBT) Pathway

Pre-admission assessment

- > Including assessment of willingness and capacity to engage in DBT and the suitability of the programme in meeting the service user's needs

Admission

- > Psychological / DBT assessment and formulation
- > Assess motivation to engage in DBT
- > Explain 4-miss rule (if a service user misses 4 consecutive sessions they have 'opted out' of DBT)
- > Baseline outcome measures administered

If motivated
Presentation and allocation at DBT consult

If not motivated
Motivation work

DBT programme pre-commitment work

- > Service user and therapist sign DBT contract
- > Agree DBT enrolment date in line with the next module start

Begin comprehensive DBT

- > One standard treatment cycle = 2 x 6 month rounds
- > Psychometric measures to be readministered every 6 months

Individual Therapy

Skills Training Group

Skills Coaching

Completion of DBT

- > Psychometric measures to be readministered at end of the programme

Refer back to psychology for other intervention



Click the buttons to find out more about our Personality Disorder Services

Introduction

Our Model of Care

Our myPath Care Model

Our Outcomes

Example DBT Pathway

Medium Secure

Low Secure

Tier 4 PD (NHSE)

PD Intensive Support

Highly Specialised PD (ICB)

PD / Disordered Eating Dual Diagnosis

Community Rehabilitation

Case Study

Service User Reviews

Map

How to Make a Referral





Cygnet Hospital Bury, North West

Buller Street, off Bolton Road, Bury, North West BL8 2BS

Medium Secure



18+ years



Male



26 beds in 2 wards

Cygnet Hospital Bury offers a dedicated personality disorder service on two wards, Columbus and Madison, in a medium secure setting. Both wards deliver care for men with enduring mental health needs, co-morbidity and behaviours which challenge in a calm, therapeutic environment with a focus on service user experience, shared care and safety.

There are five core treatment phases used across both wards:

- 1 Preadmission / preparation
- 2 Assessment and admission / getting to know you
- 3 Stabilisation / feeling safe
- 4 Active treatment and rehabilitation / individualised therapy and improving quality of life
- 5 Transition and discharge / preparing to move on

Therapies and activities

Each service user has a treatment plan and a weekly therapeutic timetable which can include:

- > Individual and group psychology
- > Counselling for drug and alcohol misuse
- > Anger management
- > Social skills development
- > Daily living skills development
- > Healthy living
- > IT skills training
- > Education and vocational development
- > Group games and activities

The model of treatment is based on the principles of the recovery model including psychological therapies, occupational therapy, social therapy, physical healthcare and medication.

Staff are trained to provide a pattern of care that continuously challenges maladaptive patterns of behaviour and provides ongoing opportunities to learn and try out more adaptive courses of action. We use the myPath framework to focus interventions towards a service user's future life outside hospital.



Click the buttons to find out more about our Personality Disorder Services

Introduction

Our Model of Care

Our myPath Care Model

Our Outcomes

Example DBT Pathway

Medium Secure

Cygnet Hospital Bury, North-West

Low Secure

Tier 4 PD (NHSE)

PD Intensive Support

Highly Specialised PD (ICB)

PD / Disordered Eating Dual Diagnosis

Community Rehabilitation

Case Study

Service User Reviews

Map

How to Make a Referral

Our facilities:

- > En-suite bedrooms
- > Gym
- > Laundry
- > Occupational therapy kitchen
- > Therapy garden

"The support workers here are fantastic and have helped me so much"
Service user

"You could not have done more for this gentleman at a really tough time in his life. And arguably his mental stability has been enduring because of this familiar support which has led us to him being able to discharge him from his section."
Professional



Cygnet Hospital Clifton, East Midlands

Clifton Lane, Clifton, Nottinghamshire, East Midlands NG11 8NB

Low Secure



18+ years



Male



25 beds across 2 wards



Scan the QR code or
click here to watch
Cygnet Hospital Clifton

Cygnet Hospital Clifton is a 24 bed specialist low secure service for men with a personality disorder, who also present with complex mental health needs and behaviours that challenge.

At Cygnet Hospital Clifton we create opportunities for sustained positive behavioural change. We achieve this by applying a consistent approach where the men in our care feel encouraged to develop positive interpersonal skills to reduce challenging behaviours.

Our interventions and approaches are matched according to individual needs informed by dynamic case formulation. Our team constantly adapt their engagement techniques and the personnel delivering specific interventions to maximise engagement and create optimum opportunity for progress to be made with the men in our care.

Alongside appropriate pharmacological treatments to stabilise diagnosed mental illness, we support the men in our care with a range of psychology-led interventions. These aim to develop self-regulation skills facilitating the improved control of impulsive behaviours.

The hospital is set out across two wards:

Ancaria Ward is the admissions / initial treatment ward, which focuses on rehabilitation, in preparation for moving on into the community or supported living.

Acorn Ward focusses on rehabilitation, to prepare for a move into the community or supported accommodation.

At Cygnet Hospital Clifton we aim to sequence interventions according to Professor Livesley's integrated treatment model. The therapeutic milieu aims to ensure consistency and optimal conditions for growth and change in a positive and effective environment.

Prison Transfers

We also offer a specialised three month prison transfer programme, for stabilisation and assessment of prisoners whose mental health needs cannot be met in the prison environment.

We provide a rapid response to referrals, and a speedy assessment within the prison environment. Following admission, we offer a comprehensive inpatient assessment process including robust risk assessment, detailed treatment planning, and recommendations for onward moves.



Cygnet Hospital Clifton has helped me with my recovery by challenging my behavioural problems and changing my thoughts to move to a more positive way, giving me more confidence to deal with different disappointments, changing my ways of thinking and giving me responsibility with (a course on) the Recovery College. - Service user



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Cygnet Hospital Clifton, East Midlands
Cygnet Hospital Derby, East Midlands
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral

Our multi-disciplinary team:

- > Consultant Forensic Psychiatrist
- > Forensic Psychologist
- > Occupational Therapist
- > Social Worker
- > Nurse leads
- > Social Therapy leads



Cygnet Hospital Derby, East Midlands

100 City Gate, London Road, Derby, East Midlands DE24 8WZ

Low Secure



18+ years



Female



15 beds

Alvaston Ward at Cygnet Hospital Derby is a 15 bed specialist low secure service for women with a primary diagnosis of emotionally unstable personality disorder and / or mental illness.

The primary pre-cursor to an admission to Alvaston Ward is that the person is ready to engage in a therapeutic programme. Service users may have a history of involvement in the criminal justice system or present with significantly challenging behaviour, severe self-neglect and vulnerability.

The ethos on Alvaston Ward is to provide assertive treatment of a person's condition. The multi-disciplinary team helps individuals address their issues and proactively use Dialectical Behaviour Therapy (DBT) and Schema Therapy. The DBT programme is adapted to the needs of the service users and is tailored for individuals who may have educational or learning difficulty issues, such as dyslexia, which may act as barriers to the standard DBT programme.



Cygnet Hospital Derby has been a life changing experience. It has offered me so much which has allowed me to develop skills, insight, confidence and much more. I just wish there were more hospitals like this one. I now feel empowered and ready to live my life. - Service user, Alvaston Ward



Click the buttons to find out more about our Personality Disorder Services

[Introduction](#)

[Our Model of Care](#)

[Our myPath Care Model](#)

[Our Outcomes](#)

[Example DBT Pathway](#)

[Medium Secure](#)

[Low Secure](#)

[Cygnet Hospital Clifton, East Midlands](#)

[Cygnet Hospital Derby, East Midlands](#)

[Tier 4 PD \(NHSE\)](#)

[PD Intensive Support](#)

[Highly Specialised PD \(ICB\)](#)

[PD / Disordered Eating Dual Diagnosis](#)

[Community Rehabilitation](#)

[Case Study](#)

[Service User Reviews](#)

[Map](#)

[How to Make a Referral](#)

Our facilities:

- > En-suite bedrooms
- > External secure courtyard
- > Fully equipped gym
- > Art room
- > IT classroom
- > Therapy kitchen



Cygnet Hospital Beckton, London

23 Tunnan Leys, Beckton, London E6 6ZB

Tier 4 PD (NHSE)

PD Intensive Support



18+ years



Female



33 Beds in 2 Wards

Cygnet Hospital Beckton has two specialist personality disorder wards, New Dawn Ward and Upping Ward. Our aim is to support individuals' recovery and integration back into the community, as quickly as possible. We have a multi-disciplinary team of specialists and offer a very broad range of therapies.

New Dawn Ward is an 18 bed specialist Tier 4 Personality Disorder service. Women can be admitted to New Dawn if they have a diagnosis of personality disorder, exhibit self-harming behaviour and are able to accept the need for help. Service users can be informal or detained under the Mental Health Act.

Therapy Programme / Approach

Dialectical Behaviour Therapy (DBT) is the main programme of therapy used on New Dawn Ward. The care pathway is structured in phases which includes a comprehensive clinical psychometric assessment, and formulation within 4-6 weeks of admission.

DBT Informed pathway features two cycles of skills training, weekly 1:1 therapy, ad hoc skills coaching and 1:1 crisis management therapy. Service users who are motivated and show commitment to DBT will undertake the full programme.

Adapted DBT pathway we recognise that standard DBT is not suitable for everyone, so we also provide an adapted programme, based within the DBT framework but tailored to the needs of individuals particularly where the service user may have an area of cognitive difficulty that impacts their ability to engage and process. There are various options available on how this is delivered for people experiencing attention, concentration or motivational difficulties including conversational, experiential learning and visual aid approaches. This is then supported with further individualised practice on a 1:1 basis.

Upping Ward is our Intensive Support Service for women with a diagnosis of personality disorder and complex mental health needs. The service pathway provides a robust programme of care for women with challenging, high risk behaviour who experience difficulties engaging with therapeutic programmes.

The enabling environment and staffing skills provide a robust and safe setting for individuals to focus on positive pre-engagement work through a wide range of approaches.

Our care model embraces a wide range of interventions including Cognitive Behavioural Therapy (CBT) and mindfulness. These are delivered within our 5 stage model of care alongside alternative therapies such as art and music therapy; offered to respond to affective, behavioural, cognitive, physiological and spiritual needs.

On-site vocational activities - assisting with cooking and gardening work



Community activities such as bowling, swimming and shopping

Off-site local 'sports for confidence' weekly group set up for service users including activities such as volleyball, aerobics and tennis



Off ward activity room for service users to meet individuals from other wards. Groups Activities take place such as planting, painting, meeting animals and music group



News & Views Group where service users go and buy magazines and newspapers for the day and go through them together



Access to an on-site Recovery College with a pathway to attending local external community college



Click the buttons to find out more about our Personality Disorder Services

Introduction

Our Model of Care

Our myPath Care Model

Our Outcomes

Example DBT Pathway

Medium Secure

Low Secure

Tier 4 PD (NHSE)

Cygnet Hospital Beckton, London

Cygnet Hospital Ealing, London

PD Intensive Support

Cygnet Hospital Beckton, London

Highly Specialised PD (ICB)

PD / Disordered Eating Dual Diagnosis

Community Rehabilitation

Case Study

Service User Reviews

Map

How to Make a Referral





Cygnet Hospital Ealing, London

22 Corfton Road, Ealing, London W5 2HT

Tier 4 PD (NHSE)



18+ years



Female



9 beds



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Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
Cygnet Hospital Beckton, London
Cygnet Hospital Ealing, London
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral

New Dawn Ward at Cygnet Hospital Ealing is a 9 bed specialist Tier 4 service, providing treatment, care and support for women with a personality disorder who are ready to engage in therapy.

Our service can support women who have a diagnosis of personality disorder and who need either:

- A short-term crisis intervention utilising a Dialectical Behavioural Therapy (DBT) model (i.e. emergency referrals)
- A longer term therapeutic treatment programme utilising the principles of DBT with skills coaching and individual therapy.

New Dawn Ward offers a programme that is well-structured to give service users the opportunity to address and cope with any challenges in a safe environment. Cygnet Hospital Ealing also provides a specialist Eating Disorder service on Sunrise Ward, service users can have access to a dietician if required.

Planning for discharge starts at admission, all treatment and interventions are geared towards preparing an individual for successfully and positively leaving the service.

Therapies and activities

- Dialectical Behaviour Therapy (DBT), including daily Skills Training and Skills Homework Group
- Daily activities offered by the occupational therapy team, including self-nurturing, cooking, creative and walking groups
- Specialist groups including body image and healthy relationships (run for a set number of weeks)
- Music and creative therapies
- Service users suggest ward activities through a fortnightly community meeting
- Carers group once a month
- Family Therapy
- Psycho-education talks on DBT every two weeks to help service users support network develop their skills and assess risk

Access to an external Recovery College at CNWL



Psycho-education talks on DBT every two weeks to help service users' support network develop their skills and assess risk



On-site occupational therapy kitchen



Access to volunteering work with local stables as well as the ability to help work with local charities

Social activities such as shopping, access to local coffee shops as well as 'Come Dine With Me' every Friday



Access to a dietician from Sunrise Ward



Multi-disciplinary team (MDT) including:

- Consultant psychiatrist
- Associate specialist
- Psychologist
- Assistant psychologist
- Ward manager
- Occupational therapist
- Assistant OT
- DBT trained nurses
- Social worker
- Social worker assistant
- Art therapist
- Physical trainer
- Dietitian



When I had extremely difficult times, the team didn't give up on me and move me on. The DBT the ward taught really helped me.
- Service user





Cygnet Acer Clinic, Derbyshire

Workshop Road, Chesterfield, Derbyshire, East Midlands S43 3DN

Highly Specialised PD (ICB)



18+ years



Female



14 beds



Scan the QR code or
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video on Cygnet Acer Clinic

Acer Lower at Cygnet Acer Clinic is a 14 bed rehabilitation service providing assessment, treatment and rehabilitation for women with personality disorder and complex needs.

Rehabilitation is provided in a therapeutic environment, with a level of security matched to individual needs. The aim of the treatment, rehabilitation and re-socialisation programme is to prepare the people in our care either for transfer to conditions of lesser security, or for a life in the community.

Our dedicated clinical teams provide a multi-disciplinary approach to rehabilitation. This includes psychology (including forensic psychology input) occupational therapy, social work and vocational training.

Therapeutic approaches and assessments:

- > Dialectical Behaviour Therapy (DBT)
- > Cognitive Behavioural Therapy (CBT)
- > Schema Focused Therapy
- > Occupational therapy assessment and interventions
- > Psychological formulations
- > Music therapy
- > Art therapy
- > Mindfulness
- > Sensory assessments
- > Complementary therapies including reiki and aromatherapy
- > Wellness Recovery Action Plan (WRAP)

Rehabilitation Process:

- > START assessments
- > Integrated approach combining different models of therapy (CBT, DBT and Schema informed)
- > Pre-engagement group
- > Personality Disorder psychoeducation
- > Mindfulness
- > Systems Training for Emotional Predictability and Problem Solving (STEPPS)
- > Wellness Recovery Action Plan (WRAP) and 'My Safety Plan'
- > Comprehensive community links to support vocational / educational, self-care and leisure opportunities



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
Cygnet Acer Clinic, Derbyshire
Cygnet Alders Clinic, Gloucestershire
Cygnet Aspen Clinic, South Yorkshire
Cygnet Maple House, Nottinghamshire
Cygnet Hospital Kewstoke, South West
Cygnet Hospital Maidstone, Kent
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral

I have been discharged for nearly four months now and I am doing so much better than I ever thought I would. And this is because of the staff at Acer believing in me when I didn't. The skills I have learnt help me everyday. Acer has given me my life back and for that I will be forever grateful! - Former Service User



Cygnet Alders Clinic, Gloucestershire

155 Podsmead Road, Gloucestershire, South-West GL1 5UA

Highly Specialised PD (ICB)



18+ years



Female



20 beds in across 3 wards

At Cygnet Alders Clinic we provide a specialist psychologically informed personality disorder pathway across three living areas; Severn, for assessment and stabilisation; Avon, where service users move as they engage and progress with their treatment pathway; and Coln, which focuses on transitioning to the community.

We have a substantive multi-disciplinary team (MDT) comprising of a hospital manager, clinical manager, head of psychology, head of occupational therapy, ward managers, drama therapist, 2 psychology assistant, OT assistant, activity co-ordinator, specialty doctor, 11 RMN nurses, senior support works and support workers. We work closely with the local community and primary care.

We promote physical health, wellbeing and meaningful occupation as part of our treatment programme, using strong community links to facilitate individualised wellbeing plans.

Therapeutic approaches and assessments:

- > Dialectical Behaviour Therapy (DBT)
- > Cognitive Behavioural Therapy (CBT)
- > Trauma Focused Cognitive Behavioural Therapy (TF-CBT)
- > Compassion Focused Therapy (CFT)
- > Schema Focused Therapy (SFT)
- > Eye Movement Desensitisation and Reprocessing (EMDR)
- > Cognitive Analytic Therapy (CAT)
- > Rational Emotional Behavioural Therapy (REBT)
- > START Risk Assessment
- > Positive Behavioural Support Plans
- > Psychometric Assessments
- > Neuropsychological Assessments
- > Ongoing Psychological Formulation
- > Wellness Recovery, Support and Action Plans
- > Drama Therapy
- > Movement Therapy Groups
- > Drug and Alcohol Support Group
- > Grief Therapy Group
- > Psycho-Educational Groups

Our pathway

Severn

Assessment and Stabilisation

- > Safety
- > Containment
- > Emotional and behavioural control and regulation
- > Crisis management
- > Individualised psychological formulation

Avon

Core Treatment

- > Exploration
- > Change
- > Cognitive, interpersonal, occupational and specific psychosocial interventions
- > Individualised psychological formulation

Coln

Consolidation

- > Integration
- > Synthesis
- > Relapse prevention
- > Transition
- > Discharge planning
- > Multi-agency working
- > Increased independence
- > Resilience



Click the buttons to find out more about our Personality Disorder Services

[Introduction](#)

[Our Model of Care](#)

[Our myPath Care Model](#)

[Our Outcomes](#)

[Example DBT Pathway](#)

[Medium Secure](#)

[Low Secure](#)

[Tier 4 PD \(NHSE\)](#)

[PD Intensive Support](#)

[Highly Specialised PD \(ICB\)](#)

[Cygnet Acer Clinic, Derbyshire](#)

[Cygnet Alders Clinic, Gloucestershire](#)

[Cygnet Aspen Clinic, South Yorkshire](#)

[Cygnet Maple House, Nottinghamshire](#)

[Cygnet Hospital Kewstoke, South West](#)

[Cygnet Hospital Maidstone, Kent](#)

[PD / Disordered Eating Dual Diagnosis](#)

[Community Rehabilitation](#)

[Case Study](#)

[Service User Reviews](#)

[Map](#)

[How to Make a Referral](#)

Alders has changed my life...After 18 years of being in hospital I finally have a future! - Service User





Cygnet Aspen Clinic, South Yorkshire

Manvers Road, Mexborough, Doncaster, South Yorkshire, Yorkshire & Humber S64 9EX

Highly Specialised PD (ICB)



18+ years



Female



16 beds

Cygnet Aspen Clinic is a specialist service for women with a diagnosis of personality disorder and associated complex needs. We provide assessment, stabilisation, treatment and rehabilitation.

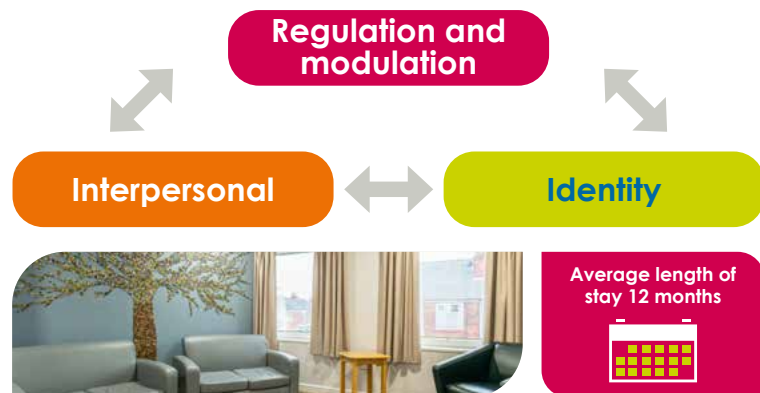
Our service users may have complex trauma histories or have experienced regular placement breakdowns. At Cygnet Aspen Clinic we provide a collaborative, multi-disciplinary approach to care and treatment with a focus on recovery and co-production with service users.

Our approach – a modular treatment pathway

At Cygnet Aspen Clinic we operate an integrated modular approach to treatment for women with a diagnosis of personality disorder, accounting for diagnostic differences, NICE guidelines and the work of Livesley (2004).

Our multi-modal treatment pathway consists of a range of therapeutic models including Dialectical Behaviour Therapy (DBT), Trauma-focused Cognitive Behavioural Therapy (TF-CBT), and Compassion-focused Therapy (CFT).

The Psychology team at Aspen Clinic offer a range of evidence based psychological assessments and therapies which are tailored to the individual's specific needs. Our priority is to empower women to feel safe enough to trust and engage in our range of therapies and assessments.



Therapeutic approaches and assessments

Our therapeutic interventions are tailored to individual presenting needs, based on comprehensive psychological formulations undertaken on admission. The interventions we use include:

- > Dialectical Behaviour Therapy (DBT)
- > Trauma-focused Cognitive Behavioural Therapy (TF-CBT)
- > Compassion-focused Therapy (CFT)
- > Trauma based Therapy
- > Eye Movement Desensitisation and Reprocessing (EMDR)
- > Structured Clinical Interview for PD (SCID-5-PD)
- > Millon Clinical Multiaxial Inventory (MCMI)
- > Difficulties in Emotion Regulation Scale (DERS)
- > Beck Anxiety Inventory (BAI), Beck Depression Inventory (BDI),
- > Beck Hopelessness Scale (BHS)
- > The Awareness of Social Inference Test (TASIT)
- > Chart of Interpersonal Reactions in Closed Living Environments (CIRCLE)
- > Aspects of Identity Questionnaire (AIQ)
- > Warwick-Edinburgh Mental Well-being Scale (WEMWBS)
- > Model of Human Occupation Screening Tool (MOHOST)
- > Assessment of Communication and Interaction Skills (ACIS)

Our facilities

- > En-suite bedrooms
- > Gym
- > Sensory room
- > Occupational therapy room
- > Laundry room
- > Therapy kitchen
- > 1:1 psychology room
- > On site beauty lounge
- > Quiet lounge
- > Downstairs communal lounge
- > Garden including an area for service users to grow their own fruit and vegetables



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
Cygnet Acer Clinic, Derbyshire
Cygnet Alders Clinic, Gloucestershire
Cygnet Aspen Clinic, South Yorkshire
Cygnet Maple House, Nottinghamshire
Cygnet Hospital Kewstoke, South West
Cygnet Hospital Maidstone, Kent
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral

I cannot express how amazing the staff here are! They saved me from myself and took the responsibility to keep me safe until I could do it for myself. I will never be able to thank them enough for the way they helped me and the huge impact they have had on my life. - Service User



Cygnet Maple House, East Midlands

93 Kneeton Road, East Bridgford, Nottinghamshire, East Midlands, NG13 8PJ

Highly Specialised PD (ICB)



18+ years



Female



16 beds

Now
open and
accepting
referrals

Cygnet Maple House is our new 16 bed highly specialised service providing assessment, treatment and rehabilitation for women with personality disorder and complex needs.

Rehabilitation is provided in a therapeutic setting, with a level of security matched to individual needs. The aim of the treatment, rehabilitation and re-socialisation programme is to prepare the individuals in our care either for transfer to an environment of lesser security, or for a life in the community.

We have a substantive multi-disciplinary team (MDT) comprising of a hospital manager, clinical manager, consultant psychiatrist, specialty doctor, psychologist, assistant psychologist, occupational therapist, therapy co-ordinator and nursing support workers. We work closely with the local community, including dieticians and primary care.

We promote physical health, wellbeing and meaningful activity as part of our treatment programme, using strong community links to facilitate individualised wellbeing plans.

Our approach

We adopt an integrated modular approach to treatment for women with a diagnosis of personality disorder, accounting for diagnostic differences, NICE guidelines and the work of Livesley (2004).

With a focus on interpersonal relationships, we use individual formulation to deliver a personalised and integrated combination of psychotherapeutic and pharmacological interventions. These can include:

- > Dialectical Behaviour Therapy (DBT)
- > Cognitive Behavioural Therapy (CBT)
- > Compassion Focused Therapy (CFT)
- > Eye Movement Desensitisation and Reprocessing (EMDR)
- > Schema Focused Therapy (SFT)

Our aim is to address the core features of personality disorder: emotional regulation, interpersonal functioning, self-identity and to prepare the women in our care for a transition to life back in the community.

Our facilities:

- > En-suite bedrooms
- > Dining room
- > Therapy kitchen
- > Laundry room
- > Communal lounge
- > TV room
- > Extensive garden
- > Sensory room
- > Treatment room



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
Cygnet Acer Clinic, Derbyshire
Cygnet Alders Clinic, Gloucestershire
Cygnet Aspen Clinic, South Yorkshire
Cygnet Maple House, Nottinghamshire
Cygnet Hospital Kewstoke, South West
Cygnet Hospital Maidstone, Kent
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral





Cygnet Hospital Kewstoke, Weston-super-Mare

Beach Road, Kewstoke, Weston-super-Mare, South West BS22 9UZ

Highly Specialised PD (ICB)



18+ years



Female



15 beds

Knightstone Ward at Cygnet Hospital Kewstoke is our 15 bed highly specialised service providing assessment, treatment and rehabilitation for women with personality disorder and complex needs. We focus on developing emotional resilience, building self-esteem, self-reliance and self-care. Our aim is to improve well-being and coping skills towards a positive discharge to a community placement. We understand the impact of trauma and the need to help maintain a safe environment.

Service user profile:

- > Female, aged 18+ years
- > Complex mental health needs, challenging behaviours and a primary or secondary diagnosis of personality disorder
- > Subject to a section of the Mental Health Act
- > May have a history of substance misuse or dependency
- > May have experienced regular placement breakdowns
- > Sustained relational and social functioning problems
- > Forensic or non-forensic history
- > Capacity to engage

Through our care pathway at Knightstone Ward, we are able to help support and care for individuals who present with complex needs, including Emotionally Unstable Personality Disorder (EUPD). We place an emphasis on a culture of co-production at Knightstone Ward as well as service user and carer participation in each individual's pathway to recovery.

Knightstone Ward offers a full multi-disciplinary team (MDT) which is experienced and skilled in Eye Movement Desensitisation and Reprocessing (EMDR) model of therapy with a Dialectical Behaviour Therapy (DBT) informed approach. We are also able to offer a full DBT programme.

Therapeutic approaches and assessments:

- > Psychodynamic therapy
- > Dialectical behaviour therapy (DBT)
- > Cognitive behavioural therapy (CBT)
- > Eye movement desensitisation and reprocessing (EMDR)
- > Psychological formulations
- > Psycho-educational groups
- > Drug and alcohol groups
- > Voices and noises groups
- > Wellness Recovery Action Plan (WRAP)
- > START assessments
- > Psychometric Assessments including the WAIS
- > Positive behaviour support plans
- > Counselling
- > Behavioural family therapy
- > Art therapy
- > Mindfulness
- > Drama therapy
- > Music Therapy
- > Comprehensive community links to support vocational, educational, self-care and leisure opportunities



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
Cygnet Acer Clinic, Derbyshire
Cygnet Alders Clinic, Gloucestershire
Cygnet Aspen Clinic, South Yorkshire
Cygnet Maple House, Nottinghamshire
Cygnet Hospital Kewstoke, South West
Cygnet Hospital Maidstone, Kent
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral





Cygnet Hospital Maidstone, Kent

Gidds Pond Way, Weaving, Maidstone, Kent, South-East ME14 5FY

Highly Specialised PD (ICB)



18+ years



Female



16 beds



Scan the QR code or click here to watch a short video on Cygnet Hospital Maidstone

Roseacre Ward is a 16 bed personality disorder service for women, based at Cygnet Hospital Maidstone, our state-of-the-art facility is situated within the the Kent Medical Campus. The aim of the service is to support service users manage their mental health, develop coping strategies, reinforce daily living skills and prepare for a return to independent living. Roseacre Ward provides a care pathway for service users who are preparing to step down to community living and uses a recovery focused model.

Roseacre Ward is designed to a Tier 4 specification but commissioned by ICB's. Building on the expertise of the other personality disorder services within the Cygnet Health Care portfolio, Roseacre Ward further complements our comprehensive national network of specialist services for women with this diagnosis.

Roseacre ward also provides treatment for women with complex mental illnesses including schizophrenia, schizoaffective disorder, bipolar affective disorder or depression, and those with a secondary diagnosis of mild learning disability or autism spectrum disorder. We also accept service users with a forensic history and those stepping down from secure services.

Just wanted to say thank you so much to all the staff at Cygnet. I'm doing really well in the community. I've started volunteering and I'm over 270 days self harm free. The care I received was amazing and I can't thank the staff enough for helping me get to where I am now. - Former Service User



Our therapeutic approaches:

Our therapeutic interventions are tailored to individual presenting needs, based on comprehensive psychological formulations undertaken on admission, using the following approaches:

- > The service is underpinned by Dialectical Behaviour Therapy (DBT), including 1:1 sessions and group skills training. DBT is a proactive behavioural therapy, requiring active engagement, designed to support individuals to manage distress, regulate emotion and develop adaptive coping skills.
- > Care planning is supported by a model of Positive Behaviour Support (PBS) each service user will have a personalised, co-produced Positive Behaviour Support plan in place to inform their care and treatment pathway.
- > The service is also supported by our tried and tested myPath model. To ensure we cater for each individual's journey and achieve long-term results, we have created a unique approach to care for people with personality disorder. myPath ensures the delivery of high quality and inclusive care which is continually evaluated through robust operational and clinical governance frameworks.

Our facilities:

- > En-suite bedrooms
- > Outside space including ward garden and communal roof terrace
- > Therapy kitchen
- > Quiet room
- > Gym and external exercise area
- > Extensive therapy space including Recovery College classrooms
- > Library and cinema room



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
Cygnet Acer Clinic, Derbyshire
Cygnet Alders Clinic, Gloucestershire
Cygnet Aspen Clinic, South Yorkshire
Cygnet Maple House, Nottinghamshire
Cygnet Hospital Kewstoke, South West
Cygnet Hospital Maidstone, Kent
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral





Cygnet Nield House, Cheshire

Barrows Green, Bradfield Road, Crewe, Cheshire, North West CW1 4QW

PD / Disordered Eating Dual Diagnosis



18+ years



Female



14 beds



Scan the QR code or click here to watch a short video on Cygnet Nield House

Clarion Ward at Cygnet Nield House is a complex personality disorder service for women diagnosed with personality disorder and co-morbid disordered eating. Both aspects can be treated simultaneously, with the appropriate specialist therapeutic input provided.

Clarion Ward adopts a phased treatment pathway which helps to help individuals to understand and plan their journey through treatment. The service focuses on the need for treatment to be personalised and collaborative with service users combining targeted behavioural therapies and interventions leading to an increased post-discharge quality of life and functioning thus reducing the risk of relapse.

Our multi-disciplinary team:

- > Consultant Psychiatrist
- > Psychologist
- > Assistant Psychologist
- > Occupational Therapist
- > Dietitian
- > Hospital Manager
- > Registered Mental Health
- > Nurses (RMN)
- > Registered General Nurses (RGN)
- > Healthcare Support Workers
- > Therapy Co-ordinator

My mum is getting help at Nield house, it's amazing! We're FaceTiming every day and me and my siblings are seeing positive changes in her already and she's not even been there for a week yet. The therapeutic activities you do are brilliant. The fact you have a hairdressers within the facility is amazing.

- Family Member

Our therapies and interventions:

- > Trauma Recovery Empowerment Model
- > Compassion Focussed Therapy
- > Radically Open-Dialectical Behavioural Therapy (RO-DBT)
- > Informed Dialectical Behaviour Therapy (DBT)
- > The Flash Technique
- > Eye Movement Desensitisation



Click the buttons to find out more about our Personality Disorder Services

- Introduction
- Our Model of Care
- Our myPath Care Model
- Our Outcomes
- Example DBT Pathway
- Medium Secure
- Low Secure
- Tier 4 PD (NHSE)
- PD Intensive Support
- Highly Specialised PD (ICB)
- PD / Disordered Eating Dual Diagnosis
- Cygnet Nield House, Cheshire
- Community Rehabilitation
- Case Study
- Service User Reviews
- Map
- How to Make a Referral





Gledholt Mews and Coach House, West Yorkshire

34 Greenhead Road, Huddersfield, West Yorkshire, Yorkshire & Humber HD1 4EZ

Community Rehabilitation



18+ years



Female



6 single occupancy self-contained flats

Gledholt Mews and Coach House is our service for adults with mental health needs or a personality disorder who have been able to progress through the hospital pathway and are looking for the next stage in their rehabilitation journey. This service has been designed around individuals from Kirklees in partnership with Kirklees ICB, the aim is to help these individuals along their path towards independent living.

The service provides supported residential care to individuals who are ready to take responsibility for the continuation of their own rehabilitation and recovery in a safe environment, whilst living in the wider community.

The service focuses on continuing practicing life skills and coping strategies. We concentrate on community based activities, the use of public transport, education and vocational therapy, job placements, work experience and development of hobbies and interests. Located less than a mile away from Huddersfield Town Centre with excellent transport links further afield, there are plenty of community based facilities nearby. For those individuals looking for a green space, there are a couple of options within a 5 minute walk, Greenhead Park and Gledholt Woods, popular for relaxing walks.

We have an in-house Multi-Disciplinary Team (MDT) wrap around service that is designed to support the individual in our care throughout their journey with us and is designed to

capture and manage risk and relapse in community settings. The team consists of nurses, psychologist, psychology assistants, occupational therapist, speech and language therapists as well as 24 / 7 support from the nursing team. This means that we are able to meet the changing needs of our residents as they progress through their care pathway, while ensuring their safety is maintained and their independence supported.

Residents are encouraged to cook independently (with or without staff support) in the Activities of Daily Living (ADL) kitchen or their own self-contained flats, however the kitchen staff are available for assistance and to prepare meals in the large on-site kitchen.

Our facilities:

- > 6 personality disorder community rehabilitation self-contained flats, each featuring a lounge / diner, kitchen and en-suite bedroom
- > Garden with outdoor seating
- > Multi-faith room
- > Activities of Daily Living (ADL) Kitchen
- > Dining room and lounge
- > Activity room
- > Tribunal / meeting room
- > Assisted bathroom



Click the buttons to find out more about our Personality Disorder Services

[Introduction](#)

[Our Model of Care](#)

[Our myPath Care Model](#)

[Our Outcomes](#)

[Example DBT Pathway](#)

[Medium Secure](#)

[Low Secure](#)

[Tier 4 PD \(NHSE\)](#)

[PD Intensive Support](#)

[Highly Specialised PD \(ICB\)](#)

[PD / Disordered Eating Dual Diagnosis](#)

[Community Rehabilitation](#)

[Gledholt Mews and Coach House, West Yorkshire](#)

[Case Study](#)

[Service User Reviews](#)

[Map](#)

[How to Make a Referral](#)





Eleanor's* Journey

Upping Ward, Cygnet Hospital Beckton, London
Personality Disorder Intensive Support Service for Women



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral

Eleanor's history

By the age of six, Eleanor's father had left home, her mother had passed away and she was placed in the care of her grandparents. During childhood, she witnessed domestic violence and was a victim of sexual abuse. Aged 14, Eleanor was referred to CAMHS and assessed as suffering a delayed grief reaction. On re-referral aged 16, she was offered help with anger management and a growing alcohol and substance abuse problem. Aged 17 Eleanor was self-harming regularly and her behavioural problems escalated further in her late teens into fire-setting and significant violence toward others, as well as increasingly serious deliberate self-harm, intoxication and suicidality.

Admissions to inpatient psychiatric services began when Eleanor was 18, escalating to Medium Secure services where she stayed for three years, before a gradual stepdown via Low Secure to a community residential rehabilitation service in her early 20s. Eleanor still self-harmed, for example on the anniversary of her mother's death, but she did well there, even coping impressively with losses of staff with whom she had formed close bonds. Until, that is, an encounter that triggered memories of her childhood sexual abuse. There followed three further years of escalating crises, characterised once again by violence, self-harm and intoxication.

When Eleanor came to us

Eleanor, now aged 25, had been in a Psychiatric Intensive Care Unit (PICU) for ten days when we assessed her. It seemed she had been scared in the community and knew she needed a more containing environment, her presentation and ongoing issues with alcohol and medication compliance triggering multiple, often short acute admissions. Now, a little more settled, she wanted to undertake a course of DBT (Dialectical Behaviour Therapy). Reports indicated good previous engagement in therapies but her risk and acuity was high.

Other personality disorder services declined Eleanor's referral due to recent incidents of violence and aggression requiring seclusion and Intramuscular injection (IM) medication. They suggested a period of 1-3 months' further stabilisation, with admission thereafter conditional on no further incidents of violence and aggression, a medication review, a clear commitment to engagement, and for Eleanor to have utilised section 17 leave into the community safely and without alcohol use.

Eleanor and her clinical / commissioning team, however, saw these goals as unattainable in local services and were eager to progress matters. Upping Ward at Cygnet Hospital Beckton was just opening

and geared specifically to cater for the needs of women with higher acuity, greater diagnostic complexity and less readiness to engage in treatment than our standard personality disorder rehabilitation services could manage.

Eleanor appeared complex and risky. She had also by now become quite institutionalised. She was morbidly obese, incontinent, rarely showered and had poor oral hygiene.

At the same time, she showed some insight, a degree of reflectiveness that both her assessor and Upping Ward's multi-disciplinary team (MDT) responded warmly toward, and an eagerness to turn her life around, even in the context of strong urges to escape her inner torment with self-harm and her other former coping strategies. She said:

“...these thoughts are bad... my head a bit all over the place... almost all the time; I do try to manage it but sometimes I give in... it's too strong; I want to do more therapy to sort it out...”

The Upping Ward MDT felt they could do some productive work with Eleanor and she was offered a place.



Eleanor's care

One of the principles the Upping Ward MDT try to establish with service users early on relates to ownership of their recovery, with the MDT and service user relationship framed as a collaboration. Eleanor found this hard. In fact, given her weak sense of agency and very low self-image, anything suggesting self-worth was hard for her.

Many interventions with Eleanor early on were about visualising a future, establishing specific goals to make that future happen, and identifying steps to reach these goals. A lot of motivational interventions in this regard came from the Occupational Therapy team, while psychology validated Eleanor's sense of struggle when her mood was low, with a shared metaphor of 'a long road to recovery'.

The medical, nursing and Healthcare Assistant (HCA) teams also gave Eleanor validation and quickly established themselves as trustworthy, non-judgemental allies, so that however hard Eleanor was finding things she knew she could talk about her urges to self-harm and the triggers with which she was struggling, and get an intelligent, validating response. A relationship of trust developed where Eleanor would accept guidance from the team, however hard. Early on this manifested, for example, in her being willing to leave her room to try and tolerate the excruciating dread around being with others in communal spaces. Later it would be more around accepting encouragement to chair her own ward round.

A second important principle the Upping Ward MDT try to establish is that relationships can be healing.

By ensuring a balance of challenge and support, service users generally respond well. Some gentle truth-telling about her personal hygiene, particularly in the context of preparation for community leave, seemed effective with Eleanor and as time passed, she engaged in walking groups and attended the gym. By the time she left us Eleanor's weight had reduced and her asthma had improved. She showered every two days rather than three weekly.

Overall, Eleanor felt heard on Upping Ward. She felt contained by the gentle boundaries and challenges of the service. Eleanor remained very sensitive to any real or perceived injustice (to herself or others) but while early on she might have reacted to events with violence (followed by depression and then deliberate self-harm), later she had transitioned to more of an assertive (if over-involved) verbal response to such situations, later still learning to contain her feelings and avoid unnecessary strife altogether.

With in relation to her own rights and empowerment, she challenged herself through sessions of schema therapy, as well as emotional regulation and interpersonal effectiveness work, to take a lead in the community planning meetings as well as her own clinical reviews. She fostered a strong sense of community in the service user cohort, supporting others and contributing massively to the positive culture that developed. She took an exceptionally proactive stance toward her own discharge pathway, writing her own referral to the residential service she eventually moved with.

“...during the last admission I did not know very well how to manage the freedom I was given, but I have learned emotional regulation skills in the personality disorder unit as well as skills on how to control intrusive thoughts and these skills do help. Since my last admission I have not refused my meds, like my last admission to you, as I now have insight that the medication helps me. I will be able to manage being a less restrictive setting a lot better than before...”

Eleanor Today

On discharge Eleanor's sleep had improved as she no longer needed to use a continuous positive airway pressure (CPAP) machine for sleep apnoea, her BMI was no longer in the morbidly obese range and her asthma was much improved. Her grandmother, who we helped Eleanor re-forge a healthy relationship with, told us that she had never seen Eleanor's physical health problems so comprehensively addressed before or, for that matter, Eleanor so physically and mentally healthy.

With the stability, the structure and the validation of her experience that Eleanor experienced on Upping Ward, she left, after a year to continue progressing to independent community living. She referred herself back into the residential service which she had stayed in during her early 20s. Eleanor is planning a future that will capitalise on the BTEC qualification in public science and experience as a cadet she had gained in her teens before her life unravelled. The team on Upping Ward take delight in Eleanor's achievements and wish her a brilliant future.



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral



Service User Reviews

“

Just a quick thank you for being so pleasant, lovely, kind and respectful to me. It is a pleasure to work with you all and also the MDT team. I feel you are all very approachable and always made me feel reassured whilst residing here with my recent positive progress. You are all professionals but you are all also human beings and I respect you. Thank you from the bottom of my heart to all of you.

Service user

”

“

Cygnets Hospital Derby has been a life changing experience. It has offered me so much which has allowed me to develop skills, insight, confidence and much more. I just wish there were more hospitals like this one. I now feel empowered and ready to live my life.

Service user, Alvaston Ward,
Cygnets Hospital Derby

”

“

I feel superb, thanks to all of the staff on my journey to become better in myself.

Service User

”

“

It is a lovely place, staff are absolutely lovely and the place is nice. I was an inpatient from an acute ward and the staff never had time to sit with service users, they just left you to it and I didn't get that support the way staff helped me here.

Former service user, Cygnets Aspen Clinic in Doncaster

”



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral



Map | Our specialist services by region

Medium Secure

- 1 Cygnet Hospital Bury**
Buller Street, off Bolton Road, Bury,
North West BL8 2BS
T: **0161 762 7200**

Low Secure

- 2 Cygnet Hospital Clifton**
Clifton Lane, Clifton, Nottinghamshire,
East Midlands NG11 8NB
T: **0115 945 7070**
- 3 Cygnet Hospital Derby**
100 City Gate, London Road, Derby,
Derbyshire, East Midlands DE24 8WZ
T: **01332 365 434**

Tier 4 PD (NHSE)

- 4 Cygnet Hospital Beckton**
23 Tunnan Leys, Beckton,
London E6 6ZB
T: **020 7511 229**
- 5 Cygnet Hospital Ealing**
22 Corfton Road,
Ealing, London W5 2HT
T: **020 8991 6699**

PD Intensive Support

- 4 Cygnet Hospital Beckton**
23 Tunnan Leys,
Beckton, London E6 6ZB
T: **020 7511 2299**

Highly Specialised PD (ICB)

- 6 Cygnet Acer Clinic**
Worksop Road, Chesterfield,
Derbyshire, East Midlands S43 3DN
T: **01246 386 090**
- 7 Cygnet Alders Clinic**
155 Podsmead Road,
Gloucestershire, South West GL1 5UA
T: **01452 222 390**
- 8 Cygnet Aspen Clinic**
Manvers Road, Mexborough,
Doncaster, South Yorkshire, Yorkshire
& Humber S64 9EX
T: **01709 572 770**
- 9 Cygnet Maple House**
93 Kneeton Road, East Bridgford,
Nottinghamshire, East Midlands NG13 8PJ
T: **01949 829 378**

- 10 Cygnet Hospital Kewstoke**
Beach Road, Kewstoke,
Somerset, South-West BS22 9UZ
T: **01934 428 989**

- 11 Cygnet Hospital Maidstone**
Gidd Pond Way, Off Newnham
Court Way, Maidstone, Kent,
South East ME14 5FY
T: **01622 580 330**

PD / Disordered Eating Dual Diagnosis

- 12 Cygnet Nield House**
Barrows Green, Bradfield Road, Crewe,
Cheshire, North West CW1 4QW
T: **01270 696510**

Community Rehabilitation

- 13 Gledholt Mews and Coach House**
34 Greenhead Road, Huddersfield,
West Yorkshire, Yorkshire & Humber
HD1 4EZ
T: **01484 959890**



Click the buttons to find out more about our Personality Disorder Services

[Introduction](#)

[Our Model of Care](#)

[Our myPath Care Model](#)

[Our Outcomes](#)

[Example DBT Pathway](#)

[Medium Secure](#)

[Low Secure](#)

[Tier 4 PD \(NHSE\)](#)

[PD Intensive Support](#)

[Highly Specialised PD \(ICB\)](#)

[PD / Disordered Eating Dual Diagnosis](#)

[Community Rehabilitation](#)

[Case Study](#)

[Service User Reviews](#)

[Map](#)

[How to Make a Referral](#)



How to Make a Referral



We are able to take referrals 7 days a week.

To make a referral please;

Call:
0808 164 4450

Email:
chcl.referrals@nhs.net
or contact your
regional Business
Relationship Manager.

Planned admissions referral steps:

- 1 Referral made to Cygnet referrals team via **0808 164 4450** / **chcl.referrals@nhs.net** or via your regional Business Relationship Manager
- 2 Assessment arranged and undertaken via our assessment team
- 3 Feedback provided on whether our service can meet the individual needs
- 4 Assessment pack formulated including care plans and funding information
- 5 Admission agreed and plans for transition arranged with referring team following confirmation of acceptance of placement



Click the buttons to find out more about our Personality Disorder Services

Introduction
Our Model of Care
Our myPath Care Model
Our Outcomes
Example DBT Pathway
Medium Secure
Low Secure
Tier 4 PD (NHSE)
PD Intensive Support
Highly Specialised PD (ICB)
PD / Disordered Eating Dual Diagnosis
Community Rehabilitation
Case Study
Service User Reviews
Map
How to Make a Referral



Improving lives together



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CYG-743 | Date of Preparation: 22/02/24

Integrity

Trust

Empower

Respect

Care