

# The Montpellier Unit

## Wotton Lawn Hospital

### Facing the Challenge Together



Unit activity 2007: Surfing the "Gower" in Wales

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[www.montpellier.glos.nhs.uk](http://www.montpellier.glos.nhs.uk)



# Gloucestershire's Low Secure Recovery Service

## What is the Montpellier Unit?

The Montpellier Unit is the base for Gloucestershire's low secure recovery service. It has 12 beds for male patients and provides a real opportunity for these patients to move on to independent living with an improved quality of life.

The unit is able to offer accommodation to male patients detained under the Mental Health Act including those subject to Ministry of Justice Restrictions.

The unit environment is fully compliant with the National Standards for Low Secure Units. In addition, the unit is amongst the practice leaders in the UK, with a significant role in national practice development.

The Montpellier Unit is for adult males with mental health problems who have found it difficult to spend long periods out of other in-patient mental health settings. Other common difficulties may include dealings with the criminal justice system. The unit also welcomes patients who may have spent periods of time in more secure mental health accommodation or in prison. The Montpellier Unit offers a step down in security and a stepping stone towards community living including education and employment. Additionally, the unit can accommodate prisoners requiring transfer to hospital (low secure conditions) for help with mental health problems.

## Why should patients and carers choose the Montpellier Unit?

The Montpellier Unit philosophy for working with residents is firmly based on the idea of social inclusion. Within the unit there is a clear expectation that the every person will move onto living in the community having spent between 3 months and 2 years staying in the unit.

The Montpellier Unit offers a wide range of activity and close cooperation with residents. The unit has a Consultant Psychiatrist, a Sports/Activity Therapist, Occupational Therapists, Nurses, Psychologist and a full time Social Worker.

**“The unit believes that rediscovering the community through social activity and engagement provides the foundation from which to build the motivation and skills for community living, further education and employment.”**

Resident's are encouraged to take part in community visits and activities some of which include:

- annual holiday with staff for groups and individuals
- cycling on Forest of Dean trails
- attending rugby and football matches
- walking – forest and countryside
- sessions at Gloucestershire GL1 Leisure Centre and Gymnasium
- attendance at steam bath, jacuzzi and health facilities at GL1 Leisure Centre
- use of on-site gymnasium including badminton, ball games etc.
- availability of circuit training within on-site facilities
- local shopping trips including markets and car boot sales
- fishing trips (sea and coarse)
- voluntary groups and treatment for smoking cessation
- visits to places of special interest



Unit holiday 2004 - Centre Parks



Forest of Dean cycle trail picture taken by resident 2007



Walking group - Welsh Hills 2006



Visit to the Millennium Stadium Cardiff 2007

## Work and employment opportunities

Also within the unit philosophy of social inclusion are a number opportunities to improve prospects for employment. These include:

- in-house computer training programme with recognised qualification
- guidance and facilities for completing a CV (Curriculum Vitae) and preparation for job interviews
- links with local providers of voluntary work
- links with local colleges and other agencies promoting work opportunities
- participation opportunities in the Montpellier gardening and vegetable production in-house co-operative



*Produce from the unit allotment*

## In-house help and therapy for individual patients

The Montpellier Unit offers a range of ways to help you with some of the problems that may have caused you great difficulty in the past these include:

- medical staff led by a Consultant Psychiatrist – the doctors review patients every week and monitor both mental and physical health. Medication is tailored to the individuals needs
- Named Nurse - an individual member of nursing staff called a Named Nurse who can take a special interest in anything that you need or problems you need help to overcome.
- A Recovery Group – this involves a meeting of the residents within the unit who help each other by discussing their own situation and how best to improve it.
- Family Work – involving specially trained staff from the unit helping to get to know you and members of your family as someone that can be helpful in allowing discussion and better understanding.
- individual and group sessions are available through the unit's Clinical Psychologist.
- sessions with the unit Occupational Therapy team.

The Montpellier Unit is different to many of the Wards you may have been in before. Much of the work of the Montpellier Unit is done in the community and our most important reason for being is to provide the best opportunities possible for you to live in the community with much better understanding of the things in life which promote health and happiness.

## Why choose the **NHS** Montpellier Unit if you are funding a placement?

The Montpellier Unit provides very regular (usually daily) escorted leave and a wide range of activities within its standard provision. No 'special' additional costs are charged for one to one nursing care, escorts, family work, special investigations eg X-rays, ECG's.

The Montpellier Unit aims to offer effective and efficient help, support and treatment to patients who may have had long histories of significant difficulty within the mental health and criminal justice systems.

Traditionally, Low Secure Units have provided little more than containment for people who have proved exceptionally challenging to mental health and/or criminal justice services. National surveys show a variation in the average length of stay (LOS) for Low Secure Units. These averages range from shortest mean average length of stay 354 days (Pereira et al 2006), to 528 days (Beer et al 2005). The figure between these two major surveys places the national average LOS at 441 days.

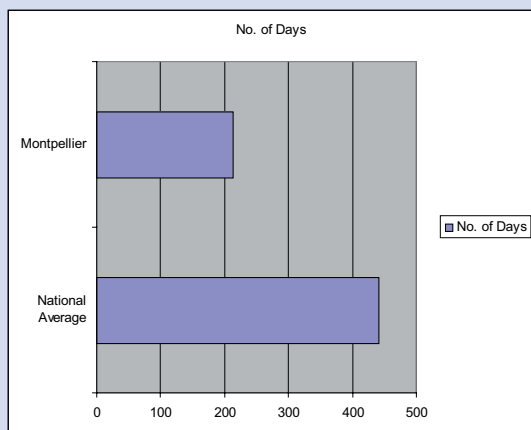
The unit's philosophy and methods have a proven record of producing relatively short length of stay, the mean average being 210 days, 231 days less than the national average. The unit has a focus on facilitating patients to make major life choices which greatly increase their prospects of not returning to secure residential mental health care.

The Montpellier Unit offers an approach which is firmly rooted in social inclusion, recovery and a strong commitment to patient's re-joining society with meaningful opportunities that will hugely diminish the prospects of return to in-patient secure care and/or the criminal justice system. With much more engagement and activity, resulting in a much shorter length of stay than the national average, the Montpellier unit offers excellent outcomes as well as efficient use of resources.

Since the Montpellier Unit became operational in February 2003, the unit has demonstrated excellent outcomes.

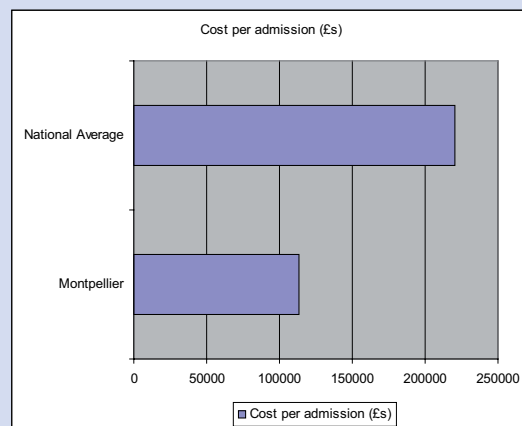
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## Unit Outcomes 2003 – 2007



### Length of stay (LOS)

**The Montpellier has a mean LOS 231 days less than the national average**



### Cost per admission

**Compared to the national average the Montpellier Unit can offer significant savings**

National average for low secure care is approximately £500 per day. The Graph shows a total cost per admission based on the Montpellier Unit cost of £529 per day. The saving shown from the national average result from the much shorter length of stay.

## General Performance Indicators

### Feb 03 to Aug 07

- 85 % of the units total (n=32) discharges went on to community living.
- 22% went on to employment or further education.
- Of the total discharges (n=32) only 2 required re-admission to acute inpatient mental health care following discharge.
- None required readmission to secure units.

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**To talk about the Montpellier Unit call 01452 891581 ask for**

**Roland Dix, Consultant Nurse**  
**Mathew Page, Unit Manager**  
**Dr Jim Laidlaw, Consultant Psychiatrist**  
**Andy Gardner, Charge Nurse**  
**Dave Buckle, Approved Social Worker**  
**Anthony Lake, Senior Charge Nurse**  
**Heather White, Charge Nurse**  
**Layla Jones, Head Occupational Therapist**

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### References

Beer D. Turk V. McGovern P. Gravestock M. Brooks D. Barnett L. Orr D (2005) Characteristics of Patients exhibiting severe challenging behaviour in low secure mental health and mild learning disabilities units. *Journal of Psychiatric Intensive Care and low Secure Units*. Vol 1 No 2 29-35

Pereira, S., Dawson P., Sarsam, M., (2006) The National Survey of PICU and Low Secure Services: 1. Patient Characteristics. *Journal of Psychiatric Intensive Care and Low Secure Units*. 2 (1) 7-12