

# Mount Lodge

High support recovery community

5 Upper Avenue, Eastbourne, East Sussex BN21 3UY 01323 411 312 | mountlodge@cht.org.uk

Registered Manager: Holly Moore

Clincal Lead: Emma Pyle



## Registered provider details

Community Housing & Therapy (CHT)
VOX Studios, 1-45 Durham Street, London, SE11 5JH

Telephone: 020 7381 5888

E-mail:co@cht.org.uk Website: www.cht.org.uk

Provider ID: 1-101671019

## Regulated Activities at Mount Lodge

• Treatment of Disease, Disorder or Injury (TDDI)

## Nominated Individual

Anthony Jones

## About CHT

Community Housing & Therapy (CHT) is a not-for-profit 24/7 residential rehabilitation service for adults experiencing acute and prolonged mental distress or the long-term impact of compound trauma.

Our seven specialist residential recovery communities across London and the South East provide safe and supportive environments, enabling people to address trauma, build positive relationships, and explore ways to find meaning and live fulfilling lives.



Since 1994, we've supported over 2,000 people referred to us by local authorities and NHS trusts across the country.

Our clinical model combines relational practice, Psychologically Informed Environments (PIE), and trauma-informed treatment approaches.

Recovery pathways are strengths-based and tailored to each resident, prioritising relationships and autonomy. In this way, we enable residents to actively participate in their recovery, which supports long-term recovery and helps to break the revolving door of psychiatric admissions.

#### Our support pathway

- High support CQC-regulated communities staffed 24/7 with waking night support.
- Medium support Therapeutic Recovery Communities, sleeping night staff.
- Semi-independent therapeutic accommodation.



### Who we support

- Adults with a diagnosis of mental health conditions, including personality disorder, psychosis, eating disorder, PTSD, depression, and schizophrenia.
- People with histories of childhood trauma, self-harm and substance use.
- People leaving hospital, or those who otherwise might be in hospital.

### We can offer

- Co-designed recovery plans.
- Support with daily living skills.
- Group therapeutic programme.
- Regular one-to-one on-site psychotherapy.
- Opportunities to contribute towards organisational learning and build skills through coproduction.
- Regular multidisciplinary progress reviews, supported by our in-house social work team.
- Access to training and employment skills.
- Support for managing substance use.

## Our approach to recovery

We believe that severe mental distress arises from experiences of repeated trauma and damaged and damaging attachment relationships, which are further exacerbated by deprivation, inequality, and stigma.

Our treatment and recovery pathways are person-centred, strengths-based and prioritise relationships, belonging and autonomy. In this way, we support long-term recovery and help to break the revolving door of psychiatric admissions.

Our recovery pathways are tailored to each resident, and a typical path is outlined overleaf.

Many residents will initially join our high or medium support communities, before progressing at their own pace, and with the support of our therapeutic staff, to our lower support therapeutic accommodation, with the ultimate aim of transitioning to lower support or independent living outside of CHT.

The five stages of our clinical model integrate relational practice, Psychologically Informed Environments (PIE), and trauma-informed care principles.

- 1. Engagement. We support residents engage with community life, their recovery pathway, and develop strategies for daily task management
- 2. Attachment. Nurturing positive relationships with others through therapeutic group activities within the community and outside.
- 3. Containment. Psychotherapy and safe, supportive environments enable residents to engage in positive risk-taking and manage their emotions in a healthy way.
- 4. Exploration. Residents (re)learn what they want from life and (re)discover their potential within CHT and beyond.
- 5. Autonomy. When residents are active in community life, participating in study, work, hobbies or volunteering and preparing for life beyond CHT.





On average we see a reduction in hospital admissions among our residents over 15 months

## Recovery pathways

#### Referral & assessment

Following referral and assessment, most residents will initially join our high or medium support communities, before progressing at their own pace, and with the support of our therapeutic staff, to our lower support therapeutic accommodation.

## High support

Our CQC-regulated residential communities offer 24/7 waking support, regular on-site psychotherapy, a community social worker, regular keywork, and a weekly therapeutic programme.

Our high support communities are:

- Highams Lodge, Waltham Forest
- Lilias Gillies House, Croydon
- Mount Lodge, Eastbourne

## Medium support

Our Therapeutic Recovery Communities offer 24hour support, with sleeping night staff. Residents benefit from training opportunities, psychotherapy and a weekly therapeutic programme.

Our medium support communities:

- George Dooley House, Ealing
- Richmond House, Richmond
- Onkar House, Ealing

#### Lower support

Residents at our semiindependent therapeutic accommodation are typically towards the end of their care pathway. Each has a self-contained flat with a therapeutic programme Monday -Friday.

Our semi-independent accommodation:

 Fairhall Court, Surbiton

## Move on to supported or independent living

Residents will typically stay with CHT for two to three years, before we support them to transition to lower support or independent living outside of CHT.



of those who moved on were in lower support or independent living in 2023/24

## About Mount Lodge

#### Service overview

Mount Lodge is our 15-bed, mixed-gender residential community in Eastbourne, a 15-minute walk or short drive from Eastbourne Pier and the sea. It operates as a Psychologically Informed Environment (PIE), offering a 24/7 safe, supportive environment for adults living with severe, complex mental health conditions, dual diagnosis, and who may have experienced multiple placement breakdowns.

Our therapeutic programme runs Monday to Friday and includes psychosocial groups, community reflective work and life skills training.

The community has fifteen bedrooms with shared bathrooms, and live-in support workers are available throughout the night if needed. Residents can access a shared kitchen, two lounge spaces for group meetings and activities such as art therapy, and a private therapy room for one-on-one psychotherapy. Our summer house offers a relaxing space in a tranquil, natural setting equipped with sensory, music, and art materials. The large garden provides ample space for connecting with nature, including an outdoor shelter with seating.

## **Key facts**

- 24-hour support (waking nights)
- Mixed gender
- Adults 18+
- 15 bedrooms
- On-site psychotherapist
- 1:1 psychotherapy each week
- Community social worker
- Resident training and development opportunities
- Shared lounge, kitchen, garden area, therapy room and group room spaces
- 1:1 key work sessionsWeekly therapeutic programme
- Psychosocial groups
- Art psychotherapy
- Facilitated reflective space
- Opportunity to join organisational committees



## Referrals

We aim to make our referral process as efficient as possible. If you have any questions, please contact referrals@cht.org.uk or 020 7381 5888.

#### Who can be referred to CHT?

We accept referrals for adults aged 18 and above. Each referral is considered on an individual basis, but we require that the people referred will benefit from a structured and personalised therapeutic program.

Referrals can come from care coordinators, community mental health teams, social workers, hospitals, or other professionals. We also welcome self-referrals.

## The referral process

Once we have received and reviewed a referral, we will arrange an assessment and invite prospective residents to meet the community. Current residents have the opportunity to provide feedback and contribute to the process. Factors such as more complex referrals and delays from funding panel decisions may affect the length of the assessment process.

### Fees and funding

Placements are cost-effective and typically funded through the resident's local authority or the NHS; however, it is possible to self-fund a placement. Please contact our referrals team for our latest fee table.

#### To make a referral

Please email referrals@cht.org.uk with supporting documents such as:

- Recent risk assessment
- Care Plan
- Support Plan
- Other information, including a psychiatric report, occupational therapist report or social circumstances report



"Mount Lodge provides me with the structure that I need, and the support that I need. But I have my freedom as well. When you're in hospital, you have no autonomy. But here, I have people who I know want to help me and want to work with me."

Mount Lodge resident

## Quality and monitoring

We are committed to offering safe, quality care and have robust monitoring policies and procedures to maintain good practice standards

#### Our outcome measures

We use tools including Dialog +, CORE, and Honos, as well as a range of outcome measures such as incidents, hospitalisations over time, transitions to lower support and the numbers of residents in employment, training or education.

We also evaluate our day-to-day work and the development and progress of residents and staff through selfrecorded outcome measures, regular supervision and group reflective practice.

## Our commitment to Equality, Diversity and Inclusion (EDI)

We take pride in creating safe and inclusive environments, and our commitment to EDI ensures that everyone can be themselves and is treated with dignity and respect. We celebrate diversity and the value of lived experience within our communities, staff teams, and board of directors.

We actively address issues of stigma or discrimination as they arise in the experiences of residents and staff, both within the community and in the wider world. We discuss these important topics during community meetings and reflective groups, encouraging everyone to recognise and appreciate individual differences.

### Staff training

We train our staff to the highest standards, covering our policies and procedures as well as essential skills such as safeguarding, the Care Certificate, risk management, Psychologically Informed Environments (PIE), and our clinical model. Additionally, we offer co-produced psychoeducation groups for both staff and residents.

Our service delivery staff have regular monthly supervision, attend facilitated reflective groups and can pursue our internationally accredited Level 7 Diploma in Relational Practice in Mental Health.

Team Leaders receive further training through the ILM Level 4 Certificate in Leadership and Management.



## Our Leadership Team

## Holly Moore Registered Manager

Holly joined CHT in 2010. She has a background in psychology and completed the Post Graduate Diploma in Psychotherapy for Practitioners in a Therapeutic Environment in 2012.

#### Emma Pyle Clinical Lead

Emma is our Community Psychotherapist. She has over 20 years of experience working in mental health services, family assessment services and counselling services for students.

### **Anthony Jones** Head of Services

Anthony has been with CHT since 2010, and is a registered social worker and Family Therapy Practitioner. He is our CQC-nominated individual and Safeguarding Lead.

## Dr. Andreas Constandinos Head of Psychotherapy

Andreas is a UKCP-registered psychoanalytic psychotherapist who trained at the Philadelphia Association in London. Andreas joined CHT in 2020 following over 10 years working in the homelessness sector.

## Support staff

Mount Lodge also has a dedicated team of professionals who offer day-today support for residents and deliver our therapeutic programme.

#### **Social Worker**

Our registered Social Worker can offer support throughout their recovery pathway, including assessment, recovery planning, and during the move-on stage.

"We come into this line of work for a reason. It's not just a job, it's not just a role, it's a vocation" CHT staff member

### **Medical Psychotherapist**

In addition to contact with their primary Psychiatrist, residents are also supported by our Medical Psychotherapist, who reviews recovery plans and can provide consultation on psychiatric medications.

### **Therapeutic Support Staff**

Including live-in Support Workers, a service Team Leader, Therapeutic Practitioners, and Senior Therapeutic Practitioners.

## Community life

Mount Lodge offers a safe and supportive environment to help people address trauma, build positive relationships, and explore ways to find meaning and live fulfilling lives.

## **Community management**

Residents are supported to engage in community life through meetings and shared responsibilities such as cleaning and cooking.

They make democratic decisions about the running of the community, and are involved in activities such as meal planning, health and safety and establishing and reviewing community rules.

### Therapeutic programme

We offer a range of therapeutic activities, including psychosocial groups, art psychotherapy, community reflective work, and life skills training. The therapeutic programme is coproduced with residents around their interests and goals.

#### Social activities

Residents are supported to organise and participate in group social activities within Mount Lodge or in the wider community, such as coffee mornings, community picnics, summer BBQs or theatre outings.

#### Life skills

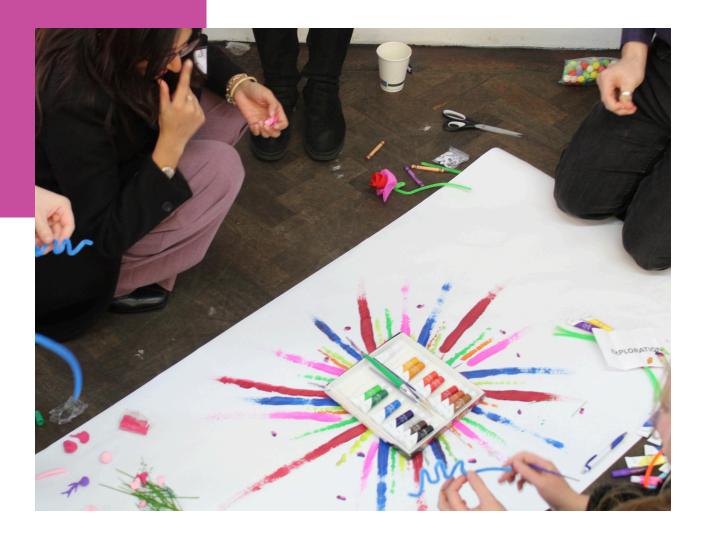
We offer life skills training that supports residents in building confidence and developing skills they can carry with them after leaving our communities.

Life skill training is tailored to each resident, and can include activities such as cooking, gardening, budgeting, project planning, chairing meetings, presentation skills, decision-making and creative thinking.



of those who moved on from our communities in 2024 were in education, employment or training





### Organisational feedback

We value lived experiences and encourage residents' participation in our communities, services, and management, as well as in the design, delivery, and evaluation of our services, training, and communications.

Residents play an active role in recruitment panels for new staff, share their experiences during staff inductions, and can participate in organisational committees, including our fundraising committee.



of residents who took part in our 2024 satisfaction survey told us they would recommend us to others

### **Experts by Experience**

We encourage residents to participate in our Experts by Experience programme, which aims to increase coproduction across CHT and to create a peer-support network that helps our residents thrive.

"Being part of the staff interview panel has given me more confidence speaking around people. I was listened to and my opinions were taken on board" CHT resident

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