



Woodleigh Community Hospital

About Us

Woodleigh Community Hospital is a Level 2 mental health rehabilitation service providing specialist care for men and women aged 18 years and over with enduring mental health needs, including autistic people. Many of those we support also have ongoing physical health conditions requiring coordinated clinical care. We work with people experiencing a range of complex mental health conditions, including psychosis, Emotionally Unstable Personality Disorder (EUPD) and Obsessive Compulsive Disorder (OCD).

Through personalised rehabilitation and IHCM's integrated care pathways, we support people to regain confidence, develop practical daily living skills and progress towards greater independence. Supported by our multidisciplinary team, each person is encouraged to engage with their local community, build meaningful relationships and prepare for the next stage of their recovery.

We promote positive risk management and carefully planned community engagement, including Section 17 leave where appropriate, helping people develop the skills, confidence and resilience needed for life beyond hospital.

Our Multidisciplinary Approach

Recovery is supported by an experienced multidisciplinary team working together to deliver personalised, evidence-based rehabilitation.



**Enquiries &
Referrals:**

T: 0330 236 8231
E: referrals@ihcm.co.uk



Our team includes:

- Consultant Psychiatrists
- Psychologist and Assistant Psychologist
- Registered Nurses (Mental Health and General)
- Occupational Therapists
- Activity Coordinators
- Healthcare Support Workers

Working collaboratively, the team develops personalised care plans that promote recovery, independence and positive long-term outcomes.

Our Approach and Care Pathway

Every individual follows a personalised rehabilitation programme designed around their strengths, aspirations and recovery goals. Support may include psychological therapies, occupational therapy, practical daily living skills, education, vocational opportunities, community engagement and physical healthcare. As part of IHCM's integrated care pathway, many people leaving Woodleigh Community Hospital progress to Beech Manor, our neighbouring nurse-led residential service. This provides a seamless transition into a less restrictive environment while maintaining continuity of care. For others, the pathway continues into supported living or independent accommodation, depending on individual needs and progress.

Case Study: Supporting Long-Term Transition

One woman was admitted to Woodleigh following a hospital admission that had lasted almost 30 years. During this time, living a significant distance from her daughter had affected their ability to maintain a close relationship. The multidisciplinary team supported her through a complex period of care, including managing episodes of medication non-compliance, while working with her to rebuild family contact. Staff encouraged regular visits and supported opportunities for mother and daughter to spend time together, including everyday activities such as shopping.

As part of her longer-term care planning, Woodleigh worked closely with commissioners and partner organisations to identify the most appropriate placement. She was successfully discharged to a nursing home closer to her daughter, allowing their relationship to continue developing while ensuring she received the ongoing support she required. This case demonstrates Woodleigh's commitment to delivering personalised care and achieving outcomes that are meaningful for each individual, whether that involves greater independence, reconnecting with family or finding the right long-term care setting.

The Woodleigh Recovery Pathway

Understanding the Person

- Comprehensive multidisciplinary assessment
- Psychological formulation
- Trauma and attachment-informed understanding
- Collaborative goal setting
- Physical and mental health review
- Building trust and therapeutic relationships

Stabilisation Through Therapeutic Relationships

- Emotional regulation
- Relational security
- Recovery planning
- Psychology-led interventions
- Positive risk management
- Meaningful occupation
- Developing confidence

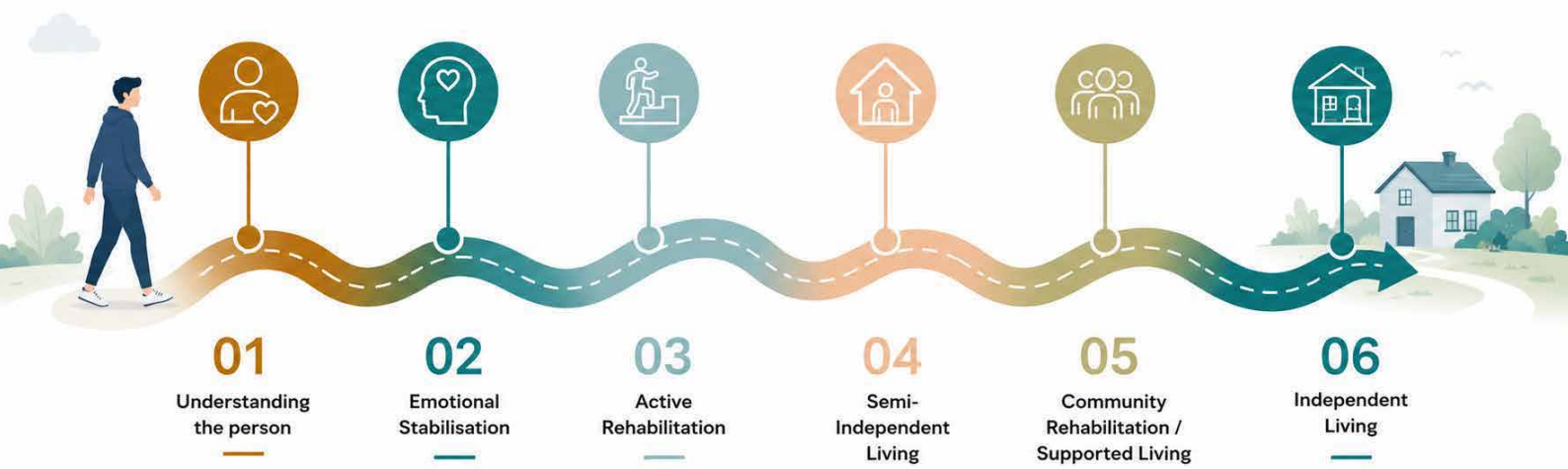
Active Rehabilitation

- Independent living skills
- Community access
- Education and vocational opportunities
- Self-management
- Family work
- Occupational rehabilitation
- Physical wellbeing

Transition and Independence

- Semi-independent apartments
- Community leave
- Discharge planning
- Partnership with community teams
- Gradual reduction in support
- Sustainable recovery

The Pathway



Admission Criteria

- Adults aged 18 years and over.
- Individuals with complex and enduring mental health needs.
- Informal patients or those detained under the Mental Health Act 1983, including Sections 3, 37 and 37/41.
- Individuals subject to life licence or other Ministry of Justice restrictions where the service can safely meet their needs.
- People stepping down from secure services, acute mental health hospitals or other rehabilitation services.

All referrals are individually assessed by our multidisciplinary team to ensure Woodleigh Community Hospital is the most appropriate environment to meet each person's clinical, therapeutic and rehabilitation needs.

All referrals are individually assessed by our multidisciplinary team to ensure Woodleigh Community Hospital can safely meet the person's clinical, therapeutic and risk management needs.



Part of



Integrated Health
Care Management Group



Integrated Health Care Management Group (IHCM) is a UK-based health and social care management organisation. IHCM operates and manages a network of hospitals, residential care homes and supported living services, providing governance, clinical oversight and strategic leadership across the Group. Individual services are registered and regulated through their respective provider organisations, with IHCM providing the management infrastructure and support to deliver safe, high-quality and compassionate care.

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