

Aster Ward & Darcy Ward

Trauma Informed Rehabilitation for Women

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Overview of the Service

Our trauma informed service offers a psychology-led pathway for women who use coping strategies that are severely harmful to themselves and who are likely to have a skewed attachment style. The model uses a phased based approach based on Herman's model of trauma linked to stabilisation, psychoeducation, and safety. The service consists of two wards, each with a different focus, depending on the level of engagement and stability the patient is presenting with.



Aster Ward

Aster ward is a shorter-stay stabilisation service for women that focuses on phase one trauma work, psychoeducation and safety. Women are likely to be pre-contemplative to change, have a history of mild to moderate violence and aggression and have an over dependence on high levels of observations. The team at The Aster Unit work with each woman to reduce observation levels through a combination of Compassion Focussed Therapy (CFT) and Positive Behaviour Support (PBS). The team aim to start the process of therapeutic engagement, preparing the patient for active engagement and intensive trauma work on Darcy ward.

Outcomes

- Decreased observation and self-harm levels
- Ability to regulate emotions
- Increased ability to trust and build hope
- Stronger sense of compassion
- Ability to use new skills to maintain engagement with trauma work





Community Integration and Discharge Preparation

Patients are encouraged to access the community as soon as their risks and behaviours allow them to safely do so. The service is situated in Newark, Nottinghamshire and close to the town centre and its amenities. There is significant emphasis on accessing mainstream community resources to enable patient to build up solid social networks outside of the service that can be utilised and maintained on discharge from the service.

Darcy Ward

Darcy ward offers intensive trauma work for those patients who show ability to use skills and do not require a higher level of observational support. The service offers a continuation of care with staff that women are familiar with and with whom they have built a trusting relationship. The model of care on Darcy ward continues with CFT combined with PBS, however patients will access longer-term interventions such as Trauma Focussed CBT and EMDR to address their trauma difficulties.

Outcomes

- Reduction in trauma symptoms
- Improved self-esteem, self-worth and identity
- Continued compassionate and judgement free approach to thinking
- Self-reliance for managing own mental health and staying well
- Successful and sustainable discharge

Admission Criteria

- Women over the age of eighteen
- Detained under the Mental Health Act 1983 (amended 2007)
- Diagnosis of Personality disorder or Conduct Disorder
- May have a mild Learning Disability or ASD
- May have a history or low to moderate levels of aggression
- Likely to have a history of trauma, abuse and/or attachment issues
- May require 1:1 or 2:1 support
- **For Aster Ward** – likely to present with high levels of self-harm and pre-contemplative to therapy
- **For Darcy Ward** – history of high-risk behaviours but have completed stabilisation work and are ready for engagement in trauma therapy

