

## **Early Intervention Picking Cases up Early and Responding**

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Eating disorders are mental illnesses with multiple and often severe complications. Recovery from an eating disorder is possible and evidence-based treatments are available to be implemented locally. When delivered early, severity, duration and impact of an eating disorder can be reduced. Timely and appropriate care may reduce morbidity and mortality, improve treatment outcomes and moderate demands on other parts of the health system.

Two key areas to support under the Service Plan are early engagement and prevention and health promotion. Supporting this can include:

- 1. Identifying and working with our partners (internally and externally) to develop strategies to improve service integration and delivery and to build capacity to:
  - Screen and assess
  - Where appropriate provide early intervention
  - Support evidence-based approaches
  - Utilise appropriate referral pathways to more intensive treatment
  - Shared care during treatment and recovery
- 2. Education and training to build knowledge and skill
- 3. Protocols and resources to support consumers, families and carers and professionals
- 4. A clear service map

Early intervention works but must be planned and resourced adequately to obtain optimal outcomes.

Staff must feel comfortable and confident to provide care for eating disorder clients or carry out health promotion in the early intervention space, therefore education and supervision is vital. There must be clear escalation processes in the clinical setting if early intervention with an individual client is not working and medical risk is increasing.