

How to set up a local Outpatient Eating Disorder Service

NSW Eating Disorders Service Development Forum

Prepared by **Judith Leahy**
Co-ordinator Eating Disorders Outpatient Service

23 February 2015



Health
Central Coast
Local Health District

Who am I? - Judith Leahy

- A practicing dietitian since 1982
- public and private settings, urban, regional and rural ie. Northside Clinic in Sydney, community health centres, medical practices, gyms, private practice.
- Multidisciplinary teams, project teams.
- Health Promotion officer -7 years
- Public Health/ Community Nutritionist - 11 years
- Co-ordinator of Central Coast Eating Disorders Outpatient Service - 11 years

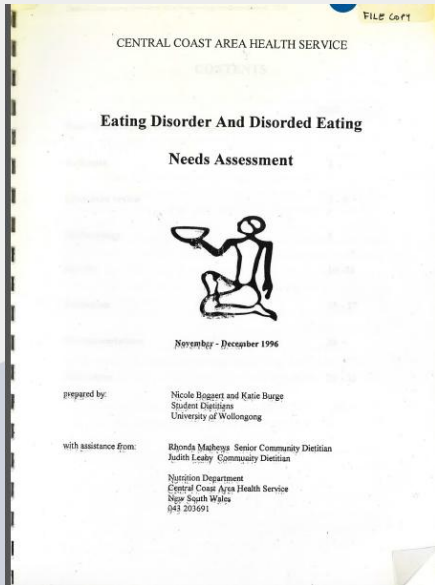


Health
Central Coast
Local Health District

How it all began.....



Health
Central Coast
Local Health District



Health
Central Coast
Local Health District

History 1996 -----2015

- 1996 a needs assessment conducted to look at gaps in services for people with eating disorders on the Central Coast.
- 1996-1999 a Central Coast Self Image and Disordered Eating Committee formed to address issues raised in needs assessment.
- 1999 feasibility study and submission written for an Early Intervention Outpatient Service.
- 2003 the Eating Disorders Early Intervention Outpatient Service (1.7 FTE, 1.5 clinic days) commenced, funded by Community Health
- 2007 -2011 Pilot Day Program funded by NSW MHDAO
- 2011 Day Program (3.8 FTE) recurrently funded.



Health
Central Coast
Local Health District

1996 Needs Assessment - Recommendations

- Conduct a Central Coast Eating Disorders Forum to discuss the findings and consider a plan of action
- Investigate the possibility of providing a co-ordinated approach
- Establish a Working Party
- Conduct a feasibility study to establish an early intervention program
- Encourage greater networking of service providers
- Interview GP's



Health
Central Coast
Local Health District

1996-1999 a Central Coast Self Image and Disordered Eating Committee

- Prevention and Promotion
- Data mining/collection/analysis/interpretation.
- Network of support for professionals
- Establish external partners
- Liaison between Health and Education (pre School-Link)
- Develop Model of Care/Treatment

1999 - feasibility study and submission written for an Early Intervention Outpatient Service.

- \$250,000; 2.5 FTE ;Co-ordinator, Social Worker, Dietitian, Clinical Psychologist
- 1999 Ceased the CC Self Image and Disordered Eating Committee.
- Nutrition Dept withdrawal of treatment following Youth Health withdrawal
- AN care plan (from ED to inpatient); Info. packs; membership of State networks maintained

July 2003 the Eating Disorders Early Intervention Outpatient Service (Initially 1.2 FTE, 1.5 clinic days), funded by Community Health

- \$110,000; 1.2 FTE (clinician) , Social Worker, Dietitian, Clinical Psychologist ; 0.5 FTE Co-ordinator
- 1.5 clinic days
- Will we or wont we?
- All Staff 'on board' - Oct. 2003
- 'Go Live' - Feb. 2004
- Preliminary review - June 2004.
- Additional 0.1 FTE Dietitian



Health
Central Coast
Local Health District

Eating Disorder Early Intervention Outpatient Service

- We provide individuals and families with early identification, assessment, referral and treatment for people with disordered eating symptoms, those at risk of developing an eating disorder or those in the early stages of an eating disorder.
- Individual and family therapy with concurrent nutritional counselling and education.
- Psychotherapeutic approaches include:
 - brief solution- focused therapy,
 - guided self-help, Narrative Therapy,
 - Cognitive Behavioural Therapy,
 - Readiness and Motivational Enhancement Therapy, Family Therapy, Maudsley model of family therapy.



Health
Central Coast
Local Health District

Inclusion criteria 2003

- All ages: Children, Adolescents & Adults
- Severity: Mild to moderate level; that can be treated in an outpatient setting ; are medically stable; BMI>15.
- Need to be willing to see a GP by the time that treatment commences at our service.
- Limited to early intervention.
- Symptoms that meet criteria for diagnoses for roughly <1 year AN, <5 years BN/EDNOS.
- Exclusion: Other primary MI diagnoses, or severe presentation requiring referral.



Health
Central Coast
Local Health District

Client profile 2004

- 46% never sought help before
- 10% male
- 48% are 15-19 years of age
- 13% are 10-14 years of age
- 9% are less than 9 years of age



Health
Central Coast
Local Health District

4 week Intensive Multi-disciplinary Model

- Trans-diagnostic in nature
- weekly appointments with clin. psychologist and dietitian, GP monitoring, +/- family therapy.
- we use CBT, Motivational Interviewing, Solution Focussed Therapy, mindfulness, nutrition and psychoeducation, awareness of eating, Family Therapy.

Reviewed in week 5

- continued or reduced frequency of appointments
- step-up to Maudsley Model

Pros and Cons

- momentum and motivation
- eating occasions -tackled on weekly basis
- helps parents focus on seriousness of condition
- change in relationships if



4 week Intensive Multi-disciplinary Model

Reviewed in week 5

- continued or reduced frequency of appointments
- step-up to Maudsley Model

Pros and Cons

- momentum and motivation

- eating occasions -tackled on weekly basis
- helps parents focus on seriousness of condition
- change in relationships if switch to Maudsley Model.



Sarah

- 19 years old
- Bulimia on and off for last 4 years
- dancer 3-18years
- dieting for 'years'
- daily weighing
- BMI 20.8
- incentive - university
- Intensive model
- 6 psychologist sessions
- 4 dietitian sessions
- 2 months
- 100% resolved



Health
Central Coast
Local Health District

Initial Experience with Maudsley Model of Family Therapy

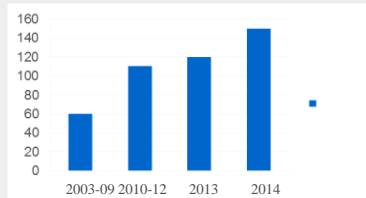
- Select clients and parents carefully
- large parental commitment both time and energy.
- initially using co-therapists and video-taping
- session 1 turn-arounds
- Phase 1 shorter due to earlier treatment/intervention.
- Clinicians able to manage the paradox of engaging parents and raising their anxiety at the same time.
- parents empowered to 'fight' the 'externalised' anorexia
- Clinician confidence growing will 'go solo' soon.
- Appropriate clients chosen



Health
Central Coast
Local Health District

Early Intervention

- No. of clients contacting service is increasing



- More clients with co-morbidities and extreme measures of depression anxiety and stress
- More clients with amenorrhea
- BMI is lower at contact with the service
- More clients with AN contacting us
- More clients with AN + purging



Health
Central Coast
Local Health District

Early Intervention - Snap shot of 2013

- Assessment –1-3 weeks wait
- Treatment –average 14.4 weeks wait.
- 97% accepted for Treatment put on waiting list
- ~75% of individuals would need Maudsley Therapy
- Duration of treatment (MFBT) 9-12months

Solution: Change Model of Care and trial Group Maudsley FBT “Restore”.



Health
Central Coast
Local Health District

Restore Structure cont.

Now in 2014

- Family Assessment
- Readiness Appointment
- 6 weekly 2hr Parent Group sessions with 1hr individual family weight check appointments
- *Plus 4 weekly individual family sessions (1st session is a review of progress)
- *Plus 4 fortnightly individual family sessions
- Then Discharge session

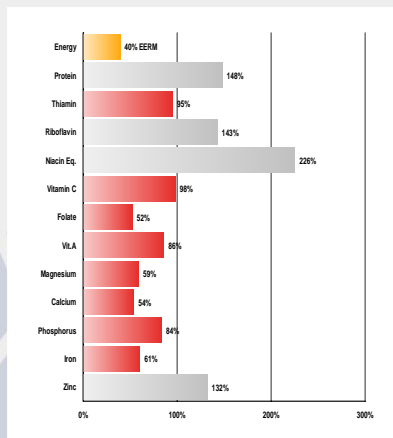
“23 sessions over 24 weeks”



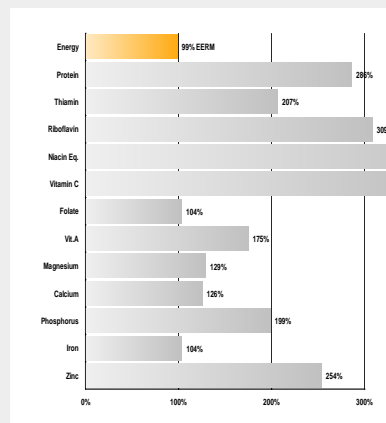
Health
Central Coast
Local Health District

Nutrition Component – food diary analysis

Pre



Post



Health
Central Coast
Local Health District

Benefits to the Restore Model

- Offers support to parents with other parents
- Provides flexibility - Both parents do not have to attend – one or both parents can attend
- Whole family to not need to attend all sessions
- Nutrition component
- As a service we can see more families and offer treatment to them



Health
Central Coast
Local Health District

Benefits to the Restore Model

- Treat both AN and BN at the same time
- Achieved weight gain and decreased ED behaviours
- Shorter duration of treatment
- Decreased waiting time for treatment, reducing deterioration of symptoms



Health
Central Coast
Local Health District

Where are we now with Early Intervention?

- Pursuing opportunities to have Restore as research pilot
- Current snapshot – last week
- 6 with restrictive ED ; 2 BN, 3 OSFED, 0 males
- Maudsley FBT: 8 ; Non-Maudsley: 3
- Total: 11 ; Inpatient GDH: 1
- Waiting Assessment: 4
- Waiting treatment: 11



Health
Central Coast
Local Health District

2007 -2011 Pilot **Day Program** funded by NSW MHDAO

2011 **Day Program** (3.8 FTE) recurrently funded.

- We did get staff on board first to develop the Model of Care
- Did things a bit differently.....
- Vision, Mission, Objectives
- International Paper comparing over 15 models of care
- Open or closed; continuous or not ; to weigh or not to weigh ...etc
- Continually evolving/improving



Health
Central Coast
Local Health District

Central Coast Eating Disorders Day Program

Vision:

To create a world that promotes acceptance and celebrates physical, emotional, mental and spiritual well-being and diversity.

Mission:

The Eating Disorders Outpatient Service is the primary source of support, information, prevention and treatment for people with eating disorders and their families on the Central Coast. We provide a service that strives for excellence of care in a safe, nurturing environment to enhance recovery with hope, acceptance and freedom.

Objectives:

1. to provide a safe, nurturing, therapeutic environment with love and consciousness.
2. to promote positive body image
3. to encourage hope and help-seeking through education and awareness
4. to advocate excellence in the provision of treatment for people with eating disorders on the Central Coast
5. to promote understanding of the complexities of eating disorders and the need for a compassionate and holistic response
6. to facilitate full recovery from an eating disorder for people and their families
7. to pioneer the development of an innovative and effective model of care for people with eating disorders and their families on the Central Coast.
8. To be joyful.



Health
Central Coast
Local Health District

Day Program Team

- 3.9 FTE, all part-time
- Co-ordinator 0.5 FTE
- Clinical Psychologist 0.82 FTE
- Dietitian 0.82 FTE
- Social Worker 0.52 FTE
- MH Nurse-GP/Inpatient liaison 0.2 FTE
- Art Therapist 0.2 FTE
- Admin. Officer 0.7 FTE



Health
Central Coast
Local Health District



Day Program Structure

Multidisciplinary treatment team 2.5 FTE

Weeks 1 to 6

- Open program....8 week cycle.. 6 weeks intensive group therapy
- Monday, Wednesday, Friday. 9.30-4pm
- Concurrent individual treatment.(not in pilot)
- Staff to participant ratio 2:6

Weeks 7 and 8

- Continued individual treatment.
- Participants are reviewed and given feedback.
- Staff conduct assessments and pre-admission clinics
- Staff plan next 6 week block.
- Staff receive supervision, training and ‘rejuvenate



2014 Day Program Timetable

	Monday	Tuesday	Wednesday	Thursday	Friday
	Pascale and Cate		Rosie and Cate		Pascale and Cate
9.15	Sign in	Individual Appointments	Sign in	Individual Appointments	Sign in
9.30	Weigh in		Morning tea: Catered		Morning tea : Participants to bring
10.00	Morning Tea: Bring a fusion food		Art Therapy		Psychological Session
10.30	Nutrition Session				Yoga
11.00					
11.30					
12.00	Lunch:		Lunch Preparation		Lunch: Participants to bring
12.30	Cooking or eating out		Lunch: Catered		
1.00	Psychological Session		Nutrition Session		Psychological Session
1.30					
2.00					
2.30					
3.00	Afternoon Tea: Participants to provide		Afternoon Tea: Catered		Afternoon Tea: Participants to provide
3.30	Reflection time		Reflection time and Harmonisation on rotational basis		Reflection time
4:00	Sign out		Sign out		Sign out



In the PilotWe found that...

- Duration of illness is not significantly associated with ED severity
- Worse Quality of Life (QoL) is associated with higher ED severity.
- Anxiety and depression scores DO NOT predict EDE scores at discharge
- Our model of care is significant and predicted 61% of the variance in EDE discharge scores.
- QoL at discharge predicted 57.5% of the variance in EDE discharge scores.

In the Pilot...We found that...

- People who are morbidly obese (BED) can be successfully treated alongside people who are morbidly underweight (AN).
- Acceptance and Commitment Therapy can be used successfully as a therapy model for ED day programs
- having a designated researcher position as part of the pilot project FTE is essential.
- There is a demonstrated need for an Outpatient clinic to support clients waiting to enter the Day Program or after leaving the Day Program.

Case study - Sandy

- Female, 34, BMI 63 (1.56m 154 Kg)
- Binge Eating Disorder, 17 years duration
- No inpatient stays
- Worst scores on EDE, Body Attitudes test, DASS, Rosenberg Self Esteem Scale, Quality of Life scale etc
- Other medical risks due to morbid obesity
- 12 weeks at program
- Significant Improvements in all areas
- 10kg weight loss
- Attending therapy group once/ week
- Working, studying.



Health
Central Coast
Local Health District

“Sandy”

- “ I am a health professional. For years I struggled with body image issues; obsessive behaviour related to my weight and extreme dieting. 18 months ago I was diagnosed with an Eating Disorder”
- “prior to this to this I had little understanding other than I had no ‘willpower’ and continued to ‘fail’ at any attempts to lose weight. This led me to more restrictive eating behaviours, bingeing and purging of food, depression, and anxiety.”
- “18 months ago things were bleak and I thought that I would die as my life would not improve. Family, friends and my GP all reinforced my belief that I had no control with dieting and must try harder”



Health
Central Coast
Local Health District

“Sandy”

- “after 12 weeks in the program I am no longer purging, my restrictive and bingeing behaviours have improved and I am more connected with myself physically and emotionally as well as significantly reduced symptoms of depression and anxiety.”
- “The 12 weeks hasn’t been a ‘walk in the park’- it was exceptionally challenging and emotive. I made changes that I never expected.”
- “as one of many people who struggle with an eating disorder I look forward to living life without it”.



Health
Central Coast
Local Health District

Day Program Now....

- Open not ‘closed’
- Behavioural readiness task before entry, particularly for AN
- One week trial
- Recommend 6 weeks x 2 , maximum 4 programs
- Individual therapy in conjunction with Day Program



Health
Central Coast
Local Health District

Day Program Future....

- Need an Outpatient Service:
- to support clients in preparation for Day Program – Step-in
- to support clients after Day Program
- for clients whom the Day Program does not suit.



Questions

