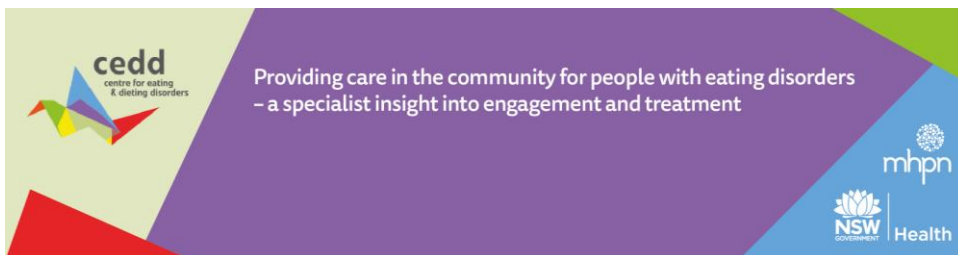


This webinar was developed as part of the NSW Workforce Development Plan for Eating Disorders and made possible through funding provided by the NSW Ministry of Health. It is produced by the Mental Health Professionals Network for the Centre for Eating and Dieting Disorders.

We will begin shortly.



MHPN & CEDD wishes to acknowledge the Traditional Custodians of the lands across Australia upon which our webinar presenters and participants are located. We wish to pay respect to the Elders past, present and future for the memories, the traditions, the culture and hopes of Indigenous Australia.





### Tonight's panel:



Nicole Gibson  
(lived experience)



Dr. Karen Spielman  
(general practitioner)



Dr. Steve Lyon  
(regional general  
practitioner)



Facilitator: Dr. Jan Orman  
(general practitioner  
& psychotherapist)




### Ground rules:

To help ensure everyone has the opportunity to gain the most from the live webinar, we ask that all participants consider the following ground rules:

- Be respectful of other participants and panellists. Behave as if this were a face-to-face activity.
- Post your comments and questions for panellists in the 'general chat' box. For help with technical issues, post in the 'technical help' chat box. Be mindful that comments posted in the chat boxes can be seen by all participants and panellists. This is a professional development activity and all comments should be on topic.
- If you would like to hide the chat, click the small down-arrow at the top of the chat box.
- Your feedback is important. Please complete the short exit survey which will appear as a pop up when you exit the webinar.
- Also participating in the chat box tonight is Dr Sarah Maguire, representing the Centre for Eating and Dieting Disorders.
- We have some of the Local Eating Disorder Coordinators from around NSW joining us in the Chat Box – a link of the list of NSW coordinators is available at the following link  
<http://cedd.org.au/health-professionals/nsw-eating-disorder-coordinators/>



## eLearning Module:



**Welcome!**

Welcome to the eLearning module for 'Management of eating disorders in the Community'. The aim of this course is to provide information and resources to accompany the online Webinar for this training package.

**Learning Objectives**

By the end of this course you will be able to:

- ✓ Recognise how to identify, screen and assess people at risk of developing an eating disorder
- ✓ Identify effective strategies to support the needs of people with eating disorders
- ✓ Develop care planning and appropriate referral pathways.

🕒 This module should take up to 1 – 2 hours to complete

[http://cedd.org.au/wordpress/wp-content/uploads/2017/03/CEDD\\_online\\_module\\_flyerV2.pdf](http://cedd.org.au/wordpress/wp-content/uploads/2017/03/CEDD_online_module_flyerV2.pdf)

## Learning outcomes:

Through an exploration of eating disorders, the webinar will provide participants with the opportunity to:

- Recognise how to identify, screen and assess people at risk of developing an eating disorder in a primary care setting
- Identify challenges in treatment and effective, collaborative strategies to support the needs of people with eating disorders and their families
- Understand care planning and appropriate referral pathways to coordinate better services for people with eating disorders



### Setting the scene:

- Highest morbidity and mortality rate of any psychiatric illness
- High prevalence rate in the community
- Early identification and treatment can lead to full recovery
- Team collaboration required at all stages of treatment
- Presentations to community health settings more frequent than those without an eating disorder



### Poll A:

Which eating disorder do you think is most prevalent?:

- Anorexia nervosa
- Bulimia nervosa
- Binge eating disorder





### Prevalence:

- Binge Eating Disorder is most prevalent at 2% (lifetime prevalence), in comparison to;
  - Bulimia Nervosa - ~1%
  - Anorexia Nervosa ~0.5%



### 1. What do you think is the most important thing to achieve during the first consultation for someone with an eating disorder?

- Pay attention to the person rather than the illness
- Work together as a team; set the tone that you're working together to achieve shared goals, building trust and a genuine relationship
- Establish a therapeutic relationship & meaningfully engage – pay attention to the person, not the illness. Use open questions, be honest in your communication to build trust, give eye contact, take a non-judgemental stance, explain confidentiality limitations and work as a team to set shared goals
- Establish non negotiables – e.g.: multidisciplinary team involvement, safety plan and goals specific to each client (e.g.: weight gain in AN)
- Screening and Assessment – Hallmark signs of an eating disorder, Scoff screening tool & a comprehensive assessment
- Medical monitoring parameters (see eLearning) – all practitioners to be aware of medical monitoring, give to your GP and ask GP to monitor

## IDENTIFYING AND SCREENING FOR AN EATING DISORDER

### The SCOFF

The **SCOFF** is a simple evidence-based **screening tool** that involves five simple questions:

- S** – Do you make yourself **Sick** because you feel uncomfortably full?
- C** – Do you worry you have lost **Control** over how much you eat?
- O** – Have you recently lost **Over** (6kg) in a three-month period?
- F** – Do you believe yourself to be **Fat** when others say you are too thin?
- F** – Would you say **Food** dominates your life?

An answer of 'yes' to two or more questions indicates the need for a more comprehensive assessment.

A further two questions have been shown to indicate a high sensitivity and specificity for BN (which is more common in older adolescents and young adults).

1. Are you satisfied with your eating patterns?
2. Do you ever eat in secret?

#### References:

Hill, L. S., Reid, F., Morgan, J. F., & Lacey, J. (2010). SCOFF: The Development of an Eating Disorder Screening Questionnaire. *International Journal of Eating Disorders*, 43(4), 344-351.

### Poll B:

A GP is always necessary in the treatment of a patient with an eating disorder:

- True
- False
- Not sure



## 2. What should you take into consideration when putting together a care plan?

- Collective Effort with client & Multidisciplinary team –
  - Work together with client to develop a MDT (minimum - GP, Psych, Dietitian)
  - Determine who the care coordinator is and what the treatment agreements are to avoiding giving conflicting information.
  - Utilise the Eating Disorder Coordinator in your local health district to help you establish treatment pathways, escalate care if needed, provide support and find specialist ED professionals available (see CEDD website for local ED Coordinator)
- Be seen for who they are and not what they' re experiencing
- Determine appropriate treatment and level of care
  - e.g. CBT, FBT, clinic/hospital/day program
  - Be aware of the indicators for an inpatient admission (see eLearning)
- To receive further evidence based training go to CEDD website for available trainings



### **Poll C:**

Reluctant patients should be left alone until they are ready to accept treatment:

- Agree
- Disagree



3. What are some of the challenges you have faced in working with people who have eating disorders and in receiving care?

- **Burden & Risk** – Practitioners often do not want to take on ED clients because of the burden, risk, and the long journey to recovery. However with a good MDT, with effective communication, medical monitoring, support of your ED Coordinator in your local district and clinical supervision, taking on ED clients can be very rewarding.
- Treatment can feel like a dehumanising experience, with too much focus on the illness and diagnosis rather than me healing as a whole person
- Doctors/professionals not considering the degree of fragility and vulnerability in their communications and approach
- **Working with resistance** – hold the resistance, validate the struggle whilst still pushing for progress, develop discrepancy between the behaviours that the person is engaging in and their ultimate goals and support self-efficacy.



### Poll D:

Who could you contact about eating disorder specialists in your local area, escalating care and referral pathways?:

- Your local eating disorder coordinator
- The Butterfly Foundation helpline
- Your local tertiary specialist unit for eating disorders
- All of the above





#### 4. Summary/ key take home messages, what is most rewarding?:

- Each individual brings something unique and the challenge with eating disorders is they're not straightforward – help someone explore what is happening and feel safe to address difficulties.
- It's a mix of mind, medical and psychological and working in teams is important
- Eating disorders most challenging, will power behind ED can be devastating – seeing recovery is satisfying, commitment to long term relationship, recognising healthy voice, trust in the little steps and small improvements toward recovery
- Support/another voice to help understand my position (especially in my family and my relationship) – made me feel less alone



An **eLearning Module** has been developed to accompany this webinar on: *'The Management of people with Eating Disorders in the Community'*.

This eLearning module is complimentary up until 30 November 2017.

You should receive an email from the Centre for Eating and Dieting Disorders by the end of the week providing you with access to the eLearning module.

If you have not received an email with access by the end of the week and would like to sign up please email [admin@cedd.org.au](mailto:admin@cedd.org.au)





Thank you for your participation

Please ensure you complete the exit survey before you log out (If it does not appear automatically, click the exit button on the webinar screen)



Thank you for your contribution and participation

For more information about MHPN networks and future webinars visit  
[www.mhpn.org.au](http://www.mhpn.org.au)

