

Information Governance

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15 March 2024

Our reference: FOI DA5123a

I am responding to your request for information received 28 February 2024. This has been treated as a request under the Freedom of Information Act 2000.

I am now enclosing a response which is attached to the end of this letter. Please do not hesitate to contact me on the contact details above if you have any further queries.

Yours sincerely,

Information Rights Coordinator

If you are dissatisfied with the Trust's response to your FOIA request then you should contact us and we will arrange for an internal review of this decision.

If you remain dissatisfied with the decision following our response to your complaint, you may write to the Information Commissioner for a decision under Section 50 of the Freedom of Information Act 2000. The Information Commissioner can be contacted at:

Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

Tel: 0303 123 1113
Web: www.ico.org.uk

Please note that the data supplied is not allowed to be re-used and/or published without the explicit consent of East London NHS Foundation Trust. Please contact the signatory to request permission if this is your intention



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Interim Chief Executive Officer: Lorraine Sunduza
Chair: Eileen Taylor

Request: Thank you for the response to our request (FOI DA5123). Can you please seek clarification regarding the points below?

Question 1: Bedfordshire and Luton countywide service

Question 3 (of DA5123) - Could you please ask the Bedfordshire and Luton countywide service to detail the maximum intensity of treatment that the 'home intensive treatment option' is able to provide in terms of the number of contacts per week and their duration?

(The purpose of question 3 is to gauge the maximum intensity of treatment that such programmes are able to provide/their capacity to provide alternatives to inpatient admission. We are looking at this nationally to see how many areas are currently able to provide genuinely intensive levels of community and/or day patient treatment (without naming providers). To be able to do this we need detailed information about the programmes that are in place, as set out in the prompts/sub-sections of this question).

Answer: The Trust has reviewed question 1 of your request for information under the Freedom of Information Act (FOI) 2000.

Section 21(1) of the FOI Act states:

(1) Information which is reasonably accessible to the applicant otherwise than under section 1 is exempt information.

The information requested is accessible here: Question 3

https://www.elft.nhs.uk/sites/default/files/2024-02/foi_da5123_-_appendix_1.pdf

However, for completeness we are providing the information in this response:

In Bedfordshire and Luton countywide service, currently, there is not a set number of contacts, however this will be adapted to each individual case/ patient needs.

Question 2: **Question 8 (of DA5123) – Please provide caseload numbers on the dates specified for this service specifically.**

Answer: For Bedfordshire and Luton countywide service:

On the 31st of March 2023 the caseload was 13 young people.

On the 30th of September 2023 the caseload was 11 young people.

Question 3: **East London wide service for City & Hackney, Newham and Tower Hamlets, Eating Disorder Intensive Programme (EDIP)**

Question 3 (of DA5123)- Could you please ask the East London wide service to:

- a. detail the maximum intensity of treatment that the 'Eating Disorder Intensive Programme (EDIP)' is able to provide in terms of the number of contacts per week and their duration,**
- b. and also for the maximum number of meals that can be supported per day?**

(The purpose of question 3 is to gauge the maximum intensity of treatment that such programmes are able to provide/their capacity to provide alternatives to inpatient admission. We are looking at this nationally to see how many areas are currently able to provide genuinely intensive levels of community and/or day patient treatment (without naming providers). To be



able to do this we need detailed information about the programmes that are in place, as set out in the prompts/sub-sections of this question.)

Answer: The Trust has reviewed question 3 of your request for information under the Freedom of Information Act (FOI) 2000.

Section 21(1) of the FOI Act states:

(1) Information which is reasonably accessible to the applicant otherwise than under section 1 is exempt information.

The information requested is accessible here: Question 3

https://www.elft.nhs.uk/sites/default/files/2024-02/foi_da5123_-_appendix_1.pdf

However, for completeness we are providing the information in this response:

For East London wide service for City & Hackney, Newham and Tower Hamlets: As minimum, the young person and their family are invited to an initial goal setting meeting, a mid-point review and an end-of-programme review with the MDT.

In terms of enhanced support as minimum, five contacts per week (x3 meal support sessions + key working session + therapy [core team]) are offered. On top of these there are nursing, psychiatry, and dietetic sessions, as needed.

Question 4: Question 6 of (DA5123) – Can you please ask the service to provide the information that appears to have been cut off from the end of their answer to this question?

Answer: For Bedfordshire and Luton countywide service:

In order to receive input from the intensive treatment pathway, the young person will be under a local GP within Bedfordshire and Luton. They will have a diagnosed eating disorder and need to already be open to the core Community Eating Disorders service (CEDS) team with an allocated care co-ordinator and in receipt of therapy as per NICE guidelines for treatment of eating disorders.

If a young person known to core CEDS or new to the service is showing signs of deterioration for example, rapid weight loss, reduced eating, disengaging – or they have been admitted/at risk of admission to the medical wards or Tier 4.

If a young person is due to be discharged from a Tier 4 inpatient setting, regular contact will have commenced prior in order to support the discharge back into the community.

The service is offered to young people, up until aged eighteen.

Assessment of needs and risk will be required prior to determine an appropriate safety and care plan.

Exclusion criteria – young people who do not meet threshold for a diagnosis of an eating disorder.

For East London wide service for City & Hackney, Newham and Tower Hamlets:

EDIP referral criteria (In process of being ratified in the Operational policy) - see below.

General Referral Criteria:



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Live and have a GP within East London boroughs of City and Hackney, Newham and Tower Hamlets.

Have a diagnosed eating disorder and have been allocated a therapist (and ideally have had a trial of evidence-based treatment) within the Community Eating Disorders Service.

Young person is under 18 years of age.

The young person must be willing to engage in an informal community care package that involves multiple sessions per week.

A risk assessment determining suitability of a community care package must be undertaken in advance of this offer commencing.

Eligibility Criteria:

CEDS eligibility criteria is in accordance to national access and waiting time standards for Intensive outpatient programmes.

Lack of progress for a young person in existing core community eating disorder treatment, as defined by:

Lack adequate weight gain in anorexia nervosa, despite accessing first line therapy. Literature defines this as at least 2.5Kg by session 3 in family-based treatment.

Rationale: Literature states that this - gaining at least 2.65Kg by session 3 - is the earliest predictor of end of treatment (EOT) remission during FBT, whilst the strongest predictor of EOT remission in FBT is a weight gain of 5.08Kg by session 8 (Doyle et al., 2010; Le Grange et al., 2014).

No reduction in compensatory behaviours in bulimia nervosa after 4 weeks of treatment.

Rationale: Fairburn et al. (2004), showed that more than 50% reduction in purging frequency within the first 4 weeks of treatment (cognitive-behavioural therapy and interpersonal psychotherapy for bulimia nervosa) was predictive of response. This was an adult-based study. Similar findings were found in the adolescent population by Le Grange et al. (2008) - i.e., that symptom reduction at week 4 treatment (family-based treatment for bulimia nervosa or supportive psychotherapy) predicted remission post-treatment and at 6-month follow-up.

No reduction in binges in binge eating disorder by 4th week of treatment.

Rationale: Grilo et al. (2006) showed that adult patients who had a 65% or greater reduction in binge eating by the 4th treatment week were more likely to reach remission.

No increase in 'sometimes' or 'never' foods in ARFID despite evidence-based/informed treatment. (At the moment, the team is not commissioned to accept ARFID).

Young person at risk of requiring hospital admission, both paediatric/medical and/or psychiatric MH Inpatient unit admission.

Young people have been medically stabilised on an acute medical hospital setting and require intensive eating disorder support in the community to prevent re-admission.

Young person on inpatient mental health unit requiring intensive support to transition them back into community CEDS care.



In complex cases, the intensive programme should engage in collaborative discussion about the most appropriate way to meet the need of the patient.

A comorbid diagnosis of ASC or EUPD should not be an exclusion criterion.

Exclusion criteria:

- Young people who do not engage informally with the intensive programme.
- Young people who have not yet started eating disorder therapy.
- Young people who do not have a diagnosis of an eating disorder.
- Young people who have self-harm/ aggression and/or violence toward others or who cannot be kept safe in a clinic space.
- Young people who do not have a diagnosis of an eating disorder.
- Young people who have self-harm/ aggression and/or violence toward others or who cannot be kept safe in a clinic space.

Question 5: Question 8 (of DA5123) – Please provide caseload numbers on the dates specified for this service specifically.

Answer: Eating disorder service for children and young people

For East London wide service for City & Hackney, Newham and Tower Hamlets:

On the 31st of March 2023 the caseload was 12 young people.

On the 30th of September 2023 the caseload was 3 young people.

For Bedfordshire and Luton countywide service:

On the 31st of March 2023 the caseload was 13 young people.

On the 30th of September 2023 the caseload was 11 young people.

**Question 6: East of England Regional Virtual Intensive Treatment (VIT) Service for adults
Question 8 (of DA5123) – Please provide caseload numbers on the dates specified for this service specifically.**

Answer: On the 31st of March 2023 the caseload was zero for the VIT service for adults as it was not in place at this time.

On the 30th of September 2023 the caseload was zero for the VIT service for adults as it was not in place at this time.



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I am writing to you under the Freedom of Information Act 2000 to request information regarding intensive community and day patient treatment programmes for patients with eating disorders. Please provide a reference number for this request in your acknowledgement email. [If this request is forwarded internally, please do not cut out the introductory wording before the questions].

A note for clinicians/services involved in responding to this request

We are conducting this survey to help us understand how widely available these forms of treatment are across the UK. The top-level findings will be published in a report, in which individual services/providers will not be named. Instead, we will report the findings in terms of the proportion of providers or areas that offer intensive community and/or day patient treatment programmes for people with eating disorders.

We recognise that eating disorder services are under extreme pressure and are facing major challenges in recruiting and retaining the staff they need. This request will form part of a wider Beat project that will aim to understand and help overcome the barriers that the NHS faces in expanding access to these innovative service models. This will include challenging policy makers and commissioners to provide the required resources.

Background

Intensive community and day patient treatment programmes offer increased contact hours for the patient compared to traditional outpatient treatment. The patient returns home at night and therefore is not an inpatient. Such treatment programmes can help minimise inpatient admissions and reduce length of stay when admission is necessary.

Day patient treatment programmes (sometimes called 'day care') tend to be run as a group programme, with patients attending the service during the day and returning home for evenings and weekends. Such programmes could potentially be delivered partially or wholly online/virtually. Some intensive community treatment programmes include home treatment, whereby a clinician visits the patient's home to support meals and snacks and offer psychosocial intervention. There are other models of intensive community treatment aside from home treatment and we are very interested in hearing about these approaches too.

Question 1: Does the Trust provide any intensive community and/or day patient treatment for eating disorders (or refer patients on to receive such treatment from another NHS or non-NHS provider)? This may include day patient treatment, home treatment, or other innovative model/s. We are interested in programmes for children and young people, and/or adults.

- Yes
- No, and the Trust has never provided such a service
- No, but the Trust did provide such a service in the past [Please provide more information below, including what led to the closure of this service/s]

If you answered "No" to question 1 (either of the two options), that is all that is required, thank you for your response.

Answer: Yes.



Question 2: What model/s of intensive community or day patient treatment for eating disorders does the Trust provide (or refer patients onto)? (Examples include day treatment or home treatment, but we are keen to hear about any other forms of intensive treatment too aside from inpatient care.) In your answer, please specify whether these are provided in-person or online/virtually.

Answer: The Trust provides eating disorder services in both East London and Bedfordshire. There are different models of care in each geographical area. These have been set out separately to aid your understanding.

Question 3: What is the intensity of this/these model/s of intensive community or day patient treatment for eating disorders?

a) Please provide the information requested below. (If the Trust provides, or refers patients onto, more than one intensive community or day patient treatment programme please provide separate answers for each):

- i. Number of hours per day (if applicable to model)**
- ii. Number of days per week (if applicable to model)**
- iii. Number of contacts per week and minimum duration of those contacts (if applicable to model)**
- iv. Is supervised meal support provided? (If so, for how many meals per day?)**

b) Please provide any more information that we should know about regarding the intensity of treatment provided by this/these programme/s.

Question 4: Are families or other carers engaged with (when appropriate) in the treatment provided by this/these intensive community and/or day patient treatment programme/s for eating disorders? If so, please describe or attach further information outlining this engagement.

Question 5: Is/are the intensive community and/or day patient treatment programme/s for eating disorders time limited, or is the length of this treatment based on clinical need? If it is time limited, what is the maximum length of treatment?

Question 6: What are the referral criteria for patients to access the intensive community and/or day patient treatment programme/s for eating disorders? In your answer, please detail any exclusion criteria (e.g., age, type of eating disorder/diagnosis, BMI, comorbidity, or otherwise).

Question 7: What is/are the geographic catchment area/s for referrals to the intensive community and/or day patient treatment programme/s for eating disorders (including any such programmes provided outside the Trust's usual geographic area, potentially as part of an NHS-led Provider Collaborative)?

Question 8: Please state the size of the caseload (number of accepted referrals) at the Trust's intensive community and/or day patient treatment programme/s for eating disorders on the dates below:

- 31 March 2023
- 30 September 2023

(If the Trust provides more than one intensive community or day patient treatment programme, please provide the size of the caseload separately for each and specify whether the programme is for over 18s or under 18s.)

Question 9: Which organisation/s commission the intensive community and/or day patient treatment programme/s for eating disorders? If this is one or more NHS Integrated Care Board (ICB) or NHS Trust (as lead provider for an NHS-



led Provider Collaborative), please specify their name/s in your answer to this question.

Question 10: Please tell us what the Trust is proud of about its intensive community and/or day patient treatment programme/s for eating disorders and outline the challenges and opportunities the Trust has experienced in providing this/these programme/s.

Answer: Please see Appendix 1.

https://www.elft.nhs.uk/sites/default/files/2024-02/foi_da5123_-_appendix_1.pdf



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