



KNOWLEDGE EXCHANGE PROGRAM OFFERED BY THE EATING DISORDERS CONTINUUM
OF THE DOUGLAS MENTAL HEALTH UNIVERSITY INSTITUTE

*Centre intégré
universitaire de santé
et de services sociaux
de l'Ouest-de-
l'Île-de-Montréal*

Québec 

Target audience



Practitioners in various disciplines including psychiatrists, general practitioners, psychologists, social workers, occupational therapists, nurses, nutritionists and other health-care professionals.

Context



Since its creation in 1986, the Eating Disorders Continuum (EDC) of the Douglas Mental Health University Institute has offered services and support for adolescent and adult Eating-Disorder (ED) sufferers.

The EDC is the largest and most elaborate program in Quebec for people who suffer from EDs in the spectrum of anorexia and bulimia. With a provincial mandate, the EDC is the cornerstone of health care for Quebec ED sufferers, and acts as a clinical expertise and research center. The EDC offers advanced treatments, conducts clinical research to guide new curative and preventive treatments, and trains professionals in various sectors of the health network.

In order to meet a strong demand for community health care, in recent years the EDC has worked to offer sessions of formal training in Knowledge Exchange, aimed at perfecting ED knowledge for the first and second line resources in health care (CLSCs, general hospitals, community clinics, other sectors). EDC staff goes into the community, providing training for general clinicians on informed assessment and first line treatment for EDs, and seeks to promote shared care with community partners.

So far, the Knowledge Exchange program of the EDC has won several prizes. It won the «Best Practices» in the 2011 Agrément, the *Innovation Award* in 2012 was granted by the Douglas Institute, it received the *Award of Excellence* in 2014 from the *Association québécoise d'établissements de santé et de services sociaux* and an honorable mention from the Quebec Institute of public administration. In 2012, the Continuum also received a CIHR research grant for Knowledge Exchange in order to study it and document the results of its interventions.

In places where shared care was implemented, something remarkable has happened: the waiting time for people in these areas has declined. ED sufferers are now receiving informed care in their communities by clinicians who are supported by experts of the EDC. In addition, the training and supervision is organized so that it optimizes the development of autonomous skills by those trained to do screening for EDs, evaluate medical risks, and to make initial interventions with people with active EDs. Furthermore, the ongoing relationship promotes an active exchange allowing staff locally formed to receive direct guidance from EDC expert staff and to identify needs to refer to more specialized services at the EDC when necessary. On this last point, the services at the EDC become available as needed, in a seamless manner.

Goal



The goal of the Knowledge Exchange Program is to inform and equip clinical practitioners interested in acquiring knowledge and skills necessary to evaluate, assess medical needs and offer informed initial interventions to individuals with EDs, so that they can quickly benefit from an assessment and informed care on site. The Program is designed to develop a treatment capacity and to ensure the sustainability of this knowledge. For this reason, the training is designed to allow qualified personnel to offer services such that ED expertise persists long after the end of the training period.

Content

The day-long teaching summarizes the phenomenology and epidemiology of eating disorders—Anorexia Nervosa, Bulimia Nervosa, and Otherwise Specified Feeding and Eating Disorders. In addition, it reviews recent research on the etiology, comorbidity, and treatment of individuals with eating disorders.

The first part of the training program emphasizes multidimensional and biopsychosocial factors implicated in eating disorders. The second part of the training presents therapeutic orientations and techniques in the treatment of Anorexia Nervosa and Bulimia, tailored to first- and second-line treatment contexts.



Format of the training and support offered to clinicians:

1. A day-long training session addressed to all interested clinicians across the territory of the IUHSSC or IHSSC
2. 1 or 2 additional intensive half-day follow-up trainings for clinicians interested in acquiring a more extensive expertise
3. The opportunity for ongoing development based on case discussions and exchanges with colleagues, with the support of an expert in eating disorders
4. Ongoing availability of an expert in eating disorders for phone consultations

FOR MORE INFORMATION, CONTACT :

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Evidence-informed treatment for Eating Disorders: Limiting coercion, maximizing engagement

9 a.m. – 10:30 a.m.	Phenomenology : What is an Eating Disorder? Comorbidity Medical and Psychological Consequences: When to intervene and when to ask for help Introduction to treatment
10:30 a.m. – 10:45 a.m.	Coffee break
10:45 a.m. – 12 p.m.	Individual Therapy Family Therapy Group Therapy Autonomy Support Pharmacotherapy
12 p.m. – 1 p.m.	Lunch
1 p.m. – 2:15 p.m.	Biopsychosocial Influences and their implications for treatment
2:15 p.m. – 2:30 p.m.	Coffee break
2:30 p.m. – 4 p.m.	Cognitive-Behavioural Therapy concepts and clinical tools Discussion



By the end of this training, participants will be able to:

- Make an eating disorder diagnosis;
- Evaluate risk and identify and evaluate the most common medical and psychiatric sequelae of the eating disorders;
- Begin the initial steps of treatment for eating disorders;
- Identify when to refer for more specialized care.