

## **Eating disorder services**

### **Suggested approach from Maureen Orr, Democratic Support and Scrutiny Team Manager**

Examination of access to eating disorder services for patients in Norfolk including adults and children, community and specialist in-patient services.

#### **1. Purpose of today's meeting**

##### **1.1 The focus areas for today's meeting are:-**

- (a) To examine the situation regarding access to eating disorder services for patients in Norfolk including the community services commissioned by the Norfolk and Waveney Clinical Commissioning Groups (CCGs) and in-patient services adults and children.
- (b) To examine the process for patients' transition from children's to adults' services.

The subject was added to today's agenda following information briefings from the local commissioners in the January and February Norfolk Health Overview and Scrutiny Committee (NHOSC) Briefings which informed Members of staff recruitment difficulties, access restrictions and long waiting times for the community eating disorders service in central and west Norfolk, and variable levels of patient monitoring within primary care.

##### **1.2 The Norfolk and Waveney CCGs were asked to provide a report with the following information for today's meeting:-**

- Details of the commissioned community services
- The latest situation with staffing, numbers of referrals and waiting times as well as the trend over the past year. (Including waiting times for inpatient services as well as community services)
- Performance benchmarking with other regional services and England as a whole
- Details of how patients are transferred from the children's to the adults service

- Explanation of how and why the decision was taken for the Cambridge and Peterborough Foundation Trust (CPFT) Adult Eating Disorder service to restrict access to 'severe' cases only
- How 'severe', 'moderate' and 'mild' eating disorders are defined?
- How people who are triaged as 'mild to moderate' cases, i.e. not eligible for the CPFT Adult ED service, are managed at the point when they are told they cannot access the CPFT service? (i.e. in terms of transfer or signposting to other services)
- How long they expect the restriction on access to the CPFT Adult ED service to be in place?
- Details of the funding increase to Eating Matters from Jan 2019 in terms of how much more capacity that provides for people with mild to moderate eating disorders.
- Any general updates about the subject which they think the committee should know.

The CCG report is attached at **Appendix A**.

NHS England Regional Specialised Commissioning were asked to provide the following:-

- Details of the commissioned in-patient services
- The numbers from Norfolk using the services

The Specialised Commissioners' report is attached at **Appendix B**.

Representatives from the CCGs and from NHS England Regional Specialised Commissioning will attend the meeting to answer Members' questions.

1.3 CCG commissioned community eating disorder services in Norfolk are provided by:-

1. **Cambridge and Peterborough Foundation Trust's (CPFT) Norfolk Community Eating Disorders Service (NCEDS)** –for adults over 18 in central and west Norfolk with moderate to severe eating disorders.
2. **Eating Matters** – for adults over 18 across Norfolk and Waveney with mild to moderate eating disorders.
3. **Norfolk and Suffolk NHS Foundation Trust** – for adults in Great Yarmouth and Waveney (GY&W) and children across Norfolk and Waveney. (In GY&W the children's service goes up to age 25; in the rest of Norfolk it goes up to age 18).

Invitations to the meeting have been extended to these organisations.

- 1.4 Cambridgeshire and Peterborough NHS Foundation Trust, the provider of Norfolk Community ED Services (NCEDS), has a contract with **Beat** eating disorders charity to help deliver training and peer support for carers in Norfolk as well as care skills workshops for carers of people with eating disorders. They also help organise GP training by taking bookings and supplying a Beat Ambassador (volunteer with lived experience) and Beat staff member who delivers a short talk about Beat and provides materials.

Beat has supplied a paper for today's meeting (**Appendix C**) and a representative will attend.

- 1.5 Some GP practices in Norfolk provide Locally Commissioned Services (LCSs) for medical monitoring of eating disorders patients following assessment by the Norfolk Community Eating Disorders Service to ensure that the patient is suitable for monitoring in this way and provision of a plan detailing the monitoring requirements. The LCSs are in the Norwich, South Norfolk, North Norfolk and West Norfolk CCG areas but not in the east of the county.

In March 2019 Norfolk and Waveney Local Medical Committee (LMC), the body which represents local GPs, raised concerns with NHS England that the access restriction on the community eating disorders service has passed responsibility for monitoring vulnerable patients on to GPs, without provision of a monitoring plan, and risks them working over and above their levels of competency. They asked NHS England to investigate the matter and support the local CCGs to ensure it is appropriately and adequately addressed. The LMC has provided a copy of their letter to NHS England, dated 5 March 2019, which is attached at **Appendix D**.

The LMC was invited to attend today's meeting but unfortunately none of their Executive members were available.

## **2. Background**

- 2.1 NHOSC added 'Eating disorder services' to today's agenda after receiving information about the services in the January and February 2019 NHOSC Briefings. The Briefings are available from the Democratic Support and Scrutiny Team Manager [maureen.orr@norfolk.gov.uk](mailto:maureen.orr@norfolk.gov.uk) on request but the latest information is included in the reports at Appendix A and B.
- 2.2 The February Briefing included information about the restriction of Norfolk Community Eating Disorders Service to severe cases only. The CCGs regarded this as a temporary emergency measure due to the shortage of suitably trained and appropriately qualified specialist staff.

2.3 The National Institute for Health and Care Excellence's (NICE) latest guidelines and standards in relation to eating disorders are:-

- 'Eating disorders: recognition and treatment' guideline published in May 2017  
<https://www.nice.org.uk/guidance/ng69>
- 'Eating disorders' quality standard published in September 2018  
<https://www.nice.org.uk/guidance/qs175>

These provide detailed guidance on improving access to services and standards of treatment for a range of eating disorders in the community and via in-patient services and describe high quality care

2.4 There are national access and waiting time standards for children and young people's access to eating disorders services. These require NICE concordant treatment to start within a maximum of 4 weeks from first contact with a designated healthcare professional for routine cases and within 1 week for urgent cases. Services are expected to meet these standards in 95% of cases by 2020.

There are no equivalent national standards for adult services.

Current waiting times in Norfolk are included in the CCGs' report at Appendix A.

### **3.0 Suggested approach**

3.1 After the CCGs and NHS England Regional Specialised Commissioning have presented their reports, Members may wish to examine the following areas:-

- (a) How long is access to the Norfolk Community Eating Disorders Service expected to be restricted to severe cases only? (See paragraph 2.1)
- (b) The commissioners' report (Appendix A) describes the adult eating disorders services in Great Yarmouth and Waveney as 'a more eclectic model than in the Central and West Norfolk area'. It is currently meeting waiting time targets, which is in marked contrast to the situation in the rest of Norfolk. How do the commissioners rate the overall effectiveness of the two models?
- (c) The requirement for eating disorder services has increased substantially in recent years. Are the CCG and Specialised Commissioners commissioning the right kind of services and what opportunity is there for commissioning preventative services in this field?

- (d) What is the process for people who are moving from children's to adults' eating disorder services, including patients coming in to Norfolk or moving to other parts of the country at this point? (Whether from a children's to an adult service or from one adult service to another).
- (e) To what extent is ongoing support available for those patients who have a long term eating disorder?
- (f) Since 2012 the CCGs have made arrangements with GPs for the provision of medical monitoring services for adults with eating disorders. They have encountered varying levels of engagement from primary care. What more can be done to ensure a good level of primary care support to all patients with eating disorders across the county?
- (g) The NICE quality standards say that people with eating disorders who are being supported by more than one service should have a care plan that explains how the services will work together. To what extent is this done in Norfolk?
- (h) How do the specialist and community eating disorder services co-ordinate with each other and with primary care to ensure that patients are safely transferred between the services or discharged from eating disorder services?

#### **4.0 Action**

4.1 The committee may wish to consider whether to:-

- (a) Make comments and / or recommendations to the commissioners based on the information received at today's meeting.
- (b) Ask for further information for the NHOSC Briefing or to examine specific aspects of children's and / or adults' eating disorder services at a future meeting.



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