

Eating Disorder Working Group Agenda – 12/19/22

10:00 – 10:10am	<p>Working Group Overview:</p> <ol style="list-style-type: none"> 1. Task/charge put forth by legislature: <ol style="list-style-type: none"> a. “There is created the Working Group on Services for Individuals with Eating Disorders to assess those services available to individuals with an eating disorder in Vermont and make recommendations to the General Assembly as to how access for services might be improved.” b. The Working Group shall: <ul style="list-style-type: none"> ▪ (A) conduct an inventory of existing services in Vermont for individuals with eating disorders; and ▪ (B) provide recommendations for expanding and improving existing services for individuals with eating disorders. <p>Introduction of Participants Joining Today:</p> <ul style="list-style-type: none"> • Participants provide brief introduction of themselves
10:10 – 10:15am	<p>Recap Outlook:</p> <ul style="list-style-type: none"> • Meeting #1 (8/29): Introductions and inventory. In addition to introducing the working group and its members, we’d like to keep the main focus today on creating an inventory of what exists for Vermonters and Vermont families struggling with eating disorders, as well as determining what else we need to know in order to make that inventory comprehensive. • Meeting #2 (9/26): Wrap up inventory and spend much of the meeting identify and discussing what it reveals about gaps/needs. • Meeting #3 (10/24): Work in small groups then reconvene; begin drafting the recommendations to the legislature • Meeting #4 (11/28): Public contribution • Meeting #5 December 19: Reflect on where we’ve been and finalize the recommendations. Haley and Kelley will draft formalized recommendations and send them back to the group for feedback before final submission in early 2023 (due to AHS by January 1, 2023).
10:15- 11:30	<p>Review and expand on current recommendations</p>
11:30-12	<p>Discuss format for recommendations Plan for review of draft/finalizing report</p>
12-12:30	<p>Public comment and additions to report</p>

Reflections

Jason – Knowing this working group exists and work is happening gives strength/hope for the future.

Erica – Great to have all the key people in one place.

Laurel – Helpful to start with inventory but then hear from people where the gaps are with those existing resources.

Annie – This was a great opportunity and the public comment meeting was difficult to hear but offered great insight. Trainings/language is important especially with cultural attitudes.

Frank – Thank you and happy holidays!

DRAFT Report Feedback

Education/Prevention:

- Early intervention/access (frame for IOP discussion?)
- National Alliance for Eating Disorders already has available and offers free trainings.
 - <https://www.allianceforeatingdisorders.com> aweiser@allianceforeatingdisorders.com
- Train the trainer program, parents need to know to reach out to school nurses and can facilitate a safe place for student in school.
- Consider cultural approaches and self-identification, collaboration with care team
- Body Positive, CA <https://thebodypositive.org/>
- Highlight cultural issues/biases – introduction
- Protocol within system. Variety in terms of how treatment is happening. Medically based. Available to providers in state. Coordinated care.
- Focus on young peoples' growth/development around education in BMI. Phrasing? (Erica)
- Consider eating disorders in adults as well.
- Unification important, same language and recommendations throughout the community.

Programs/Providers:

- Specific and actionable/attainable.
- Specifics around youth vs. adults (needing more for adults)
- Kalm clinic opens in January, plans to eventually accept 16+
- Specific language around IOP/PHP
- Vague, specific recommendations around process with GMCB? Legislatively created?
- Reframing. Barriers to starting a program? System favorable to starting a system that's needed.
- Call out individual and family therapist
- Securing funding for trainings
- NAED, free help line, licensed clinicians/psychologists, support and referrals.
 - www.findEdhelp.com - The Alliance's free, interactive database to find outpatient providers through all levels of care. This breaks down each providers/programs accepted insurances, co-morbid diagnoses treated. etc. The Alliance also has a toll free helpline staffed by licensed clinicians where we provide free & confidential support, education, and referrals to all levels of care for eating disorders: 866-662-1235
- Dietician in OR, trainings and consult
- Education of ED staff

Access:

- VT Medicaid specific (first 3 bullets)
- 2 and 3 sound like statements and not recommendations
- Care managers for ED's in all insurance companies to help individuals/families navigate
- Family system training for IOP's

Awareness/Data:

- Messaging could go under education/prevention. Other points look like data. Awareness doesn't feel like a recommendation. Could have statements about what we've learned (findings before recommendations).
- Measures of ED's consistent with those used in other state-wide surveys
- Be careful around perpetuating via language (fat shaming/body positivity)
- Increased collaboration around the state, ED's multi layered, be careful with overall messaging strategies.
- Careful about education in schools (homeschooled kids who won't have regular access to schools and their resources)

Support:

- National level resources, don't recreate the wheel
- Tool to identify ED's in early stages, (DMH make a recommendation about where this should be centralized).
- Who will maintain clearing house (partners?) Different groups focused on different areas. Ongoing workgroup.
- Funding for programs and people to provide this work

In regard to findEDhelp.com, we vet providers and have them complete a questionnaire before being approved to be listed. We try to make sure anyone who signs up and approved has legitimate ED training and experience. Please sign up if you are not already listed and you are an ED provider! We get tons of calls from VT. It will always be free to be listed and free to utilize.

They need to sign themselves up.

Outline/Structure Feedback

- Focus on what reality for a family needing treatment looks like
- Very brief overview of best approaches for prevention and early intervention
- Center the individual/family when building a person/family centered system of care
- Start with data then education/prevention, etc.

Draft out to working group Tuesday 12/27, Comments/edits by Thursday 12/29, finalized report out by Friday 12/30.

Reply all/instead of track changes when sending out so people are all on the same page about final edits.