



FREED

**Time to win
the race
against eating
disorders!**

SPRING 2024 NEWSLETTER



**We have restarted the FREED
National AP network!**

Please email
muhammad.ahmed2@slam.nhs.uk if
you would like to be included



**Next tracker
data
submission:
30/06/23**

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FOCUS ON: PEER SUPPORT WORK

Diversifying the workforce FREED Pilot Study

We have been working with the Health Innovation Network, King's College London, and three FREED services on a project exploring the potential roles of peer support workers (PSWs) within the FREED model.

PSWs already play an integral role in a number of services. Bringing their rich and varied lived experience, they are an invaluable source of support and expertise to both service users and clinicians.

Thank you to the three FREED sites (Central and North West London, Lincolnshire, and Cornwall), all of which already use PSWs in their wider services, who will be acting as pilot sites during the project.

Senior Peer Support Worker Supervisor Reflections

"The Senior PSWs and myself agreed to meet regularly to discuss progress with the pilot's initiatives and the support needed. I recognise that I initially wanted to guide the process, providing lots of ideas and input regarding how I best thought PSW could be utilised within the service. However, following my own supervision within the FREED pilot study, I began to recognise that whilst it was okay to share ideas, it was important to allow the Senior PSWs to lead on the agreed initiatives and that I needed to take a step back. This helped ensure that PSW implementation was truly co-produced and not a product of others thinking they know what is best. Once my self-awareness of this improved, I continued to provide regular support but changed my approach to allow Senior PSWs to lead."

"Having allocated time to work closely with the Senior PSWs in our team has really helped to develop my understanding of what is required to properly implement PSW into a team. It's really starting to feel like there are some structures being put in place to support with the safe and supportive implementation of PSW across the country which is great to feel a part of (e.g. supervisors training, competencies framework).

Often co-production can feel like a bit of a buzz word that is talked about but not always backed up by involving those with lived experience. However, having been involved in the pilot, it really feels like a true piece of co-production where those with lived experience are really able to take the lead."

FOCUS ON: PEER SUPPORT WORK

Senior Peer Support Worker Reflections

“Through gathering feedback from service users, we have been able to understand what is important to patients accessing eating disorder services, particularly focusing on the FREED pathway, transition and how peer support can enhance the referral to assessment process for FREED patients entering the service. Moreover, this has helped us gain further insight to begin considering how we embed peer support within the Adult Eating Disorders Service and why this is so important.

The work we have undertaken so far as part of the pilot study has highlighted how important co-production is in reaching a shared understanding of the role of peer support, in order to maximise its efficacy.”

“When recruiting PSWs, I felt unsure we were asking enough at interviews, I felt that we needed to be more thorough in our questioning around recovery, and how people manage their own wellbeing and would support others in their recovery. This felt important, as it was ultimately for the protection of the staff, who are placing themselves into a potentially triggering environment. In my experience this role requires self-awareness and resilience, the ability to be vulnerable with clients and staff. I asked my team to be involved in reviewing the interview process to make it more robust. We updated the questions and added a presentation on individual recovery which felt like a step in the right direction. However, we are continuing to learn as we develop.”

“I was asked to prepare a presentation on my recovery story as this is something I would be doing in my role. It felt comfortable at first, but when I started preparing, it made me question myself. Was I recovered? How did I get to recovery? How do I keep pushing forward in recovery? Can I recognise when things are slipping? Can I stop myself from relapsing? This was an extremely valuable and insightful process to go through as it made me realise how far I have come and how hard I have worked to recover and maintain my recovery.”

AGE-RELATED SERVICE TRANSITIONS TRAINING

Age-related service transitions between child and adolescent and adult eating disorders (ED) services present significant challenges and opportunities for service users and staff.

Making a fresh start allows a fresh look at a person's difficulties and may unlock new approaches to treatment and care. However, poor communication and coordination between services and other issues contribute to such transitions also being associated with distress, treatment delays, drop-out and deterioration.

Building on existing guidance from the Royal College of Psychiatrists and designed in partnership with service users, carers, academics and clinicians, South London and the Maudsley NHS Foundation Trust (SLaM), King's College London (KCL) and the Health Innovation Network South London (HIN) have developed a new suite of online learning resources to support ED professionals to understand the issues, risks and opportunities involved in age-related service transitions. These resources are intended to support professionals to work with their colleagues in their service settings to deliver safe, effective and empowering transitions for young people and their families.

Across five modules, these resources are designed to help clinicians and other ED professionals tackle complex issues including:

Understanding the risks and opportunities of age-related service transitions;

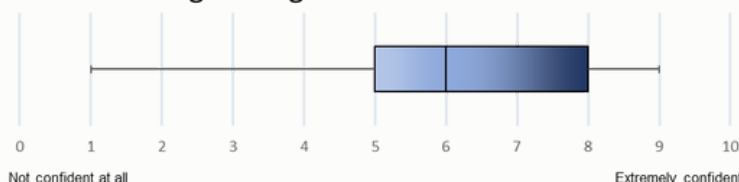
- Understanding the pros and cons of different service models (e.g. all age services) in relation to such transitions;
- Developing effective transition plans;
- Involving parents and carers in transitions and navigating conversations around confidentiality;
- Helping young people plan for other age-related major transitions such as moving to university;
- Building strong working relationships between child and adolescent services and adult services.

FIND THE TRAINING ON THE FREED WEBSITE HERE: [HTTPS://FREEDFROMED.CO.UK/EATING-DISORDERS-SERVICE-TRANSITIONS](https://freedfromed.co.uk/eating-disorders-service-transitions)



Let's get everyone to the top to the scale!

How confident do you feel in supporting your patients throughout age-related service transitions?



FREED CONSULTATIONS

Implementation supervision:

Services across the country reported finding implementation supervision to be:

- normalising and validating.
- great for networking with other services.
- useful for remaining updated on resources and training.
- helpful in ensuring correct implementation and providing guidance with case supervision.

However, services requested:

- a move to regional supervision groups.
- reduced frequency of supervision meetings.
- opportunity for further networking.
- terms of reference for supervision.
- minutes to be more widely disseminated.
- infrequent meetings for mini-team members.

Funding:

Services requested:

- help with presenting business cases and accessing funding.
- national team presence in meetings with commissioners.
- the pathway to be more prescriptive regarding FREED mini-team member roles.
- help with areas commissioners value (hard-to-reach groups, minorities).

Resources + Training:

Services requested:

- co-developed resources for minoritised groups (LBGQT+, males).
- FREED national social media revamp
- sharing/collaborating on (i) research; (ii) resources and (iii) examples of good practice.
- annual refresher training.

REGIONAL SUPERVISION DATES

London + East of England

Tue 5th March 11:00-12:15	Tue 11th June 11:00-12:15
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Midlands

Mon 8th April 14:00-15:15	Mon 1st July 14:00-15:15
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North East & Yorkshire + North West

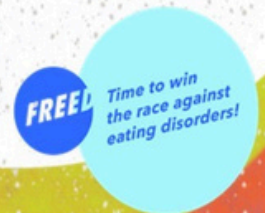
Fri 31st May 11:00-12:15	Fri 9th August 11:00-12:15
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South East + South West

Tue 16th April 13:00-14:15	Tue 9th July 13:00-14:15
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FREED JUBILEE

FREED at 10: Towards the Next Decade of Early Intervention for Eating Disorders



JOIN US: FREED AT 10 - TOWARDS THE NEXT DECADE OF EARLY INTERVENTION FOR EATING DISORDERS CONFERENCE

Ten years ago, we started FREED (First episode rapid early intervention for eating disorders) as a small pilot project. It is now the leading evidence-based service model and care pathway for early intervention in eating disorders. It is fully embedded in services across England and has inspired development of similar models internationally. Join us to celebrate FREED's first decade. Learn about how we are working with our partners to shape the future of high-quality authentic prevention and early intervention for eating disorders to revolutionise care for patients and families. Help us make early intervention for eating disorders a world-wide movement.

The event will feature keynote lectures and talks from international experts on youth mental health and early intervention, members of CREW, national FREED team and the EDIFY consortium on scientific advances, impacts and ongoing work and opportunities for networking, discussion and debate.

The FREED team will be in touch with further details.

INTRODUCING THE NATIONAL TEAM!



LUCY HYAM
FREED PHD STUDENT



JESS GRIFFITHS
FREED NATIONAL
CO-LEAD



DR KARINA ALLEN
FREED CONSULTANT
CLINICAL PSYCHOLOGIST



DR GIULIA DI
CLEMENTE
FREED NATIONAL
CO-LEAD



MUHAMMAD AHMED
FREED NATIONAL
ASSISTANT
PSYCHOLOGIST



PROF. ULRIKE
SCHMIDT OBE
FREED EXECUTIVE
DIRECTOR



JESSICA WILKINS
FREED PHD STUDENT



DANIELLE GLENNON
HEAD OF FREED

RECENT RESEARCH

Clinicians' views and experiences of delivering First Episode Rapid Early Intervention for Eating Disorder (FREED)

Why did we do these research studies?

We have previously shown that FREED improves outcomes by reducing the length of time that young people are ill before accessing treatment and tailoring existing evidence-based treatments to young people in early-stage illness. To understand how FREED works in practice and what, if any, changes need to be made to allow it to work optimally, we investigated the views and experiences of clinicians delivering FREED.

What did we do?

We ran two integrated studies at different time points between 2019-2022, i.e. from early to later stages of the national rollout of FREED. These studies used questionnaires, individual interviews and focus groups.

What did we find?

Both studies found that clinicians were overwhelmingly enthusiastic of FREED and recognised its value for patients, largely because of the noticeably quicker improvements.

FREED's active engagement activities and rapid access to tailored treatments were seen as crucial for engaging young people and supporting early recovery.

Features of the FREED model and associated implementation supports were seen as important for getting FREED started and embedded in services.

continued overleaf

RECENT RESEARCH

Clinicians' views and experiences of delivering First Episode Rapid Early Intervention for Eating Disorder (FREED) (cont.)

However, there were concerns around increased workloads and the potential impact on patients not eligible for FREED. Clinicians wanted early intervention to be available to all patients but realised that this was not feasible with current resources.

Funding and staffing issues were and continue to be critical challenges in delivering FREED, especially for providing treatment quickly. This led some services to limit their FREED-offer to specific areas, ages or presentations.

What do these findings mean for practice and research?

The two studies suggest that when delivered as intended, FREED is seen as valuable and working well for staff and patients. However, there are key barriers in effectively delivering FREED that need to be addressed:

- Greater investment and funding are needed to allow services to deliver FREED optimally.
- Additionally, solutions are needed to support services to deliver treatment quickly, such as brief focused interventions, group treatments and task-sharing (e.g. peer workers).
- We need to know what outreach work is effective at increasing suitable referrals and engaging young people in the community, especially under-served and underrepresented groups.
- There needs to be a thorough evaluation of the wider impacts of FREED, i.e., how cost savings from FREED are used within individual services and nationally.

The full-text articles for the studies can be accessed at:

- Richards et al., 2024 (conducted 2019-2021) Paper:
<https://jeatdisord.biomedcentral.com/articles/10.1186/s40337-024-01000-4>
- Hyam et al., 2024 (conducted 2022) Paper:
<https://www.frontiersin.org/journals/psychiatry/articles/10.3389/fpsyt.2024.1327328/full>

CURRENTLY RECRUITING

Version 2 (22/08/23)
Recruitment deadline: 28/02/25

Raise

For more info,
please search:
IRAS ID
318129

Eating Disorders: Delineating illness and recovery trajectories to inform personalised prevention and early intervention in young people (EDIFY)

WHAT ARE WE DOING?

Testing a **new** type of **brain-directed treatment**, called **theta burst stimulation (TBS)**, for young people with anorexia nervosa (AN)

WHAT'S INVOLVED?

- Allocation by chance to receive **20 sessions** of real or sham (fake) TBS
- You will receive one session of TBS every day (i.e Mon-Fri) for 4 weeks
- We will assess the effects of TBS before and after receiving 20 sessions of TBS & 3-months after the final session.

WHAT NEXT?

For more info, contact:

Amelia Hemmings 
amelia.1.hemmings@kcl.ac.uk

Scan the QR code to see our participant information video:



Plus, visit us on:



www.twitter.com/EDIFYresearch



www.instagram.com/edifyresearch



www.edifyresearch.co.uk

WHO CAN TAKE PART?

People of any gender aged **13-30 years old** with a current diagnosis of AN, and:

- a **BMI of at least 14** or 66% of median BMI for age and gender
- Completed **at least one** course of treatment for your eating disorder
- **living in the community**, i.e., not currently receiving inpatient treatment
- No history of seizure or head injury

WHAT ELSE IS INVOLVED?

- 90-minute MRI scan before the first TBS session and another 90-minute MRI scan after your final TBS session
- Computer tasks (brain puzzles)
- Blood samples
- Questionnaires
- You will be reimbursed £50 after we assess the effects of TBS at 3-months after your final TBS session
- You can get up to £17 travel costs on the days of your assessment

CURRENTLY RECRUITING

We want to hear your

STORY!

Join the STORY study!

ARE YOU ...

- between 16-25?
- and have an eating disorder or think you may have one?
- or have no history of an eating disorder?



Scan for more
information



CURRENTLY RECRUITING



University of
Nottingham
UK | CHINA | MALAYSIA



Communicating about eating disorders online

We are keen to hear from young people with different experiences of posting or viewing posts about eating disorders on social media.



Are you...?

- aged 16-25
- living in the UK
- experiencing an eating disorder or disordered eating behaviours

Have you ever...?

- Posted or viewed social media content about eating disorders

Do you...?

- ever worry about money
- identify as ethnically diverse
- live rurally OR
- feel your gender is underrepresented in ED narratives

**NOW
RECRUITING!**

What's involved?

- An online individual interview (of around 45 minutes)
- Sharing and discussing some social media posts you have made (if you feel comfortable).

Next steps

Scan the QR code below or express your interest at <https://tinyurl.com/communicating-eds>.



CURRENTLY RECRUITING

LENS **EDIFY** SCHOOL OF
INNOVATION
AND TECHNOLOGY
THE GLASGOW
SCHOOL OF ARTS

Share Your Experience

We would like to talk to young people to understand experiences of eating disorders and how to make support better in the future

who

Are you **16-25**, and have you ever experienced an **eating disorder**?

We are keen to hear from young people with different experiences. You may relate to **one or more of these**:

Have you ever **worried about money, experienced poverty or been impacted by rising cost of living**?

Do you identify as **culturally or ethnically diverse**?

Maybe you live or have lived in a **rural area**?

Do you feel your **gender** isn't represented in current conversations about eating disorders?

how

Taking part in the LENS research can involve

- **an interview** with researchers either online or in person,
- and a **group session** with other young people and researchers online.

You are welcome to take part in one or both of these.

You will receive a small incentive to thank you for your time and contribution.

For more info:



If you are interested please contact f.stephens@gsa.ac.uk

Guided Self-Help in Early Intervention Eating Disorder Services: Facilitators and Barriers in the FREED Network

Purpose:

To establish facilitators and barriers to using guided self-help in FREED Network services.

What participation involves:

Taking part in a 15-45 minute individual interview over Microsoft Teams with a researcher. Interviews will be recorded and later transcribed and anonymised.

Who can take part?

Any FREED staff member in any FREED Network service (e.g. FREED Champion, FREED mini team member, FREED assistant psychologist)

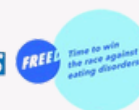
Contact:

Laura Courtney,
Laura.Courtney@slam.nhs.uk , or
Pippa Croft,
Philippa.Croft@slam.nhs.uk

Study supervisor, Dr Karina Allen:
Karina.allen@kcl.ac.uk

South London
and Maudsley
NHS Foundation Trust

NHS



FOOD FOR THOUGHT

COMING SOON

Do you have something to say?

Is there an area of ED or early intervention provision you are particularly passionate about?

Is there something your trust does really well?

We're looking for articles from our network members to feature in the quarterly newsletter!

Contact:
Muhammad.ahmed@slam.nhs.uk