

Eating Disorders Home Intensive Treatment Team (HITT) Information for

Patients, Parents and Carers

What does the HIT team do?

HITT work with children and young people known to the Eating Disorder Team, specifically focusing on the following:

- supporting discharges from acute paediatric/medical wards
- supporting discharges from Tier 4 specialist inpatient units
- prevention of admission to acute paediatric/medical and Tier 4 specialist inpatient units
- reducing duration of admissions

We understand that Eating Disorders can have a significant impact on family dynamics and home life. HITT will support children and young people with an eating disorder, during their hospital admission, and work with young people and their families/carers in the community.

HITT work closely with the hospital wards across Bedford, Luton and Milton Keynes, and the Luton & Bedfordshire Core Eating Disorder Team, utilising re-feeding programmes, offering meal supervision with coaching and support in ways to de-escalate distress associated with eating, plus guidance and support around managing food avoidance and compensatory behaviours.

Our HIT team members

Bea – Eating Disorder Nurse

- Julie Eating Disorder Nurse
- Shelly Eating Disorder Support Worker
- Tyra Eating Disorder Support Worker
- Linda Eating Disorder Support Worker

What support can the HIT team offer?

HITT provide short-term intervention (usually 4-8 weeks) alongside the care you receive from your care coordinator within the core Eating Disorder Team.

We currently operate an 8am-8pm Monday-Friday service. HITT support will be tailored to patients' needs, ranging from daily to weekly support. If you are in hospital, you will be visited by our HIT team throughout your hospital stay, and your support plan will be discussed throughout, to plan for a safe discharge home.

If you are supported in the community, likewise, your support plan will be discussed with you throughout your appointments with your care coordinator.

HITT can offer the following support:

- Face to face meal support in the hospital or at home, for any snacks or meals throughout the day; multiple meal supports throughout the day if required
- Virtual (video call) meal support as above
- Support phone/video calls



What do the HIT team expect from us as a family?

If the HIT team are going to be visiting young people at home, we would need to complete a home risk assessment. This would be a visit to the home by your care coordinator from the core Eating Disorder Team, and either a Nurse or Support Worker from HITT. The purpose is to highlight any potential risks, such as pets, uneven flooring, road access, identifying who lives in the house etc. The risk assessment can be found on the following page, to put you at ease. This will then be uploaded to the patient record system RiO. You do not need to complete this; your care coordinator and HITT clinician will do this.

We require parents/carers to be at home when HITT visit the young person; our role aims to support you in supporting your child.

We appreciate that sometimes other appointments or commitments may arise, meaning that meal support is no longer required on a given day. We ask that you please give us at least one hour's notice if you need to cancel meal support. This can be done by contacting CAMHS on 01234 893300, or by calling the team member that is due to be visiting.

Then what?

HITT support will be reviewed weekly by the HIT team nurses, and your care coordinator. Any changes in your support plan will be discussed with you and your family, and a support plan will be sent to you or your parents/carers via email each week.

When HITT support ends, your care will be handed back solely to your care coordinator within the Core Eating Disorder Team.

If you have any non-urgent questions between 9am-5pm regarding your care, please contact CAMHS on 01234 893300 and ask for the Eating Disorders Team.

Feedback

As we are a relatively new and developing team, we would be very grateful for any feedback regarding the support you received from the HIT team.

Please note, you are under no obligation to provide feedback.



Service User Questionnaire – ED HITT

Premises Risk Assessment	Identified risk or	Risk management or hazard
	hazard	control
 Access to home – easy access and exit, more than one exit from the home. Doors – easily opened, unobstructed 		
2. Pathways – level surface, uncluttered, adequate width		
3. Steps /stairs – non slip, level surface, solid		
4. Pets – adequately restrained		
5. Lighting – well-lit, dark hiding places		
NB. If any home visits need to be carried out after dark ensure neighbourhood lighting is assessed after dark prior to first visit.		
6. Neighbourhood – general safety		
7. Is there safe, well-lit parking available close to the home?		
8. Are there any safety concerns regarding the route from public transport stops to the home.		
9. Who lives in the property that you are visiting?		
10. Is there any history of aggressive behaviour or potential violence?		
11. Is there any history of aggressive behaviour or potential violence towards staff, volunteers?		
12.Is there any history of aggression, violence or threats to staff from family or other visitors to the home?		
13. Is the client a risk to themselves?		
14. Are there any other risk factors or hazards (Including mental health, substance /alcohol misuse)?		
15. Are there any other safety issues associated with the premises/ person/ family members?		
16. Is the client supported by any other agencies?Please give details, i.e. other CAMHS teams, Early Help, Autism Bedfordshire		



Please answer the questions as fully as you can, or feel able to. If you don't know the answer, or don't wish to give it, don't worry. Any information you can give will be very helpful to us in working towards improving care and treatment provided to young people with eating disorders and their families. We do not require you to complete any personal details on this page so your feedback will remain anonymous.

Section 1: The service I receive.....

		Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree	Not Sure / Not Relevant
1.	Treats me as an individual							
2.	Involves me in choices about my care							
3.	Explains things to me in a way that I can understand							
4.	Involves the right people in my care planning							
5.	Is provided by staff who are approachable							
6.	Is based on an open and trusting relationship with staff							
7.	Is provided by people who have sufficient knowledge and understanding of eating disorders							
8.	Provides enough home support to me and my family							



Section 2: Additional Comments

- Is there anything that could be improved?
- Is there anything particularly good about your care?

Section 3: Parents/Carers View

- Is there anything that could be improved?
- Is there anything particularly good about the support that has been received to either you or your child?