

Eating Disorders Program FY 2016

Program Overview

Anorexia Nervosa is characterized by drastic weight loss (15 per cent of body weight or more) which can lead to emaciation and compromised physical and psychological health. Bulimia Nervosa consists of constant changes in weight with episodes of binge-eating followed by self-induced vomiting or purging with laxatives, diuretics, compulsive exercising, and for periods of fasting. Some people may present with symptoms of both disorders.

These disorders can involve serious medical and psychological complications and require professional attention and care.

Homewood Health Centre offers one of the largest residential eating disorders programs (EDP) in Canada. Our program helps women and men aged 16 and older to regain control over their lives.

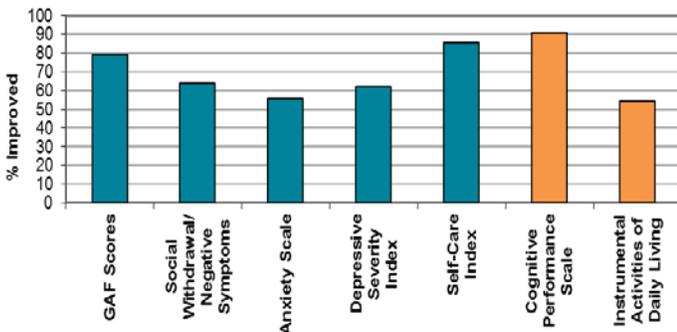
Program Trends and Patient Characteristics

- 85 patients were discharged from EDP in 2016. They were between 16 and 56 years of age (average age 28 years) and 98% were female.
- Individuals come to EDP as voluntary patients.
- About 65% of EDP patients have had prior admissions to an inpatient mental health treatment setting at some point in their lifetime.
- Comorbidity is common with anxiety disorders and substance-related disorders.
- 36% of patients reported a trauma history

Clinically Observed Outcomes

The Resident Assessment Instrument-Mental Health (RAI-MH) is a comprehensive, standardized instrument evaluating symptoms and functioning, socio-demographics, behaviours, prior experiences, and interventions. The outcomes below reflect the percentage of patients whose difficulty with certain symptoms or functioning improved from admission to discharge.

% of 2016 EDP Patients Who Improved in Clinically Observed Outcome Domains



The graph above illustrates that EDP patients displayed positive rates of improvement (70% on average) for all outcome indicators.

Self-Reported Outcomes

EDI – 3 Outcomes

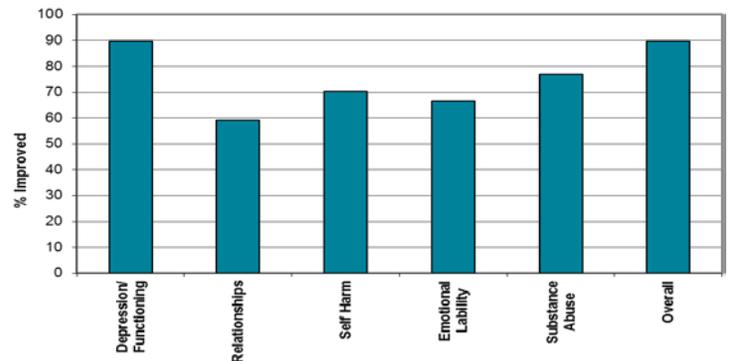
The Eating Disorders Inventory-3 (EDI-3) is a comprehensive mental health tool used to precisely measure characteristics and personality traits associated with eating disorders. Below are results of improvement from admission to discharge on specific eating disorder subscales.

- *Drive for Thinness* – 89% improved
- *Bulimia* – 91% improved
- *Body Dissatisfaction* – 81% improved

BASIS-24 Outcomes

The Behaviour and Symptom Identification Scale (BASIS-24) is a self-reported, objective measure of symptoms and functioning that assesses outcomes of psychiatric care from the patient's perspective. Below are results of improvement from admission to discharge for the subscales most relevant to EDP.

% of 2016 EDP Patients Who Improved in Self-Reported Symptoms and Functioning



The graph above illustrates that EDP patients displayed positive rates of improvement (greater than 59%) for all outcome indicators.

Patient Perceptions of Care

Overall Rating of Care at EDP:

- Patients, on average, rate the overall quality of care as 8 out of 10 (10 best care).
- 90% of patients said they would recommend EDP and Homewood to others in need of treatment.
- 98% of patients felt they were helped by the care they received.

What patients have said about the program...

“I wouldn't be where I am today without the staff and specialized treatment. The DBT portion of the program is exceptional and life changing!!!”

“I had a great experience in the EDP program. This program changed my life. I am excited and hopeful for recovery.”

“(Homewood) has been an extraordinary resource to me. I had two major issues besides anorexia, and the team has worked with me to address all three.”

