

Eating Disorders: Care for People of All Ages

This document is a resource for health care providers and summarizes content from the [Eating Disorders: Care for People of All Ages quality standard](#).

Assessment and Promoting Equity

Quality Statement (QS)* 1: Comprehensive Assessment

- Ensure people who seek care for their eating disorder symptoms receive an assessment as soon as possible—ideally within 4 to 8 weeks of their initial contact
- Conduct comprehensive mental and physical health assessments to determine the severity of symptoms, degree of impairment, and nature of the eating disorder, and to identify any comorbid conditions and determine a treatment plan
- Ensure that the care delivered is inclusive, affirming, welcoming, and culturally sensitive for Black, Indigenous, and racialized people, people who identify as 2SLGBTQIA+, and other equity-deserving groups where there are known barriers to care

*The quality statements are provided in full on page 2, along with helpful resources.

QS 8: Promoting Equity

- Treat people with an eating disorder (and their families and caregivers, where appropriate) with respect, dignity, and compassion, and work to establish trust with them
- Acquire the appropriate education, knowledge, and skills needed to provide trauma-informed care in a culturally sensitive, anti-racist, and anti-oppressive way that recognizes intersectional identities of people with an eating disorder
- See the person for who they are as an individual, actively listen to them, work to understand their needs, and provide timely, high-quality care
- Be an advocate and an agent of change if structural factors of discrimination are observed and need to be addressed

Treatment and Monitoring

QS 2: Level of Care

- Collaborate with people with an eating disorder to determine the most appropriate level of care based on the severity of their eating disorder, experience with previous treatment, and their individual needs and preferences
- Offer the least intensive treatment option that is likely to be effective first

QS 4: Psychotherapy

- Offer evidence-based psychotherapy to people with an eating disorder in alignment with their needs and preferences
- Ensure that evidence-based psychotherapy that focuses on eating disorders begins as soon as possible, ideally within 4 to 8 weeks after the comprehensive assessment

QS 5: Monitoring and Medical Stabilization

- Monitor people with an eating disorder to help prevent complications

- Offer medical stabilization for people with an eating disorder who are malnourished, medically unstable, or very underweight, and monitor them for complications and adverse events
- People of any size or weight can also experience hemodynamic instability and require medical stabilization

QS 7: Physical, Mental Health and Addictions Comorbidities

- Determine the most appropriate course of treatment for the eating disorder and any comorbid physical, mental health, or addiction conditions, considering the severity of each condition and the person's needs and preferences
- Ensure that care for all conditions is part of the same treatment plan
- Care for each condition can be provided concurrently or sequentially

Support, Follow-up, and Transitions in Care

QS 3: Transition From Youth to Adult Health Care Services

- Work with the young person (and their family and caregivers, where appropriate) to support their transition to adult services, including identifying a transition coordinator, developing a written care plan to assist with the process, and facilitating an introduction to adult services
- It is important to fully involve the young person, and where appropriate, their family and caregivers. Also see Ontario Health's [Transitions From Youth to Adult Health Care Services quality standard](#)

QS 6: Support for Family and Caregivers

- Ensure that families and caregivers are offered resources, structured supports, and education about eating disorders

- People may benefit from a psychosocial assessment depending on their needs. Families and caregivers should be included in care and treatment planning, especially for children and young people
- For adults, involvement of families and caregivers occurs according to the wishes of the person with an eating disorder

QS 9: Care for People Who Are Not Receiving Active Treatment

- Support and collaborate with people with an eating disorder who are not receiving active treatment and their family and caregivers to determine what ongoing follow-up and support best meets their needs

Eating Disorders: Care for People of All Ages

QUALITY STATEMENTS

Quality Statement 1: Comprehensive Assessment

People with signs and symptoms of an eating disorder have timely access to comprehensive mental and physical health assessments. The assessment is used to determine whether they have a specific eating disorder, the severity of their symptoms, the degree of impairment, and whether they have any comorbid conditions, and to establish a plan of care.

Quality Statement 2: Level of Care

People with an eating disorder receive the most appropriate level of care, which takes into consideration their needs, goals, and experience with previous treatment.

Quality Statement 3: Transition From Youth to Adult Health Care Services

Young people with an eating disorder who will transition out of youth-oriented services to adult-oriented services receive transitional care that focuses on continuity and helping the young person develop independence.

Quality Statement 4: Psychotherapy

People with an eating disorder receive timely access to evidence-based psychotherapy that focuses on eating disorders and considers their individual needs and preferences.

Quality Statement 5: Monitoring and Medical Stabilization

People with an eating disorder receive ongoing medical monitoring to prevent and address adverse events and complications. They are offered acute medical stabilization when indicated.

Quality Statement 6: Support for Family and Caregivers

Families and caregivers of people with an eating disorder are offered resources, structured support, and education in a way that meets their needs.

Quality Statement 7: Physical, Mental Health, and Addiction Comorbidities

People with an eating disorder who have physical, mental health, or addiction comorbidities are offered treatment for their eating disorder and other conditions as part of a comprehensive plan of care.

Quality Statement 8: Promoting Equity

People with an eating disorder experience care from health care providers and a health care system that uses an anti-racist, anti-discrimination, anti-stigma, and anti-oppressive approach. Health care providers promote a culture that is compassionate, trauma informed, unbiased, and respectful of people's diversity. They build trust with people with an eating disorder and their families and caregivers, work to remove barriers to accessing care, and provide care equitably.

Quality Statement 9: Care for People Who Are Not Receiving Active Treatment

People with an eating disorder who are not receiving active treatment are offered medical monitoring, support, and follow-up that meets their needs and preferences.

Resources

- [Ontario Health's Eating Disorder Quality Standard, Patient Guide, and Caregiver Guide](https://bit.ly/QS-ED)
bit.ly/QS-ED
- [Ontario Community Outreach Program for Eating Disorders: List of Treatment Programs](https://bit.ly/3YtpyYo)
bit.ly/3YtpyYo
- [National Eating Disorders Information Centre: Find a Provider Interactive Tool](https://nedic.ca/find-a-provider)
nedic.ca/find-a-provider
- [National Eating Disorders Information Centre: Affirming Care for Every Body](https://nedic.ca/2slgbtq)
nedic.ca/2slgbtq
- [Ontario Health's Quorum: Eating Disorders Quality Standards—Tools for Implementation](https://bit.ly/4oEM9CU)
bit.ly/4oEM9CU

For people with an eating disorder and their families and/or caregivers:

- [National Eating Disorders Information Centre: Eating Disorder Community Groups](https://nedic.ca/community-groups)
nedic.ca/community-groups
- [National Initiative for Eating Disorders: Safety, Crisis Readiness and Other Essential Information for Caregivers](https://bit.ly/3GZcimT)
bit.ly/3GZcimT
- [Families Empowered And Supporting Treatment for Eating Disorders. \(F.E.A.S.T.\): First 30 Days Program](https://www.feast-ed.org/feast-30-days/)
https://www.feast-ed.org/feast-30-days/
- [Canped.ca's Online Education Tool for Parents/Caregivers: Understanding Eating Disorders in Adolescence](http://canped.ca/)
http://canped.ca/

Note: This resource can be used to support health care providers in the provision of care. It does not override the responsibility of health care providers to make decisions with patients, after considering each patient's unique circumstances. Grouping/directionality of statements may not be applicable for every patient, and clinical judgment should be used.