

Eating Disorders Training in Australia

Review Report



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Executive Summary

The National Eating Disorders Collaboration (NEDC) has conducted a review of professional development training delivered by state-funded specialist eating disorders services. This was done in order to map at a national level (i) the current range of professional development training about eating disorders delivered around Australia, and (ii) how each of these training offerings aligns with the National Practice Standards for Eating Disorders.

The output, this report, represents a national first. It compiles the training module information from all of the eating disorders specialist organisations included in the review, and shows how each of those training modules aligns with the seven core competency areas and their specific units of competency.

This facilitates a gap analysis. For the first time, eating disorder specialist training providers, funding bodies, workforce planners across key health agencies, professional bodies and other interested parties can see what other training is needed and where it needs to be delivered. This will support efforts to ensure that all of the health professionals who need to be reached will be reached.

The seriousness of the high prevalence of eating disorders in the Australian community cannot be overstated, particularly in light of high rates of morbidity and mortality. Eating disorders affect 1 million Australians. Despite this, 97% of surveyed health professionals stated that they had received either no training in eating disorders or inadequate training to be able to confidently identify and treat a person with an eating disorder. Activities to increase the eating disorder competence of the workforce are clearly needed.

This review looked at 73 training modules and other relevant professional development activities offered by state-funded specialist eating disorders services and one specialist eating disorders professional body. Training modules varied in delivery format, duration, cost and geographic availability. Key findings with regards to the competency framework were:

- All units of competency in the competency framework were covered by at least one nationally available training module;
- Eight of the modules included in the review were available online; the rest were face to face and currently limited in their reach by both geographical and time/frequency barriers;
- NSW was the only state where regional delivery of face to face training was occurring routinely;
- No face to face training was identified in the Northern Territory or Tasmania;
- There was evidence that the state-based eating disorders specialist services included in this review are already collaborating and finding ways to share their training modules.

Three recommendations have been made following the completion of this review and a period of stakeholder consultation.

- That a dynamic database be developed which allows health professionals and workforce planners to access the details of all training modules contained in this review (and others developed in future) in a way that assists them to meet their specific professional and workforce development needs;
- That an in-reach project to increase uptake of existing training modules in jurisdictions with low current availability of training be scoped and piloted;
- That ongoing efforts are made to reach professional groups who may not self-identify as working in the eating disorders sector, so that they may take up professional development training targeted at Early Identifiers and First Responders.

Thank you

The NEDC acknowledges the time, expertise and input of the organisations that participated in this review and thanks them for their contribution. The organisations involved in the Advisory Group to the review were:

- InsideOut Institute for Eating Disorders
- Victorian Centre of Excellence in Eating Disorders
- Queensland Eating Disorders Service
- SA State-wide Eating Disorders Service
- WA Eating Disorders Outreach and Consultation Service
- Australia and New Zealand Academy for Eating Disorders
- Partners in Practice

In addition, the following organisations submitted information about their training to the review, and are thanked for making this contribution:

- Eating Disorders Victoria
- Eating Disorders Queensland
- Eating Disorders Training and Evaluation Centre
- The Centre for Clinical Interventions
- The Sydney Children's Hospital Network Eating Disorders Program

A draft of this report was made available to NEDC Members and other key stakeholders for consultation in November 2018. The NEDC thanks all participants in that consultation.

PART ONE

National Eating Disorders Collaboration

The National Eating Disorders Collaboration (NEDC) is an initiative of the Australian Department of Health which brings together research evidence, clinical expertise and lived experience to develop a nationally consistent, evidence-based approach to the prevention, treatment and management of eating disorders in Australia.

The NEDC is a collaboration of over 2,800 individuals and organisations with a strong interest in or experience with Eating Disorders, guided by a Steering Committee of experts in the field. The collaboration is administered on behalf of the federal government by the Butterfly Foundation.

This Report

This report summarises the work undertaken by the NEDC to bring together information on current eating disorders-specific training and development opportunities for health and allied workforces in an easily accessible, coordinated suite.

The report appears in two parts:

- Part one provides details on workforce development and eating disorders, the review process, the review's key findings and recommendations
- Part two provides an overview of training relevant to eating disorders for professional audiences. It includes listings for individual resources or programs, providing:
 - Overview of training – module name, provider, delivery method, delivery frequency, cost, geographic availability, duration, target audience;
 - Summary table – the extent to which each of the core competency areas is covered or addressed in the training module;
 - Detailed tables – whether or not each of the units of competency underpinning a core competency area has been covered in the training modules;
 - Access information with details on provider and availability.

Workforce capacity, training, development and systems have formed a significant part of the work undertaken by the NEDC to date. This review should be read in conjunction with other NEDC materials including:

- National Practice Standards for Eating Disorders (2018)
- Competency to Treat Eating Disorders; A Workforce Development Blueprint (2016)
- Eating Disorders: The Way Forward – An Australian National Framework (2010)

- An Integrated Response to Complexity – National Eating Disorders Framework (2012)
- Eating Disorders Prevention, Treatment and Management – An Evidence Review (2010 and 2017)

All published reports are available from the NEDC website www.nedc.com.au .

The state of eating disorders training in Australia

There has been a growing recognition of the need for workforce development in the identification, treatment and support of people with eating disorders, their carers and friends. This need has been identified against a backdrop where there is a dearth of tertiary health courses in Australia that position competence to respond to eating disorders as a core component of clinical practice.

Recent evidence of growing commitment to improving the experience of people with eating disorder when they interface with the health system can be seen in examples such as the NSW Service Plan for People with Eating Disorders and the ACT Health Eating Disorders Position Statement. Despite these positive developments, large gaps in investment remain.

Much of the work that has led to the current increasing awareness of and interest in workforce development in eating disorders has been driven by the strong commitment of a small and dedicated group of people working in state-based and specialist eating disorder organisations, who have recognised the need for greater development of workforces that provide referral pathways into and out of their services as well as providing health and education services to the wider Australian community. There is merit in maximising opportunity across these organisations to leverage the expertise and commitment of this group to achieve maximum reach of workforce development initiatives including training, including into jurisdictions which currently have little training coverage or investment in eating disorders.

This report shows that 73 training modules have been produced, each addressing elements of competency to identify and respond to eating disorders. This is a good start. In progressing workforce development and professional development training in eating disorders across the health workforce, it is imperative that this good work is not lost but rather taken as a basis for continued investment and growth.

Eating Disorders and the Australian Health Workforce

Eating disorders are serious mental illnesses resulting in significant psychological and physical complications and impairment, with an increased risk of mortality. Eating disorders are estimated to affect approximately 10% of the total population (Fairweather-Schmidt & Wade, 2014); in Australia today more than 2 million people are likely to experience an eating disorder at some point in their lives. These are conservative estimates; research indicates that the majority of people with eating disorders do not seek or receive treatment

(Stice, Marti, & Rohde, 2013), and only 22% of individuals diagnosed with eating disorders access specialist eating disorders services (Deloitte Access Economics, 2012). This prolongs illness, entrenches core psychopathology, increases the likelihood of complications and mortality, makes eventual treatment more complex, and costs the community from both human and financial perspectives.

Eating disorders require treatment that is specific to the illness and level of severity. Working with clients with eating disorders requires a specific knowledge and skill base including knowledge of evidence based practice, medical and nutritional issues, assessment of physical and psychiatric health, developmentally appropriate care, and the need to be able to work in a collaborative multidisciplinary team.

For treatment of eating disorders to be effective it must be evidence-informed and delivered by skilled and specifically trained clinicians (Australia and New Zealand Academy for Eating Disorders, 2011). This is not to suggest that all clinicians must be trained as tertiary specialists, but rather that any clinician treating or supporting a person with an eating disorder has specific knowledge and skill requirements associated with this group of disorders, and that those requirements need to be addressed through training.

People with eating disorders may come into contact with the healthcare system for assistance with many comorbidities or complications of their illness, but if eating disorders are not identified as a possible cause or comorbidity by the treating clinician then an opportunity for intervention is missed. This affects the trajectory of the illness and the person's long-term quality of life; the earliest possible identification and intervention lead to the best rates of recovery and long-term quality of life.

It is a principle of the National Framework (National Eating Disorders Collaboration, 2012) that people with eating disorders should have access to services when and where they are needed, in their local community, as early as possible in the illness. Most people with eating disorders could be treated in their community if evidence based treatment options were available. Development of community based services for people with eating disorders that are safe and effective cannot occur without workforce development.

As eating disorders are diverse in presentation, the people that they can affect and the health outcomes they produce, any practitioner in the healthcare system may have a role in the eating disorders continuum of care.

The need for an Australian health workforce with the skills and knowledge to identify, screen, intervene, treat and support people with eating disorders to work towards recovery is clear and present. A continuum of care from prevention to early intervention, treatment and recovery support is required and the capacity to deliver this continuum relies heavily on the availability of a skilled workforce appropriately trained in evidence-based approaches to eating disorders.

The Australian healthcare workforce comprises close to 550,000 health professionals across the 14 health professions that are registered by the Australian Health Practitioner Regulation Agency (AHPRA) (Australian Institute of Health and Welfare, 2018). These people work across a broad range of disciplines, in every state and territory and in locations ranging from major cities through to remote and very remote areas. In addition, a broad range of health professionals providing treatment or support for people with eating disorders work in disciplines that are not regulated by AHPRA, including Dietitians, Social Workers, Exercise Physiologists and more. It is estimated that at least 170,000 health professionals work in designated roles that directly relate to the delivery of eating disorders treatment (e.g. psychologist, psychiatrist, dietitian, GP, occupational therapist, paediatrician, hospital physician, physiotherapist, social worker, mental health nurse) and the number is likely to be significantly higher.

This workforce is set to grow (Workforce Australia, 2014). This in part aligns with the growth in Australia's population, as well as its aging. With an aging population will also come an increase in demand for complex care, requiring increased role specialisation in certain areas of the sector at the same time as an increase in ancillary health workers roles (e.g. Allied Health Assistants). This includes professionals with tertiary and post-graduate degrees, as well as support workers with vocational qualifications such as Certificate or Diploma qualifications in mental health and peer work. For the purposes of this report, all people working in a health-oriented role (as distinct from education or community services), including those with vocational qualifications, are referred to as health professionals.

In Australia, the majority of health professionals do not have the knowledge or skill to safely and effectively treat people with eating disorders. An investigation conducted by the NEDC as part of the 2013 Gap Analysis Report found that 97% of clinicians surveyed had received no or insufficient training in eating disorders to enable them to provide treatment with confidence. The outcomes are delayed access to treatment or access to inappropriate treatment, increased physical and mental health consequences for patients, a longer course of illness with an increased risk of relapse and recurrence, and a higher social and economic impact.

To ensure access to eating disorder treatment in all communities, especially regional and rural communities, it is essential that providers of general primary and secondary health care are equipped and supported to contribute to diagnosis and treatment for people with eating disorders.

Workforce Development and Competency

As with treatment of other health conditions, the effectiveness of eating disorders treatment is mediated by the experience and skills of the treatment team. There is evidence that outcomes are poor when therapy is provided by health professionals without the necessary level of knowledge and skill in the treatment of eating disorders (National Eating

Disorders Collaboration, 2012). Without appropriate skill and expertise, experience in early intervention and treatment for people with eating disorders may do harm, prolonging the duration of illness, building resistance to treatment, decreasing hope in recovery, and increasing the risk of suicide.

The National Standards Schema for Eating Disorders (National Eating Disorders Collaboration, 2012) includes a skilled workforce as one of eleven essential principles for a safe and effective response to eating disorders:

A skilled workforce is needed, in which all health and frontline professionals receive training in eating disorders to raise their awareness and to enable them to identify, assess and contribute to the treatment of eating disorders.

Workforce development is a very high priority area for action. While other strategies are also required in delivering evidence-based services across the continuum of stepped-care, none of these strategies can successfully address eating disorders without the development of a skilled workforce.

The challenges in developing a systematic response to eating disorders in the Australian context are shared with many other health sectors. These challenges include the stigma associated with mental illness, providing expert community-based care to relatively small populations, and the integration of physical and mental health, and health and non-health services, as part of a whole treatment pathway.

In addition to these shared issues, the NEDC has found the following key issues for workforce development and capacity building in Australia:

- Health professionals need to receive meaningful training specifically in all eating disorder presentations to equip them to treat eating disorders in a manner appropriate to their role;
- Strong training and education resources exist and require better awareness and facilitated access to connect with the broader health workforce, particularly those who have not self-identified eating disorders as an area of need;
- Resources are needed for existing centres of eating disorder expertise to enable better outreach and tertiary support for primary and secondary health services, especially in regional areas;
- Core competencies for all health professionals and other professionals working with people at high risk of eating disorders need to be consistently adopted across the sector.

Core competencies refer to the skills and knowledge required to work in a particular field. They are an important framework for professional development and have a number of

potential benefits in providing a consistent, measurable framework for skills and work practices. Implementation of competencies needs to be strengthened by policy, training, professional development, supervision and support.

Ensuring that competence to identify and respond to eating disorders is included in ongoing health workforce development is critical.

The NEDC developed the first Australian draft competencies as part of the Gap Analysis Report (National Eating Disorders Collaboration, 2013) based on international practice standards. In 2014-2015, the NEDC undertook a further review of the evidence supporting the draft competencies and consulted with representatives from the eating disorders sector and from related professional bodies. The draft competencies were reviewed by industry stakeholders, including a significant review by the Australia and New Zealand Academy of Eating Disorders (ANZAED) to provide a set of expert endorsed Core Competencies for eating disorders. The core-competencies form a significant part of the NEDC National Practice Standards for Eating Disorders (National Eating Disorders Collaboration, 2018) and their roll out is part of wider eating-disorders workforce development activity driven by the NEDC.

The competency framework has been structured to reflect the different levels of knowledge and skill that professionals at different points on the continuum of care require to identify and respond to eating disorders safely and effectively. It is not expected that all health professionals should become specialists in eating disorder treatment, nor that any single health professional should provide the full suite of supports and clinical input that a patient with an eating disorder may require. The mix of professional development training available in eating disorders must therefore be able to cater to this wide variety of roles.

METHODOLOGY

The Review

The NEDC Gap Analysis (National Eating Disorders Collaboration, 2013) and Workforce Development Blueprint (National Eating Disorders Collaboration, 2016) identified that evidence-based training and education programs that are currently available in Australia. Before seeking to produce new resources, it is important to facilitate access to existing programs, where appropriate.

This review sought to:

- Map selected current training content to the National Practice Standards (National Eating Disorders Collaboration, 2018) and the requirements for each of the key functional groups within the eating disorders responsive health workforce;

- Facilitate wider awareness of and access to existing evidence-based training, particularly focusing on those provided within a workforce development context;
- Identify gaps in the current mix of training modules in terms of content/competencies covered;
- Identify opportunities, barriers and needs in accessibility of current training to the health workforce, with geographic, resource and time-based considerations.

To guide workforce development activity, including the development of this review, the NEDC convened an expert Advisory Group in May 2018. This group included representatives from key public state-based eating disorder specialist services with an explicit role in workforce development, NEDC steering committee representatives including representation of those with a lived experience, and representation from the Australia & New Zealand Academy of Eating Disorders (ANZAED) as the peak professional body for eating disorders professionals and clinicians. The organisations represented on the Advisory Group were:

- InsideOut Institute for Eating Disorders
- Victorian Centre of Excellence in Eating Disorders
- Queensland Eating Disorders Service
- SA State-wide Eating Disorders Service
- WA Eating Disorders Outreach and Consultation Service
- Australia & New Zealand Academy of Eating Disorders
- Partners in Practice
- National Eating Disorders Collaboration

As part of their work, the advisory group proposed a simplified version of the competency framework to facilitate the mapping of current training against NEDC core competencies. The simplified framework and mapping tool groups all required competencies under seven core areas, summarised in Table 1. The functional groups shown in this table are drawn from the National Practice Standards (National Eating Disorders Collaboration, 2018).

Underpinning each of these core competency areas are 53 units of competency which apply variously to the different functional groups. These are shown in Table 2. The 53 units of competency are drawn from the National Practice Standards for Eating Disorders (National Eating Disorders Collaboration, 2018).

Table 1: Competency framework for the safe and effective identification of and response to eating disorders, shown by professional functional group

Core competency area	Functional group				
	Early identifiers*	Initial responders**	Shared care professionals***	Treatment professionals****	Recovery support professionals*****
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Required	Required	Required	Required	Required
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Required	Required	Required	Required	Required
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Required	Required	Required	Required	Required
4. Ability to support the person and their family to facilitate personal recovery		Required	Required	Required	Required
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role			Required	Required	Required
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Required	Required	Required
7. Ability to deliver an evidence-based treatment for eating disorders				Required	

* Early identifiers are most likely to act as the first point of contact for people with eating disorders and their families. Their role is to proactively engage people at risk to promote prevention and early help seeking.

** Initial responders are primary health care providers who provide the first level of intervention, such as screening, initial assessment, initial diagnosis, and referral.

*** Shared care professionals provide treatment or support for the consequences of an eating disorder (e.g. medical monitoring and treatment) or for comorbid conditions

**** Treatment professionals deliver eating disorder-specific treatment that is safe, addresses all aspects of illness and delivered through a collaborative multi-disciplinary team or shared care approach.

***** Recovery support professionals provide support to those who are learning to manage their recovery from an eating disorder and to families and carers – this group includes the professions most likely to act as early identifiers and initial responders as well as treatment providers (National Eating Disorders Collaboration, 2018).

Table 2: Units of competency for safe and effective identification and response to eating disorders

Competency area	Units of competency
<p>1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery</p> <p>(required of all health professionals)</p>	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations
	d. Ability to describe the range of physical issues related to eating disorders
	e. Ability to explain the impact of rapid weight loss, and/or very low BMI on cognition
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)
<p>2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role</p> <p>(a-e required of all health professionals)</p> <p>(f required of shared care management and eating disorder treatment professionals)</p> <p>(g-i required of recovery support professionals)</p>	a. Ability to recognise the signs of disordered eating and describe the associated health risks
	b. Knowledge of warning signs and red flags
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice
	d. Assess for risk of suicide and self-harm
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders
	g. Discuss the risk of relapse and the importance of recovery support
	h. Describe secondary prevention strategies
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders

<p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	<p>d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs</p> <p>e. Identify when the person should be referred directly to an eating disorders specialist service</p> <p>f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department</p> <p>g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder</p>
<p>4. Ability to support the person and their family to facilitate personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	<p>a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder</p> <p>b. Ability to encourage patients to allow their family to share information with the treatment team</p> <p>c. Provide appropriate follow-up for people referred for treatment</p> <p>d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information</p> <p>e. Ability to manage a person with an eating disorder who is waiting for treatment</p> <p>f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program</p> <p>g. Work collaboratively with and support family members and identified support people</p> <p>h. Explain the range of education and support needs a person with an eating disorder and their family/support people may require</p> <p>i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services</p> <p>j. Recognise indications of relapse and support people to re-access treatment services</p>
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment)</p>	<p>a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness</p> <p>b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians</p> <p>c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers</p> <p>d. Monitor progress and measure outcomes (relevant to own professional discipline)</p>

<p>professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	<p>e. Support transfer between services and service providers</p> <p>f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team</p> <p>g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support</p>
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	<p>a. Describe the standards for safe treatment (National Standards Schema)</p> <p>b. Describe the medical and nutritional care that may be required to treat eating disorders</p> <p>c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission</p> <p>d. Describe the purpose of weight gain for people with malnutrition</p> <p>e. Discuss issues in the care of adults with long term eating disorders</p> <p>f. Knowledge of specific evidence based psychological and pharmacological treatments</p> <p>g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders</p> <p>h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration</p> <p>i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary</p>
<p>7. Ability to deliver an evidence-based treatment for eating disorders</p> <p>(required of eating disorder treatment professionals only)</p> <p>(e required of psychologists and mental health service providers only)</p>	<p>a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT</p> <p>b. Implement strategies to enhance motivation for change</p> <p>c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral</p> <p>d. Refer people with eating disorders for treatment of comorbid conditions where appropriate</p> <p>e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT</p>

Training modules to be included in the review process were identified by the advisory group. Emphasis was placed in the first instance on identifying (1) Australian training modules already in use within the health workforce broadly and (2) training modules that have been developed with the assistance of government funding, noting that government funded services or projects have a mandate to ensure that the materials they produce are contemporary and evidence-based. As this review did not include a comprehensive assessment of all training materials provided with each module, it was felt that the use of this second criterion was necessary.

The advisory group was asked to provide information about the range of training modules that their organisations offered, with a view to mapping this information against the competency framework. In addition, six organisations not represented in the advisory group were invited to provide the same details for any government-funded eating disorders training that they currently provide. These were:

- Eating Disorders Victoria
- Eating Disorders Queensland
- Eating Disorders Training and Evaluation Centre (WA)
- Centre for Clinical Interventions (WA)
- ACT Eating Disorders Program
- Royal Hobart Hospital, Paediatric Eating Disorders Service

Following a period of stakeholder consultation, one other training provider came forward and offered to have their training information included in the review. This was the Sydney Children's Hospital Network Eating Disorder Program.

Each of the organisations involved in the review provided its own assessment of how its training modules mapped to the competency framework. This was then compiled by the NEDC and analysed for national trends and identification of key gaps.

Wherever possible, a training module has been mapped against the 53 individual units of competency, to indicate the extent to which the module covers each core competency area. In some cases, sufficient information about a training module was not available to enable a full analysis of each of the specific units of competency. In these cases, the mapping exercise was limited to a broad interpretation of the seven core competency areas. Rather than rate the extent to which these modules have covered a given core competency area, they have been assessed as either 'Addressed' or 'Not addressed.'

The nature and scope of the review undertaken and the information provided means that there are important considerations to note in interpreting and using this information. Most significantly, this report represents the available information about training resources that

were mapped as part of this review exercise. The list does not necessarily comprise a comprehensive list of all resources available to health professionals in Australia.

In addition, the following are noted:

- Mapping of current trainings to core competencies is not in any way a judgement on the quality of the training content or delivery. Similarly, if a training module is not included in this review because it did not meet all inclusion criteria, this does not represent a judgement about quality.
- Almost all of the training modules that are included in this report were developed by specialist eating disorder organisations before the competency framework was developed, endorsed and circulated. A wide variety of training modules have been developed in response to identified needs over time. These include several modules which address topic areas highly relevant to work in eating disorders but which are more specialised than the competency framework is able to reflect. An analysis that indicates a training module does not address many of the competencies in the framework is not a judgement about its relevance to a particular topic or professional group.
- The appraisal of resources on the domain of core competencies may be less fitting for some types training, such as those focused on sharing personal narratives or brief sessions on very specific topics. The aim of the appraisal was to facilitate identification of those resources which might be judged as particularly comprehensive, evidence-based and in line with nationally consistent approaches. There are resources that were not selected for review or may not map well to the NEDC core competencies which nevertheless, anecdotally, have been reported as helpful or comprehensive.
- The mapping of content to NEDC core competencies was conducted at a single point in time based on evidence from the provider organisations. Education and training resources are continually being developed and made publicly available, therefore this resource set comprises those identified as available at one specific point in time only. There will be other useful resources that subsequently become available.

Further work is required to interpret the competencies for specific professions and for services working at different points in the treatment continuum, supporting implementation of the competencies with relevant professional training, decision tools and information resources. Each profession has its own needs and will require structures that support continual development, supervision and support to ensure ongoing implementation of core competencies and skills.

It should also be noted that there is no expectation going forward that all training modules should cover every competency area in the framework. In a workforce as large and diverse as the Australian healthcare workforce, operating across a spectrum of functional roles in the prevention, identification and management of eating disorders, there will always be a need for a range of training modules to address the different professional development needs of both professional and functional groups.

KEY FINDINGS

Descriptive statistics

Seventy-three training modules and related activities were included in this review. Their distribution across the eating disorder specialist organisations involved in the process is shown at Table 3.

Table 3: Number of training modules included in review, by provider

Provider	Number of training modules
InsideOut Institute for Eating Disorders	10
Victorian Centre of Excellence in Eating Disorders	13
Queensland Eating Disorders Service	20
SA State-wide Eating Disorders Service	1
WA Eating Disorders Outreach and Consultation Service	3
Australia and New Zealand Academy for Eating Disorders	10
Eating Disorders Queensland	1
Eating Disorders Victoria	6
Eating Disorders Training and Evaluation Centre	5
Centre for Clinical Interventions	2
Sydney Children's Hospital Network Eating Disorder Program	2
Centre for Clinical Interventions	2
Total	73

The reach of the various modules depended on both delivery method and delivery frequency. The eight modules included in the review that were delivered online had the potential to reach health professionals around the country at a time of their choosing.

The 63 face to face modules tended to be of longer duration, and therefore more likely to cover content in greater depth (though content depth is not necessarily reflected in the competency framework). This was particularly so for multi-day training modules, which were generally focused on training clinicians in a specific evidence-based modality.

Gap analysis – delivery and reach

In general, face to face modules were limited in their reach to one or two locations and only once or a few times a year, though some providers noted that they were able to deliver training in regional locations on request, generally with some added cost to cover transport of staff to present the training.

Six of the face-to-face modules also had a video-conference or tele-conference option, so that people who could not be physically present at the training could still engage in real time. Five of these modules were only available via video-conference to professionals in Western Australia, and one was available nationally.

NSW was the only state where face to face training was routinely delivered across all of its Local Health Districts. No face to face training was identified in the Northern Territory, Tasmania or the Australian Capital Territory.

While several providers offered training modules targeted at specific professional groups, such as dietitians or nurses, it was difficult to assess the extent to which existing training modules could reach health professionals who do not immediately self-identify as working within the eating disorders sector. By definition, a health professional who attends training in eating disorders is likely to be doing so because they have identified the need in their practice. One exception to this was training that was offered in partnership with tertiary institutions to future health professionals, though arrangements such as this will not reach workers already established in their profession.

Gap analysis – units of competency

Every one of the 53 specific units of competency was addressed in at least one training module that was nationally available.

Units of competency that were addressed in fewer than 25% (n=18) of the training modules were:

- 2h. Describe secondary prevention strategies;
- 4f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program.

Units of competency that were addressed by 25% or more but fewer than 50% of the training modules were:

- 1a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food;
- 2c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice;
- 2d. Assess for risk of suicide and self-harm;
- 2e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.);
- 2f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders;
- 2g. Discuss the risk of relapse and the importance of recovery support;
- 2i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support;
- 3e. Identify when the person should be referred directly to an eating disorders specialist service;

- 3g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder;
- 4b. Ability to encourage patients to allow their family to share information with the treatment team;
- 4c. Provide appropriate follow-up for people referred for treatment;
- 4e. Ability to manage a person with an eating disorder who is waiting for treatment;
- 4g. Work collaboratively with and support family members and identified support people;
- 4h. Explain the range of education and support needs a person with an eating disorder and their family/support people may require;
- 4i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services;
- 4j. Recognise indications of relapse and support people to re-access treatment services;
- 5d. Monitor progress and measure outcomes (relevant to own professional discipline);
- 5e. Support transfer between services and service providers;
- 5f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team;
- 6a. Describe the standards for safe treatment (National Standards Schema);
- 6b. Describe the medical and nutritional care that may be required to treat eating disorders;
- 6e. Discuss issues in the care of adults with long term eating disorders;
- 6f. Knowledge of specific evidence based psychological and pharmacological treatments;
- 6g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders;
- 6h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration;
- 6i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary;
- 7a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT;
- 7b. Implement strategies to enhance motivation for change;
- 7c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral;
- 7d. Refer people with eating disorders for treatment of comorbid conditions where appropriate;

- 7e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT.

These units of competency are likely to have had less reach across the workforce that has received some training in eating disorders, based on the lower rates of inclusion of these competencies in the training modules in this review.

The above data should be read with caution, however, in light of the fact that not all providers were able to produce information about their training modules that was sufficiently granular to be included in this part of the analysis. Nor was data consistently available to indicate how many workers had completed a given training module over time.

Further, the lower rates of coverage of the units in competency areas 6 and 7 may reflect the fact that these areas of competency are required by a much smaller tranche of the workforce (shared care professionals, treatment professionals and recovery support professionals) than the competencies covered in areas 1-4. As such, the lower rate of inclusion of these units of competency within the training modules included in this review does not necessarily signify low coverage for the target audience.

There were no units of competency that were covered in 75% or more of the training modules. The most commonly included unit of competency was 3a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders, which was included in 68% of the training modules (n=48).

Professional needs and training match

It was clear that the providers included in this review had developed training in response to the specific needs of different professional groups, with a breadth of training offerings having been developed. Training modules targeted the following specific professions:

- General Practitioners
- Psychologists and/or mental health professionals
- Dietitians
- Nurses
- Occupational Therapists
- Psychiatrists
- Physicians in hospital settings
- Emergency Medicine practitioners
- Dental practitioners
- Exercise professionals
- Maternal health practitioners
- Diabetes educators
- Drug and alcohol workers
- Students in a range of different health courses at university (the future workforce).

In addition, several courses were identified which addressed eating disorders in specific practice contexts such as primary care, community settings or inpatient care, as well as paediatric or adult-focused settings.

Some providers offered a range of introductory and advanced training modules, allowing for scaffolded learning. This included introductory and advanced training modules that dealt with general management of eating disorders, as well as introductory and advanced courses in specific therapeutic modalities.

Promising practice – collaboration and modularisation

In the current review, some training providers specified pre-requisites for some of the training modules that they offer, so that participants may come to their training with a common level of assumed knowledge. This is one example of how multiple training modules may be combined to make up the right training mix for a professional or functional group.

It is worth noting that several providers involved in the review pointed to others as key sources of training modules that they either recommended to or purchased for practitioners in their jurisdiction. This was particularly true of online training modules, which some providers use as a pre-requisite before a practitioner attends their face to face training.

RECOMMENDATIONS

Discussion

As this report has highlighted, there are current and pressing needs for workforce development to improve eating disorder competency across the Australian health workforce. Eating disorders are complex, serious and affect 1 million Australians, yet 70% of Australians currently do not receive timely access to treatment. This can be understood to be at least in part due to the fact that so few health professionals are currently adequately skilled to identify and respond to eating disorders within their professional and practice context.

Any practitioner in the healthcare system may have a role in the eating disorders continuum of care. Particular workforce challenges relating to eating disorders include the need for a treatment and support system that simultaneously operates across a multidisciplinary and a stepped care model, so that people may receive intervention across medical, nutritional, psychological and functional domains and that their support intensity can vary according to the trajectory of their illness. Health professionals may belong to a discipline which spans multiple functional groups across the continuum of care, may work in a generalist role that requires them to fulfil more than one disciplinary area, or may work in a highly specialised area that, while not focused on eating disorders, nonetheless involves working with people who have an eating disorder as part of their clinical presentation. Developing the skills of a workforce of this complexity in the face of a group of complex disorders requires multiple, flexible approaches to training in addition to a range of other professional tools and workforce initiatives that are outside the scope of this review.

In addition, the practice context for Australia presents further unique challenges associated with geography, population distribution and the federal model. Funding arrangements may restrict the ability of a training provider to deliver an established training package in another jurisdiction, or the onus may be placed on individual workers to travel to another state if they wish to access a certain training module. Outside the major cities, access to training opportunities can be scarce – within this review, NSW was the only state that had a systematic approach to delivering eating disorders training in all Local Health Districts.

To ensure access to eating disorder treatment in all communities, especially regional and rural communities where specialist and tertiary services may not be available, it is essential that providers of general primary and secondary health care are equipped and supported to contribute to diagnosis and treatment for people with eating disorders.

This review has identified the following strengths with regards to the current provision of professional development training in eating disorders in Australia:

- There is coverage at a nationally available level (online) of all of the 53 units of competency for the safe and effective identification of and response to eating disorders;
- There is a range of training modules currently in delivery that address the spectrum of early identification through to advanced and specialised treatment and a range of different health disciplines;
- There is a combination of online and face to face training available, to meet different needs in terms of learning style, travel requirements, depth of content, etc;
- There is evidence of collaboration between different training providers in recommending each other's training offerings as part of a combined approach.

According to the findings of this review, the following gaps remain:

- Systematic coverage of face to face training outside major capitals in most states and territories;
- Face to face training in the Northern Territory, Tasmania and the Australian Capital Territory, with a very limited amount available in South Australia also;
- Comprehensive coverage of certain units of competency, listed in the key findings of this report;
- Approaches to reaching health professionals who do not immediately self-identify as working within the eating disorders sector;
- At a national level, and particularly in rural and remote areas, there remain few health professionals who are trained and able to provide treatment for eating disorders within a multi-disciplinary approach.

Vision and goals

In seeking to address these needs and gaps, the NEDC is guided by the following vision:

That services and supports for people with eating disorders in Australia are informed by a comprehensive suite of professional development training that reflects evidence-based best practice and excellence in safe and effective responses to eating disorders.

In contributing to this comprehensive suite, each training module will have rigorous quality assurance and evaluation mechanisms and will inform service development to embed practice change.

This vision is underpinned by the following goals, which have been informed by the findings of this report.

1. Improve access to discipline relevant introductory training in eating disorders awareness, identification, screening and response for the wide range of health and other professionals whose roles are located at the early identification and initial response sections of the continuum of care, using the range of existing training modules that are available around Australia which address these specific professional development needs.
2. Improve access to discipline relevant training in advanced or specialised areas (e.g. specific therapeutic modalities) for the range of health professionals involved in shared care, treatment and recovery services using the range of existing training modules that are available from eating disorder training providers and state based services around Australia which address these specific professional development needs to the greatest extent possible before any new modules are developed.
3. Address the availability of workers in rural and remote areas with competency in the identification, screening, assessment and management of eating disorders through piloting a targeted strategy to link existing rural and remote workers with training in eating disorders that is relevant to their professional discipline and practice context.
4. Address the need for eating disorders awareness, identification, screening and response training to reach health professionals who may not self-identify as working in the eating disorders sector through collaboration with relevant professional bodies and colleges as well as peak bodies for related key health priority areas.
5. In all efforts that seek to connect professionals with training, promote training that presents up-to-date, evidence-based information about eating disorders, their identification and treatment.
6. In all efforts that seek to connect professionals with training, work to ensure that the right training reaches the right professionals, matching content to professional role and skill level.

Actions

The following recommended actions are intended to address the above goals:

1. That a dynamic database be developed which has the following features:
 - Presents the training details contained within this report in an easy-to-access, publicly-available format
 - Is searchable
 - Is able to be updated on a biannual basis, as new training modules are developed or existing modules reviewed

It is proposed that the NEDC will host and coordinate this database, and noted that there will be an administrative burden for any training providers who wish to update or submit new training information. This database, options for its delivery and proposed models of administration will be scoped by June 2019.

This action addresses goals 1, 2, 3, 5 and 6.

2. In recognition that (a) there is very limited face-to-face training identified in the Northern Territory, Tasmania, South Australia or the Australian Capital Territory, (b) there are nationally available training packages identified in this review, and (c) the need to increase the eating disorders capability of the rural and remote health workforce is a key priority, it is recommended that an in-reach project to increase uptake of existing training modules be scoped and piloted. This project would be coordinated by the NEDC and evaluated by June 2019.

This action addresses goals 1, 2, 3 and 6.

3. That ongoing efforts are made to reach professional groups who may not self-identify as working in the eating disorders sector, so that they may take up professional development training targeted at Early Identifiers and First Responders, including utilising existing training resources and consultation with key tertiary services. This work to be driven through ongoing engagement with peak professional bodies and professional colleges, as well as a targeted communications strategy to increase acceptance of the key message that all health professionals have a role to play in the identification of and response to eating disorders.

This action addresses goals 4 and 6.

PART TWO

This section of the report sets out the detailed mapping information for each training module that has been reviewed for this report. Beginning on the next page, each training module is set out according to the following format:

- Overview of offering – module name, provider, delivery method, delivery frequency, cost, geographic availability, duration, target audience.
- Summary table – the extent to which each of the core competency areas is covered or addressed in the training module.
- Detailed tables – whether or not each of the units of competency underpinning a core competency area has been covered in the training module.

How to use this document

To find a training module that addresses either your personal professional development needs, use the following six steps:

1. Find your position(s) on the eating disorders continuum of care. Read the descriptions on page 14 to assist you.
2. Identify the core competency areas that are required for you in your role. Consider whether you already meet some of these, or which areas you specifically need training in.
3. Use the search function in your page viewer to locate training modules according to your specific preferences, such as geographic location, profession, or delivery method (face to face, online, videoconference).
4. Check the summary table to see if the competency areas you are trying to cover are covered by that training. If you need more information about the units of competency included in the training, look at the detailed tables on the following pages.
5. Consider whether your training needs can be met by a single training module, or whether you need to pick and choose from a selection of the training modules included in this document.
6. Contact the training provider for more information about the training module and to register.

If you are using this document to find training that meets the professional development needs of your team of workforce, follow a similar process to the one outlined above. Bear in mind that, if you are planning to train an entire team or workforce, it is likely that you will need to combine different training modules to meet the diverse learning needs of different professionals at different points on the continuum of care. Develop a plan for embedding learning and practice change after your team has completed the training.

Training offered by the InsideOut Institute

Name of training	The Management of Eating Disorders in the Community
Name of provider	InsideOut Institute
Delivery method	Online
Delivery frequency	Always available
Cost	\$39
Geographic availability	Australia-wide
Duration/CPD hours	1 hour
Target audience	Clinicians (unspecified)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Mostly covered	Mostly covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	No
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	The Essentials: Training Clinicians in Eating Disorders
Name of provider	InsideOut Institute
Delivery method	Online
Delivery frequency	Always available
Cost	\$280 for individuals, bulk purchase options may be available
Geographic availability	Australia-wide
Duration/CPD hours	17.5 hours
Target audience	Clinicians (unspecified)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Fully covered	Fully covered	Fully covered	Fully covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Fully covered	Fully covered	Fully covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Flagged but not detailed

Name of training	Family Based Treatment for Children and Adolescents with Anorexia Nervosa: The Basics
Name of provider	InsideOut Institute
Delivery method	Online
Delivery frequency	Always available
Cost	\$39
Geographic availability	Australia-wide
Duration/CPD hours	1 hour
Target audience	Clinicians (unspecified)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Minimally covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	No
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	f. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	CBT for Eating Disorders: A practice based introduction
Name of provider	InsideOut Institute
Delivery method	Online
Delivery frequency	Always available
Cost	\$69
Geographic availability	Australia-wide
Duration/CPD hours	1 hour
Target audience	Psychologists, other clinicians with base CBT skills

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Not covered	Not covered	Not covered	Not covered	Not covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Specific modality: CBT-E	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	No
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	No
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	No
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes, CBT-E

Name of training	Eating Disorders Inpatient Management: Children, Adolescents and Adults
Name of provider	InsideOut Institute
Delivery method	Online
Delivery frequency	Always available
Cost	First module free, second or third module \$120, full package \$180
Geographic availability	Australia-wide
Duration/CPD hours	1 hour + 2 hours + 2 hours
Target audience	Clinicians (unspecified)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Fully covered	Fully covered	Fully covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Flagged, not detailed

Name of training	The Foundations of Eating Disorders
Name of provider	InsideOut Institute
Delivery method	Online
Delivery frequency	Always available
Cost	Free
Geographic availability	Australia-wide
Duration/CPD hours	1 hour
Target audience	Clinicians (unspecified)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not covered	Not covered	Not covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	No
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Everyone has a role
Name of provider	InsideOut Institute
Delivery method	Face to face
Delivery frequency	Ongoing
Cost	Nil
Geographic availability	NSW
Duration/CPD hours	1-2 hours
Target audience	All health professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Inpatient management
Name of provider	InsideOut Institute
Delivery method	Face to Face
Delivery frequency	
Cost	By nomination
Geographic availability	Across all NSW Local Health Districts
Duration/CPD hours	8 hours
Target audience	Clinicians (unspecified)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	No specific modality	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes, not specified

Name of training	Family Based Treatment for Children and Adolescents
Name of provider	InsideOut Institute
Delivery method	Face to face
Delivery frequency	
Cost	By nomination
Geographic availability	Across all NSW Local Health Districts
Duration/CPD hours	16 hours
Target audience	Clinicians (unspecified)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Specific modality: FBT	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes

Name of training	Cognitive Behavioural Therapy for Eating Disorders
Name of provider	InsideOut Institute
Delivery method	Face to face
Delivery frequency	
Cost	By nomination
Geographic availability	Across all NSW Local Health Districts
Duration/CPD hours	16 hours
Target audience	Clinicians (unspecified)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Fully covered	Fully covered	Fully covered	Fully covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Specific modality: CBT-E	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Specific modality: CBT-E

Training offered by the Centre for Excellence in Eating Disorders (CEED)

Name of training	Motivational Interviewing in Eating Disorders
Name of provider	CEED
Delivery method	Face to Face
Delivery frequency	Once per year
Cost	2018: \$75 for mental health clinicians, \$185 for others; 2019: \$95 for mental health clinicians, \$205 for others
Geographic availability	Melbourne
Duration/CPD hours	8 hours
Target audience	Treatment professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	This course has a pre-requisite element that assumes that these competencies have been covered				
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role					
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not covered	Not covered	Not covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Not covered	Not covered	Not covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Pre-requisite
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	
	d. Ability to describe the range of physical issues related to eating disorders	
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Pre-requisite
	b. Knowledge of warning signs and red flags	
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	
	d. Assess for risk of suicide and self-harm	
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	
	g. Discuss the risk of relapse and the importance of recovery support	
	h. Describe secondary prevention strategies	
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Specialist Supportive Clinical Management (SSCM)
Name of provider	CEED
Delivery method	Face to Face
Delivery frequency	Once per year
Cost	\$95 for mental health clinicians
Geographic availability	Melbourne
Duration/CPD hours	8 hours
Target audience	Mental health clinicians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	This course has a pre-requisite element that assumes that these competencies have been covered				
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role					
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Specific modality: SSCM	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Pre-requisite
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	
	d. Ability to describe the range of physical issues related to eating disorders	
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Pre-requisite
	b. Knowledge of warning signs and red flags	
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	
	d. Assess for risk of suicide and self-harm	
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	
	g. Discuss the risk of relapse and the importance of recovery support	
	h. Describe secondary prevention strategies	
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Pre-requisite
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Pre-requisite
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Specific modality: SSCM

Name of training	Eating Disorders in General Practice
Name of provider	CEED
Delivery method	Face to Face
Delivery frequency	Once per year or on request
Cost	Free
Geographic availability	Victoria
Duration/CPD hours	2 hours
Target audience	General Practitioners

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Management of Eating Disorders on Paediatric Wards
Name of provider	CEED
Delivery method	Face to Face
Delivery frequency	Once per year and on request
Cost	Free
Geographic availability	Victoria
Duration/CPD hours	4 hours
Target audience	Nurses

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	No
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Master of Psychological Medicine (MPM)
Name of provider	CEED
Delivery method	Face to face
Delivery frequency	One per year
Cost	Free (included within broader Masters course)
Geographic availability	Melbourne
Duration/CPD hours	3 hours
Target audience	Trainee psychiatrists

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Child and Adolescent Psychiatry Course (CAPC)
Name of provider	CEED
Delivery method	Face to face or via webinar
Delivery frequency	One per year
Cost	Free (included within broader Masters course)
Geographic availability	Victoria
Duration/CPD hours	8 hours (4 x 2 sessions)
Target audience	Child and Adolescent Psychiatry registrars

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	N/A
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Developmental Psychiatry Course (DPC)
Name of provider	CEED
Delivery method	Face to face
Delivery frequency	Once per year
Cost	Free (included within broader course)
Geographic availability	Melbourne
Duration/CPD hours	3 hours
Target audience	New entrant mental health clinicians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not covered	Not covered	Not covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Collaborative Carer Skills Workshop (CCSW)
Name of provider	CEED
Delivery method	Face to face
Delivery frequency	Once per year
Cost	\$180
Geographic availability	Melbourne
Duration/CPD hours	16 hours
Target audience	Eating disorder treatment clinicians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	This course has a pre-requisite element that assumes that these competencies have been covered.				
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role					
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments					
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role	Not required	Not required	Not covered	Not covered	CCSW
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Not covered	Not covered	Not covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Specific modality: CCSW	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Prerequisite
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	
	d. Ability to describe the range of physical issues related to eating disorders	
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Prerequisite
	b. Knowledge of warning signs and red flags	
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	
	d. Assess for risk of suicide and self-harm	
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	
	g. Discuss the risk of relapse and the importance of recovery support	
	h. Describe secondary prevention strategies	
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Prerequisite
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	
	e. Identify when the person should be referred directly to an eating disorders specialist service	
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Specific modality: CCSW

Name of training	Family Based Treatment (FBT)
Name of provider	CEED
Delivery method	Face to face
Delivery frequency	2 times per year
Cost	2018: \$150 for mental health clinicians, \$375 for others; 2019: \$170 for mental health clinicians, \$395 for others
Geographic availability	Melbourne; regional Victoria by request
Duration/CPD hours	16 hours
Target audience	Mental health clinicians, including psychiatrists and psych registrars

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	This course has a pre-requisite element that assumes that these competencies have been covered.				
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role					
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered including some pre-requisites.				
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Specific modality: FBT	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Prerequisite
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	
	d. Ability to describe the range of physical issues related to eating disorders	
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Prerequisite
	b. Knowledge of warning signs and red flags	
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	
	d. Assess for risk of suicide and self-harm	
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	
	g. Discuss the risk of relapse and the importance of recovery support	
	h. Describe secondary prevention strategies	
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Pre-req
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Pre-req
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	N/A
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes

Name of training	Cognitive Behaviour Therapy – Guided Self Help (CBT-GSH)
Name of provider	CEED
Delivery method	Face to face
Delivery frequency	2 times per year, more on request
Cost	2018: \$75 2019: \$95 for mental health clinicians, \$205 for others
Geographic availability	Melbourne; regional Victoria on request
Duration/CPD hours	4 hours
Target audience	Mental health clinicians and shared care providers

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Specific modality: CBT-GSH	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	No
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	No
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Specific modality: CBT-GSH

Name of training	Multi-Family Therapy – Anorexia Nervosa (MFT-AN) for adolescents
Name of provider	CEED
Delivery method	Face to face
Delivery frequency	Once per year
Cost	\$850
Geographic availability	Melbourne
Duration/CPD hours	32 hours
Target audience	Eating disorder treatment professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	This course has a pre-requisite element that assumes that these competencies have been covered.				
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role					
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Specific modality: MFT	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Prerequisite
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	
	d. Ability to describe the range of physical issues related to eating disorders	
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Prerequisite
	b. Knowledge of warning signs and red flags	
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	
	d. Assess for risk of suicide and self-harm	
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	
	g. Discuss the risk of relapse and the importance of recovery support	
	h. Describe secondary prevention strategies	
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and supports a person with an eating disorder and their family/support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	N/A
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Specific modality: MFT

Name of training	Cognitive Behaviour Therapy for Eating Disorders (CBT-E)
Name of provider	CEED
Delivery method	Face to face
Delivery frequency	Once per year
Cost	2018: \$150 for mental health clinicians, \$375 for others; 2019: \$170 for mental health clinicians, \$395 for others
Geographic availability	Melbourne; regional Victoria by request
Duration/CPD hours	16 hours
Target audience	Mental health clinicians, including psychiatrists and psych registrars

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	This course has a pre-requisite element that assumes that these competencies have been covered				
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Specific modality: CBT-E	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Prerequisite
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	
	d. Ability to describe the range of physical issues related to eating disorders	
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Specific modality: CBT-E

Name of training	Working with Body Image with Young People with Eating Disorders
Name of provider	CEED
Delivery method	Face to face
Delivery frequency	Once per year
Cost	2018: \$75 for mental health clinicians, \$185 for others 2019: \$95 for mental health clinicians, \$205 for others
Geographic availability	Melbourne
Duration/CPD hours	8 hours
Target audience	Mental health clinicians and other eating disorder treatment professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	This course has a pre-requisite element that assumes that these competencies have been covered				
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role					
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Prerequisite
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	
	d. Ability to describe the range of physical issues related to eating disorders	
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Prerequisite
	b. Knowledge of warning signs and red flags	
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	
	d. Assess for risk of suicide and self-harm	
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	
	g. Discuss the risk of relapse and the importance of recovery support	
	h. Describe secondary prevention strategies	
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role (a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals) (g required of recovery support professionals)	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
6. Knowledge of current clinical practices and standards in the treatment of eating disorders (a-e required of shared care management professionals and eating disorders treatment professionals) (f-i required of eating disorders treatment professionals)	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No



Other offerings – bespoke training

CED also offers a series of other training packages that can be provided on request, and delivered in a bespoke format for the requesting organisation. Examples include:

- Nutrition in Eating Disorders for Community Mental Health Professionals
- Community Dietitian Role in Eating Disorders
- University Undergraduate programs – Introduction to Eating Disorders, Assessment, and Referral Pathways

Training offered by the Queensland Eating Disorders Service (QuEDS)

Name of training	Working with clients affected by an Eating Disorder in an inpatient setting
Name of provider	QuEDS
Delivery method	Face to Face
Delivery frequency	11 times per year
Cost	Free
Geographic availability	Brisbane metro, and able to be delivered in regional centres
Duration/CPD hours	8 hours
Target audience	Inpatient health professionals from public and private facilities

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery				Addressed	
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role				Addressed	
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments				Addressed	
4. Ability to work with the person and their family to support personal recovery	Not required			Addressed	
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role	Not required	Not required		Addressed	
6. Knowledge of current clinical practices and standards in the treatment of eating disorders				Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Addressed	Not required

Name of training	Eating Disorders Prevention and Awareness
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	Once per year
Cost	Free
Geographic availability	Brisbane metro
Duration/CPD hours	1.5 hours
Target audience	University Student mentors

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Addressed	Addressed			
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Addressed	Addressed			
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Addressed	Addressed			
4. Ability to work with the person and their family to support personal recovery	Not required	Addressed			
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required			
6. Knowledge of current clinical practices and standards in the treatment of eating disorders					
7. Ability to deliver an evidence-based treatment for eating disorders		Not required			Not required

Name of training	CBT for Eating Disorders
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	6 times per year
Cost	Free
Geographic availability	Brisbane metro, and able to be delivered in regional centres
Duration/CPD hours	16 hours
Target audience	Community clinicians, Clinical psychologists and interns

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Fully covered	Fully covered	Fully covered	Fully covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Specific modality: CBT-E	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes - adult focus
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role (a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals) (g required of recovery support professionals)	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
6. Knowledge of current clinical practices and standards in the treatment of eating disorders (a-e required of shared care management professionals and eating disorders treatment professionals) (f-i required of eating disorders treatment professionals)	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes

Name of training	Dietetic Education in Eating Disorders
Name of provider	QuEDS
Delivery method	Face to Face
Delivery frequency	3 times per year
Cost	Free
Geographic availability	Brisbane metro
Duration/CPD hours	1-8 hours
Target audience	Dietitians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Fully covered	Fully covered	Fully covered	Fully covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Fully covered	Fully covered	Fully covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Assumed knowledge
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Medical Treatment of Eating Disorders
Name of provider	QuEDS
Delivery method	
Delivery frequency	6 times per year
Cost	
Geographic availability	
Duration/CPD hours	30 minutes – 2 hours
Target audience	Psychiatric registrars

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Addressed	Addressed	Addressed	Addressed	Addressed
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Addressed	Addressed	Addressed	Addressed	Addressed
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Addressed	Addressed	Addressed	Addressed	Addressed
4. Ability to work with the person and their family to support personal recovery	Not required	Addressed	Addressed	Addressed	Addressed
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Addressed	Addressed	Addressed
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Addressed	Addressed	Addressed
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not addressed	Not required	

Name of training	Mental Health Practitioner Network Breakfast Meetings
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	4 times per year
Cost	
Geographic availability	Brisbane metro
Duration/CPD hours	90 minutes
Target audience	Any health professional or student interested in working with people affected by an eating disorder

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Addressed	Addressed	Addressed	Addressed	Addressed
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role					
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments					
4. Ability to work with the person and their family to support personal recovery	Not required				
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required			
6. Knowledge of current clinical practices and standards in the treatment of eating disorders					
7. Ability to deliver an evidence-based treatment for eating disorders		Not required			Not required

Name of training	Family Inclusive Treatment for Adults with Eating Disorders (FIT-ED) training
Name of provider	QuEDS
Delivery method	Face to face and videoconferencing
Delivery frequency	Once per year
Cost	Free
Geographic availability	Brisbane and videoconferencing for Queensland participants
Duration/CPD hours	6 hours
Target audience	Practitioners in public and private healthcare

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	No
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Working with clients affected by an eating disorder in the community setting
Name of provider	QuEDS
Delivery method	Face to Face
Delivery frequency	4 times per year
Cost	
Geographic availability	
Duration/CPD hours	4 hours
Target audience	Community clinicians and case managers

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Fully covered	Fully covered	Fully covered	Fully covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	No specified modality	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	No
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	No
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes - Adult focus
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes, no modality specified

Name of training	Working with a client affected by an eating disorder in primary care
Name of provider	QuEDS
Delivery method	Face to Face
Delivery frequency	4 times per year
Cost	
Geographic availability	
Duration/CPD hours	2 hours
Target audience	General Practitioners

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Not covered	Not covered	Not covered	Not covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not covered	Not covered	Not covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Not covered	Not covered	Not covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes – adult focus
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Guest lectures in under-graduate health practitioner courses
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	1-2 times per year per profession
Cost	Free (within course fees)
Geographic availability	University campus
Duration/CPD hours	1 hour
Target audience	Students in Nursing, Psychology, Dietetics, Occupational Therapy and Social Work

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Addressed	Addressed	Addressed	Addressed	Addressed
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Addressed	Addressed	Addressed	Addressed	Addressed
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Addressed	Addressed	Addressed	Addressed	Addressed
4. Ability to work with the person and their family to support personal recovery	Not required				
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required			
6. Knowledge of current clinical practices and standards in the treatment of eating disorders					
7. Ability to deliver an evidence-based treatment for eating disorders		Not required			Not required

Name of training	How to identify and refer a client suspected of having an eating disorder
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	Once per year
Cost	Free (within course fees)
Geographic availability	Delivered at UQ Dental School
Duration/CPD hours	2 hours
Target audience	Oral health practitioners and students

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Not covered	Not covered	Not covered	Not covered	Not covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Not covered	Not covered	Not covered	Not covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not covered	Not covered	Not covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Not covered	Not covered	Not covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	No
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Providing nursing care to the client affected by an eating disorder
Name of provider	QuEDS
Delivery method	Face to Face
Delivery frequency	
Cost	
Geographic availability	Delivered in five different services
Duration/CPD hours	1-2 hours
Target audience	Students in nursing graduate programs

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Not covered	Not covered	Not covered	Not covered	Not covered
4. Ability to work with the person and their family to support personal recovery	Not required	Not covered	Not covered	Not covered	Not covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not covered	Not covered	Not covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Not covered	Not covered	Not covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	No
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	QuEDS Annual Forum
Name of provider	QuEDS
Delivery method	Face to face and teleconference
Delivery frequency	Once per year
Cost	Free
Geographic availability	Delivered in Brisbane, accessible Australia-wide
Duration/CPD hours	6 hours
Target audience	Health professionals and carers

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Addressed	Addressed	Addressed	Addressed	Addressed
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role					
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments					
4. Ability to work with the person and their family to support personal recovery	Not required				
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required			
6. Knowledge of current clinical practices and standards in the treatment of eating disorders					
7. Ability to deliver an evidence-based treatment for eating disorders		Not required			Not required

Name of training	Best guidelines for providing emergency care to someone with an eating disorder
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	Once per year
Cost	
Geographic availability	Brisbane metro
Duration/CPD hours	2 hours
Target audience	Department of Emergency Medicine (DEM) staff

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their family/support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Diabetes and eating disorders
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	Once per year
Cost	
Geographic availability	Brisbane metro
Duration/CPD hours	2 hours
Target audience	Nurses, Medical Professionals, Dietitians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Addressed	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Addressed	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Addressed	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Not addressed	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not covered	Not covered	Not covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Perinatal health and eating disorders
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	Once per year
Cost	
Geographic availability	Brisbane metro
Duration/CPD hours	2 hours
Target audience	Midwives and other health professionals involved in maternity care

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Fully covered	Fully covered	Fully covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Eating Disorders and Drug and Alcohol
Name of provider	QuEDS
Delivery method	
Delivery frequency	Once
Cost	
Geographic availability	
Duration/CPD hours	1 hour
Target audience	Workers in the community supporting people with AOD dependencies

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Not covered	Not covered	Not covered	Not covered	Not covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	No
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Single Session Family Consultation for Eating Disorders training
Name of provider	QuEDS
Delivery method	Face to face and videoconferencing
Delivery frequency	Once per year
Cost	Free
Geographic availability	Brisbane and videoconferencing for Queensland participants
Duration/CPD hours	3 hours
Target audience	Treatment professionals in public and private healthcare

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	No
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
<p>7. Ability to deliver an evidence-based treatment for eating disorders</p> <p>(required of eating disorder treatment professionals only)</p> <p>(e required of psychologists and mental health service providers only)</p>	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Guided Self Help for eating disorders
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	
Cost	
Geographic availability	
Duration/CPD hours	16 hours
Target audience	

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Fully covered	Fully covered	Fully covered	Fully covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Fully covered	Fully covered	Fully covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Specific modality: CBT-GSH	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes - Adult focus
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	Yes
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Specific modality: CBT-GSH

Name of training	Eating disorders education for Occupational Therapists
Name of provider	QuEDS
Delivery method	Face to face
Delivery frequency	Once per year
Cost	
Geographic availability	Brisbane metro
Duration/CPD hours	2 hours
Target audience	Occupational Therapists

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes – adult focus
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Training offered by the WA Eating Disorders Outreach & Consultation Service (WAEDOCS)

Name of training	Eating Disorder Essentials for Nurses
Name of provider	WAEDOCS
Delivery method	Face to face
Delivery frequency	Approximately twice yearly
Cost to participants	Free for Northern Metro and Sir Charles Gairdner Hospital staff. \$88 to others
Geographic availability	Perth Metro area
Duration/CPD hours	6 hours
Target audience	Nurses (medical and mental health)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	No
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes

Name of training	Psychology Study Day
Name of provider	WAEDOCS
Delivery method	Face to face
Delivery frequency	Approximately yearly
Cost to participants	Free for North Metro and Sir Charles Gairdner Hospital staff. \$132 to others
Geographic availability	Perth Metro area
Duration/CPD hours	6 hours
Target audience	Psychologists

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Adolescents and adults
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Dietetics Study Day
Name of provider	WAEDOCS
Delivery method	Face to face
Delivery frequency	Approximately twice yearly
Cost to participants	Free for North Metro and Sir Charles Gairdner Hospital staff. \$99 to others
Geographic availability	Perth Metro area
Duration/CPD hours	6 hours
Target audience	Dietitians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Adolescents and adults
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role (a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals) (g required of recovery support professionals)	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
6. Knowledge of current clinical practices and standards in the treatment of eating disorders (a-e required of shared care management professionals and eating disorders treatment professionals) (f-i required of eating disorders treatment professionals)	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Training offered by the SA State-wide Eating Disorders Service (SEDS)

Name of training	Brief Introduction to Eating Disorders and treatment services in SA
Name of provider	SEDS
Delivery method	Face to face
Delivery frequency	Ad hoc, upon request
Cost	Free
Geographic availability	South Australia
Duration/CPD hours	1 hour
Target audience	Clinicians (unspecified)

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Training offered by the Australia and New Zealand Academy for Eating Disorders (ANZAED)

Name of training	Maudsley Model of Family Based Treatment for Anorexia Nervosa
Name of provider	ANZAED
Delivery method	Face to face
Delivery frequency	Multiple times per year
Cost	
Geographic availability	Locations around Australia and New Zealand
Duration/CPD hours	8 hours
Target audience	Eating disorder treatment clinicians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery				Addressed	
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role				Addressed	
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments				Addressed	
4. Ability to work with the person and their family to support personal recovery	Not required			Addressed	
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required		Not addressed	
6. Knowledge of current clinical practices and standards in the treatment of eating disorders				Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Specific modality: FBT	Not required

Name of training	Advanced workshop – Family Based Treatment for Anorexia Nervosa
Name of provider	ANZAED
Delivery method	Face to face
Delivery frequency	Multiple times per year
Cost	
Geographic availability	Locations around Australia and New Zealand
Duration/CPD hours	8 hours
Target audience	Eating disorder treatment clinicians

Summary of competencies covered in this training					
Core competency	Early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery				Addressed	
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role				Addressed	
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments				Addressed	
4. Ability to work with the person and their family to support personal recovery	Not required			Addressed	
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required		Not addressed	
6. Knowledge of current clinical practices and standards in the treatment of eating disorders				Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Specific modality: FBT-AN	Not required

Name of training	Medical Management of Eating Disorders
Name of provider	ANZAED
Delivery method	Face to face
Delivery frequency	
Cost	
Geographic availability	
Duration/CPD hours	8 hours
Target audience	Medical professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery			Addressed	Addressed	
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role			Addressed	Addressed	
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments			Addressed	Addressed	
4. Ability to work with the person and their family to support personal recovery	Not required		Addressed	Addressed	
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Addressed	Addressed	
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Addressed	Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Addressed (unspecified)	Not required

Name of training	Psychological treatment of eating disorders: Advanced skills and clinical decision making
Name of provider	ANZAED
Delivery method	Face to face
Delivery frequency	
Cost	
Geographic availability	
Duration/CPD hours	8 hours
Target audience	Psychologists

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery			Addressed	Addressed	
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role			Addressed	Addressed	
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments			Addressed	Addressed	
4. Ability to work with the person and their family to support personal recovery	Not required		Addressed	Addressed	
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not addressed	Not addressed	
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Addressed	Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Not addressed	Not required

Name of training	Eating Disorders Clinical Workshop for Dietitians (Medical and Nutrition)
Name of provider	ANZAED
Delivery method	Face to face
Delivery frequency	
Cost	
Geographic availability	
Duration/CPD hours	8 hours
Target audience	Dietitians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery			Addressed	Addressed	
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role			Addressed	Addressed	
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments			Addressed	Addressed	
4. Ability to work with the person and their family to support personal recovery	Not required		Addressed	Addressed	
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not addressed	Not addressed	
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Addressed	Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Addressed (unspecified)	Not required

Name of training	Single Session Interventions
Name of provider	ANZAED
Delivery method	Face to face
Delivery frequency	
Cost	
Geographic availability	
Duration/CPD hours	8 hours
Target audience	Eating disorders treatment clinicians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery				Addressed	
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role				Addressed	
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments				Addressed	
4. Ability to work with the person and their family to support personal recovery	Not required			Addressed	
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required		Not addressed	
6. Knowledge of current clinical practices and standards in the treatment of eating disorders				Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required		Not addressed	Not required

Name of training	Annual Conference, including clinical training days and post conference workshops
Name of provider	ANZAED
Delivery method	Face to face
Delivery frequency	One per year
Cost	
Geographic availability	Rotating location
Duration/CPD hours	Conference – 2 days, pre and post workshops – up to 3 days
Target audience	Health professionals interested in eating disorders, from entry level to experienced clinicians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery		Addressed	Addressed	Addressed	Addressed
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role		Addressed	Addressed	Addressed	Addressed
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments		Addressed	Addressed	Addressed	Addressed
4. Ability to work with the person and their family to support personal recovery	Not required	Addressed	Addressed	Addressed	Addressed
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Addressed	Addressed	Addressed
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Addressed	Addressed	Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Addressed (various)	Not required	

Name of training	Autumn workshop series
Name of provider	ANZAED
Delivery method	Face to face
Delivery frequency	Once per year
Cost	
Geographic availability	Rotating location
Duration/CPD hours	
Target audience	

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery		Addressed	Addressed	Addressed	Addressed
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role		Addressed	Addressed	Addressed	Addressed
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments		Addressed	Addressed	Addressed	Addressed
4. Ability to work with the person and their family to support personal recovery	Not required	Addressed	Addressed	Addressed	Addressed
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Addressed	Addressed	Addressed
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Addressed	Addressed	Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Addressed (various)	Not required	

Name of training	Binge Eating Disorder
Name of provider	ANZAED
Delivery method	Online
Delivery frequency	Always available
Cost	
Geographic availability	Australia-wide
Duration/CPD hours	
Target audience	

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery		Addressed	Addressed	Addressed	Addressed
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role		Addressed	Addressed	Addressed	Addressed
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments		Addressed	Addressed	Addressed	Addressed
4. Ability to work with the person and their family to support personal recovery	Not required	Addressed	Addressed	Addressed	Addressed
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Addressed	Addressed	Addressed
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Addressed	Addressed	Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Addressed	Not required	

Name of training	Community Medical Monitoring in Eating Disorders
Name of provider	ANZAED
Delivery method	Online
Delivery frequency	Always available
Cost	
Geographic availability	Australia-wide
Duration/CPD hours	
Target audience	Medical professionals working in community settings

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery		Addressed	Addressed	Addressed	Addressed
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role		Addressed	Addressed	Addressed	Addressed
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments		Addressed	Addressed	Addressed	Addressed
4. Ability to work with the person and their family to support personal recovery	Not required	Addressed	Addressed	Addressed	Addressed
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Addressed	Addressed	Addressed
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Addressed	Addressed	Addressed	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Addressed	Not required	

Other offerings – webinars and PD Hub

ANZAED also offers a wide range of live and recorded webinars. These are delivered by local and international subject matter experts, and are generally targeted at experienced clinicians and provide a level of detail in specific clinical areas which is not currently able to be reflected in the competency framework. Examples include:

- Medical Management of Eating Disorders
- Eating Disorders from the Inside Out
- Food Addiction
- Introduction to Avoidant Restrictive Food Intake Disorders
- Using Imagery Rescripting with Eating Disorders
- The First Episode and Rapid Early intervention for Eating Disorders (FREED)
- Single Session Interventions
- Anorexia Nervosa Theory and Treatment
- E-mental Health for Eating Disorders
- Obesity and Eating Disorders

Training offered by Eating Disorders Queensland

Name of training	Eating Disorders - A different approach to community treatment and support
Name of provider	Eating Disorders Queensland
Delivery method	Face to face
Delivery frequency	As needed
Cost	Cost varies, ranges from \$643 half day to \$918 full day
Geographic availability	State-wide (additional cost for locations outside of metro Brisbane)
Duration/CPD hours	7 hours
Target audience	Community Practitioners

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	No
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	No
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Training provided by Eating Disorders Victoria

Name of training	Eating Disorders 101
Name of provider	Eating Disorders Victoria
Delivery method	Face to face
Delivery frequency	Always available
Cost to participants	\$300, minimum of 10 – maximum of 30
Geographic availability	Victoria - with additional costs outside of Melbourne
Duration/CPD hours	1.5 hours
Target audience	Any professionals – bespoke for diabetes, LGBTIQ, AOD, pregnancy/postnatal

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	No
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	No
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role (a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals) (g required of recovery support professionals)	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
6. Knowledge of current clinical practices and standards in the treatment of eating disorders (a-e required of shared care management professionals and eating disorders treatment professionals) (f-i required of eating disorders treatment professionals)	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	A Collaborative Approach to Eating Disorders for Exercise Professionals
Name of provider	Eating Disorders Victoria
Delivery method	Face to face
Delivery frequency	Always available
Cost to participants	\$800pp, minimum of 12
Geographic availability	Australia wide - with additional costs outside of Melbourne
Duration/CPD hours	4 hours, accredited with Fitness Australia (3 CECs)
Target audience	All exercise/fitness professionals who works with ED clients

Summary of competencies covered in this training						
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals	
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered	
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered	
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered	
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered	
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Not covered	Not covered	Not covered	
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	No
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Managing Eating Disorders in General Practice
Name of provider	Eating Disorders Victoria
Delivery method	Face to face
Delivery frequency	Always available
Cost to participants	\$400 pp, minimum of 16
Geographic availability	Australia wide – additional costs apply outside of Melbourne
Duration/CPD hours	1 day, 40 CPD points for GPs (accredited with RACGP)
Target audience	General Practitioners and other health professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Managing Eating Disorders in General Practice (Intro)
Name of provider	Eating Disorders Victoria
Delivery method	Face to face
Delivery frequency	Always available
Cost to participants	TBC
Geographic availability	Australia wide – additional costs apply outside of Melbourne
Duration/CPD hours	2 hours, 2 CPD points for GPs (accredited with RACGP)
Target audience	General Practitioners and other health professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Partially covered	Partially covered	Partially covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Managing Eating Disorders in General Practice (Online Intro)
Name of provider	Royal Australian College of General Practitioners & Eating Disorders Victoria
Delivery method	Online for RACGP members
Delivery frequency	Always available
Cost to participants	None
Geographic availability	Australia wide
Duration/CPD hours	1 hour, 2 CPD points for GPs (accredited with RACGP)
Target audience	General Practitioners

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Stories of Recovery
Name of provider	Eating Disorders Victoria
Delivery method	Face to face
Delivery frequency	Always available
Cost to participants	\$150
Geographic availability	Victoria, additional costs for outside of Melbourne
Duration/CPD hours	1 hour
Target audience	All professionals; also delivered to consumers and carers

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Not covered	Not covered	Not covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	No
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Training offered by the Eating Disorders Training and Evaluation Centre

Name of training	Introduction to eating disorders: identification and assessment
Name of provider	Eating Disorders Service - CAMHS CAHS, Eating Disorder Training and Evaluation Centre (EDTEC)
Delivery method	Face to face and via videoconferencing
Delivery frequency	2-4 times per year
Cost to participants	\$95 (free to rural/remote clinicians and those attending via videoconference)
Geographic availability	Perth metro area, all of WA via videoconference, available on request in country areas within driving distance from Perth
Duration/CPD hours	1 full day (6.5 hours)
Target audience	Multidisciplinary health and education professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not covered	Not covered	Not covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Not covered	Not covered	Not covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Partially covered	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
<p>3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments</p> <p>(a-f required of all health professionals)</p> <p>(g required of shared care management, eating disorder treatment and recovery support professionals)</p>	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
<p>4. Ability to work with the person and their family to support personal recovery</p> <p>(a-e required for all professionals)</p> <p>(f-g required for eating disorder treatment professionals)</p> <p>(h-j required for recovery support professionals)</p>	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	No
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Introduction to eating disorders: Management strategies
Name of provider	Eating Disorders Service - CAMHS CAHS, Eating Disorder Training and Evaluation Centre (EDTEC)
Delivery method	Face to face and via videoconferencing
Delivery frequency	2-4 times per year
Cost to participants	\$95 (free to rural/remote clinicians and those attending via videoconference)
Geographic availability	Perth metro area, all of WA via videoconference, available on request in country areas within driving distance from Perth
Duration/CPD hours	1 full day (6.5hours)
Target audience	Multidisciplinary health and education professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	No
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	No
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
j. Recognise indications of relapse and support people to re-access treatment services	No	

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Eating Disorders - Dietitian Basics
Name of provider	Eating Disorders Service - CAMHS CAHS, Eating Disorder Training and Evaluation Centre (EDTEC)
Delivery method	Face to face and via videoconferencing
Delivery frequency	1-2 times per year
Cost to participants	\$95 (free to rural/remote clinicians and those attending via videoconference)
Geographic availability	Perth metro area, all of WA via videoconference, available on request in country areas within driving distance from Perth
Duration/CPD hours	1 full day (6.5 hours)
Target audience	Dietitians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Name of training	Eating Disorders - Dietitian Advanced
Name of provider	Eating Disorders Service - CAMHS CAHS, Eating Disorder Training and Evaluation Centre (EDTEC)
Delivery method	Face to face and via videoconferencing
Delivery frequency	1-2 times per year
Cost to participants	\$95 (free to rural/remote clinicians and those attending via videoconference)
Geographic availability	Perth metro area, all of WA via videoconference, available on request in country areas within driving distance from Perth
Duration/CPD hours	1 full day (6.5hours)
Target audience	Dietitians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Not covered	Not covered	Not covered	Not covered	Not covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Not covered	Not covered	Not covered	Not covered	Not covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not required	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Not covered	Not covered	Not covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Partially covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	No
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	No
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	No
	d. Ability to describe the range of physical issues related to eating disorders	No
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	No
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	No

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	No
	b. Knowledge of warning signs and red flags	No
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	No
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	No
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	No
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role (a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals) (g required of recovery support professionals)	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
6. Knowledge of current clinical practices and standards in the treatment of eating disorders (a-e required of shared care management professionals and eating disorders treatment professionals) (f-i required of eating disorders treatment professionals)	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes

Name of training	Early intervention for eating disorders
Name of provider	Eating Disorders Service - CAMHS CAHS, Eating Disorder Training and Evaluation Centre (EDTEC)
Delivery method	Face to face and via videoconferencing
Delivery frequency	1 x times per year
Cost to participants	\$45 (free to rural/remote clinicians and those attending via videoconference)
Geographic availability	Perth metro area, all of WA via videoconference, available on request in country areas within driving distance from Perth
Duration/CPD hours	½ day (3.5 hours)
Target audience	Multidisciplinary education and school health professionals

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Not covered	Not covered	Not covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Not covered	Not covered	Not covered	Not covered
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Not covered	Not required	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	No
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	No
	d. Assess for risk of suicide and self-harm	No
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	No
	g. Discuss the risk of relapse and the importance of recovery support	No
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	No
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	No
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	No
	b. Ability to encourage patients to allow their family to share information with the treatment team	No
	c. Provide appropriate follow-up for people referred for treatment	No
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	No
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	No
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	No
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	No
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	No
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	No
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	No

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	No
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	No
	d. Describe the purpose of weight gain for people with malnutrition	No
	e. Discuss issues in the care of adults with long term eating disorders	No
	f. Knowledge of specific evidence based psychological and pharmacological treatments	No
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	No
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	No
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	No
	b. Implement strategies to enhance motivation for change	No
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	No
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	No
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	No

Training offered by the Sydney Children's Hospital Network Eating Disorder Service

Name of training	Family Based Treatment Intensive Workshop
Name of provider	Sydney Children's Hospital Network Eating Disorder Service
Delivery method	Face to face
Delivery frequency	1-2 times per year
Cost to participants	\$600 + GST
Geographic availability	Westmead, Sydney
Duration/CPD hours	16 hours
Target audience	Mental Health Clinicians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders		Fully covered	Fully covered	Fully covered	
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Specific modality: FBT	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes

Name of training	Family Based Treatment Advanced Workshop
Name of provider	Sydney Children's Hospital Network Eating Disorder Service
Delivery method	Face to face
Delivery frequency	1 times per year
Cost to participants	\$600 + GST
Geographic availability	Westmead, Sydney
Duration/CPD hours	16 hours
Target audience	Mental Health Clinicians

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Fully covered	Fully covered	Fully covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Fully covered	Fully covered	Fully covered
7. Ability to deliver an evidence-based treatment for eating disorders		Not required	Specific modality: FBT	Not required	

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	Yes
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	Yes

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	Yes

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	No
	e. Ability to manage a person with an eating disorder who is waiting for treatment	No
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	No
	j. Recognise indications of relapse and support people to re-access treatment services	No

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dental Practitioner, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	Yes
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	Yes
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	Yes

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes

Training offered by the Centre for Clinical Interventions

Name of training	Introduction to Eating Disorders
Name of provider	Centre for Clinical Interventions
Delivery method	Face to face
Delivery frequency	Annually
Cost to participants	\$154
Geographic availability	Perth Metropolitan Area
Duration/CPD hours	One day
Target audience	Mental health practitioners

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Fully covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes – youth & adult
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dentist, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Y
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes

Name of training	Youth Eating Disorders: Screening, assessment and treatment skills
Name of provider	Centre for Clinical Interventions
Delivery method	Face to face
Delivery frequency	One off
Cost to participants	No charge
Geographic availability	Perth Metropolitan Area
Duration/CPD hours	1 day
Target audience	Youth mental health workers in WA Health e.g. clinical psychologists, social workers, mental health nurses

Summary of competencies covered in this training					
Core competency	For early identifiers	For initial responders	For shared care professionals	For treatment professionals	For recovery support professionals
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery	Fully covered	Fully covered	Fully covered	Fully covered	Fully covered
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
3. Ability to engage the person with an eating disorder and family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments	Partially covered	Partially covered	Partially covered	Partially covered	Partially covered
4. Ability to work with the person and their family to support personal recovery	Not required	Partially covered	Partially covered	Partially covered	Partially covered
5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role		Not required	Partially covered	Partially covered	Partially covered
6. Knowledge of current clinical practices and standards in the treatment of eating disorders			Partially covered	Partially covered	Partially covered
7. Ability to deliver an evidence-based treatment for eating disorders			Not required	Fully covered	Not required

Core competency	Units of competency	Included?
1. General knowledge of the clinical features of eating disorders, common treatments and the individual experience of recovery (required of all health professionals)	a. General knowledge of developmentally appropriate healthy eating, nutritional principles and healthy relationships with food	Yes
	b. Ability to describe eating disorders, their progression and impact on psychological health and quality of life	Yes
	c. Awareness of the overlapping nature of eating disorders and the prevalence of atypical presentations	Yes
	d. Ability to describe the range of physical issues related to eating disorders	Yes
	e. Ability to explain the impact of rapid weight loss and/or very low BMI on cognition	Yes
	f. Awareness of a variety of health conditions which can co-exist with eating disorders (e.g. diabetes, depression)	Yes

Core competency	Units of competency	Included?
2. Ability to identify warning signs of eating disorders and disordered eating and to conduct initial assessment within the scope of usual professional role (a-e required of all health professionals) (f required of shared care management and eating disorder treatment professionals) (g-i required of recovery support professionals)	a. Ability to recognise the signs of disordered eating and describe the associated health risks	Yes
	b. Knowledge of warning signs and red flags	Yes
	c. Ability to take a preliminary case history relevant to eating disorders using culturally respectful practice	Yes
	d. Assess for risk of suicide and self-harm	Yes
	e. Use assessment tools and tests as appropriate for the person and the professional discipline (e.g. SCOFF, EDE-Q, EDI, RMI, HEADSS, EAT-26, BEDS-7, etc.)	Yes
	f. Contribute to the comprehensive assessment of children, adolescents and adults in relation eating disorders	Yes – youth and adult
	g. Discuss the risk of relapse and the importance of recovery support	Yes
	h. Describe secondary prevention strategies	No
	i. Ability to conduct strengths-based assessment, collaborating with the person to identify their strengths, risks for relapse and individual needs for support	No

Core competency	Units of competency	Included?
3. Ability to engage the person with an eating disorder and their family in a non-judgemental manner and to motivate engagement with and refer to relevant health services and treatments (a-f required of all health professionals) (g required of shared care management, eating disorder treatment and recovery support professionals)	a. Ability to demonstrate an empathetic understanding of the high levels of ambivalence and fear of change in people with eating disorders	Yes
	b. Discuss the barriers to self-disclosure that a person with an eating disorder may experience and strategies to deal with these barriers	Yes
	c. Demonstrate knowledge of services and systems in your region appropriate for the treatment of eating disorders	Yes
	d. Refer people with eating disorders to relevant services to address their physical, psychological and nutritional needs	Yes
	e. Identify when the person should be referred directly to an eating disorders specialist service	Yes
	f. Identify when a person with an eating disorder needs an urgent medical assessment or psychiatric assessment and when they should be referred to a Hospital Emergency Department	Yes
	g. Demonstrate awareness of personal attitudes, values and beliefs (e.g. body shape) to manage the potential impact of collusion with a person with an eating disorder	No

Core competency	Units of competency	Included?
4. Ability to work with the person and their family to support personal recovery (a-e required for all professionals) (f-g required for eating disorder treatment professionals) (h-j required for recovery support professionals)	a. Ability to engage parents/carers/partners and assess their concerns recognising that symptoms may be minimised by the person with an eating disorder	Yes
	b. Ability to encourage patients to allow their family to share information with the treatment team	Yes
	c. Provide appropriate follow-up for people referred for treatment	Yes
	d. Demonstrate knowledge of support services available for people with eating disorders and their families and provide information	Yes
	e. Ability to manage a person with an eating disorder who is waiting for treatment	Yes
	f. Ability to provide professional guidance to people with BN and BED who are working through a self-help program	No
	g. Work collaboratively with and support family members and identified support people	Yes
	h. Explain the range of education and support needs a person with an eating disorder and their support people may require	Yes
	i. Demonstrate awareness of community-based supports and resources and refer people to appropriate services	Yes
	j. Recognise indications of relapse and support people to re-access treatment services	Yes

Core competency	Units of competency	Included?
<p>5. Ability to contribute to multi-disciplinary team assessment, care planning and treatment within scope of usual professional role</p> <p>(a-f required of shared care management professionals, eating disorders treatment professionals and recovery support professionals)</p> <p>(g required of recovery support professionals)</p>	a. Understand how care teams are set up including the range of professions required to safely address all aspects of illness	Yes
	b. Describe the roles of key professions in the multidisciplinary team including: GP, Psychologist, Psychiatrist, Dietitian, Dentist, Mental Health Nurse, OT, Social Workers, Paediatricians	Yes
	c. Within usual role, work collaboratively with professionals from other disciplines to implement and review management plan, and to reduce the risk of patient's "splitting" health care providers	Yes
	d. Monitor progress and measure outcomes (relevant to own professional discipline)	Yes
	e. Support transfer between services and service providers	No
	f. Know the limits of personal expertise and when to seek advice or refer on to other colleagues in the shared care team	Yes
	g. Within scope of usual role demonstrate ability to provide one or more of the following: Information; Case management; Family education and support; Peer support; Recovery education; General counselling; Meal support	Yes

Core competency	Units of competency	Included?
<p>6. Knowledge of current clinical practices and standards in the treatment of eating disorders</p> <p>(a-e required of shared care management professionals and eating disorders treatment professionals)</p> <p>(f-i required of eating disorders treatment professionals)</p>	a. Describe the standards for safe treatment (National Standards Schema)	No
	b. Describe the medical and nutritional care that may be required to treat eating disorders	Yes
	c. Describe the role of treatment for medical consequences of eating disorders and of comorbid mental conditions including hospital admission, including intensive treatment and hospital admission	Yes
	d. Describe the purpose of weight gain for people with malnutrition	Yes
	e. Discuss issues in the care of adults with long term eating disorders	Yes
	f. Knowledge of specific evidence based psychological and pharmacological treatments	Yes
	g. Knowledge of the clinical practice guidelines for treatment of DSM-5 feeding and eating disorders	Yes
	h. Be aware of the risks of re-feeding syndrome, and the need for specialist care in nutritional restoration	Yes
	i. Demonstrate awareness of the circumstances when involuntary treatment may be necessary	No

Core competency	Units of competency	Included?
7. Ability to deliver an evidence-based treatment for eating disorders (required of eating disorder treatment professionals only) (e required of psychologists and mental health service providers only)	a. Describe a range of evidence supported treatment modalities for eating disorders and their relevance to individual needs including: CBT, Guided Self Help CBT, FBT	Yes
	b. Implement strategies to enhance motivation for change	Yes
	c. Utilize relevant tertiary services for professional training, case conferencing, supervision and referral	Yes
	d. Refer people with eating disorders for treatment of comorbid conditions where appropriate	Yes
	e. Ability to implement at least one evidence based treatment modality for eating disorders e.g. CBT-E, Guided Self Help CBT, FBT	Yes

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