Work-In-Progress: Implementing Evidence-Based **Training for Pediatric Eating Disorders Across British** Columbia and the Yukon

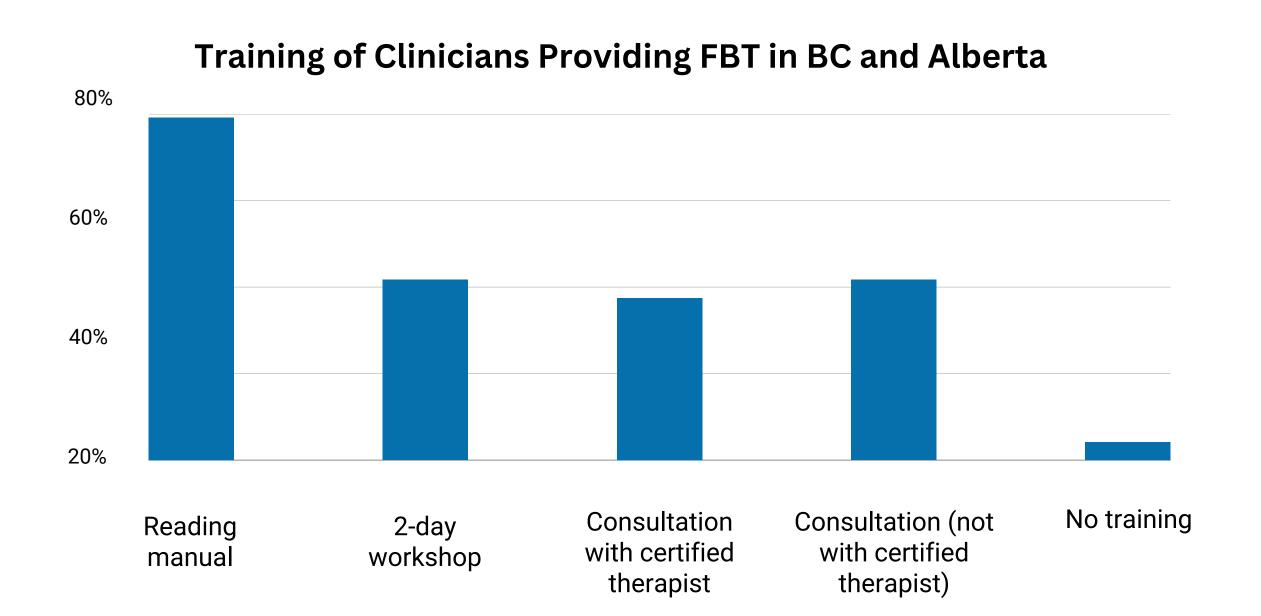
Tayla Bain ^{1, 2},* Julia Kaufmann ^{1, 2},* Kim D. Williams ¹, Josie Geller^{2,3}, Patricia Obee⁴, Jennifer S. Coelho^{1,2}

¹Eating Disorders Program for Children and Adolescents, BC Children's Hospital, ²UBC Department of Psychiatry, ³ Provincial Adult Tertiary and Specialized Eating Disorder Program, St. Paul's Hospital, ⁴Ministry of Child and Family Development

*notes shared first author

Introduction

- The prevalence of pediatric eating disorders (pEDs) have increased three-fold.1
- Clinicians for pEDs are reporting burnout, high turnover intention,³ and lack of evidence-based training.4
- Survey data from our team suggests that only 50% of clinicians in BC and Alberta using family based treatment (FBT) had formal training.⁵



Intervention

Clinicians at BC Children's Hospital Provincial Specialized Eating Disorder Program have launched a **Provincial Eating Disorders Training Hub,** which aims to improve capacity in the pED workforce by implementing a no-cost training and consultation in FBT in BC and the Yukon.

Clinicians are eligible for this training if they are:

- 1. providing care for children and youth (<=18 years) with eating disorders
- 2. employed by a public mental health service in BC or the Yukon

Study Progress

The implementation of the Training Hub is in progress. We aim to provide a status of the research project to date.

201 clinicans have expressed interest in the training

- 87 clinicians have been trained
- 67 clinicians are registered for future 2024 sessions
- More sessions to come in 2025
 - 30 clinicians participating in Drop-In Consultation
 - 9 clinicians participating in Advanced Consultation

157 clinicians have been invited to participate in research 89 clinicians have consented (available data)

Accessible training and consultation in evidence-based healthcare practices can reduce costs and increase capacity.

Research Objectives

We will use the RE-AIM implementation framework to evaluate implementation processes and outcomes.⁶

Reach

- Identify number of clinicians who register/participate in the training
 - Current registration: n = 157
 - Current participation: n = 89
- Identify the geographical distribution of clinicians registering/participating in the training

Adoption

- Assess # of programs that have therapists trained in FBT
- Assess # of clinicians from each program/locale that engage in our training
- Qualitative surveys with clinicians to understand adoption post training

How do I know my How do I reach the intervention is targeted effctive? population? **RE-AIM** Framework⁶ How do I develop How do I ensure organizational the intervention is support to deliver delivered my intevention? properly?

Effectiveness

- Baseline, pre-training, post-training, 3month follow-up and post-consultation
- Measures:
 - Professional Quality of Life
 - Turnover Intention
 - Self-Compassion
 - Compassion to Others
 - FBT Attitude Scale

Implementation

- Track adaptations made to the training
- Track content of consultation group discussions
- Qualitative interviews with clinicians and decision makers to understand perspectives of the training
- Assess clinician fidelity to the model

Discussion

The Provincial Eating Disorders Training Hub has potential to transform the supports available for the pediatric eating disorder workforce in BC and the Yukon. This project will provide insight into the implementation of evidence-based trainings to support capacity building for healthcare workers. To date, many clinicians have expressed positive feedback regarding these trainings:

"I wish more of my colleagues could have taken part in this training! In order to support the growing presentation of eating disorders among youth, FBT needs to be more accessible and promoted for and amongst mental health providers"

"I thought the training was amazing and really gave a good glimpse into the importance and relevance of using FBT as a main treatment model for anorexia nervosa. I feel that there is a big need for this specialized care"

We gratefully acknowledge funding from:







