SPACE TO BREATHE

Understanding Levels of Treatment

Outpatient, day care, intensive community and inpatient support

Eating-disorder treatment can be offered at different levels depending on medical risk, psychiatric risk, symptoms, age, home support and response to care. Needing more intensive help is not failure; it means the current level of support may not be enough to keep someone safe and moving forward.

UNDERSTAND	NOTICE	SUPPORT

INSIDE THIS GUIDE

- Outpatient care
- More intensive community or day care
- Inpatient or medical admission

Use this guide to understand, begin a conversation, or help someone feel less alone.

You do not need to read it all at once. Pause whenever you need to and return when you feel ready.

A compassionate information guide

This resource offers general information and does not replace individual medical or specialist eating-disorder care.

Understanding what may be happening

Outpatient care

- Appointments are attended while the person continues living at home.
- Care may include psychological therapy, medical monitoring and dietetic support.
- Family or carer involvement may be offered where appropriate.

More intensive community or day care

- Support is provided more often, sometimes including supported meals and groups.
- It can help when ordinary outpatient contact is not sufficient.
- Availability and programme structure vary by local service.

Inpatient or medical admission

- May be needed for serious physical instability, psychiatric risk or failure of less intensive care to maintain safety.
- Goals include stabilisation, nutritional rehabilitation and a safe plan for continuing treatment.
- Discharge planning and communication between services are crucial.

Gentle, practical ways forward

Support should always be adapted to the person, their diagnosis, physical health, culture, neurotype and treatment plan.

WHAT MAY HELP

- Ask the team what level is recommended and why.
- Discuss sensory, communication, disability, cultural and family needs.
- Request written information if verbal explanations are difficult to process.
- Clarify who monitors physical health and who to contact between appointments.
- Seek urgent assessment if risk changes rather than waiting for the next review.

A gentle reminder

The best setting is the least restrictive level that can safely and effectively meet the person's needs.

Please seek urgent help for fainting, chest pain, confusion, severe weakness, uncontrolled vomiting, blood, serious dehydration, or immediate risk of harm. In the UK call 999/A&E; for an emergency, NHS 111 for urgent advice, or contact your GP/eating-disorder team.

Trusted information

NHS: Eating disorders overview
https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/eating-disorders/overview/

NICE: Eating disorders: recognition and treatment (NG69)
https://www.nice.org.uk/guidance/ng69

Royal College of Psychiatrists: Medical Emergencies in Eating Disorders (MEED)
https://www.rcpsych.ac.uk/improving-care/campaigning-for-better-mental-health-policy/college-reports/2022-college-reports/cr233

Beat: Eating-disorder information and support
https://www.beateatingdisorders.org.uk/

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