

Care Plans

People with eating disorders will present with a number of behaviours associated with the eating disorder. These are often difficult to contain within the inpatient setting, as the patient is usually quite unwell and once refeeding starts they will become very anxious and have high urges to engage in behaviours. It is important that the care team are aware of these potential behaviours.

In non-specialist treatment settings, such as general medical wards in local hospitals, the care plan provides a way for all team members to have a shared understanding of the treatment context and challenges that the patient may be facing due to the eating disorder. Team review of the plan is recommended to be weekly at minimum, depending on the acuity of the patient.

The treating team may decide to allocate a 24 hour one-to-one nurse ('nurse special') in certain circumstances to monitor the treatment of the patient. It is important that the care plan is communicated with the nurse special, to provide a copy of the care plan at the beginning of each nursing shift to them, and also, that this important member of the care team has a way to communicate how the care plan is being implemented (what's working, what's not) if they aren't able to consistently attend nursing handover.

EXAMPLE Care Plan

NAME, name MRN

Day, date, month, 2015

- Continuous NG feeds as per Dietitian order
- Twice-daily bloods
- BSL bd 0800hrs, 12:00hrs and 18:00hrs
- For continual bedrest - supervised by special nurse
- _____ is to request to use the bathroom from special nurse prior to leaving bed
- All toilet / bathroom use (including all showering and personal care) to be respectfully supervised by special nurse on shift
- Other bathrooms on ward are not to be used
- No standing, pacing/walking
- TDS obs
- Wheelchair escorts to all appointments
- Smoking: Referral to Drug & Alcohol team to be made by Dr _____ today (date)
- Retape NG tube with hyperfix as necessary
- Oral food: No food items to be stored at bedside due to risk of refeeding syndrome (see RPAH RFS Policy)
- This care plan is not to be negotiated until multidisciplinary team review on day, date, month, year

Original care plan by Brooke Adam, Network Eating Disorder Coordinator SLHD 9515-1430
(Mon, Tues, Weds)

Care plan written in consultation with staff of (medical ward), CL Psychiatry & Eating
Disorder Specialist team (*via telemedicine conf*)

For review day, date, month, year

CC: Medical Chart

Patient file

Copy given to patient

(name), NUM _____(ward) (electronic copy)

Copy be given to the nurse special at the beginning of each shift