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Eating Disorder Outreach Service (EDOS) (for people aged under 18 years)

Service Specification: SS295

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SERVICE SPECIFICATION:
SS295 EATING DISORDER OUTREACH SERVICE (EDOS) (FOR PEOPLE AGED UNDER 18 YEARS)

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Statement

NHS Wales Joint Commissioning Committee (NWJCC) will commission the Eating Disorder Outreach Service (EDOS) service in accordance with the criteria outlined in this specification.

In creating this document NWJCC has reviewed the requirements and standards of care that are expected to deliver this service.

Welsh Language

NWJCC is committed to treating the English and Welsh languages on the basis of equality, and endeavour to ensure commissioned services meet the requirements of the legislative framework for Welsh Language, including the [Welsh Language Act \(1993\)](#), the [Welsh Language \(Wales\) Measure 2011](#) and the [Welsh Language Standards \(No.7\) Regulations 2018](#).

Where a service is provided in a private facility or in a hospital outside of Wales, the provisions of the Welsh language standards do not directly apply but in recognition of its importance to the patient experience, the referring health board should ensure that wherever possible patients have access to their preferred language.

In order to facilitate this, NWJCC is committed to working closely with providers to ensure that in the absence of a Welsh speaker, written information will be offered and people have access to either a translator or 'Language-line' if requested. Where possible, links to local teams should be maintained during the period of care.

Decarbonisation

NWJCC is committed to taking assertive action to reducing the carbon footprint through mindful commissioning activities. Where possible and taking into account each individual patient's needs, services are provided closer to home, including via digital and virtual access, with a delivery chain for service provision and associated capital that reflects the NWJCC commitment.

Disclaimer

NWJCC assumes that healthcare professionals will use their clinical judgment, knowledge and expertise when deciding whether it is appropriate to apply this document.

This document may not be clinically appropriate for use in all situations and does not override the responsibility of healthcare professionals to make decisions appropriate to

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the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian, or Local Authority.

NWJCC disclaims any responsibility for damages arising out of the use or non-use of this policy.

1. Introduction

This document has been developed as the Service Specification for the planning and delivery of the Eating Disorder Outreach Service (EDOS) for children and adolescents resident in Wales. This service will only be commissioned by the NHS Wales Joint Commissioning Committee (NWJCC) and applies to residents of all seven Health Boards in Wales.

1.1 Background

The Eating Disorder Outreach Service offers a tertiary (but non-residential) service to Health Board Child and Adolescent Mental Health Services (CAMHS) teams who work with eating disordered children and young people. In 2016 it was estimated that 1.25 million people in the UK had a form of eating disorder.

In 2014, Welsh Health Specialised Services (WHSSC) commissioned a "scoping exercise" to review eating disorder services with South, Mid and West Wales CAMHS teams. The findings of this Scoping Review concluded that there was significant variation in expertise and service provision in these areas and that a "hub" should be funded to help increase uniformity of service, increased expertise and training. The Review recommended that this Hub be called the Eating Disorder Outreach Service and that it "offers second opinions, undertakes joint work with Tier 3 services and offers consultation and training". In 2015, EDOS was established with a range of clinicians.

EDOS offers the following services:

- Specialist consultation and supervision to health board (HB) specialist Eating Disorder (ED) CAMHS teams.
- A number of specialist interventions to families referred to the team by HB specialist ED CAMHS teams.
- Second opinions where teams are unsure how to help the young person and family.
- Intensive forms of intervention not normally available to HB specialist ED CAMHS teams such as a remote parent coaching programme and face to face multi-family group interventions.
- Intensive therapy specialist interventions to ED patients within the South Wales In-patient (Tier 4) provision.
- Intensive parent coaching within the Tier 4 provision in order to create a 'step down' intervention for young people who will be discharged to their local ED CAMHS teams.
- Specialist training in evidence-based practice in the field of ED provided to all ED and CAMHS staff within the South and West Wales HBs. This training will be both 'in-house' and external with the EDOS budget funding some external training as relevant.

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- Added value input with families and young people alongside HB ED CAMHS team staff as required and requested by these teams.
- Advice to NWJCC and Welsh Government (as requested) concerning the development of CAMHS ED services within South and West Wales.

1.2 Aims and Objectives

The aim of this service specification is to define the requirements and standard of care essential for delivering the Eating Disorder Outreach Service (EDOS) which provides services to children and young people with an eating disorder and their families in South, Mid and West Wales (six health boards).

The objectives of this service specification are to:

- detail the specifications required to deliver the Eating Disorder Outreach Service to children and young people and their families in South, Mid and West Wales.
- ensure minimum standards of care are set for the Eating Disorder Outreach Service.
- ensure equitable access to children and young people and their families to EDOS.
- improve outcomes for children and young people and their families accessing eating disorder services in South, Mid and West Wales.

Note: Clinical risk is managed by individual Health Board Eating Disorder CAMHS teams.

1.3 Relationship with other documents

This document should be read in conjunction with the following documents:

- **NHS Wales**
 - All Wales Policy: [Making Decisions in Individual Patient Funding requests \(IPFR\)](#).
 - MATRICS PLANT: [Guidance on the Delivery of Psychological Interventions for Children and Young People in Wales](#)
- **NHS Wales Joint Commissioning Committee policies and service specifications**
 - WHSSC (2023) Specialised Services Service Specification: CP150 In-patient Child and Adolescent Mental Health Services (CAMHS): General Adolescent Unit (GAU) and Extra Care Area (ECA). [WHSSC Policies - Welsh Health Specialised Services Committee \(NHS. Wales\)](#)
 - WHSSC (2023) Specialised Services Service Specification: CP222 Tier 4 Forensic Child and Adolescent Mental Health Service (Forensic Adolescent Consultation Service – Consultation and Advice for Child and Adolescent

Mental Health Services. [WHSSC Policies - Welsh Health Specialised Services Committee \(NHS. Wales\)](#)

- **Other published documents**

- [Social Services and Wellbeing Act 2014](#)
- [Equality Act 2010](#)
- [Human Rights Act 1998](#)
- [Mental Capacity Act 2005](#)
- [Mental Health Act 1983](#)
- [Mental Health \(Wales\) Measure 2010](#)
- NHS England (2015) *Access and waiting time standards for children and young people with an eating disorder*. <https://www.england.nhs.uk/wp-content/uploads/2015/07/cyp-eating-disorders-access-waiting-time-standard-comm-guid.pdf>
- National Institute of Health and Care Excellence (NICE) guidance (2020) *Eating Disorders: recognition and treatment*. <https://www.nice.org.uk/guidance/ng69>
- [Rights of Children and Young Persons \(Wales\) Measure 2011](#)
- [Well-being of Future Generations \(Wales\) Act 2015](#)
- [Welsh Language \(Wales\) Measure 2011](#)
- BEAT (2022)(Kelly, T & Whitfield, J) *The Welsh Eating Disorder Review: three years on*. https://beat.contentfiles.net/media/documents/3_years_on.pdf
- Royal College of Psychiatrists (2022) *Medical Emergencies in Eating Disorders: Guidance on Recognition and Management* [college-report-cr233-medical-emergencies-in-eating-disorders-\(meed\)-guidance.pdf \(rcpsych.ac.uk\)](#)
- Tan, J. et al (2018) *Welsh Government Eating Disorder Service Review* <https://www.gov.wales/sites/default/files/publications/201909/welshgovernment-eating-disorder-service-review-november-2018.pdf>
- [A healthier Wales: long term plan for health and social care | GOV.WALES](#)
- [Trauma-Informed Wales: A Societal Approach to Understanding, Preventing and Supporting the Impacts of Trauma and Adversity; Public Health Wales, 2022](#)

2. Service Delivery

The NHS Wales Joint Commissioning Committee will commission the Eating Disorder Outreach Service (EDOS) for children and young people with an eating disorder and their families in line with the criteria identified in this specification.

2.1 Access Criteria

EDOS provides services via a referral route to children and young people under 18 and their families (in line with evidence-based practice) and the CAMHS teams that manage their care across South, Mid and West Wales University Health Boards.

The service outlined in this specification is for patients ordinarily resident in Wales, or otherwise the commissioning responsibility of the NHS in Wales. This excludes patients who, whilst resident in Wales, are registered with a GP practice in England, but includes patients resident in England who are registered with a GP Practice in Wales.

In order to receive a service from EDOS, young people and their families will need to meet the following criteria:

- Be under 18 (young people).
- Reside within the specified health board areas (as above).
- Have a case coordinator within a CAMHS eating disorder team (or similar clinician).
- Meet one of the diagnostic categories within the 'Eating Disorder' description. These include Anorexia Nervosa (either 'type')(AN), Bulimia Nervosa (BN), Avoidant Restrictive Food Intake Disorder (ARFID).
- EDOS follows evidence-based practice guidelines and therefore the family of the young people must also be involved.

See annex i.

2.2 Service description

In addition to the standards required within the Contract, specific quality standards and measures will be expected. The provider must also meet the standards as set out below. Please also refer to Annex i patient referral pathway. The providing health board (Cwm Taf Morgannwg University Health Board) will provide all appropriate resources and management/ administrative services (including Governance) as required to enable EDOS to function.

The overarching aim of EDOS is to provide a highly specialist resource to CAMHS eating disorder teams and thereby to the families and young people they work with. This

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resource functions as an “added value” one where EDOS works alongside these local teams, helps to train these teams and offers ongoing consultation and support to them.

Facilities and equipment

Essential

- A clinical base suitable for ensuring a coherent and well managed team.
- A clinical base that ensures confidential space for the assessment and treatment of C&YP and families.
- The provision of appropriate monitoring tools to ensure physical safety.
- Appropriate IT support including mobile computing to allow the team to work around South, Mid and West Wales.
- Appropriate means of engaging C&YP and their families via remote platforms.
- Suitable equipment to ensure medical safety including BP, scales, height equipment etc.
- The ability to provide outreach groups where applicable.

Desirable

- A clinical base that is suitable for groupwork.

Staffing: Specialist team

A multi-disciplinary team capable of assessing and treating a range of eating disorder presentations in child and adolescent mental health. This is not a psychologically led service, but it is providing psychological interventions and thus team members need to be experienced and qualified in a range of psychological interventions.

Essential

- Specialist nurse practitioners (to offer a range of psychological interventions and physical monitoring competencies).
- Systemic Family Psychotherapist (as supported by the evidence base).
- Clinical Psychologist (to provide expert psychological intervention).
- Dietitian (to provide expert dietetic intervention as required).
- Peer Mentor (to provide expert by experience input for eating disorder staff and patients and their families).
- Team administrator.

Desirable

- The development of good working relationships across all the Health Boards covered by ED~OS.
- The development of named Tier 3 ED leads in each Health Board and the provision of specialist eating disorder CAMHS team within these Health Boards.

Clinical Standards

Clinical standards are based on the Welsh Government's Mental Health Strategy as well as a range of standards set out in 1.2 and 1.3 above.

Useful Benchmarking resources:

- [Mental Health Act 1983](#)
- National Institute of Health and Care Excellence (NICE) guidance (2017) *Eating Disorders: recognition and treatment*. <https://www.nice.org.uk/guidance/ng69>
- Royal College of Psychiatrists (2022) Medical Emergencies in Eating Disorders: Guidance on Recognition and Management (Replacing MARSIPAN and Junior MARSIPAN) COLLEGE REPORT CR233. [2022 College Reports | Royal College of Psychiatrists \(rcpsych.ac.uk\)](#)

Essential

- All staff working in EDOS need to have a high experience and knowledge of working in CAMHS eating disorder services.
- The staff skills should be in line with the recommendations of the *Access and waiting time* (NHS England) document and the Welsh Government review of Eating Disorder Services (Tan 2018).
- The team needs to be able to assess physical risk within children and adolescents with eating disorders by employing a range of clinical skills and drawing on the multi-disciplinary nature of the team.
- Good practice determines that the professional/ clinical mix of the team needs to be multi-disciplinary with an emphasis on psychological therapeutic competence.

2.3 Interdependencies with other services or providers

As stated above, EDOS functions as a Tier 4 service that relies on good working relationships with Tier 3 CAMHS eating disorder clinicians. EDOS also relates to wider CAMHS clinicians such as 'intensive treatment teams' and Crisis teams, FACS, Ty Llidiard, as necessary.

2.4 Exclusion Criteria

EDOS may in rare situations, where a young person is physically compromised, decide that the clinical risk is such that they cannot work with a young person within the community context. In such cases, active work will be undertaken to empower local HB clinicians to act appropriately to protect the welfare of the young person.

The service will not accept referrals for:

- Young people 18 years of age or over.

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- Young people whose mental health needs can be met by community CAMHS, including intensive treatment teams. This will include young people who are experiencing placement break-down or lack of appropriate care, supervision or accommodation but whose mental health needs can continue to be met through the provision of community care rather than hospital treatment.
- Young people who are physically / medically compromised in which case EDOS will act with medical colleagues to contain and manage risk.
- Young people currently placed in secure settings who are assessed as continuing to require that level of security.
- Young people who, regardless of their current care setting, are assessed as requiring a secure care environment by the in-patient CAMHS MDT. This may be for example, due to a history of persistent and violent attempts to abscond with severe associated risks.
- Young people who present with chronic high risk to themselves, who have already received a full multi-disciplinary assessment and formulation from the in-patient CAMHS service, and whose current presenting risk is not believed to be due to a diagnosable mental disorder.
- Young people who present with a risk profile where the primary risk is their vulnerability and require safeguarding for example, those at risk of sexual exploitation or gang-related behaviour.
- Young people whose physical healthcare needs are of a greater complexity or acuity than their mental healthcare needs. The decision about the priority of presenting needs will require discussion and agreement between the health professionals involved in the young person's care.

2.5 Acceptance Criteria

The service outlined in this specification is for patients ordinarily resident in Wales, or otherwise the commissioning responsibility of the NHS in Wales. This excludes patients who whilst resident in Wales, are registered with a GP practice in England, but includes patients resident in England who are registered with a GP Practice in Wales.

2.6 Patient Pathway (Annex i)

See Annex i.

2.7 Service provider/Designated Centre

EDOS is based in Ty Llidiard, Princess of Wales Hospital, Coity Road, Bridgend. However, EDOS is very much a travelling team who provide services around the South, Mid and West Wales areas.

2.8 Exceptions

If the patient does not meet the criteria for treatment as outlined in this policy, an Individual Patient Funding Request (IPFR) can be submitted for consideration in line with the All Wales Policy: Making Decisions on Individual Patient Funding Requests. The request will then be considered by the All Wales IPFR Panel.

If the patient wishes to be referred to a provider outside of the agreed pathway, an IPFR should be submitted.

Further information on making IPFR requests can be found at: [Individual Patient Funding Requests](#)

3. Quality and Patient Safety

The provider must work to written quality standards and provide monitoring information to the lead commissioner. The quality management systems must be externally audited and accredited.

EDOS must enable the patients and carers to have informed participation and to be able to demonstrate this. Provision should be made for patients with communication difficulties and for children, teenagers and young adults.

3.1 Quality Indicators (Standards)

EDOS will provide the following measures of outcomes for NWJCC on a quarterly basis.

Clinical outcomes:

- Numbers of open cases at each audit point.
- Numbers of cases closed at each audit point.
- Numbers of direct family contacts undertaken including diagnostic presentation.
- The numbers of second opinions sought and the diagnostic presentation involved.
- The numbers of groupwork therapies at each audit point.

Indirect clinical outcomes:

- Report on routine outcome measurement results when appropriate.
- Numbers of training sessions held with clinicians including numbers of attendees.
- Numbers of supervision and consultation sessions provided, including numbers of patients discussed and advised about.

Team structure and processes:

- An annual financial report from CTMUHB to report on expenditure, including staffing establishment against plan.
- Details of staffing turnover, vacant posts and recruitment procedures.
- Relevant training schedule of EDOS team staff.

EDOS will seek regular feedback from partner services and report key findings and actions to NWJCC. EDOS will monitor and review activities in accordance with these standards and may use this information to vary activity.

All clinical material will be kept, as expected, within Cwm Taf Morgannwg University Health Board governance procedures.

3.2 National Standards

The Service adheres to standards set by the documents outlined in **1.3** above. This includes but is not limited to:

- Medical Emergencies in Eating Disorders (MEED)
- Access and waiting time
- Tan et al (2018)
- Mental Health Act

3.3 Other quality requirements

- EDOS will gather a range of quality indicators relating to its work. These will be published in regular Performance Reviews with NWJCC staff. These may include:
- Patient surveys for all work undertaken.
- Use of Routine Outcome Monitoring processes including indicators of severity of mental health symptoms, outcomes and measures of family functioning.
- Clinical audits will be undertaken regularly to ensure appropriate data protection, recording quality and compliance with CTMUHB guidance and governance requirements.
- EDOS will employ a Peer Mentor which will also make its work subject to an internal review.

4. Performance Monitoring and Information Requirement

4.1 Performance Monitoring

NWJCC will be responsible for commissioning services in line with this policy. This will include agreeing appropriate information and procedures to monitor the performance of organisations.

For the services defined in this policy the following approach will be adopted:

- Service providers to evidence quality and performance controls
- Service providers to evidence compliance with standards of care

NWJCC will conduct performance and quality reviews on an annual basis

4.2 Key Performance Indicators

The providers will be expected to monitor against the full list of Quality Indicators derived from the service description components described in Section 2.2.

The provider should also monitor the appropriateness of referrals into the service and provide regular feedback to referrers on inappropriate referrals, identifying any trends or potential educational needs.

In particular, the provider will be expected to monitor against the following target outcomes:

- Numbers of families involved in the specialist inputs provided by EDOS which will include those involved in Parent Coaching, Multi-Family Groups, Second opinions and specialist inputs to families with HB ED teams.
- Numbers who attend consultations and supervision sessions and the numbers of families and young people discussed.
- Numbers of specialist sessions offered including parent coaching sessions, multi-family group sessions, group work with young people.
- Outcome measures derived from the above services.
- Training provided including numbers trained and outcome measures from the training.

4.3 Date of Review

This document is scheduled for review before July 2027, where we will check if any new evidence is available.

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If an update is carried out the policy will remain extant until the revised policy is published.

5. Equality Impact and Assessment

The Equality Impact Assessment (EQIA) process has been developed to help promote fair and equal treatment in the delivery of health services. It aims to enable NHS Wales Joint Commissioning Committee to identify and eliminate detrimental treatment caused by the adverse impact of health service policies upon groups and individuals for reasons of race, gender re-assignment, disability, sex, sexual orientation, age, religion and belief, marriage and civil partnership, pregnancy and maternity and language (Welsh).

This policy has been subjected to an Equality Impact Assessment.

The Assessment demonstrates the policy is robust and there is no potential for discrimination or adverse impact. All opportunities to promote equality have been taken.

6. Putting Things Right

6.1 Raising a Concern

If a staff member or service user of the Eating Disorder Outreach Service (EDOS) wishes to seek redress for any unhelpful process in their dealings with EDOS, Cwm Taf Morgannwg University Health Board procedures need to be involved and any professional registration processes followed.

Whilst every effort has been made to ensure that decisions made under this policy are robust and appropriate for the patient group, it is acknowledged that there may be occasions when the patient or their representative are not happy with decisions made or the treatment provided.

The patient or their representative should be guided by the clinician, or the member of NHS staff with whom the concern is raised, to the appropriate arrangements for management of their concern.

If a patient or their representative is unhappy with the care provided during the treatment or the clinical decision to withdraw treatment provided under this policy, the patient and/or their representative should be guided to the LHB for [NHS Putting Things Right](#). For services provided outside NHS Wales the patient or their representative should be guided to the [NHS Trust Concerns Procedure](#), with a copy of the concern being sent to NWJCC.

6.2 Individual Patient Funding Request (IPFR)

If the patient does not meet the criteria for treatment as outlined in this policy, an Individual Patient Funding Request (IPFR) can be submitted for consideration in line with the All Wales Policy: Making Decisions on Individual Patient Funding Requests. The request will then be considered by the All Wales IPFR Panel.

If an IPFR is declined by the Panel, a patient and/or their NHS clinician has the right to request information about how the decision was reached. If the patient and their NHS clinician feel the process has not been followed in accordance with this policy, arrangements can be made for an independent review of the process to be undertaken by the patient's Local Health Board. The ground for the review, which are detailed in the All Wales Policy: Making Decisions on Individual Patient Funding Requests (IPFR), must be clearly stated.

If the patient wishes to be referred to a provider outside of the agreed pathway, and IPFR should be submitted.

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Further information on making IPFR requests can be found at: [Individual Patient Funding Requests](#)

Annex i Patient Pathway

Tier 3 Specialised Eating Disorder Service (includes CITT, CAT, and COT)

Tier 3 services to refer to Tier 4 where the following maybe evident (not exhaustive) :

- Under Part 2 of the Mental Health Measure, with a care co-ordinator
- Have a consultant (where applicable)
- Tier 3 team to ensure management of the medical risk
- The diagnosis and treatment plan may not always be clear
- Where treatment seems stuck and/or the patient is not making progress
- Where evidence-based interventions are not available within Tier 3
- Where the patient is deteriorating
- Where difficult decisions need to be made, including the possibility of inpatient admission
- Failure to engage

Tier 4 Specialised Eating Disorder Outreach Service

Core services:

1 A consultation / discussion with professionals

Provision once a month to every HB area within Wales

(this service is also available to HB areas outside of regular provision)

2 A second opinion with patient and family

Referral criteria

See Tier 3 above

care co-ordination remains with Tier 3

Outcome

Bespoke work with families

Complete package of care to include (not solely) interventions (see 3 below)

Joint working with referring Health Board

If patient requires inpatient admission, Tier 3 to re-submit referral form to T4 inpatient unit (EDOS to remain actively involved if appropriate, see 3 below)

3 Direct services

Multi-Family Group Therapy

Parent Support

Intensive Treatment Programme (available to T4 inpatients)

4 Supervision

For health professionals in South, Mid and West Wales

5 Training

Specialist ED training for health professionals in South, Mid and West Wales

6 Meetings / Conferences

Attending profession specific All Wales and National Special Interest / strategy forums

Annex ii Abbreviations and Glossary

Abbreviations

- **AWMSG** All Wales Medicines Strategy Group
- **NWJCC** NHS Wales Joint Commissioning Committee
- **WHSSC** Welsh Health Specialised Services
- **CAMHS** Children and Adolescent Mental Health Services
- **EDOS** Eating Disorder Outreach Service
- **CITT** Community Intensive Treatment Team
- **CAT** Community Assessment Team
- **COT** Community Outreach Team

Glossary

CAMHS

Children and Adolescent Mental Health Services. Each Health Board across South and West Wales has a CAMHS team. Usually within these teams is an embedded or separate Eating Disorder team. Referral pathways between CAMHS and the specialist ED team may vary from Health Board to Health Board.

Individual Patient Funding Request (IPFR)

An IPFR is a request to NHS Wales Joint Commissioning Committee (NWJCC) to fund an intervention, device or treatment for patients that fall outside the range of services and treatments routinely provided across Wales.

NHS Wales Joint Commissioning Committee (NWJCC)

NWJCC is a joint committee of the seven local health boards in Wales. The purpose of NWJCC is to ensure that the population of Wales has fair and equitable access to the full range of Tertiary Services. NWJCC ensures that services within our portfolio are commissioned from providers that have the appropriate experience and expertise. They ensure that these providers are able to provide a robust, high quality and sustainable services, which are safe for patients and are cost effective for NHS Wales.