

Maudsley Family Training 1-3rd November 2010
Paul Rhodes & Andrew Wallis, Werry Centre,
Evaluation Report from Midland Representatives

Training:

In November 2010, the Werry Centre hosted a Maudsley Family Training in Auckland. The Maudsley model was developed at the Maudsley Hospital in London and was manualised in 2001. The model integrates ideas from a number of family therapy approaches but has the basic premise that families have the resources to help their child recover from Anorexia Nervosa in the home setting. The model is suitable for adolescents with Anorexia Nervosa with a short course of illness (less than 3 years). It is an outpatient treatment that supports the family over a 1-year period. There are a number of randomised control trials that support the models efficacy.

WORKSHOP CONTENT

The aim of this workshop will be to provide intensive practical training in the application of this model including:

- Theoretical underpinnings and core concepts
- Empirical support for the Model
- Detailed descriptions the treatment phases and specific sessions
- Macro and micro skill development
- Challenges of the model and issues that can effect outcome
- The experience of families and young person during treatment
- Systemic / organisational change needed to support the model

By the completion of this workshop participants should be able to begin to incorporate the Maudsley model into their own practice.

Prerequisites for the workshop would include:

- Experience with eating disorders
- Experience working with families
- An opportunity to apply the model in clinical practice

Expectations of training:

The national Eating Disorders Workforce Subgroup in consultation with the national Eating Disorders Steering Group have opted for two-tier training. In the national consultation process it was noted there is already a degree of expertise in Maudsley Family Therapy in New Zealand, hence this two tier training was suggested. Those attending the first training will become the potential supervisors, within the hub and spoke model to those attending the second training and their teams/networks.

Allocation of training:

The Auckland workshop was invite only with a limit of twenty five individuals. Training places were proportionally distributed nationally by the population base of the four regions (ie Northern, Midlands, Central and Southern). The Midland region were allocated 5 places. Regionally, it was determined to offer each DHB within the Midland region one place on the training. Workshop participants were nominated locally, by the Eating Disorder Liaison position within each DHB.

The five representatives nominated to attend were:

BOP - Daniella Alloro

Lakes - Liz Carrington

Tairāwhiti - Yvonne Van der Worm

Taranaki - Pauline Humm

Waikato - Ashleigh Englebrecht

The training fee and travel was funding by The Werry Centre, The Midland Regional Network provided accommodation assistance for the five Midland participants..

Evaluation Summary by Midland Representatives

The data is based on feedback received from the five participants. Participants completed the Midland Evaluation form.

Content:

The content of the workshop overall was ranked high .Consistently, all participants reported on the skill of both facilitators and practical demonstrations.

Course Facilitator:

All participants reported a high level of engagement, interest and demonstrated skill by the facilitators

Process/Environment:

Registration was invite only, accommodation assistance was provided by Midland Regional Network.

Participation:

All participants reported a high level of engagement, and confidence in training others in Maudsley Family training.

What did the participants find most useful (ranked in order of highest number of responses)?

- Role playing, practical demonstration of how to apply.
- Handouts, which were described as useful to train others
- Extensive knowledge of speakers and ability to impart knowledge

Data

Overall Rating	4.6	
Demonstrated knowledge of content	5	
Modelled techniques	5	
Instructors interest in participant	4.6	
Process/Environment		
	4.6	
Registration process was easy	4.6	
Location of the training room	4	
Facility was appropriate	4.6	
You the participant		
I was fully present and actively participated	4.6	
my co-participants were actively involved...	4.6	
I feel confident to be able to train other staff	4.4	

	Not good, staff unhappy
	OK but keep an eye on this
	Good replies - keep it up

What were the three key things participants learnt (ranked in order of highest number of responses)?

- Meal planning
- Supporting parents to take responsibility and inclusion of family in managing resistance
- Examination of the role of the therapist in therapy
- Conducting the first session, working with resistance, and the therapy process
- Commitment to the model and family therapy origins.

Was there anything missing that should be included?

- For one participant, the last day was described as a bit rushed and more discussion regarding phase 3.

Would this be recommended to others?

- Yes to all staff working with children/adolescents and their families
- Mental Health staff, Pediatrics, GP's.

Ruth Choudharey
Midland Workforce Coordinator