

# NEWMARKET HOUSE



## A HANDBOOK FOR CARERS

November 2016

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## **1. INTRODUCTION**

### **What are eating disorders?**

Eating disorders are complex psychological conditions. They are a sign of psychological distress and a way of coping when life feels difficult. There is no one clear cause for an eating disorder, but likely to be a number of contributing factors which lead to an individual feeling unable to cope.

Although a person's feelings about and/or experience of family life can be a contributing factor, we know that families themselves do not cause eating disorders. What we do know is that everyone is different and their eating disorder is too. Anyone can develop an eating disorder at any age, regardless of their sex, culture or race.

### **This Handbook**

The purpose of this handbook is to help families and carers with practical suggestions as to how they might support their family member or friend while they are with us at Newmarket House. It is also a source of information and a useful way to let you know what you can expect during their admission.

Whether you are a parent, step-parent, child, sibling, partner, other relative or a friend who is offering emotional and/ or practical support to someone with an eating disorder it can be difficult. It is common for family and friends to feel many emotions during this time and many people report negative effects on their health, family life and other areas of their lives.

Families and friends also tell us that they have felt unsure about how best they can help and at times they report feeling as though they are 'walking on eggshells'. Sometimes the fear and anxiety family and friends experience can leave them feeling a sense of responsibility for their family member's ongoing treatment. This can be a very exhausting situation and it can be common to experience a sense of relief following your family member's admission. On the other hand, given the vigilance you may have felt you needed whilst your family member was at home (whether they were living with you or not), you may also find it difficult to 'let go' and entrust their care to the staff at Newmarket House. We hope you will have sufficient confidence in us to feel able to do so.

Shortly after your family member's admission, you will be contacted by our Clinical Care Liaison Co-ordinator who will be able to tell you about the support available to you and will be happy to give you general information about Newmarket House. If you require particular information about your own family member, please feel free to contact the nursing staff at any time.

At the end of the handbook you can find more information about the support we offer to carers, details about our website and a recommended reading list.

## **NEWMARKET HOUSE**

Newmarket House is a private voluntary hospital dedicated to the treatment of those affected by eating disorders. It is a spacious Victorian house with a large garden one mile from the centre of Norwich. We can accommodate ten patients.

Newmarket House offers a calm and optimistic atmosphere where patients discover they deserve a better life than one that is governed by the symptoms of their illness. With the encouragement of the dedicated team patients learn to develop a sense of who they are and the self-esteem to enable them to begin to take responsibility for their own lives.

The weeks at Newmarket House follow a set format offering a combination of therapies in a caring and structured environment. There are groups to attend during the week, and weekends and Wednesday afternoons are allocated as free time.

Patients remain at Newmarket House until they reach a level of improved health whereby they may be transferred safely to the community to continue with their recovery as an outpatient.

Newmarket House is a collaborative community where individuals are supported through the stages of overcoming their eating disorders. In order for patients to achieve this, they will be offered:

- 24 hour care
- Safe and effective treatment
- A calm and optimistic environment
- Each patient is assigned a key nurse and will be offered support from all nursing and support staff
- Staff support through a gentle programme of refeeding with the aim of establishing healthy weight restoration
- A structured daily programme of therapeutic activities designed to foster a new sense of self awareness
- Individual, group, and family therapy to provide a safe means of exploring emotional issues
- Encouragement to develop a sense of self-esteem and responsibility
- An opportunity to explore relationships within families and within Newmarket House
- A respect for individual, cultural, and religious backgrounds
- Support for the patients' families and carers

At the core of our programme is the belief that all eating disorders are conditions from which patients can recover.

## **2. WELCOME PACK**

Each patient is given a Welcome Pack when they arrive and the relevant sections are reproduced here for your information.

House rules are few and they are designed to protect the patient rather than for the convenience of staff. We would be grateful if you would support us in upholding them.

### **Consent to treatment**

The treatment programme at Newmarket House is designed to cater for the individual healthcare and personal needs of each patient. On admission, a patient is asked to sign a Consent Form agreeing to accept treatment. We need to be satisfied that a person understands the nature of their treatment, its likely effects and the likely outcome if they choose not to comply. Privacy, dignity and confidentiality will be considered at all times.

### **Confidentiality**

On admission a patient will be asked to sign a consent statement giving permission for Newmarket House to access information from, and communicate with, other agencies involved in a patient's care. They will also be asked to sign another form to give consent to Newmarket House contacting their families and carers in order to give information about the support we offer to carers. We will also ask if they are happy to share any or all information about their treatment and progress with identified family members or friends.

There are laws protecting individual's rights to privacy and guaranteeing them confidentiality. Without permission we are unable to share any information about your family member's treatment or progress with you.

### **Safety**

It is not possible for patients to self-medicate whilst at Newmarket House or to keep or take any non-prescribed drugs. We must ensure the safety of all our patients so we ask that medicines are given to the nurse on duty to be locked in the medicine cupboard for administration by a nurse. It may be possible to keep lotions and creams in the safe in a patient's room.

Patients are not allowed alcoholic drinks.

Patients cannot supply their own food or drink and no low calorie drinks, foods, substitutes or chewing gum are allowed in the Clinic.

Newmarket House will take responsibility for weight monitoring as part of a patient's treatment. Patients are not allowed to bring personal sets of weighing scales into Newmarket House.

Under certain circumstances it is sometimes necessary for staff to conduct searches, including searches of personal possessions, in the presence of a patient. Two members of staff will be present during a search. Any possession thought to be detrimental to the safe environment of the Clinic will be removed.

Patients are not allowed to bring cars, bicycles or skateboards to Newmarket House.

## **Personal Property**

Patients should try to avoid where possible bringing money or valuable items into Newmarket House. However, if they are brought in, these must be kept in the patient's individual safe for safe keeping.

Bed linen and towels are, of course, provided but patients are very welcome to bring their own, if they prefer. Patients may like to label their own possessions.

Personal computers and laptops are allowed and a computer for the patients' use is available in the sitting room. There are two televisions for the patients' use, but patients are not allowed televisions in their bedrooms.

It is essential that patients insure their own personal effects to cover damage or loss. Newmarket House is unable to take responsibility for this

## **Mobile phones**

When a patient arrives we may ask them to hand in their mobile phone and it will be kept safely in the nurses' office. They will be able to check it whenever they want. Once it has been returned, we ask that phones are only used between 8am and 10pm unless specific permission has been given by the nurse in charge of the shift. However, the use of phones is not allowed during groups, meal times or supervision. Phones should be kept on silent or vibrate mode so that they do not disturb other patients. The use of the camera facility is not permitted.

## **Independent Advocacy Service**

For information, advice and advocacy service contact Equal Lives:  
15 Manor Farm Barns, Fox Road, Framingham Pigot, Norwich, NR14 7PZ  
01508 491210  
[www.equallives.org.uk](http://www.equallives.org.uk)  
[info@equallives.org.uk](mailto:info@equallives.org.uk)

## **Complaints**

We hope you will not have reason to make a complaint, but if you have any concerns please speak with a senior member of staff or the General Manager who can discuss your concerns and/ or refer you to our Complaints Procedure Policy.

## **Care Quality Commission**

Newmarket House Healthcare Ltd is inspected by the Care Quality Commission ([www.cqc.org.uk](http://www.cqc.org.uk)). A copy of the most recent CQC annual inspection report may be accessed via their website or on request from:

CQC National Correspondence  
Citygate  
Gallowgate  
Newcastle-Upon-Tyne  
NE1 4PA  
Tel: 03000616161

## **HOW YOU CAN HELP US**

### **Food and weight gain**

An important aspect of treatment at Newmarket House is that we do not engage in conversations or deals around food. We see food avoidance as a symptom of the illness. We do not discuss target weights or calories with patients. Weight gain is vital, but discussion about it is not always helpful. Whatever weight gain the patient sees on the scales, even if it is very low, can become a focus for them. It would assist us greatly if you, too, do not allow yourself to become involved in discussions about these issues.

### **Language**

Each member of our staff is trained to avoid making remarks that may cause distress. Even simple comments such as 'You look good today' may be interpreted as 'I've put on weight'. This may be obvious to anyone who has lived with someone suffering from an eating disorder, but it would be helpful if you would ask siblings, grandparents and friends to try to avoid making personal comments of this nature.

### **Contact**

By the time they are admitted for treatment most patients have been ill for some time and the symptoms of their eating disorder may have masked their own identity. At Newmarket House we teach patients to recognise the difference between the symptoms of their illness and the characteristics of their own underlying personality. Thus they can begin, for themselves, to challenge their own eating disorder thinking. You may find it helpful, when speaking to your family member, to consider whether it is the 'voice' of the eating disorder you are hearing or whether it is their true voice.

For example, soon after their admission to Newmarket House they may telephone you to tell you they are unhappy and ask to come home. This may place you in a difficult position. Is what they are telling you really the truth or are they hoping you will believe them and take them home, allowing them to continue to avoid having to face up to treatment and recovery. Conversations like this are bound to make you feel anxious.

Although treatment at Newmarket House is voluntary, please may we suggest you do not allow yourself to become engaged in long negative conversations of this nature. In doing so, you could find yourself colluding with their eating disorder and facilitating their illness, rather than supporting them in fighting it. If you are worried about what they are telling you, please do not hesitate to ring us and discuss your concerns with their Key Nurse, Clinical Care Liaison Co-ordinator or a Senior Staff member on duty.

### **Telephone**

The telephone numbers at Newmarket House are:

- Administrative Office 01603 452226
- Patients' Payphone 01603 505772

Telephone calls may not be taken during group activity times or at meal times. It would be helpful if you could ask family members or friends to restrict their calls to evenings, Monday - Friday, or at any time during the weekend.

## **Visits**

Families and close friends are welcome to visit on Wednesday afternoons and weekends, except during meal times. In exceptional circumstances, visiting outside these times is sometimes agreed. During the first month of treatment, the number of visits a patient can have is decided on an individual basis to help the patient settle into the Clinic routine.

During visits to the Clinic the counselling or art rooms may be used, if available, rather than the patient's bedroom. Please arrange this with a member of staff and always let them know where you will be, for the patient's own safety.

Visitors must always sign in and out of the register on the hall table in case of an emergency. If you were to discover a fire during your visit, raise the alarm straight away and leave by the nearest exit. Under no circumstances should you go to a patient's room to collect any possessions.

## **Outings**

Outings and car rides will be agreed at the patient's review meetings when it is felt that they are ready to go out. A patient should not leave the Clinic unless by prior arrangement. On leaving and returning they should tell a member of staff and sign the register in the hall.

Usually a member of staff or a relative accompanies a patient when they go out unless it is agreed at review meetings that it is safe for them to be unaccompanied.

Weekend leave is considered by the multi-disciplinary team when it is felt that a patient is ready to begin short periods away from the Clinic.

## **HOME VISITS AND HOME LEAVE**

As treatment progresses, the staff here will begin to plan some periods of home leave with your family member. This is an important part of the recovery process as it allows the patient to begin to take responsibility for them self, practice the skills they have learnt in treatment, and develop a life outside of the eating disorder.

We know that trips outs and home visits, even just for a day can feel stressful for everyone involved, especially in the early stages of home visits.

Your family member will have developed a plan with staff for managing their meals and snacks and will have considered as much as possible how to manage any anxiety provoking scenarios.

Below are some things we believe are helpful to be aware of during day and home visits:

### **Meal times**

Although your family member may be making progress, they might find the experience of eating more difficult when they begin to go out or go home. Reasons for this include:

- At Newmarket House they can feel more reassured that the quantity of food they are given is the appropriate amount. When they begin to eat food outside of Newmarket House they may feel anxious about having to estimate the size of a 'normal' portion.
- They may feel watched for signs of improvement.
- They may feel tempted to avoid certain foods.

Since home visits can be stressful, do not be disappointed if they still feel the need to avoid, hide, or be secretive around food. By all means, mention you have noticed this, but do so gently.

Stock the fridge as you would normally. If, however, someone in your home is on a diet to control their own weight, please try not to discuss this during the visit.

### **Communication**

You may find your family member is less communicative than they were before they were admitted for treatment, or perhaps reluctant to talk about their progress or difficulties. Remember that they will be spending a great deal of their time at Newmarket House talking to staff about their thoughts and feelings. Try not to underestimate how tiring it is for them to work on their physical and psychological recovery.

On the other hand, they may want to discuss the minute detail of their treatment or eating disorder. At times their eating disorder thinking might get in the way of seeing the bigger picture of recovery. We do not need to tell you that the eating disorder mind is hyper-sensitive and their thinking style can be very black and white.

These hints may be helpful:

- Try to avoid confrontation, especially at meal times
- Try to be empathetic – it's not always easy, but remember it is impossible to win an irrational argument.
- Try to make a positive effort to listen to what they are telling you. Sometimes it helps to summarise or repeat back and clarify what they have said in order to emphasise that you have listened and want to understand.
- Silence – pauses in conversations are ok, they give us time to think about what has been said and what we might want to say in response.
- Stay calm – it's hard to concentrate on listening when we are worried or panicking about what we are being told.
- Take a step back – phrases like “we'll talk about this later when we all feel calmer” are helpful as long as you do indeed re-visit the topic.
- Try not to preach or lecture or become authoritarian.
- Encourage self-expression – ask opinions and give choices or options if someone is finding it hard to make a decision about something (i.e. what shall we do tomorrow?)
- Try not to prescribe solutions or a course of action but instead emphasise that they have the choice and responsibility for deciding their own future.
- Be aware how important it is for each voice in the family to be heard. It is helpful if you try to talk one at a time and not interrupt.

### **Over exercisers**

Whilst in the Clinic, over exercisers are closely observed and restrictions are imposed. Depending on where someone is in their recovery, a home visit may remind someone of their old eating disorder rituals and routines and as a result they may fall back into old habits (i.e. exercise). Beware the suggestions of long walks or long shopping trips, but don't always assume an opportunity to exercise to be the motivator. Going for walks and shopping together can also be very 'non eating disorder', healthy, and fun things to do together. If you are worried that your family member's suggestions for activities are too active, speak to a member of staff who can suggest more sedentary activities like playing a board game or a trip to the cinema.

### **Celebrations – Birthdays, Christmas, etc**

Celebrations almost invariably involve food, presents, and an emphasis on happiness and togetherness. This expectation can feel highly pressured and stressful for us all, even without the presence of an eating disorder. Planning and open discussion can be helpful in trying to avoid it all becoming too much to cope with.

We are all different and some of us find it is easier to give rather than to receive presents. Often, those suffering with low self-esteem have great difficulty in receiving presents since they feel they do not deserve them. It is hard for the donor, if a present chosen with great care remains unopened for days or is rejected, but perhaps it helps to know that this can be normal behaviour and will pass as the illness is overcome.

**In general**

Although it's not always easy, try to remember that you are the parent, child, sibling, partner, relative or friend and not their therapist. Try to enjoy each other's company and do not panic about getting things wrong – you are only human.

If a visit becomes too difficult, do not hesitate to bring your family member back early and please do not regard this as a failure.

It is very helpful to staff if you report back to them on how things have gone, in particular any problems you may have encountered.

### **3. RECOVERY**

When considering recovery from an eating disorder, there is no single definition because it can mean different things to different people. However the guiding principle has to be hope – the belief that full recovery is possible. The treatment we offer at Newmarket House encourages people to aim for a life free from their eating disorder.

The idea of recovery can raise anxiety in both the patient and their family. As a patient regulates their eating and weight restores, they may experience painful emotions that have been suppressed by their eating disorder. This can be a very difficult time for your family member and a time when they may consider going back to their old way of coping (in this instance, their eating disorder). You may view this negatively or as a sign of relapse, however, fleeting thoughts of going back to an old behaviour or even having a 'blip' is an understandable part of making changes and at this stage remembering the bigger picture and the positive things about recovery can be very motivating. Try not to panic about a 'blip'. This can be a useful way in learning how to do things differently next time. Try to focus on the things that have gone well.

Sometimes people report an initial drop in their mood when they are trying to recover, this is understandable given the above. In these instances patients can become more distant and uncommunicative with their families and friends. This is not inevitable, but you may find it hurtful unless you understand it can be normal behaviour in the recovery process.

Whilst we do not encourage this development, if a patient feels they need a degree of separation from their family or friend it is not helpful if staff attempt to persuade them to remain in close contact. You are always most welcome to contact staff to discuss your concerns and anxieties.

#### **What next?**

After supporting someone through the different stages of their illness, you may find yourself becoming impatient and feeling that progress seems to be slow. It is understandable that you want your family member to recover as quickly as possible, but recovery can take time - there is no quick fix and it takes hard work and determination.

#### **4. WHAT ABOUT YOU?**

It is important to remember that we are only ever in charge of our own lives and we cannot control what others do. As much as you want your family member to get better you can't make them, only they can make the necessary changes to do so. However, you can play an invaluable supporting role - they alone can do it, but they can't do it alone.

When patients are admitted, often families and carers report feelings such as confusion, self-blame, guilt, exhaustion, sadness, a sense of loss, fear, anxiety, resentment, anger, and can feel rejected. Your family member may have been your main preoccupation for several years, sometimes to the detriment of your own wellbeing.

Looking after yourself is really important. Time for yourself is a big part of taking care of your own needs. Not only does looking after yourself role model being a healthy adult (both in the physical and psychological sense of the word), it also allows you to be as recharged as is possible when you are offering support to your family member. Now that your family member is with us at Newmarket House, it is a good time to try to start (if you weren't already) finding some time for yourself.

#### **Support for Carers**

Support for families and friends is central to our ethos. We offer a wide range of support – details of which can be found in the next section of this handbook.

#### **Family therapy**

Family therapy is offered to the families of all our patients. It offers, within a safe and supported environment, an opportunity for family members to explore and express their own feelings and anxieties. Many families have told us how invaluable these sessions have been.

#### **Multi-Family Therapy**

Multi Family Therapy (MFT) is a recognised treatment approach. It provides a more intensive form of family intervention than single family therapy. The programme runs over 3 days during 1 week and requires all family members to attend. The days are structured and involve many tasks and discussions with the aim to help improve family understanding, encourage collaborative working and improve communication. It also aims to help family members to feel more confident in their interactions around food and meal times. The sharing of experiences and the dynamics of the group are important components of the treatment.

MFT is available to all families. We will discuss this with you and your family member at an appropriate time during your family member's treatment.

#### **Siblings**

For patients who may have been living at home (with their siblings), it is important to recognise that those siblings may have experienced a range of their own emotions about the eating disorder and the impact it has had on the family. They may feel that their needs are overlooked or not as important when their brother or sister is so unwell. It might be particularly difficult for them to understand that the eating disorder is not a 'choice' their brother or sister has made, but an illness. Frequently, however, it seems that the greatest concern of siblings is the stress the illness is causing their parents. If you are receiving family therapy, do feel free to involve them. This may

help them to manage how they are feeling, understand that the problem is being addressed and it may relieve them of their perceived responsibility to support their parents.

### **Hold the hope...**

Everyone who walks through the door at Newmarket House, staff, families, and most importantly the patients themselves must believe that full recovery from their eating disorder, however severe, is possible. The focus of our treatment is to increase and deepen our patients' self-awareness and to encourage them to develop the ability to make the choices that will enable them to live as independent adults. We hope this will become a strength they will draw on in years to come, enabling them to understand and be aware of growth and change within themselves as life unfolds, long after they have left Newmarket House.

## **5. SUPPORT FOR CARERS**

### **Support Plan Meeting**

A Support Plan Meeting is offered to all carers. It is an opportunity to meet face to face (or this can be done over the telephone if preferred) to discuss how supporting your family member is affecting you and think together about what kinds of advice and support might be specifically helpful to you at this time. Ongoing carer support sessions and/or telephone calls are offered as part of this plan.

### **Support Group**

We know that family members can have a significant role in a person's recovery from their eating disorder, but often they feel unsure of what to do or how they can help. The group is an opportunity to share experiences and anxieties with other carers in a supportive environment. The format of this group is variable, sometimes we invite a guest speaker to come along – this maybe another health professional or a recovered patient and/or their family member.

We also offer Skills Workshops which are designed to offer carers support in how to apply and practice skills which promote recovery. These are skills you might find helpful whilst your family member is an inpatient, but also the skills for when they return home (regardless of whether they live with you or not).

The group and workshops are facilitated by our Clinical Care Liaison Co-ordinator.

### **Telephone Support**

We are aware that you may have some distance to travel in order to attend our groups and that this journey might not always be possible. Regular telephone support is also available at a mutually convenient time.

All of the support services for carers are organised and facilitated by our Clinical Care Liaison Co-ordinator. Shortly after your family members admission she will be in touch with you, but if at any time you would like to organise a Support Plan Meeting or would like any further details about the support services we offer to carers here at Newmarket House then please contact her on 01603 452226.

## 6. RECOMMENDED READING

Below are some reading materials which have been found useful by families and friends:

- **Skills-based learning for Caring for a Loved One with an Eating Disorder: The New Maudsley Method** – *Janet Treasure, Grainne Smith and Anne Crane, 2007*
- **Anorexia Nervosa: A Survival Guide for Families, Friends and Sufferers** – *Janet Treasure, 1997*
- **Beating Your Eating Disorder: A Cognitive-Behavioural Self Help Guide for Adult Sufferers and Their Carers** – *Glenn Waller, Victoria Mountford, Rachel Lawson and Emma Gray, 2010*

You can find more information about the eating disorders and further details about Newmarket House on our website [www.newmarket-house.co.uk](http://www.newmarket-house.co.uk)