



CARALINE ANNUAL REPORT 2016/17

NHS
*Bedfordshire
Clinical Commissioning Group*

NHS
*Luton
Clinical Commissioning Group*

bacp

British Association for
Counselling & Psychotherapy



LOTTERY FUNDED

Registered Charity Number: 1053897

Where to find Caraline:

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13 George Street West
Luton
Bedfordshire
LU1 2BJ

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Email: admin@caraline.com
Website: www.caraline.com

Service Director: Claire Jackson

**Honorary
Chairperson:** Brian Holmes

Charity Number: 1053897

Caraline

Eating disorders counselling & support service

Annual Report

For the period:
1st April 2016 to 31st March 2017

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1.0 Introduction

1.1 Purpose of the service

Established in February 1994, CARALINE provides a confidential counselling and support service for people with anorexia nervosa, bulimia nervosa, compulsive over-eating, binge eating and other specified feeding and eating disorders (OSFED).

Whilst direct helping services are prioritised for the residents of Bedfordshire & Luton, requests for counselling and support from people with eating disorders and carers who live outside of the county are considered in accordance with individual need and the practical arrangements for effecting care.

Emphasis is placed upon engaging people with eating disorders within the early stages of their illness, with an overall aim of the service being to offer a comprehensive support package to sufferers, their families, and involved health-care professionals.

Where possible, people with eating disorders are supported within the community with the aim of minimising the need for hospital admission, although support visits are made to those clients of CARALINE who are hospitalised.

1.2 Charity Information

Registered Charity number: 1053897

Board of Trustees

Brian Holmes (Treasurer & Hon. Chair-Person)
John Jackson (Hon. Secretary)
Alan Jeffs (Trustee)
Gill Peck (Trustee)

Executive Committee – *other members*

Claire Jackson (Service Director)

Mental Health Advisor:

John Butler BSc (Jt. Hons.), RN, MSc, PGDipHE, FHEA

Registered Office:

Kline House
13 George Street West, Luton, Bedfordshire LU1 2BJ

Treasurer:

Brian Holmes
Kline House
13 George Street West, Luton, Bedfordshire LU1 2BJ

Independent Examiner of Accounts:

Mark Plane
Whittaker & Plane Accountants, Luton

Bankers:

HSBC (Midland) Bank PLC
63 George Street, Luton LU1 2AP

Solicitors:

Machins Solicitors
Victoria Street, Luton LU1 2BS

2.0 Service Objectives (The Charity's Objects)

- 1. The relief of those suffering from anorexia or bulimia nervosa, in particular by the provision of a confidential counselling and support service within non-stigmatising surroundings.*
- 2. The preservation and protection of the mental and physical health of sufferers by the provision of an accessible alternative to hospital-based care in order to reduce both the necessity for admission to a psychiatric hospital and the duration of the length of in-patient care for those admitted.*
- 3. The preservation and protection of the mental and physical health of the families of persons suffering from anorexia or bulimia nervosa.*
- 4. The advancement of education amongst sufferers, carers, professionals and the public at large, in particular by the provision of an education service which offers information and skills-based learning opportunities relating to anorexia nervosa, bulimia nervosa and associated mental health issues.*

(Amendment to Object No. 4 was agreed and approved by the Charity Commission on 16-2-2000)

3.0 Report of the Honorary Chairperson

I would like to begin by thanking all staff, volunteers, and the Caraline Board members for another successful year.

During 2016-17 Caraline secured NHS funding from the Bedfordshire Clinical Commissioning Group and Luton Clinical Commission Group to offer full core services to all service users and carers, which included the following treatment:

- Individual evidence based (CBT-e) sessions for service users, following assessment.
- A 10 session evidence based Eating Behaviours Group.
- Outreach Programme for Luton and Bedfordshire.
- Monthly creative art groups.
- Monthly client support group offering peer support.
- Individual Carer's support sessions.
- Monthly Carer's support group.
- Afresh weight management programme.

The Caraline Team remained dedicated throughout the year, seeing the majority of clients within 2 weeks of the date of their referral into the service, unless a client had requested a delay if for example they were going on holiday or for religious reasons. This is something the Team worked very hard to achieve as it is recognised that fast assessment and intervention makes all the difference to a client's physical and mental wellbeing.

There have been lots of exciting developments over the last 12 months with the pilot of the Afresh Weight Management programme, the recruitment of an Occupational Therapist to complement the Team, the introduction of new staff training (CBT-e) to ensure we are compliant with the new NICE Guidelines, and consequently new and updated evidence based treatment for our clients. Further details of all these achievements will be mentioned in the Service Manager's Report, but all staff should be very proud of embracing and implementing these changes to ensure we are delivering the most up to date treatment.

On a final note, I would like to say once again that I am looking forward to Caraline's continued success and working alongside my fellow Trustees, staff and volunteers in the forthcoming year. On behalf of the Board of Trustees, I would like to take this opportunity to thank the whole team at Caraline for their continued passion, hard work, and dedication at all times, resulting in us being able to offer much needed help and support to the community of Bedfordshire.

Brian Holmes
Caraline Chairperson

4. Founder & Service Manager's Report 2016-2017

This financial year has been an exciting year for all of us working at Caraline, with a particular focus on the development of the current service provision including the following.

- CBT-e
- Afresh Weight Management Programme (Pilot)
- Eating Disorder Awareness Week
- Radio Interview
- Recruitment of an Occupational Therapist

Enhanced Cognitive Behavioural Therapy (CBT-e)

The National Institute for Health and Clinical Excellence (NICE) will be publishing a new updated guidance for commissioners and service providers to those living with eating disorders in May 2017. We are aware that the Transdiagnostic approach to working with eating disorders is proven to be the most effective treatment and a focus on early intervention is paramount.

CREDO- Oxford www.credo-oxford.com who are a Centre for Research and have been responsible for the development and evaluation of many leading treatments for adults with eating disorders. Caraline were given the opportunity to participate in their digital training programme to train therapists in the successful delivery of CBT-e. With thanks to CREDO, our clients can now benefit from the most evidenced based treatment of which will be listed in the new NICE Guidelines. Please check out CREDO-Oxford website for further information on the treatment.

Afresh Weight Management Programme

Caraline is commissioned to work with eating disorder clients of whom need to meet the diagnostic criteria of either Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder as well as Other Specified Feeding or Eating Disorders (OFSED, previously EDNOS) and Avoidant Restrictive Food Intake Disorder (AFRID is a newer diagnostic category introduced in the DSM-5 that allows for more appropriate diagnosing of individuals especially children, with atypical eating disorders.

The programme was designed as a pilot programme in response to an increase in the number of referrals received from the Luton and Dunstable Hospital's Weight Management and Bariatric Service. It was evident when assessing these clients that many of them were experiencing psychological issues with food in a way that was leading to general overeating as well as binge eating, but for many of them, they did not meet the diagnostic criteria for binge eating disorder. It was noted that there were a number of psychological factors contributing to the maintenance of problematic eating (and therefore contributing to obesity), and because of the high level of referrals, a 40 hour, Cognitive Behavioural Therapy based treatment programme was designed. An executive summary of our findings can be found in Appendix 2 at the back of the annual report. Funding for the pilot project was through Lottery funding.

Eating Disorder Awareness Week

Whilst understanding around eating disorders has improved over the years there is still much more to be done in particular around raising awareness and the importance of early intervention along with trying to help remove the stigma around Mental Health Illness in general. To raise awareness, Caraline held an open evening where service users, professionals came together to look at the services we provide along with being able to participate in Creative Art with our newly appointed Occupational Therapist.

Carly and I were also guest speakers on our local community radio Inspire FM discussing the new afresh programme as well as raising awareness about eating disorders.

Finally, I wish to thank all of the staff and Trustees at Caraline for their continued enthusiasm and hard work.

Claire Jackson
Founder and Service Manager

5. Financial Report

Please see attached financial report on next page.



CHARITY COMMISSION
FOR ENGLAND AND WALES

Charity Name Caraline: Eating Disorders Counselling and Support Service	No (if any) 1053897
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CC16a

Receipts and payments accounts

For the period from	Period start date 1st April 2016	To	Period end date 31st March 2017
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Section A Receipts and payments

	Unrestricted funds to the nearest £	Restricted funds to the nearest £	Endowment funds to the nearest £	Total funds to the nearest £	Last year to the nearest £
A1 Receipts					
PCT Service Level Agreement	125,480	-	-	125,480	103,880
Fundraising	8,852	-	-	8,852	964
Donations	1,755	-	-	1,755	1,620
Bank Interest	22	-	-	22	30
Other Income	-	-	-	-	33
	-	-	-	-	-
	-	-	-	-	-
	-	-	-	-	-
Sub total (Gross income for AR)	136,109	-	-	136,109	106,527
A2 Asset and investment sales, (see table).					
	-	-	-	-	-
	-	-	-	-	-
Sub total	-	-	-	-	-
Total receipts	136,109	-	-	136,109	106,527
A3 Payments					
Wages and Employers NIC	98,920	-	-	98,920	-
Office Costs	7,337	-	-	7,337	6,287
Self employed contractors & Supervision	4,291	-	-	4,291	91,966
Staff Training	4,753	-	-	4,753	432
Insurance	2,271	-	-	2,271	2,255
Premises Cost	1,688	-	-	1,688	1,423
Equipment Expensed	1,000	-	-	1,000	856
Subscriptions	499	-	-	499	496
Accountancy Fees	300	-	-	300	264
Staff Expenses	21	-	-	21	37
Sub total	121,080	-	-	121,080	104,016
A4 Asset and investment purchases, (see table)					
	-	-	-	-	-
	-	-	-	-	-
Sub total	-	-	-	-	-
Total payments	121,080	-	-	121,080	104,016
Net of receipts/(payments)	15,029	-	-	15,029	2,511
A5 Transfers between funds	-	-	-	-	-
A6 Cash funds last year end	28,107	-	-	28,107	25,596
Cash funds this year end	43,136	-	-	43,136	28,107

Section B Statement of assets and liabilities at the end of the period

Categories	Details	Unrestricted funds to nearest £	Restricted funds to nearest £	Endowment funds to nearest £
B1 Cash funds	Cash at bank and in Hand	43,136	-	-
		-	-	-
		-	-	-
	Total cash funds	43,136	-	-
	(agree balances with receipts and payments account(s))	OK	OK	OK
B2 Other monetary assets	Details	-	-	-
		-	-	-
		-	-	-
		-	-	-
		-	-	-
		-	-	-
B3 Investment assets	Details	Fund to which asset belongs	Cost (optional)	Current value (optional)
			-	-
			-	-
			-	-
			-	-
B4 Assets retained for the charity's own use	Details	Fund to which asset belongs	Cost (optional)	Current value (optional)
	Leasehold Property	Endowment	107,101	-
	Office Equipment	Unrestricted	5,442	-
			-	-
			-	-
			-	-
			-	-
			-	-
			-	-
B5 Liabilities	Details	Fund to which liability relates	Amount due (optional)	When due (optional)
			-	
			-	
			-	
			-	
Signed by one or two trustees on behalf of all the trustees	Signature	Print Name	Date of approval	

5.2 Provision of Services

CARALINE has continued to provide services from its Centre in central Luton, having secured these premises with the help of a capital funding grant from the National Lottery Charities Board. The Centre's facilities have been widely complemented by staff, professionals and clients alike.

Individual work has continued to be based upon an assessment of the client's specific problem areas, with a focused programme of individual or group intervention sessions being offered in the first instance.

Individual counselling sessions continue to be based upon one or more recognised therapeutic approaches, and principally the cognitive-behavioural and person-centred approaches.

All individual sessions / programmes have been offered by counsellors or therapists who are trained to at least diploma level, and each has received formal supervision on a regular basis.

5.3 Fund Confirmation

In the opinion of the Trustees, the Charity's assets are sufficient to fulfil the current obligations of the Charity for the coming year.

Most grants that have been received relate to specific projects, restricting the use of such funds to the project rather than for meeting the costs of Caraline's overheads (revenue costs), and meeting these costs remain a challenge.

In this respect, Caraline is indebted to the local NHS (Bedfordshire CCG and Luton CCG) for their continued financial support in accordance with a Service Level Agreement, which is re-negotiated annually. Withdrawal of this grant aid would have a major impact upon the services that could be provided.

Acknowledgements

Caraline would like to thank all our members and volunteers who have helped us financially and practically over the past twelve months.

Prepared for, and on behalf of, CARALINE Trustees by:

***Brian Holmes (Hon. Chairperson & Trustee)
& John Jackson (Trustee)***

Signed:



.....
Trustee



Trustee

5.4 Trustee Matters

The current Trustee Board seek applicants from any section of the community and new Trustees can be elected at any time.

If you believe you can make a contribution to Caraline's Objectives, please do get in touch.

Appendix 1: Patrons, Executive Committee & Caraline Team-members

PATRONS:

Cleo Laine DBE

Dr. Roger Hood TD, BSc, PhD

Derek Prag Hon. MEP, D.Litt

Diane Youdale Dip.F&E, RSA

THE EXECUTIVE COMMITTEE:

Brian Holmes (Hon Treasurer & Chair-Person)

John Jackson (Hon Secretary & Trustee)

Alan Jeffs (Trustee)

Claire Jackson (Service Director)

Gill Peck (Trustee)

CO-OPTED MEMBERS:

John Butler BSc (Jt. Hons.), RN, MSc, PGDip HE, FHEA Mental Health Advisor

CLINICAL SUPERVISOR:

Caroline Khambatta – Counselling Supervisor

CARALINE TEAM MEMBERS:

Claire Jackson
Service Director

Elaine Jackson
Office Manager

Carly Francis
CBT Therapist

Imelda Flanagan
Counsellor & Group Facilitator

Elizabeth Aldous
Occupational Therapist

Appendix 2: Afresh Weight Management Programme Evaluation

Please see attached report.

Appendix 2: Afresh Evaluation

- The 'afresh' programme is a 40-hour Cognitive Behavioural Therapy programme designed to target the risk factors associated with emotional overeating.
- It is delivered over a 10-week period.
- It is comprised of four modules; Motivation, Education, Psychology and Activity for body and mind.
- Six clients started and completed the programme, 4 were referred from the L&D hospital and 2 were GP or self-referrals having been seen by their GP for obesity related health concerns.
- All clients were assessed as experiencing 'emotional overeating'.
- It has been evaluated using both quantitative and qualitative measures.
- Improvements were seen across the following areas as measured by validated psychometric questionnaires
 - Emotional Overeating
 - Self Esteem
 - Anxiety
 - Depression
 - Control over eating
 - Desire to change
 - Confidence on own ability to change
- Readiness to change remained the same pre and post programme
- Clients described the programme as having the biggest impact on; eating behaviours and understanding factors contributing to emotional overeating.
- Two clients maintained their weight and two clients lost weight during their time on the programme. Two clients weight is to be confirmed as they are awaiting interview. No clients gained weight outside of normal weight fluctuation.
- 2 clients had diabetes, and of those 2, one of them has reduced their HbA1c levels to 39 from 43, indicating a reduction in risk of diabetes associated complications.

- This pilot was delivered to 6 clients and results are promising in relation to clients becoming more in control of their eating behaviour, developing insight into the factors that contribute to their eating behaviours and developing strategies in order to manage them.

1. Introduction

This is a 'Headline Summary' report detailing the outcomes of the 'afresh' Programme. A full report is currently being written for key stakeholders, and is being completed in order to evaluate the effectiveness of the 'afresh' programme from a qualitative and quantitative perspective with a view to consider the impact of the programme on those clients accessing the programme, as well as considering the broader impact that this will have on the NHS and the funding required to support obesity related conditions and bariatric surgery. The full report details the background to the programme, the design and structure, case studies of those completing the programme, and the qualitative and quantitative outcome data.

2. Programme Structure and Design

The programme was designed as a pilot programme in response to an increase in the number of referrals received from the Luton and Dunstable Hospital's Weight Management and Bariatric Service. It was evident when assessing these clients that many of them were experiencing psychological issues with food in a way that was leading to general overeating as well as binge eating, but for many of them, they did not meet the diagnostic criteria for binge eating disorder. It was noted that there were a number of psychological factors contributing to the maintenance of problematic eating (and therefore contributing to obesity), and because of the high level of referrals, a 40 hour, Cognitive Behavioural Therapy based treatment programme was designed.

The programme was designed to target the psychological and educational factors known to contribute to emotional over eating. It was comprised of four modules:

1. Motivational
2. Educational
3. Psychological
4. Activity for body and mind

These four modules were delivered consecutively between August and November 2016 at a twice weekly pace, and during this time, clients had access to dietetic support, advice and guidance, Cognitive Behavioural Therapy and support, advice and guidance in relation to activity for the body and mind. Clients received this support and intervention from a specialist eating disorder dietitian, Cognitive Behavioural Therapists, Counsellors and a Personal Trainer.

Funding to develop and deliver this programme was sought and received from the National Lottery's Big Lottery Fund. The funding received supported the development and delivery of the programme. To continue delivering this programme and continue to review its impact, additional funding will need to be sought.

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01582 457474

Registered Charity No 1053897

3. Clients

Seven clients started the programme, and six completed. This summary details outcomes from the six completers and looks at outcomes at the pre and post programme stage.

Four of the six clients were referred from the L&D hospital, and two were self/GP referred. All clients were female and their ages ranged between x and x. All clients were assessed as experiencing emotional overeating as measured by the range of assessments discussed in section 5.1, alongside the completion of a structured assessment.

4. Measures administered

The 'afresh' programme is a psychological intervention designed to target the psychological factors associated with emotional over eating. Clients were required to complete the following psychometric measures at a pre and post stage;

- Emotional Eating Questionnaire
- Self Esteem Scale
- Beck's Anxiety Inventory
- Beck's Depression Inventory
- Control, Readiness, Desire and Confidence to change

In addition to measuring psychological development in relation to relevant factors, whilst it is not a weight loss programme, in challenging the psychological elements relevant to emotional overeating, it is hoped that weight would not increase, and that over a 12-month period, weight should be maintained or lost. The programme advocates safe and steady weight loss (10% body weight in 12 months) and advocates that clients regain control of their eating and develop insight into the maintaining mechanisms first. Weight loss is a secondary consideration. Clients weight was recorded pre and post programme.

It is intended that all measures will be administered again at a six monthly follow up in order to evaluate what has happened in relation to progress made. The follow up is scheduled for May 2017.

5. Outcomes

Evaluation of impact was measured using both qualitative and quantitative methods. Relevant psychometric measures were administered to explore the impact in relation to the behavioural and emotional factors which contribute to emotional overeating and obesity.

5.1 Quantitative Evaluation

The following details the pre and post outcomes for the six clients who took part and completed the 'afresh' programme between August and November 2016. The full report includes individual data, however, for the purpose of the 'Headline Summary', mean scores for all measures are reported.

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Emotional Eating Questionnaire (Fig 1)

The emotional eating questionnaire administered pre and post indicate a reduction in score, suggesting that clients saw improvement in their level of emotional eating.

Self Esteem Scale (Fig 2)

The outcomes from the Self Esteem Scale demonstrate an improvement in the level of self-esteem between pre and post administration.

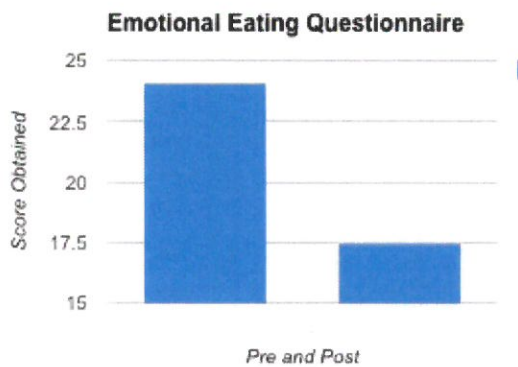


Fig 1.

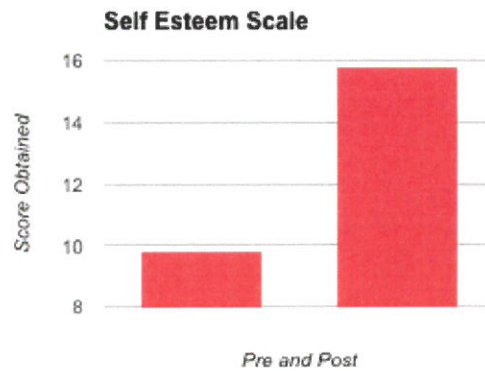


Fig 2.

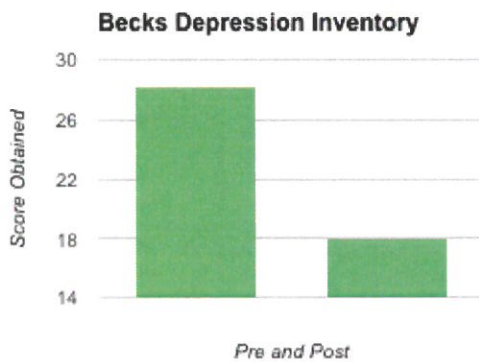


Fig 3.

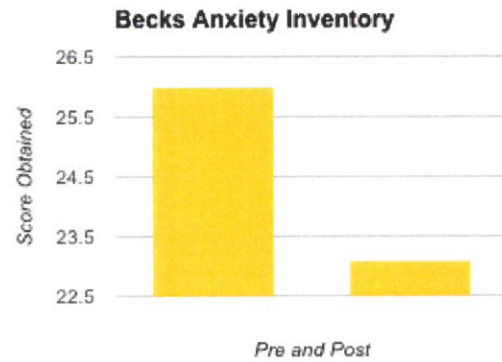


Fig 4.

Beck's Depression Inventory (Fig 3)

There was a significant reduction in the scores obtained on the Becks Depression Inventory, moving clients from the moderate depression to borderline levels of depression.

Beck's Anxiety Inventory (Fig 4)

The Becks Anxiety Inventory demonstrated a reduction in score between pre and post administration, indicating a reduction in anxiety experienced by clients.

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Control over Eating (Fig 5)

The outcomes of the self-reported rating scale for control over eating indicate that clients described feeling more in control of eating post course.

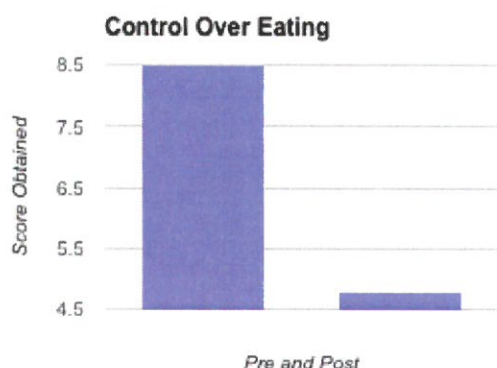


Fig 5.

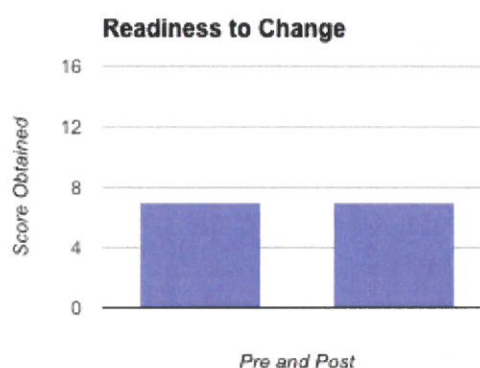
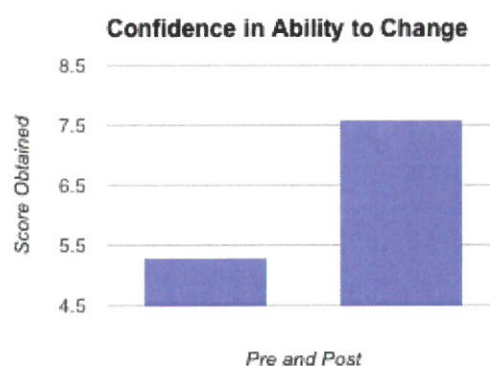
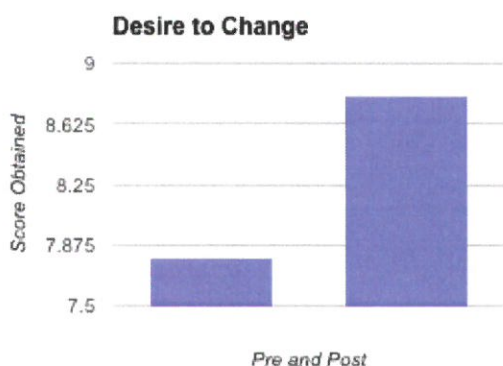


Fig 6.



Readiness to Change (Fig 6)

Clients self-reported readiness to change remained the same pre and post programme.

Desire to Change (Fig 7)

Clients desire to change increased throughout the intervention as demonstrated by the increase in rating pre and post programme.

Confidence in Ability to Change (Fig 8)

Clients demonstrated an increase in their confidence in their ability to change their problematic eating behaviour.

All of the outcomes administered indicate an improvement in those factors that are known to contribute to emotional overeating and obesity. Targeting the psychological components of emotional overeating has enabled clients to develop insight into their eating behaviour and adopt strategies to manage it more effectively. This has led to either a maintenance in weight or weight loss for those clients going through the programme.

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5.2 Qualitative Evaluation

A full qualitative evaluation is currently being completed which will identify key themes associated with client experience. This report details a snapshot of client feedback relevant to their experience on the programme and the key learning for them in relation to the key themes identified:

- Emotional recognition and regulation
- Recognition and regulation of thought processes
- Regular Eating and other behavioural strategies
- Impact of group work

Emotional Recognition and Regulation

One of the key aims of the programme is to support clients to understand the link between their eating and emotional experience and regulation. Clients feedback suggests that these links were understood and strategies were developed to help manage this.

“The whole course has changed the way I think and feel. I find it much more difficult to become depressed about things. It has stopped the terrible slumps - I can turn my mind away from this now which is great, as I would usually eat when I was depressed”

Recognition and regulation of thought processes

One of the key aims of the programme is to help clients understand how their thoughts and feelings are linked together, and how cognitive distortion can contribute to decision making. Clients were encouraged to identify their cognitive distortions and challenge them, with a view to developing new, more functional beliefs or thought processes.

“You can get stuck in your own thoughts and we believe them to be gospel. Talking about them adds a different perspective which really helped me to change them”

Regular Eating and other behavioural strategies

The programme advocates the use of a number of behavioural strategies that aim to enhance control over eating and facilitate the development of self-esteem and confidence to change.

“Regular eating was the single most important practical thing that came out of the course. I lost 4kg which I had not expected. I kept up with regular eating after the course, and is something that I know I can do and that it makes a difference. The great thing about it was that I always felt satisfied”

Impact of Groupwork and psychological intervention

It was a key aim of the programme to deliver information in a way that was supportive and inclusive, but enable personal development in a psychological and educational way. Offering this particular client group therapy on a group basis, it was hoped that this would challenge some of the isolation that is felt, and help them utilise the support from each other in a way that they had not done before.

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All clients had completed dieting with diet clubs on a group basis, but had not had any form of intervention relevant to weight management delivered on a group basis. All clients interviewed described that format and delivery of the intervention as being so helpful in helping them develop a sense of belonging, creating a safe environment within which to explore their eating behaviours.

“Group therapy is by far the most effective form of therapy, and I have never done anything like this for my eating problems before. The group are always with you and I would absolutely recommend it to others”

6. Conclusions and Recommendations

This report details the outcomes of the ‘afresh’ Programme, a forty-hour Cognitive Behavioural Therapy based treatment programme designed for weight management and emotional over eating. Results obtained are promising both in terms of psychological functioning as well as the associated weight and health implications of obesity.

The programme was developed and delivered having received funding from the National Lottery. To continue to deliver this intervention, additional funding is required. Given the results obtained from a pilot project of six clients, it is important that additional data is collected and evaluated to monitor the long-term effects of this psychological programme. Based on the data to date, the impact of this intervention could benefit both the individual and benefit the NHS more broadly. From a physical perspective, this intervention has contributed to a reduction in obesity related health concerns, as well as weight loss and maintenance. From a psychological perspective, clients emotional eating improved, as did their self-esteem, anxiety and depression. All of which are risk factors to continued problematic eating. Given that there is a lack of psychological intervention for weight management, this programme could support the already existing weight management provision.

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