Program Goals & Objectives
Intensive Outpatient Eating Disorders

Policy and Procedure

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**Approved By:** Lois Zsarnay

**Purpose:** This document outlines the program goals and objectives.

**Program Goals & Objectives:**
The Bright Heart Health Eating Disorder Program Objectives emphasize dealing with urges and triggers, and dealing with feelings and emotions in recovery as well as other emotional behaviors.

All patients entering the program are required to have:
- Medical History and Eating Disorder History
- Clinical Assessment
- Appropriate labs, weight and BMI

Our program typically spans 10 weeks. Patients will attend 11 hours of therapy a week.

Patients completing the Intensive Outpatient Program should have stabilized in their recovery practices; understand and are able to manage the triggers and emotions related to their eating disorder; and no longer require ongoing support from an Intensive Outpatient Program or higher level of care.

Additionally, patients will have a set of tools to help them with trauma, depression, anxiety, emotions, social interactions, and other aspects to help them in their daily life.

**Short-Term Objectives:**
1. Honestly describe the pattern of eating including types, amounts, and frequency of food consumed or hoarded with RD by *a specific date* as evidenced by RD notes.

2. Describe any regular use of unhealthy weight control behaviors by *a specific date* as evidenced by Patient report and daily DBT Diary Card.

3. Verbalize an accurate understanding of how eating disorders develop by *a specific date* as evidenced by Patient report.
4. Verbalize an understanding of the rationale for and goals of treatment by a specific date as evidenced by Patient report.

5. Keep a journal of food consumption with RD’s guidance by a specific date as evidenced by RD notes and Patient report.

6. Establish regular eating patterns by eating at regular intervals and consuming optimal daily calories with RD by a specific date as evidenced by RD notes and Patient report.

7. Identify and develop a list of high-risk situations for unhealthy eating or weight loss practices by a specific date as evidenced by Patient report.

8. Learn and implement skills for managing urges to engage in unhealthy eating or weight loss practices by participating in DBT Skills group by a specific date as evidenced by Patient report and daily DBT Diary Card.

9. Participate in exercises in DBT and Life Skills group to build skills in managing urges to use maladaptive weight control practices by a specific date as evidenced by Patient report and daily Diary Card.

10. Identify, challenge, and replace self-talk and beliefs that promote the bulimia by a specific date as evidenced by Patient report and DBT Diary Card.

11. Identify important people in the past and present, and describe the good and poor qualities of those relationships by a specific date as evidenced by Patient report.

12. Verbalize a resolution of current interpersonal problems and a resulting termination of bulimic behaviors by a specific date as evidenced by Patient report and DBT Diary Card.

13. State a basis for positive identity that is not based on weight and appearance but on character, traits, relationships, and intrinsic value by a specific date as evidenced by Patient report.

14. Verbalize an understanding of relapse prevention and the distinction between a lapse and a relapse by a specific date as evidenced by Patient report.

15. Implement relapse prevention strategies for managing possible future anxiety symptoms by a specific date as evidenced by Patient report.

Long-Term Goals:
1. Restore normal eating patterns, healthy weight maintenance, and a realistic appraisal of body size.
2. Terminate the pattern of binge eating and purging behavior with a return to eating normal amounts of nutritious foods.
3. Develop healthy cognitive patterns and beliefs about self that lead to positive identity and prevent a relapse of the eating disorder.
4. Develop healthy interpersonal relationships that lead to alleviation and help prevent relapse of the eating disorder.
5. Develop coping strategies (e.g. feeling identification, problem-solving, assertiveness) to address emotional issues that could lead to relapse of the eating disorder.