

TeleFFIT Study

Participant ID
Number

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Participant
Initials

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Site

Deakin University

TeleFFIT study: Dietitian Video Consultation Instructions

TeleFFIT Dietary Intervention – General Principles

The dietary intervention for TeleFFIT follows the general principles below. Please review these principles prior to the session and keep these in mind during the consultation and setting goals with the participant. The overarching principle is to support bone and muscle health by promoting a whole of diet/dietary pattern approach focusing on practical and tailored individual education and support.

- Increasing calcium: Increase/maintain intake of calcium between 1000 or 1300 mg/day (depending on individual RDI) and 3-4 serves of dairy/alternatives
- Increasing protein: Increase/maintain intake of protein of between 1.2-1.5 g/kg body weight/day and serves (2 to 2.5) of meat/alternatives to meet protein requirements. Also protein in staggered to around 30g at each meal/snack to boost muscle synthesis throughout the day and after resistance training to help build muscle.
- Vitamin D – Increase/maintain Vitamin D levels through sunlight exposure (primary source) and incorporation of fortified foods where possible (secondary source). Referral to GP for monitoring of Vitamin D and supplementation for individuals at risk of insufficiency.
- Alcohol: Avoid excess alcohol consumption.
- Whole of diet/dietary pattern approach: Eat a healthy diet according to the Australian Dietary Guidelines including:
 - Consuming the recommended serves of five food groups according to age and sex
 - Increasing dietary variety within food groups (with a particular focus on calcium and protein-rich vegetables, nuts, grains, alternatives etc.)
 - Limiting consumption of discretionary items.
- Estimated to take about 20-30 min (+15 minutes preparation time)
- To be conducted in a private space to maintain participant confidentiality
- Coding: **Black** – key points; **Blue** – example conversation; *Italics* – notes to EP.

Important note about video consultation script

Below is the structure for the video consultation, including a suggested script. Dietitians will need to balance intervention fidelity (following the structure) with a participant-centred approach. For example, at the start of the session, if the participant starts to discuss barriers to the TeleFFIT program that have emerged (e.g., I find it hard to include the foods, I have been following my old dietary habits...), it will be important to acknowledge these, noting that later in the session, they will be collectively addressed with solutions.

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VIDEO CONSULTATION 3 – Week 27

Dietitian initials: ____

Date: ____ / ____ / ____
(DD / MMM / YYYY)

Date of call

____ / ____ / ____
(DD / MMM / YYYY)

Time of call

Start: ____ : ____ (HH : MM)

Finish: ____ : ____ (HH : MM)

To be completed by Dietitian prior to each video consultation

Dietitian notes regarding client's needs and progress based on their 6-month dietary behaviours questionnaire results (e.g. daily serves of protein, calcium, dairy foods etc.)

Part 1

1. Dietitian ensures client has their healthy eating goals (and action plan) with them.
2. Dietitian explains the purpose of today's video coaching session.
 - “Today is your third of 4 dietitian consultations.”
 - “Today we will go through how the first 6 months of your program have gone and touch base on how you're tracking with the goals that you set at the beginning of the study.”
 - “Again, I will take some notes on my computer throughout the conversation so I can keep track of what we discuss. Finally, I'll also book in your final consultation in another 3 months' time.”

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3.	<p>How have you found the last 3 to 6 months of the program in terms of healthy eating?</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
4.	<p>Have you noticed any benefits from making the healthy eating changes?</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
5.	<p>Have you faced any issues so far?</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
6.	<p>In the last two sessions we focused on key nutrients important for your bone and muscle health – protein, calcium and Vitamin D. But we also know having a healthy diet overall is important to provide additional nutrients needed to keep healthy and active. This includes (refer to ADG/AGHE):</p> <ul style="list-style-type: none">- 2.5-4 four servings of dairy and alternatives per day – as we discussed provide calcium and protein to provide building blocks of bone and muscle. (Note: Dairy choices can be whole fat and/or calcium/protein/Vit D fortified depending on individuals taste preferences and what they are used to) - 2-2.5 serves of lean meat, fish and legumes/beans/nuts per day – as we discussed provides protein

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And also:

- **3-4.5 serves of grain foods (mostly wholegrain) per day – whole grain foods like oats, whole grain bread, barley, whole wheat pasta can also boost your protein intake.**
- **5-5.5 serves of vegetables and 2 serves of fruit per day. Consuming a wide variety with lots of different colours provide important antioxidants other nutrients to help your bone health. Plus some also provide protein or calcium (e.g. frozen peas, broccoli/green veg, figs, dates, strawberries)**
- **Limiting discretionary foods to 0-2 serves. Discretionary foods are high in sugar, salt and unhealthy fats and low in important nutrients. They can be filling and take the space of other more bone/muscle healthy snacks like yoghurt, nuts, fruit etc.**
(Note, as above we are not so worried about high fat calcium and protein sources/snacks e.g. high fat yogurt. We also don't want to promote dietary restriction and weight loss – so be specific in your messaging and clarify any confusion here).
- **Avoiding excessive alcohol consumption. A moderate (1-2 glasses/day) consumption of alcohol is fine but large amounts can weaken bones and worsen bone loss and cause unsteadiness and increase risk of a fall.**
(Note, important to note some alcohol is fine and can increase enjoyment of meals for some. We are only making them aware of the potential issues of excessive alcohol but may not be an issue/large focus of the discussion for most).

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Part 2

7. Provide feedback/guidance as required based on their 6-month dietary intake Q results.

<p>Calcium intake</p>	<p>For participants on calcium supplements, add to dietary intake.</p> <p>Meeting requirements? Yes / No</p> <p>Notes:</p>
<p>Protein intake</p>	<p>Meeting requirements? Yes / No</p> <p>Notes:</p>
<p>Serves of dairy and alternatives</p>	<p>Meeting serves? Yes / No</p> <p>Notes:</p>
<p>Serves of lean meat, fish and legumes/beans</p>	<p>Meeting serves?</p> <p>Notes:</p>
<p>Protein foods – even distribution across the day</p>	<p><i>Having 25-30g protein at each meal – particular focus on breakfast and morning/afternoon tea as these are often lower in protein than lunch and dinner.</i></p> <p>Notes:</p>

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<p>Protein foods – eating after exercise/training</p>	<p>Having a protein-rich meal or snack after training? Yes / No</p> <p>Notes:</p>
<p>Vitamin D</p>	<p>Currently on vitamin D supplements? Yes / No</p> <p>Meeting vitamin D sun exposure requirements (Spring/Summer/Autumn - a few minutes per day) (Winter – 2-3 Hours per week)? Yes / No</p> <p>Consuming other Vit D sources (e.g., fortified milks, breakfast cereals, fatty fish, sun exposed mushrooms)? Yes / No</p> <p>Notes:</p>
<p>Other dietary points for discussion about:</p>	<p>These can include:</p> <ul style="list-style-type: none"> - Consuming grain foods (mostly wholegrain to boost protein intake). What types of grain foods to choose (e.g. brown rice, oats, wholegrain bread). - Consuming a wide variety of vegetables and fruits. Strategies to increase intake i.e. pre-preparing/pre-cutting, frozen or tinned options to reduce cost, etc. - Reducing discretionary foods. What types and when are they consumed and how could these be substituted with healthier high protein and/or calcium options (e.g. chips/biscuits for nuts, desserts for fruit and yoghurt, etc.) See factsheet for ideas: https://nutritionaustralia.org/app/uploads/2022/03/Smart-swaps.pdf <p>Notes:</p>
<p>Any further comments</p>	<p>Notes:</p>

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Part 3

Goals

8. At the start of the study you outlined a number of key goals you wanted to achieve <<Dietitian to highlight main goals >>. Let's review how you're going with these goals. Do you wish to reconsider or update any of your goals?

Ensure goals are SMART. I.e. Specific, Measurable, Achievable, Relevant, and Time-based

	ORIGINAL GOALS	REVISED GOALS (IF RELEVANT)	COMMENT
1			
2			
3			
4			
5			

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Part 4

Barriers to healthy eating (if relevant based on discussion above – Q5). If they answered NO, progress to Part 5.

9. Refer to question 5 above. If the client has indicated they have experienced some challenges with the healthy eating plan to date or are not enjoying certain aspects, this needs to be discussed in more detail to identify specific barriers to help inform an action plan to overcome these issues.

So, earlier you indicated that you << reiterate any challenges / issues from Q5 above >>. Can we discuss these in more detail so that we can help you form an action plan to help you overcome some of these challenges/barriers.

<p>Barriers</p>	
<p>Action Plan(s)</p> <p>What strategies do you think can help you overcome these barriers? How do you wish to proceed over the next 3 months? Can I make some suggestions?</p>	

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10. Do you foresee anything that would get in the way of the goals you have set?

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11. On a scale of 1-5 how confident do you feel that you could adhere to your healthy eating goals that we have discussed?

If 3 or less, need to explore/discuss potential barriers and strategies to increase confidence. They might answer that they don't believe that they can stick to a healthy diet consistently on their own. In this case, the dietitian should reinforce that they are available to provide support etc.

Not confident at all	Slightly confident	Somewhat confident	Quite confident	Completely confident
1	2	3	4	5

Notes:

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12. Encourage client to stick to your goals but acknowledge challenges with changing diet.

Over the next 3 months, try to use your strategies to reach your dietary goals...

Optional prompt: Why might you decide to change and increase your adherence to the healthy eating behaviours? What would be some good things about sticking to healthy eating?

Optional prompt: If you stopped adhering to the healthy eating, what would be the undesired outcome/s do you think?

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Part 5

13. **Is there anything else you would like to discuss before we end our session?**

Notes:

Next consultation date / time:

___/___/___
(DD / MMM / YYYY)

Start: ___:___ (HH : MM)

Other comments

Time call finished: ___:___ (HH : MM)

Completed by (initials): _____