

TeleFFIT Study

Participant ID
Number

Participant
Initials

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 each 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) that includes 3-4 serves of dairy/alternatives
- Increasing protein: Increase/maintain intake of protein to 1.2 to 1.5 g/kg body weight per day that includes 2.0 to 2.5 serves of meat/alternatives to meet protein requirements. In addition, aim to include ~30g of protein at each meal/snack to boost muscle protein 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 vitamin D fortified foods where possible (secondary source). Referral to GP for monitoring of vitamin D and supplementation for individuals that might be classified at risk of insufficiency (e.g., those that avoid the sun or spend long periods indoors, especially during the middle of the day or between 10am and 2pm).
- Alcohol: Avoid or limit excess alcohol consumption.
- Whole of diet/dietary pattern approach: Encourage clients to 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.

Instructions

- 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 Dietitian*.

Important note about video consultation script

Below is the structure for the second video consultation, including a suggested script. As a dietitian you 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 potential solutions.

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VIDEO CONSULTATION 2 – Week 15

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 3-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 second of 4 dietitian consultations."

"Today we will go through how the first 3 months of your program has 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 next consultation in another 3 months' time."

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3.	<p>How have you found the first 3 months of the program in terms of healthy eating?</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
4.	<p>Have you noticed any benefits from you making the healthy eating changes?</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
5.	<p>Have you faced any issues so far? (e.g., meal planning or snack ideas, buying foods, not liking suggested foods)</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

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6. Education: In the first session, we talked about calcium and protein as important to your muscle and bone health. Today we will talk about another important nutrient – Vitamin D.

Introduce nutrient: Vitamin D is a vitamin needed to absorb calcium in the gut. Vitamin D levels need to be maintained in older age to maintain bone strength and calcium levels – the main role of vitamin D is to promote calcium absorption. However, it is a unique vitamin (in fact it is a hormone) as we obtain most of our everyday needs from sun exposure on our skin rather than absorption from foods in our gut.

Sources and risk factors: People at risk of low vitamin D include being older, those with darker skin pigmentation, those residing in southern states of Australia, being indoors a lot, low physical activity. Levels are also lower during winter than summer.

Up to 95% of our vitamin D comes from skin synthesis in the sun. 5% comes from food sources such as fatty fish (wild salmon, herring mackerel), egg yolks, mushrooms exposed to sunlight and fortified foods (e.g., soy milks, margarines/spreads, breakfast cereals).

Your Vitamin D needs: The sun exposure you need for adequate vitamin D in Victoria:

- Spring/Summer/Autumn – a few minutes sun exposure on bare arms/face most days. Mid-morning (10am) or Mid-afternoon (2pm) is best – avoid the middle of the day when UV levels are most extreme.
- Winter: May-August – 2-3 hours per week sun exposure

For people with low Vit D blood levels – supplementation prescribed by GP or doctor.

7. Is there anything you'd like to bring up or discuss before we review your dietary intake (consider discussing alcohol intake, healthy snacks foods, serves of fruits and vegetables)?

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Part 2

8. Provide feedback/guidance as required based on their 3-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 (see education section)? 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>Can cover vitamin D, meal planning and shopping lists and/label reading.</p> <p>Notes:</p>
<p>Any further comments</p>	<p>Notes:</p>

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Part 3

Goals

9. 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.

10. 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><i>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?</i></p>	

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11. Do you foresee anything that would get in the way of the goals you have set?											
12.	<p>On a scale of 1-5 how confident do you feel that you could adhere to your healthy eating goals that we have discussed?</p> <p><i>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.</i></p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Not confident at all</td> <td style="padding: 5px;">Slightly confident</td> <td style="padding: 5px;">Somewhat confident</td> <td style="padding: 5px;">Quite confident</td> <td style="padding: 5px;">Completely confident</td> </tr> <tr> <td style="padding: 5px;">1</td> <td style="padding: 5px;">2</td> <td style="padding: 5px;">3</td> <td style="padding: 5px;">4</td> <td style="padding: 5px;">5</td> </tr> </table> <p>Notes:</p>	Not confident at all	Slightly confident	Somewhat confident	Quite confident	Completely confident	1	2	3	4	5
Not confident at all	Slightly confident	Somewhat confident	Quite confident	Completely confident							
1	2	3	4	5							
13.	<p>Encourage client to stick to your goals but acknowledge challenges with changing diet.</p> <p>Over the next 3 months, try to use your strategies to reach your dietary goals...</p> <p>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?</p> <p>Optional prompt: If you stopped adhering to the healthy eating, what would be the undesired outcome/s do you think?</p>										

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Part 5

14. **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): _____