

TeleFFIT Study

Participant ID
Number

Participant
Initials

Site

Deakin University

TeleFFIT Initial Dietitian Video Consultation Instructions

TeleFFIT Healthy Eating Behaviours – General Principles

The healthy eating behaviours initiative for TeleFFIT follows the general principles below. Please review these principles prior to the initial consultation with your client and keep these in mind throughout the consultation and when setting goals with your clients. 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.

Instructions

- Estimated to take about 45 min (+45 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 first 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 1 – Week 1

Dietitian initials: ____	Date: ____ / ____ / ____ <small>(DD / MMM / YYYY)</small>
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Date of call <small>(DD / MMM / YYYY)</small>	Time of call	Start: ____ : ____ (HH : MM) Finish: ____ : ____ (HH : MM)
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To be completed by Dietitian prior to each video consultation

<p>Dietitian notes regarding client’s needs based on baseline dietary intake results (e.g., overall focus, physical activity levels, dietary preferences/ lactose intolerant to consider in planning etc.)</p>	
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Part 1

1. Dietitian to introduce themselves and ensure client is ready/comfortable to chat about their involvement in the study via Zoom.
2. Dietitian explains the purpose of today’s video coaching session.
 - “Today is your first dietitian consultation. You will have another 3 consultations throughout the 12-month study.”
 - “Today we will go through some healthy eating behaviours to optimize your musculoskeletal health, then set some goals for what’d like to achieve diet-wise throughout the study.”
 - “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 about 3 months’ time.”
3. Explain the main study goals briefly.
 - “Over the next 12 months we’re going to work together for you to get the most out of the TeleFFIT program, to improve your bone and muscle health and reduce your risk of future falls and fractures.”
 - “My role in the TeleFFIT program is to guide you through the dietary support, which involves reviewing what you are currently eating and ensuring there is a regular supply of nutrients (e.g., calcium, protein and vitamin D) for healthy bones and muscles to support the exercise program you are undertaking.”

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“Each of the nutrients we talk about is involved in bone and muscle health and shown to reduce risk of future falls and fractures, however most importantly it is the combination of all these together – the different nutrients we talk about, in combination with any supplements you are on and the exercise that all work together to improve your bone and muscle health.”

4. Healthy Eating information – Calcium / Dairy / Dairy alternatives

Introduce nutrient: The first thing we will cover is calcium.

- Calcium is a mineral which is key for maintenance of strong bones and other important roles in muscle contraction, heart function, nervous system and blood clotting.
- As we age if calcium intakes are inadequate then we can lose calcium from our skeleton so is important to eat a good amount of calcium containing foods each day to keep bones strong and reduce osteoporosis.

Food sources: Show visual of calcium containing foods from factsheet. In this factsheet there are a list of calcium-rich foods you can refer to. Food rich in calcium include

- dairy foods (milk, cheese and yogurt), ***For vegan/lactose intolerant/dairy avoiders: soy milks, other nut/rice milks, tofu that are fortified with calcium***,
- some seafood (canned sardines or salmon with bones),
- leafy green vegetables (kale, silverbeet, broccoli) and nuts (almonds, walnuts, hazelnuts).
- Also, some foods are fortified with calcium including orange juice, milks, breakfast cereals.

Your calcium needs: For a man/woman of your age we recommend that your intake of calcium is << 1000 or 1300 mg/day >> and you have << __ >> (3 to 4 for older adults) serves of dairy/alternatives to meet your calcium levels. We will look at whether you are currently meeting these and what we can do to increase your calcium levels next.

Calcium supplements (optional for those taking calcium supplements): Are you taking calcium supplements prescribed by your GP or doctor? *If yes, check amount/type in relevant past medical history section of baseline results summary document.* Taking a calcium supplement regularly will provide the additional calcium you need when dietary intake is not meeting this.

- For 500-600 mg doses: Take regularly at or with meals to increase absorption (10-30% increased absorption)
- For 1000-1300 mg doses: As above take with meals. Also, the max we can absorb at a time is about 500mg so splitting your daily dose across two meals time will be more effective.

Vitamin D: Vitamin D is needed for our bodies to absorb the calcium we need from these foods. 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. We will talk about Vitamin D in more detail at our next appointment but for now, try to spend some time in the sun each day

- (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. You can get these checked by your GP if concerned.

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5.	<p>Healthy Eating information – Protein</p> <p>Next, we will talk about protein.</p> <p>Introduce nutrient: Proteins are important components to make muscle and bone. Proteins are made of building blocks called amino acids. Our bodies are constantly making and breaking down protein as part of our normal body functions, so it needs a regular supply of the 9 amino acids (protein building blocks) we get from food. These 9 amino acids we get from food are known as the essential fatty acids (i.e., essential for life). As we get older, muscle protein synthesis decreases however two things are particularly important to boost muscle synthesis – regular ‘doses’ of protein throughout the day and regular exercise (resistance training). We will talk about these in more detail when we review your protein intake below.</p> <p>Food sources: Show MLA protein rich meals factsheet. Good sources of protein include lean red meat, dairy, fish, beans/legumes, eggs and poultry.***For vegetarians/vegans – should focus on consuming a variety of protein sources across tofu/soy, beans and legumes, (cheeses, eggs) nuts and seeds as well as a variety of vegetables and grain foods (e.g., rice, wholemeal/grainy breads, pastas) to ensure getting all the essential amino acids.***</p> <p>Your protein needs:</p> <ul style="list-style-type: none">• Your protein intake is calculated based on how much you weigh – a larger man will need more protein than smaller woman for example. For a man/woman of your age we recommend that your intake of protein is << __ >> g/day (calculate based on intake of >1.2 g/kg body weight – hence if 80 kg, they would need at least 95-100g/d) and you have <<___ >> serves (2 to 2.5) of meat/alternatives to meet your protein levels.• Also, key is timing and dose of protein foods – it is recommended that you consume around 30g at each meal/snack (every 3-5 hours) to boost muscle synthesis throughout the day. Exercise also boosts muscle synthesis so consuming a protein-rich snack or meal after your resistance training will also help to build muscle.• We will look at if you are currently meeting these and what we can do to increase your protein levels next.
7.	<p>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)?</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

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Part 2

8. Provide feedback/guidance as required based on their baseline dietary intake results.

<p>Calcium intake</p>	<p><i>For participants on calcium supplements, add to dietary intake.</i></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 requirements? Yes/No</p> <p>Notes:</p>
<p>Serves of lean meat, fish and legumes/beans</p>	<p>Meeting serves? Yes/No</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><i>Having a protein-rich meal or snack after training? Yes/No</i></p> <p>Notes:</p>
<p>Reading food labels</p>	<p><i>Show participant how to read food labels to look for high calcium and high protein options when shopping. Can use example food label resources in folder.</i></p>
<p>Other dietary points for discussion:</p>	<p>Notes:</p>
<p>Any further comments</p>	<p>Notes:</p>

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Part 3

Goals

12. “Now that we have reviewed what you are eating, let’s set some goals to support your healthy eating.”

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

1	
2	
3	
4	
5	

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Part 4

Barriers to healthy eating and strategies to overcome them

13. Do you foresee anything that could get in the way of the goals you have set? What do you think could be some of your barriers to healthy eating?

Barriers	
Action Plan What strategies do you think can help you overcome these barriers?	

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14.

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:

Part 5

15.

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. But remember that you are about to change habits you might have had for quite some time. It's normal to take some time to adjust or have days where you slip into old habits. We can discuss any challenges at the next session and adjust your strategies if needed.

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16. 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): _____