Don’t “Eat it” when talking about food & nutrition
the value of one day training on nutrition & diet for staff working in Primary Care
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Background

• Development of a first-line nutrition & diet course for Primary Care
  – Needs assessment
    • Questionnaire
    • Interviews
    • Literature
  – Course development
  – Course delivery
  – Evaluation
    • Immediate
    • 3 weeks post-delivery
Needs assessment - Questionnaire

• 111 responses, 80% female
• 98% - giving dietary advice is an important part of role
• 55.3% difficult to raise the topic of weight
• Less certainty about weight loss advice than diabetes or CVD
• Not confident about nutritional adequacy
• 30% - not patient focused
• Lacked confidence that patients would make changes once advised
Needs assessment - Interviews

• Many opportunities to discuss diet – not enough time to do it justice
• Poverty and access seen as significant issues
• Concern about the lack of formal training
• Want to learn both facts (applied nutrition) and “how to deliver” in the course
Needs assessment - Literature

• Nursing knowledge of applied nutrition not great
• Skills on “how to deliver messages” are appreciated but do not remain in practice without regular refreshers
• Raising weight is a global health problem
Course Development - Competency Framework

1. Raise the topic of weight and diet in a patient-centred manner and obtain consent to check weight and before discussing diet.
2. Use a patient-centred method to assess dietary intake using a variety of tools and questioning techniques to enable the patient to identify their dietary and lifestyle issues.
3. Explain the importance of determining the factors that will promote or detract from the ability to change diet within an individual patient's life.
4. Relate servings of each food group on the healthy heart model to a minimum dietary intake for nutritional adequacy.
5. Describe the main features of a diet suitable for newly diagnosed Type 2 diabetes, primary prevention of CVD and weight management.
6. Outline the different emphasis that may occur with each diet to manage glycaemia, lipids and hypertension, particularly in relation to change in biochemical outcomes.
7. Explain the importance of determining the factors that will promote or detract from the ability to change diet within an individual patient's life.
8. Reflect on own views of success, engagement and relapse in relation to lifestyle and dietary change.
9. Create, use and reflect on a brief intervention script on dietary intervention, for use within usual practice.
10. Calculate energy values reported in kCal into kJ and reverse. Relate energy values in kJ to both food and physical activities.
11. List the benefits of modest weight loss for the prevention of and management of Type 2 diabetes and CVD.
12. Use a specific calculator to assess paediatric BMI centile and interpret the result to advise family on appropriate interventions for children.
13. Use General Practice Physical Activity Questionnaire as a tool to evaluate current physical activity and to create a focus for a patient-centred brief intervention encouraging increasing or maintaining physical activity.
14. Accurately measure, calculate and interpret BMI and waist circumference for adults with a wide range of ages, ethnicities and body shapes.
Course Delivery

• All participants received a workbook with all notes
• Resources for later use
• A variety of learning styles
• Wrap around learning experience – including catering
• 80 trainees over 11 courses
• 1 day training with some pre-preparation
• Initially in the main centres, but then agreed to deliver anywhere we got more than 8 participants
Cut your plate size...control your portions

Aim for a 22cm plate for weight management
Cut your bowl size... control your portions
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Evaluation - immediate

• 100% said it met their expectations and was either very relevant and relevant

• Pros
  – Met all identified learning needs
  – Practical Tools to use
  – Positive messages
  – Interactive
  – Identified the importance of an annual review

• Cons
  – Many found it very intense
  – Questions about whether should be two days
Evaluation - delayed

• Increased knowledge and confidence
  – Raising weight
  – Identification of competing priorities

• Many of the resources used post-training,
  – plate and bowl posters,
  – benefits of 5-10% weight loss
  – Types of fats and oils
What now?

• Want more input:
  – Refresher course
  – Older people’s nutrition
  – Children’s nutrition

• Online training to increase accessibility