Advancing client-centred nutrition care using an innovative and active learning model for Canadian medical and dietetic learners

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The following steps have been taken to mitigate bias:

- All speakers have been provided with a speaker letter outlining the certification/accreditation requirements for their presentation.
- All authors reviewed the presentation prior to their delivery.



Shared Responsibility¹⁻³

"I will apply dietetic measures for the benefit of the sick according to my ability and judgment; I will keep them from harm and injustice."

- Hippocrates





Education Disconnect⁴⁻¹²

Nutrition should be treated like all other medical education content areas.

Katz, 2018

Recipe for Nutrition in Medical Education

- Simulation-Based Medical Education with Deliberate Practice (SBME-DP)^{2,11,13,14}
 - Mimic clinical encounters
 - Constant skill improvement
 - Superior in mastery learning
- Culinary medicine^{15,16}
 - Comprehensive
 - Translatable
 - Interdisciplinary



Objective

To evaluate the impact of CML 110: Mental Health on UME and DI learners with recommendations for future virtual sessions.

Session learning objectives

- Identify the key nutrition issues in mental health conditions including factors that may affect nutritional status.
- Demonstrate how to prepare quick and easy recipes for individuals with psychiatric disorders such as depression.
- List three key nutrition messages that can support mental health treatment and recovery.
- Recognize credible and evidenced informed nutrition information, tools, resources and available supports including referrals to RDs.

Recipes & Case Study



Vegetarian Chili

- Mix of canned & fresh ingredients
- Food bank access
- Easily customizable to fit preferences & diets



Vegetable Frittata

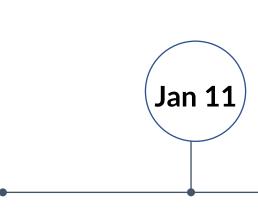
- Minimal food skills & equipment
- Low cost/serving
- Made in batch & can be reheated



Martin Dufour

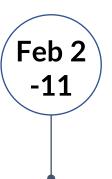
- Francophone living in North Western Ontario
- Recent decreased mood/energy
- Unintended weight loss

Methods



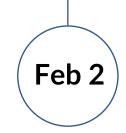
Case study
Recipes
Food demo
Mini-lecture
Polls

Virtual Event



Recruitment

Promotional poster & email



Evaluations

Participants
Facilitators
No-shows











Demographics

49% (n=31)

attended the CML

35% (n=22)

previously attended a CML

52% (n=16)

Were dietetic interns

39% (n=12)

UME Year 1 and 2

12% (n=3)

NOSM U RD faculty/community RDs





Nutrition Competence¹⁷ (n=21)

Evidencebased Dietary Strategies

Nutrition Critical Appraisal Basic Nutritional Sciences Food Sources of Nutrients, Social Importance of Food

Team
Approach to
Nutrition
Care

100% UME (n=6 of 6) 78% DI (n=7 of 9)

Application of Basic Dietary Strategies

Ethics and Nutrition Management

Nutrition Risk Nutrition in Health/Disease Prevention

Satisfaction and Attendance

100%

(n=21)

Would encourage others to attend

100%

(n=2)

Effective learning strategy

57%

(n=8)

Did not attend due to a time conflict

36%

(n=5)

Did not attend due to time of day

28%

(n=4)

Did not attend due to virtual fatigue

Interprofessional Learning

- Essential component of medical education ¹⁸
- Allows UME and DI learners to learn about other professions, scopes of practice and professional perspectives ^{19,20}
- Value of RD referrals and improving patient care ^{12,18,21-23}
- Leverage expertise to augment physician care ²
- Fosters a sense of community leading to improved wellbeing ²⁰
- Improves personal health behaviours and perspectives 11,20,24-27
- Virtual formats are feasible and enhance national faculty expertise but in-person preferred by learners ²⁸

Teaching Kitchens²⁹

"See one, do one, teach one" could become "See one, taste one, make one, teach one."

- Eisenberg, 2020











Enhanced Nutrition Competence and Knowledge Application^{11,19,24-28,30,31}

McGovern Resolution on Nutrition Education in Medical Schools Passes House

Washington, May 17, 2022 | 0 comments A FEDERAL



https://mcgovern.house.gov/news/documentsingle.aspx?Docume ntID=398867



NNEdPro Global Centre for Nutrition and Health

Advancing and implementing nutrition knowledge to improve health, wellbeing and society

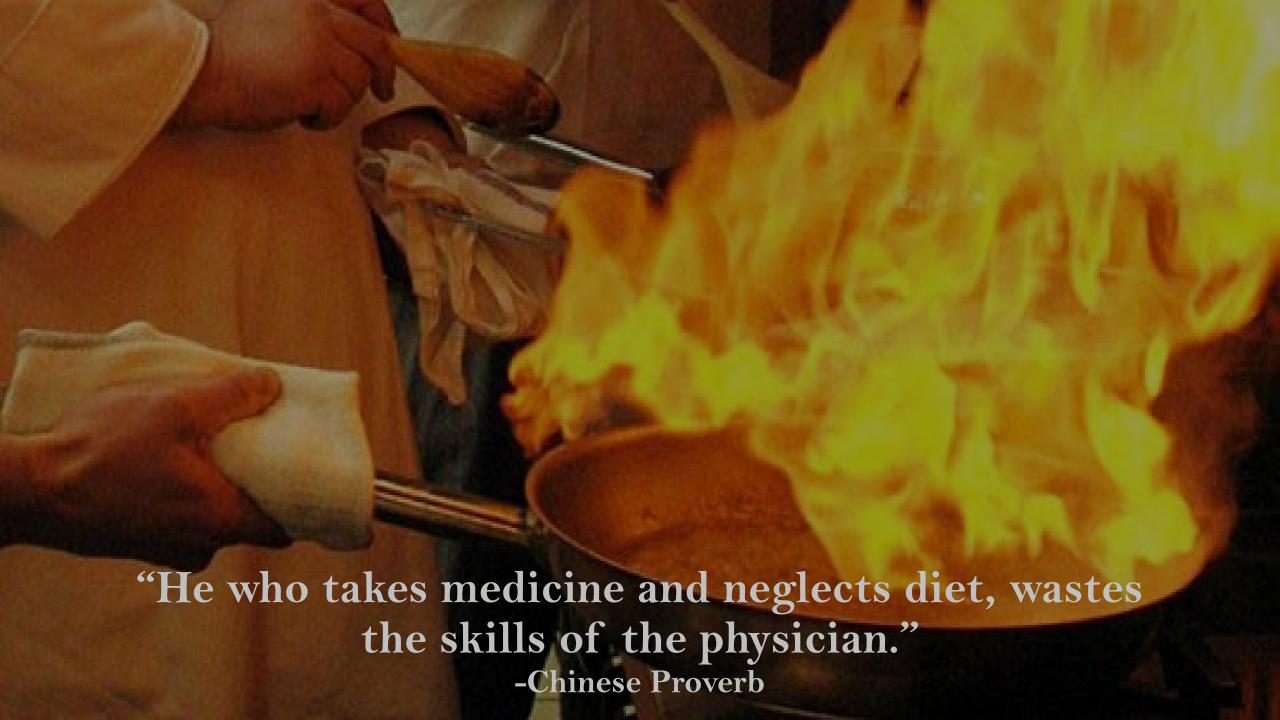
Key Aims

Facilitate the spread and scale of existing nutrition knowledge, experiences, standards, and evidence-informed interventions across Canada and internationally.

Support the strengthening of nutrition competence and confidence in the healthcare workforce through education and training opportunities.

Facilitate the spread and scale of existing ways to empower underserved communities and diverse populations in nutrition and health.

Facilitate knowledge sharing related to food security, food safety, food waste, agriculture, and environmental sustainability.



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Competence & Behaviour Change

UME Learners

"Changes to improve health need to be made in small steps to be manageable for patients..."

"Creating easy/healthy recipes that are simple to make especially for people with mental illness who may not have the desire to cook"

"Ask if patient is able to make ends meet"

"Important to consider the patient's social and personal context to make suggestions/plan more feasible and achievable"

"Meal prepping to ensure that I'm eating/valuing healthy eating"

"Refer to or suggest dietitian when possible and applicable"

Dietetic Learners

"Information...how much energy our brains use and how adequate nutrition can affect brain processes"

"Suggesting simple recipes that don't require lots of energy"

"Working with my patient's dietary intake and adding to it rather than taking things away"

"I will pay more attention to mental health drugs when reviewing patient charts in order to evaluate for possible nutrition implications"

"Learn more about mental health and plan to take the food and mood online course."