

#### PURINA® PRO PLAN® Vet Nurse Symposium 2024

**Empowering the Vet Nurse Journey** 

# How to Initiate Nutrition Conversations: Tips & Tricks

#### **Dr. Julie Churchill**

DVM, PhD, Diplomate DACVIM-Nutrition, Professor, Veterinary Nutrition at University of Minnesota





## Think of your favorite holiday.....







Now how many of you thought of a favorite dish or recipe when you thought of your holiday?





# My bias

- Nutritionist in clinical practice and teaching
- Goal-help veterinary teams promote excellent health through great nutrition
- Absolute belief in power of nutrition
- Nutrition = Nurture
- Do have a passion for people and their pets
- Help pets live longer not just survive but thrive (live long and prosper)



#### **Enhance Your Nutrition Talking Toolkit**

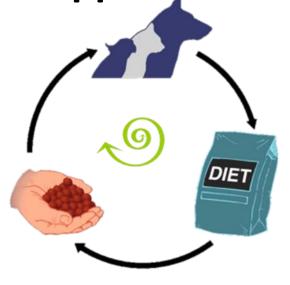


- Develop your framework for each nutritional conversation:
  - > Assessment of needs- patient and the client
  - Recommendation what to feed, amount/day, and frequency
  - > Follow-up to evaluate & record outcomes stay connected!
- > Key communication skills to address nutrition conversations:
  - Find common ground
    - Listen for and identify client expectations clearly state your expectations, too
    - Determine 'readiness-to-change' to set client and pet up for success
    - Shared decision making
- Use your communication skills
  - Share your passion with empathy and clarity
  - Address nutrition-related questions
- Remember, these are transferable skills



# Circle of Nutrition approach to helping pets through Nutrition







Fifth vital assessment







#### The art of a taking a diet history...





WSA Global Nu Committee	trition	
S	hort Diet History	y Form
Please	answer the following question	as about your pet
Pet's name:	Species/breed:	Age:
Owner's name:		
Date form completed:		



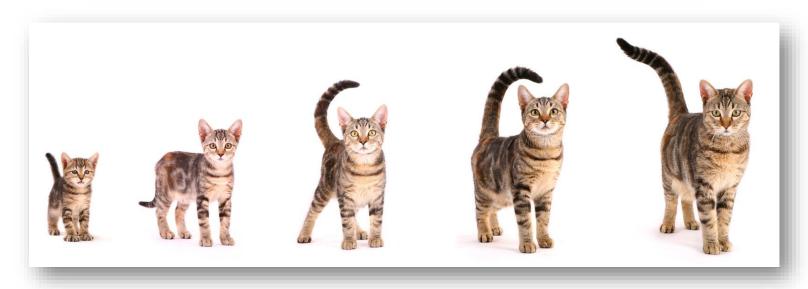




Nutritional Screen for risk factors	Require extended evaluation if (√)			
Life stage needs (include time of spay/neuter) Key prevention opportunities				
HISTORY				
Treats/snacks/human food > 10%				
Inadequate information/inappropriate feeding/food				
Unconventional diets	ASSESSMENT			
Previous/ongoing medical problems				
Altered GI function or signs	>)			
PHYSICAL EXAM FINDINGS:				
Any abnormal BCS (≠5/9)				
Any abnormal MCS				
Unintentional weight loss OR gain				
New medical condition				
Poor skin hair coat				
Dental disease				

# Life stage needs.....Life stage foods





#### **How Do You Start? Ask Permission**

















### Identify Common Goals & Common ground











### **Targeted discussion**

## JAVMA



# Veterinary clients prefer benefit-focused online communication while clinic websites uncommonly communicate benefits of preventive care services

Katja A. Sutherland, PhD<sup>1\*</sup>; Jason B. Coe, DVM, PhD<sup>1</sup>; Kassandra Blais-Vaillancourt, BSc<sup>1</sup>; Margaret Gober, VMD<sup>2</sup>; Heather Berst, MA, VMD<sup>2</sup>



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#### **Proactive Considerations for Growth**



#### **Opportunity to create nutrition culture**









# Priority-refocus our efforts Prevention efforts "an ounce of prevention..."



- Support healthy growth (orthopedic, behavior)
- Prevent unhealthy gain
- Significant health benefits from maintaining a lean body weight
- Target by known risk factors











#### Keep treats in perspective





Cats 5-10 Calories/day



Small dog 25 Calories/day



Mid size dog- 60 -70 Calories/day



Large dog- 85-100 Calories/day



Make a specific treat plan!



Treats are so much more than food

Be with your dog



## Targeted discussions

#### **JAVMA**



# Impact on life expectancy was the most important information to clients when considering whether to take action for an overweight or obese dog

Abby R. Davies, MSc<sup>1</sup>; Katja A. Sutherland, PhD<sup>1</sup>; Catherine N. H. Groves, MSc<sup>1</sup>; Lauren E. Grant, PhD<sup>1</sup>; Megan L. Shepherd, DVM, PhD, DACVIM<sup>2</sup>; Jason B. Coe, DVM, PhD<sup>1\*</sup>

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#### OBJECTIVE

To determine dog owner preferences for information communicated during veterinarian-client obesity-related conversations within companion animal practice.









#### **RESULTS**

A total of 1,108 surveys were analyzed, with most participating dog owners residing in Canada. The most important weight-related attribute was life expectancy (relative importance, 28.56%), followed by the timeline for developing arthritis (19.24%), future quality of life (18.91%), change to cost of food (18.90%), and future mobility (14.34%).

#### CLINICAL RELEVANCE

Results suggest that dog owners may consider information relating to an extension of their dog's life as the most important aspect of an obesity-related veterinary recommendation. By integrating dog owner preferences into discussions between clients and veterinary professionals about obesity, there is the potential to encourage more clients to engage in weight management efforts for their overweight or obese dog.

### **Prevent Seasonal Flux**

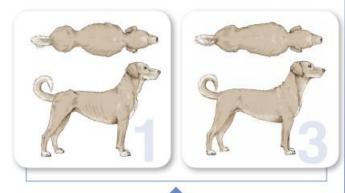




# What does "healthy" look and feel like?



#### **Body Condition Score**



#### UNDER IDEAL

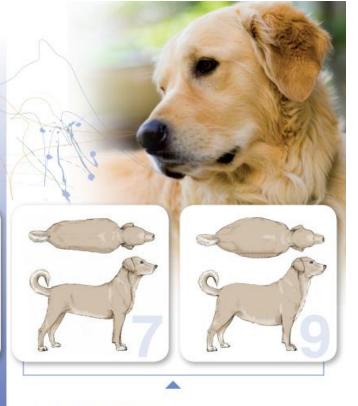
- Ribs, lumbar vertebrae, pelvic bones and all bony prominences evident from a distance. No discernible body fat. Obvious loss of muscle mass.
- Ribs, lumbar vertebrae and pelvic bones easily visible. No palpable fat. Some evidence of other bony prominences. Minimal loss of muscle mass.
- 3 Ribs easily palpated and may be visible with no palpable fat. Tops of lumbar vertebrae visible. Pelvic bones becoming prominent. Obvious waist and abdominal tuck.

German A, et al. Comparison of a bioimpedance monitor with dual-energy x-ray absorptiometry for noninvasive



#### IDEAL

- A Ribs easily palpable, with minimal fat covering. Waist easily noted, viewed from above. Abdominal tuck evident.
- 5 Ribs palpable without excess fat covering. Waist observed behind ribs when viewed from above. Abdomen tucked up when viewed from side.



#### OVER IDEAL

- 6 Ribs palpable with slight excess fat covering. Waist is discernible viewed from above but is not prominent. Abdominal tuck
- Ribs palpable with difficulty; heavy fat cover. Noticeable fat deposits over lumbar area and base of tail. Waist absent or barely visible. Abdominal tuck may be present.
- 8 Ribs not palpable under very heavy fat cover, or palpable only with significant pressure. Heavy fat deposits over lumbar area and base of tail. Waist absent. No abdominal tuck. Obvious abdominal distention may be present.
- Massive fat deposits over thorax, spine and base of tail. Waist and abdominal tuck absent.



# "I've told them a thousands time to stop giving all those treats!"



 Definition of insanity- doing the same thing over and over and expecting a different result!

## Best predictor of adherence

- Veterinary team interviewing skills
- Quality of the veterinary –client relationship



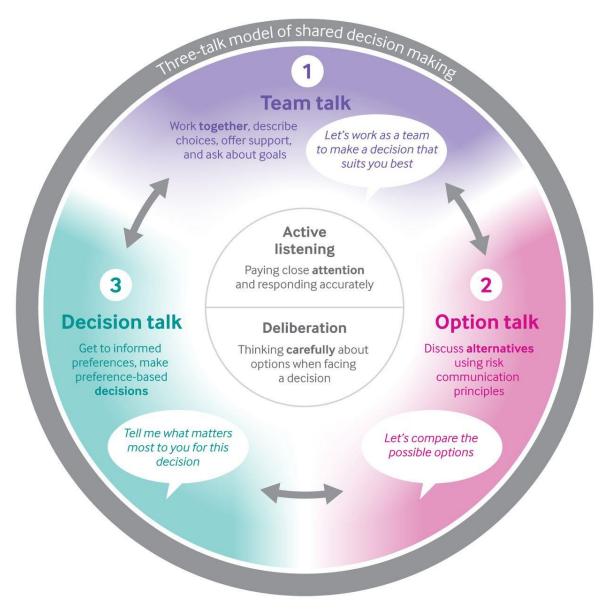


## Promote <del>Compliance</del> Adherence → Concordance

- Believe in Value
- Enhance the experience
- Use impactful Stories
- Include Clients as part of the team
- Strive for consistency (practice protocols)



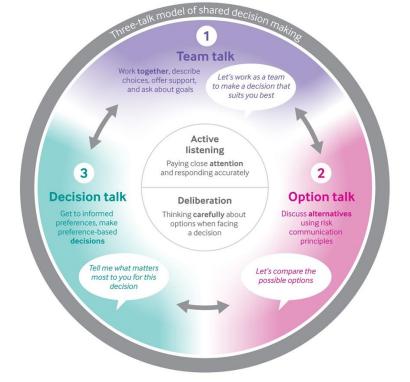
### Three-talk model of shared decision making





Glyn Elwyn et al. BMJ 2017;359:bmj.j4891





#### **Using Core Communication skills**

- Empathy
- Open-ended Inquiry
- Reflective listening
- Non-verbals

#### **Team Talk**

Assess Goals (hopes/dreams)
Assess ability & motivation
Offer choices
Justify choices
Provide support & patterning

#### **Option Talk**

Check knowledge
Lost options
Describe options
Support decisions
Clarify & Summarize

#### **Decision Talk**

Elicit Preferences Move to a decision Plan to review and revise together

#### **JAVMA**



Small animal general practitioners discuss nutrition infrequently despite assertion of indication, citing barriers

Elizabeth E. Alvarez, DVM, DABVP1\*; Kelly K. Schultz, MS, DVM1; Amanda M. Floerchinger, DVM, MBA2;

JAVMA | OCTOBER 2022 | VOL 260 | NO. 13

**Opportunity!** 

JAVMA

Jennifer L. Hull, MS, DVM<sup>2</sup>



Veterinary technicians contribute to shared decision-making during companion animal veterinary appointments

Natasha Janke, PhD1\*; Jane R. Shaw, DVM, PhD1; Jason B. Coe, DVM, PhD2

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JAVMA



Clients prefer collaborative decision-making with veterinarians regardless of appointment type

doi.org/10.2460/javma.24.06.0421

Catherine N. H. Groves, MSc\*; Jason B. Coe, DVM, PhD; Katja A. Sutherland, PhD; Cathy Bauman, DVM, PhD; Lauren E. Grant, PhD

#### **Nutrition Assessment (5th vital assessment)**



See something, say something

	Require extended evaluation if (√)
Life stage needs (include time of spay/neuter)	$\checkmark$
HISTORY	
Treats/snacks/human food > 10%	
Inadequate information/inappropriate feeding/food	
Unconventional diets	
Previous/ongoing medical problems	
Altered GI function or signs	
PHYSICAL EXAM FINDINGS:	
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## Stages of change

- Transtheoretical model
- Psychologists developed to understand how humans make changes in behavior to improve their health......

Veterinarians need *client* to change their behavior



### Assessing readiness for change

#### Precontemplation

- No intention of taking action in next 6 months
- Resistant, unmotivated, <u>unaware</u>



#### Contemplation

- Aware of pros/cons of changing, intending within 6 mo.
- Stuck in "thinking about it"

### Decision making (preparation)

- Plans to take action in next month
- Recognize the problem, may have read or asked@ pet store

# Assessing readiness for change



#### Action

- Taking action to reduce risks
- May have decreased treats or tried a different food
- May need guidance for optimal care

#### Maintenance

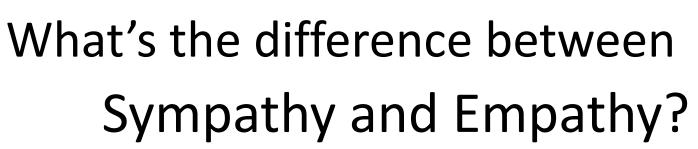
- Continued action to prevent relapse
- Lapses (relapse- happens)

## Use stage-appropriate intervention

Use the *right* approach for the *right* client at the *right* time



# **Empathy**





Empathy. Responses that demonstrate an accurate understanding and acceptance of the client's feelings and concerns

# Invite and allow the emotion(s) of food







### Communicating your recommendation



#### **Make A Specific Recommendation**

- Tell the client what food you recommend, and why. Be specific.
   Type, amount and frequency
- 2. Ask what concerns they might have in following your recommendation.
- 3. What other questions do they have?
- 4. Include a follow up plan
- 5. Write your specific nutritional recommendation in patient record.





- What Questions Do You Have?
- Did You Get What You Needed?
- We'll Be In Touch
- Don't say it unless you mean it!

#### Create the Program that works for you

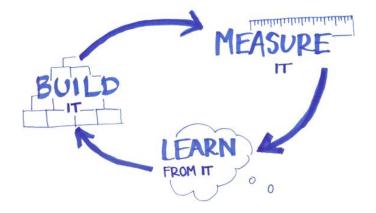


# Consider package programs Wellness program or package ideas

- Technician managed
   Puppy/kitten counseling
   Nutrition consultation post every spay/neuter
- Life stage nutrition
- Obesity prevention

#### Nutrition and Disease-therapeutic plan

- Screened and risks identified- veterinary responsibility
- Chronic disease package- follow-up plan
- Obesity treatment include all team members



# **Summary Thoughts to Improve Care**



- Vet <u>teams</u> believe and value their nutrition program and/or recommendations (health focus)
- Include clients as part of the team
- Combine excellent communication skills with concepts of behavioral change and shared-decision making
- Strive for consistency in verbal and written recommendations
- Give clients time; stay flexible





# Thank you!

**#PROPLANVetNurseSymposium24** 



### **Resources**



Centre Square:



**WSAVA Global Nutrition Toolkit:** 



> Pet Nutrition Alliance



**AAHA Nutritional Guidelines:** 







