



Indigenous Services
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EAT WELL SASKATCHEWAN

**A Six Month Dietitian Call Centre Pilot Project for
Saskatchewan First Nations Communities**

OCTOBER 2018



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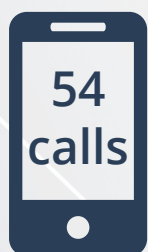
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Executive Summary

Many First Nations people are facing serious health-related challenges and inequities as a result of Residential Schools and colonization, coupled with insufficient healing and wellness resources. Many chronic diseases can be prevented, treated and managed with proper nutrition. Registered Dietitians (RDs) are the most qualified health care professionals to provide clients and communities with evidence-based food and nutrition advice and interventions to support positive health outcomes and save future health care dollars. Due to the remoteness of First Nation communities in Saskatchewan, access to RDs is limited or non-existent.

Given these challenges, the Government of Canada, First Nations and Inuit Health Branch (Saskatchewan) and Dietitians of Canada partnered to establish and operate a six-month Dietitian Call Centre pilot project titled Eat Well Saskatchewan (EWS). A Dietitian Call Center, also known as a Dietitian Advisory Service (DAS), is a primary health care service that provides the public and health care professionals with access to a RD through telephone or email. This results in timely, cost-effective and accessible evidence-based food and nutrition information and advice. EWS operated from January 8/18 – June 29/18 and provided First Nations communities in Saskatchewan with free, confidential, easy and trustworthy access to a RD through a toll-free phone number and email, Monday to Friday from 10 a.m. – 4 p.m. As time and resources allowed, the service accepted questions from anyone in Saskatchewan.

Results of the Pilot Project



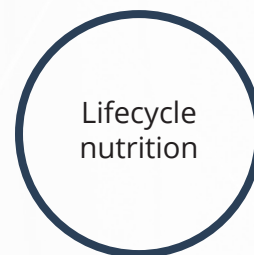
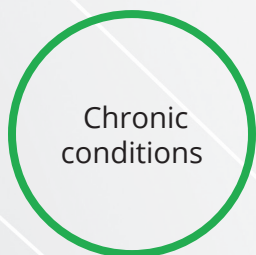
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- **Top 5 reasons for contact were:**



- **Data from calls indicated:**

65% of callers were First Nations (either a member of a First Nation or calling on behalf of a First Nations person) from various areas of the province.

87% of callers were female, 13% were male.

87% of callers indicated the service was useful.

93% of callers indicated they would use the service again.

96% of callers indicated they would recommend the service to someone else.

96% of callers indicated they would like to see the service become a permanent service for all Saskatchewan residents in the future.

- **Data from Callback Surveys demonstrated the service lead to positive behavior changes and increased healthy eating knowledge:**

67% of respondents have made changes as a result of the call that they believe will help themselves/or their family eat healthier.

94% indicated yes (88%) or somewhat (6%) in response to the statement “I felt the dietitian listened to my questions.”

81% indicated yes (75%) or somewhat (6%) in response to the statement “I felt better informed about the food, nutrition or health issues I was calling about.”

100% indicated yes (94%) or somewhat (6%) in response to the statement “I felt the dietitian explained things to me in a way I could understand.”

100% of respondents would recommend the service to family and friends.

100% of respondents would like to see the service become a permanent service for all Saskatchewan residents.

- **Data from a Health Professional Survey indicated strong satisfaction with the service:**

87% indicated yes (81%) or maybe (6%) when asked if they would recommend the service to clients.

100% indicated yes (81%) or maybe (19%) when asked if they would recommend the service to colleagues.

94% indicated yes (88%) or maybe (6%) when asked if they would like to see the service become permanent for all Saskatchewan residents.

- **What the public and health professionals had to say:**

“Love it! Hope this pilot is successful. In my mind, it certainly sounds like it will fill a gap in available services.”

“I really liked it (the service) because I could call in and didn't need an appointment. I didn't receive a recording. I think people need to know how important diet is to overall health and how helpful a dietitian can be.”

“The biggest thing for me was that the person was understanding and a good listener and sometimes that's all it takes. She was very knowledgeable and she confirmed what I was doing was correct. It's an added benefit for our health care.”

“It was very accessible, timely and helped me right in the exam room. It saved me and my client time.”

“I hope it continues into the future because it has the potential to help reduce health gaps.”

“Excellent program for individuals who may be limited to the support that they can receive.”

EWS was a successful pilot project for First Nations communities in Saskatchewan that allowed the public and health professionals to access timely, high-quality RD services no matter where they lived. Data collected throughout demonstrated high satisfaction with the service and indicated that the evidence-based advice and information provided to clients lead to positive behavior changes and increased healthy eating knowledge. A permanent Dietitian Call Center would be responsive to the Truth and Reconciliation Commissions' call to action of closing gaps in health outcomes for First Nations Communities.

Acknowledgements

Eat Well Saskatchewan (EWS) would not have been possible without the contributions of many people. A special thank you to:

- The EWS Advisory Committee for their guidance, wisdom and support during the pilot project including:
 - Jennifer Wojcik, RD MSc, Senior Director, Public Affairs and Member Engagement, Dietitian of Canada
 - Sara Langley, RD CDE, Regional Nutritionist, First Nations and Inuit Health, Saskatchewan Region, Indigenous Services Canada
 - Mustafa Andkhoie, Epidemiologist, Indigenous Services Canada
 - Jayne Thirsk, RD PhD FDC, Senior Director, Knowledge Translation, Dietitians of Canada
 - Christine Mehling, RD MSc, Contact Centre Specialist, Dietitians of Canada
 - Shawna Berenbaum, RD PhD, Professor, College of Pharmacy and Nutrition, University of Saskatchewan
 - Carol Henry, PhD, Associate Professor and Assistant Dean of Nutrition and Dietetics, College of Pharmacy and Nutrition, University of Saskatchewan
 - Lana Moore, RD Msc, Registrar, Saskatchewan Dietitians Association
 - Corene Martin, Health Promotion, Fond Du Lac Community Health, Fond Du Lac, Saskatchewan
 - Karen Jensen, Manager, medSask, College of Pharmacy and Nutrition, University of Saskatchewan
- The residents, health care professionals and staff of the Saskatchewan First Nations communities, Tribal Councils and Saskatchewan Health Authority for helping to promote the service, using the service and providing valuable feedback.
- The following organizations for providing support, assistance and/or resources throughout the pilot project:
 - Government of Canada, First Nations and Inuit Health (Saskatchewan)
 - Government of Saskatchewan, Ministry of Health
 - Dietitians of Canada, including Practice-Based Evidence in Nutrition (PEN) and the Aboriginal Nutrition Network
 - EatRight Ontario
 - Dial-a-Dietitian (Manitoba)
 - Healthlink BC
 - College of Pharmacy and Nutrition, University of Saskatchewan
 - Saskatchewan Dietitians Association
 - medSask

Introduction

Many First Nations people are facing serious health-related challenges and inequities as a result of Residential Schools and colonization, coupled with insufficient healing and wellness resources¹. Many chronic diseases can be prevented, treated and managed with proper nutrition². Registered Dietitians (RDs) are the most qualified health care professionals to provide clients and communities with evidence-based food and nutrition advice and interventions to support positive health outcomes and save future health care dollars³. Due to the remoteness of First Nation communities in Saskatchewan, access to RDs is limited or non-existent.

A Dietitian Call Center, also known as Dietitian Advisory Service (DAS), is a primary health care service that provides the public and health care professionals with access to a RD through telephone or email. This results in timely, cost-effective and accessible evidence-based food and nutrition information and advice. In Canada, three provinces (British Columbia, Ontario and Manitoba) have implemented a provincial DAS with great success. In April 2018, a new provincial DAS was opened in Newfoundland and Labrador.

In 2012, Dietitians of Canada partnered with the Saskatchewan Dietitians Association to pilot a provincial Dietitian Call Center, Ask a Dietitian. Ask a Dietitian provided all residents of Saskatchewan with free access to a RD for credible food and nutrition information and advice through a toll-free phone number and email. The pilot was a success, with 155 people using the telephone and email service over the duration of two months⁴. Data specific to First Nation communities was not collected during this pilot project.

Given the burden of nutrition-related chronic diseases on the health care system, the current gaps in dietitian services in Saskatchewan First Nations communities, and the success of other provincial DAS models, the Government of Canada, First Nations and Inuit Health (Saskatchewan) provided \$75,000 in funding to Dietitians of Canada to conduct a Dietitian Call Centre pilot project titled Eat Well Saskatchewan (EWS). Seventy-five percent (75%) of the funding was allocated to the establishment and operation of the call centre (consultant fee, email, toll free phone number, website, supplies, postage, promotion), 10% of the funding was allocated to an administration support charge for Dietitians of Canada, 8% of the funding was allocated towards updating the Practice-based Evidence in Nutrition (PEN) Aboriginal Pathway and 7% of the funding was allocated to the evaluation of the pilot project and development of the final report.

PRIMARY OBJECTIVES of the EWS pilot project were:

1. To provide free, easy access to the trusted, evidence-based healthy eating advice of a RD through telephone or email to First Nation clients and their service providers in Saskatchewan First Nation Communities to improve healthy eating knowledge and behaviours for individuals and families leading to better health outcomes.
2. To promote RDs as the most trusted, credible source of food and nutrition information to Saskatchewan First Nations communities.

Introduction

EWS was initially scheduled to operate from January 8/18 to March 29/18. In March, a three-month extension was announced, extending the service until June 29/18 for a total of six months. The service was closed for four statutory holidays as well as National Indigenous People's Day on June 21/18. EWS provided First Nations communities in the province with free, confidential access to a RD through a toll-free phone number (1-833-782-7800) and email (info@eatwellsask.ca), Monday to Friday from 10 a.m. – 4 p.m. As time and resources permitted, EWS accepted calls and emails from all residents of Saskatchewan. The service was staffed by one RD, who operated the Dietitian Call Centre from a home-based office. Callers could call the RD directly during business hours or leave a message outside of business hours to be responded to within 3 business days. Emails received were responded to within 3 business days.

The aim of the service was to provide general nutrition information and advice. The RD provided nutrition advice consistent with the Practice-based Evidence in Nutrition (PEN) database. PEN is a dynamic nutrition knowledge database developed by Dietitians of Canada with input from leaders from around the world in dietetic practice, knowledge translation and technology. The PEN system is recognized across Canada and internationally as a gold standard in evidence-based dietetic practice. The RD did not diagnose or make specific individual dietary recommendations. EWS did not replace the advice that a doctor or an individual counselling session that a RD would provide. Appropriate referrals were made if further assessment and counselling were required using the Saskatchewan Registered Dietitian Directory for Individual Client Services document, found at: <https://www.saskdietitians.org/wp-content/uploads/2017/01/dietitian-contact-info-SK-march-13-2018.pdf>⁵. No confidential or personal information was collected and calls and emails were considered anonymous.



Promotion

The following promotional strategies were organized during the duration of the pilot project including at the beginning of the project (January 2018) and when the extension was announced (March 2018). Ongoing promotions was through word-of-mouth promotions.

Promotional Emails to Stakeholders

Promotional information packages were distributed through email to key stakeholders. Emails included a letter introducing the service, a Frequently Asked Questions (FAQ) document, a poster and postcard (for print, web and social media promotions). It was the hope that stakeholders would print, post and share materials as able with their networks (including clients and health care providers). See the Appendix for the FAQ document and an example of the EWS poster/postcard. Promotional information was shared/sent to:

- All First Nation Communities in Saskatchewan through First Nations Inuit Health Saskatchewan region programs
- Dietitians in Saskatchewan through the following groups:
 - Dietitians with First Nations
 - Community and Regional Dietitians Group
 - The Public Health Nutritionists of Saskatchewan Working Group
 - Food and Nutrition Directors in the Saskatchewan Health Authority
 - Regina and Saskatoon Nutrition 530 Practicum Coordinators
 - Saskatchewan Dietitians Association
 - Dietitians of Canada Aboriginal Nutrition Network Members
 - Dietitians of Canada Regional Newsletter
- Members of the EWS Advisory Committee
- University of Saskatchewan College of Pharmacy and Nutrition
- Heart and Stroke – Saskatchewan
- Diabetes Canada – Saskatchewan Region
- medSask
- HealthLine (811)
- EatRight Ontario
- Dial-a-Dietitian (Manitoba)
- Healthlink BC
- National Aboriginal Diabetes Association
- Saskatchewan Cancer Agency
- The Government of Saskatchewan Ministry of Health and Education
- The Medical Health Officers of Saskatchewan
- Saskatchewan Registered Nurses Association
- Network of Inter-Regulatory Organizations



Promotional Items Mailed to First Nation Communities

The letter to stakeholders, FAQ document, posters and postcards were mailed to each First Nation community and Tribal Council in Saskatchewan. All Saskatchewan physicians received this information through fax as well with information on how to order more materials.

Promotion

Promotional Calls to First Nation communities

Follow up promotional calls were made to over 80 First Nation health centers and Tribal Councils in Saskatchewan to promote the service.

Media

Print

The Leader Post

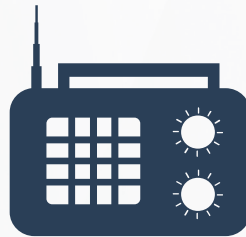
The Prince Albert Herald

CBC News Saskatchewan
Web Story

DocTalk, the College of
Physicians and Surgeons in
Saskatchewan March newsletter
themed “Indigenous Health”

Radio

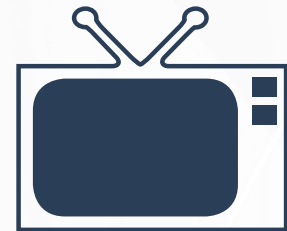
CBC Radio 1
The Afternoon Show



TV

Global News Morning Regina

CTV Regina



Radio and Web-Based Promotions

Promotional commercials aired on the Missinippi Broadcasting Company (MBC) Radio Stations, a First Nations Broadcasting Company, throughout Saskatchewan in three languages – English, Cree and Dene from February 21/18-March 29/18 and again from May 14/18-June 29/18.

EWS was promoted in the June edition of Eagle Feather News newspaper and a Web-based promotion rotation for approximately 6 weeks.

Website

An EWS website (www.eatwellsask.ca) was available from April 3/18 – June 29/18. During this time, the website was visited 337 times by 292 users.

EWS was also promoted on the Dietitians of Canada website from January 8/18 – June 29/18 and UnlockFood.ca website from April 1/18 – June 29/18.

Social Media

An EWS Facebook page (<https://www.facebook.com/EatWellSaskatchewan/>) was available from April 3/18 – June 29/18. The service was also promoted on Instagram, as well as by Dietitians of Canada and other stakeholders on Twitter throughout the six months.

Data Collection

Three main tools were used to collect data to evaluate the EWS pilot project: Client Encounter Form, Callback Survey, and Health Professionals Survey (see Appendix to view each tool). All documents were adapted with permission from EatRight Ontario.

Client Encounter Form

A Client Encounter Form (CEF) was completed for each call and email received by the EWS RD. The CEF was a set of questions, which provided demographics, reason for call, how clients heard about the service and caller satisfaction questions. When clients submitted a nutrition question to EWS through email, the response written by the RD included satisfaction questions at the end of the email. All data was entered into an encrypted excel spreadsheet.

Callback Surveys

At the end of each phone call, callers were asked if they were interested in receiving a Callback Survey in two weeks to assist in evaluating the service. The primary reasons for conducting the Callback Surveys was to assess if any behavior change occurred since speaking with the RD and if callers' nutrition knowledge increased as a result of utilizing the service. Calls made between March 12-19/18 were not offered the option for a Callback Survey due to the initial plans to end the pilot project March 29/18. Similarly, calls made between June 11-29/18 were not offered the option for a Callback Survey due to the service ending June 29/18. The EWS RD would make three attempts over three days to contact the caller to conduct the survey. The survey was not conducted if the caller could not be reached after the three attempts. All data was entered into an encrypted excel spreadsheet.

Health Professional Surveys

To obtain feedback about the service from health professionals working with First Nations communities in Saskatchewan, an online Health Professional Survey was created using the Dietitians of Canada Survey Monkey tool and distributed to RDs and nurses working in First Nation communities. The survey was available for two weeks (June 11/18-June 22/18).



Results: Client Encounter Form

For purposes of the pilot project, a contact (call or email) was defined as a nutrition, health or EWS related question received from a Saskatchewan resident.

Total Contacts (Calls + Emails): 101

Eat Well Saskatchewan Total Contacts			
Month	Calls	Emails	Total (Calls + Emails)
January	12	5	17
February	13	12	25
March	13	7	20
April	9	9	18
May	3	5	8
June	4	9	13
Total	54	47	101

Figure 1 - Eat Well Saskatchewan Total Contacts

It is important to note that the pilot project was specifically targeted for First Nations communities in Saskatchewan. Ten percent (114,570) of the population in Saskatchewan self-identify as First Nations. Of this 10%, 47.5% (54,460) live on reserve⁶. As such, these results should not be compared to larger Dietitian Call Center services with province-wide coverage for all individuals.

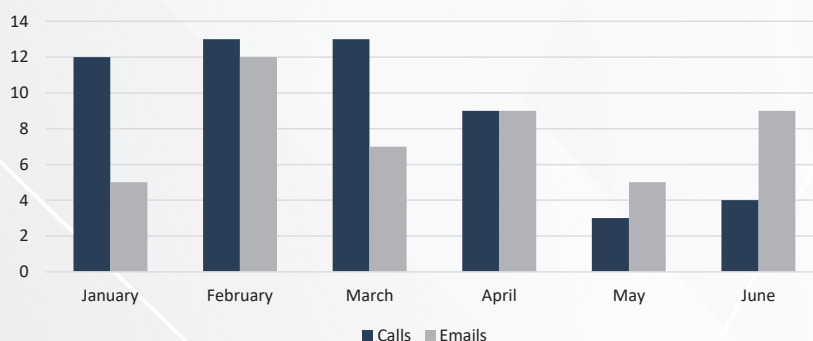


Figure 2 - Eat Well Saskatchewan Contacts by Month

Top 5 Reasons for Contact (Includes Calls and Emails):



Results: Client Encounter Form

PHONE CALLS

Total Phone Calls: 54

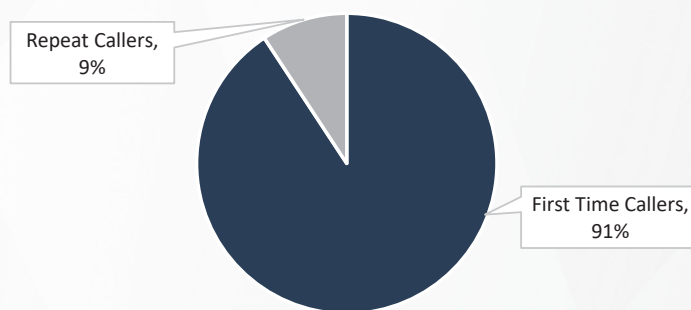


Figure 3 - First Time Callers & Repeat Callers

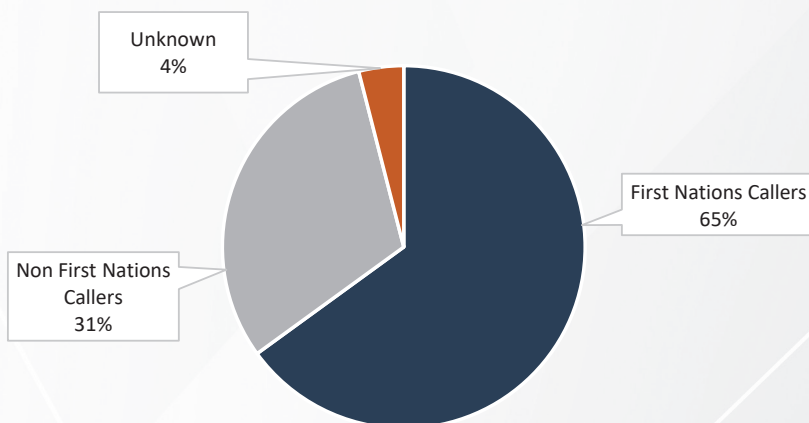


Figure 4 - First Nations Callers

Average Minutes to Complete Call: 34 minutes

(Minutes per call = length of call, research completed for call and callback, if required. Average based on data from 43 calls; those from Jan 24/18-June 29/18).

For the purpose of this pilot project and report, First Nations callers were defined as callers who:

- were a member of a Saskatchewan First Nations community;
- were calling on behalf of a First Nations community where they work; or,
- were calling on behalf of their work where the majority of their clients are First Nations (note that this question was added to the CEF on Jan 23/18).

Results: Client Encounter Form

Former Health Region/Authority in Saskatchewan	Total Calls	Percentage of Calls
Athabasca Health Authority	3	6 %
Keewatin Yatthe Health Authority	2	4 %
Mamawetan Churchill River Health Authority	1	2 %
Prairie North Health Authority	3	6 %
Prince Albert Parkland Health Authority	8	15 %
Kelsey Trail Health Authority	0	0 %
Heartland Health Authority	0	0 %
Saskatoon Health Authority	9	17 %
Sunrise Health Authority	2	4 %
Cypress Health Authority	0	0 %
Five Hills Health Authority	3	6 %
Regina Qu'Appelle Health Authority	18	33 %
Sun Country Health Authority	3	6 %
Unknown	2	4 %
Total	54	100 %

Notes: At the beginning of the EWS pilot project, the new Saskatchewan Health Authority had just been announced. As such, the former 13 health regions were used for geographical purposes for our report.

Figure 5 - Location of Callers by former Health Authorities in Saskatchewan

Figure-5 – Location of Callers by former Health Authorities in Saskatchewan, shows that calls were received from northern, rural and remote communities in Saskatchewan including three calls from the former Athabasca Health Authority. It is important to consider that the population of this former health region is approximately 2,500⁷. Two calls were received from the former Keewatin Yatthe Health Authority (populations 12,197 people) and 1 call from the Mamawetan River Churchill Health Authority (population 24,442)⁷. Call volume from rural and remote communities suggests a far reach of the service.

The former Regina Qu'Appelle Health Region and Saskatoon Health Region had the highest number of calls at 18 and 9, respectively. It is important to note that these health authorities have much larger populations than the rural or northern health authorities. In addition to this, the Regina Qu'Appelle Health Region stretches east to the Manitoba Border along the Qu'Appelle Valley which is home to many Saskatchewan First Nation communities.

Callers were asked the postal code of where they currently lived or the postal code of where they worked (if calling on behalf of work). A limitation identified was that callers may have answered they were a member of a First Nation community, but if they did not live at that community at the time of the call, their postal code may not be reflective of the community they were a member of.

Results: Client Encounter Form



Figure 6 - Former Saskatchewan Regional Health Authorities Map with Map of Saskatchewan First Nations

Results: Client Encounter Form

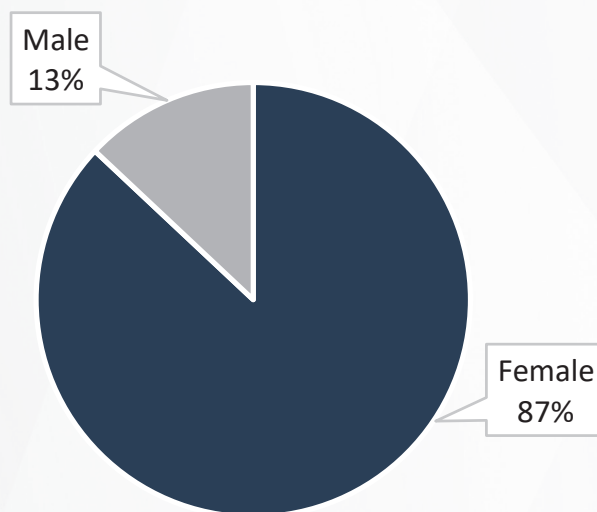


Figure 7 - Callers by Gender

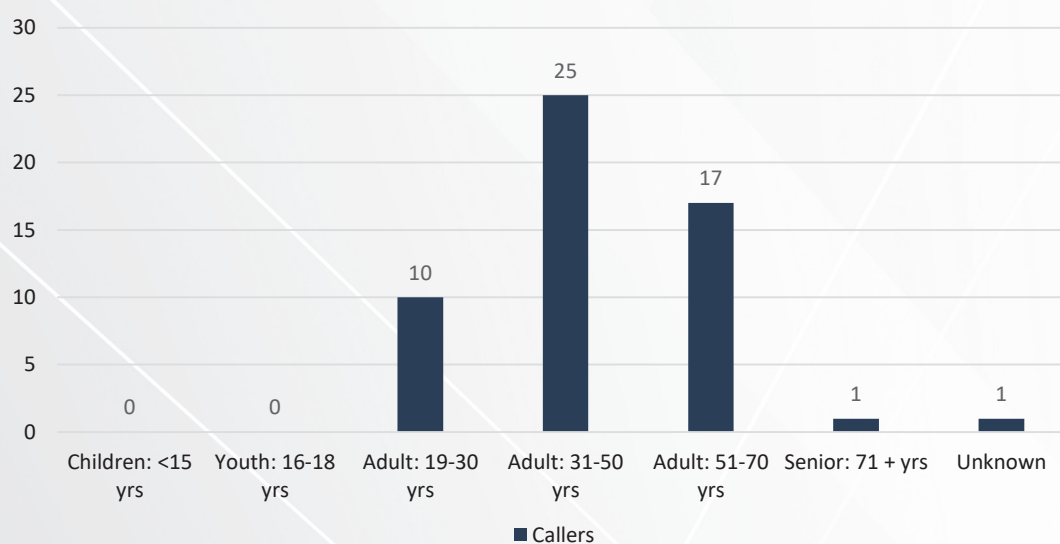


Figure 8 - Callers by Age

Results: Client Encounter Form

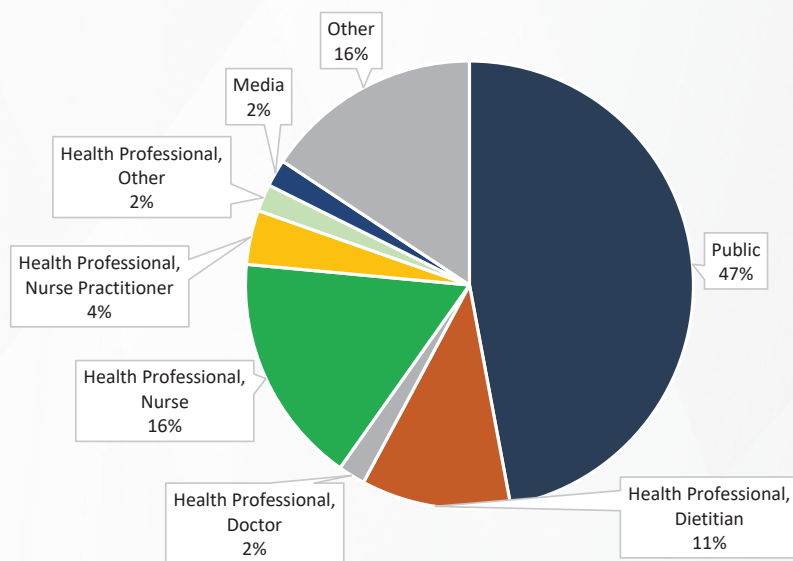


Figure 9 - Type of Caller

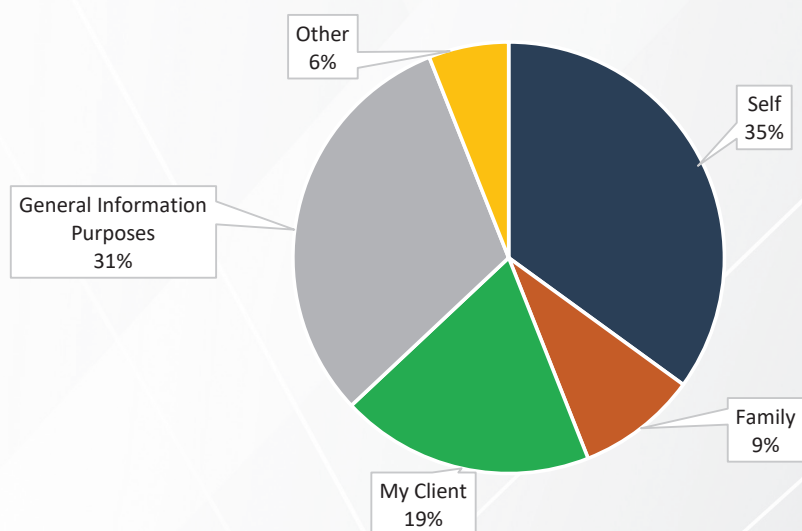


Figure 10 - Who the Question was About

Results: Client Encounter Form

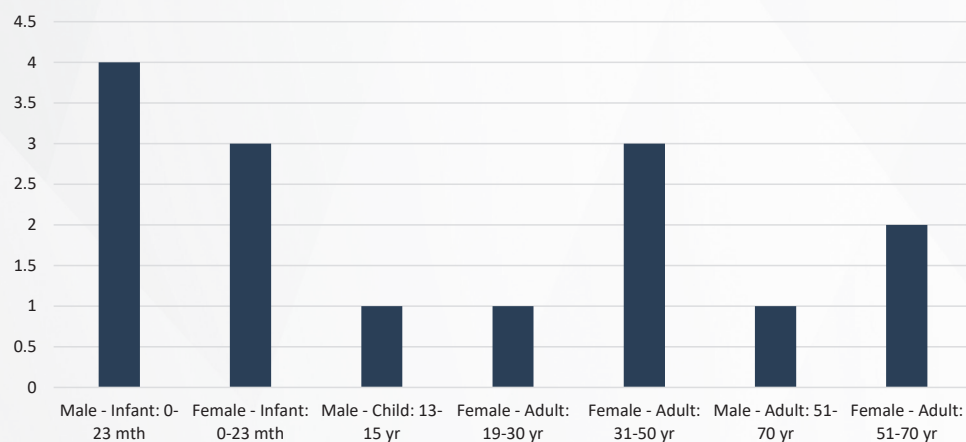


Figure 11 - If calling about Someone Else, Age & Gender of Person

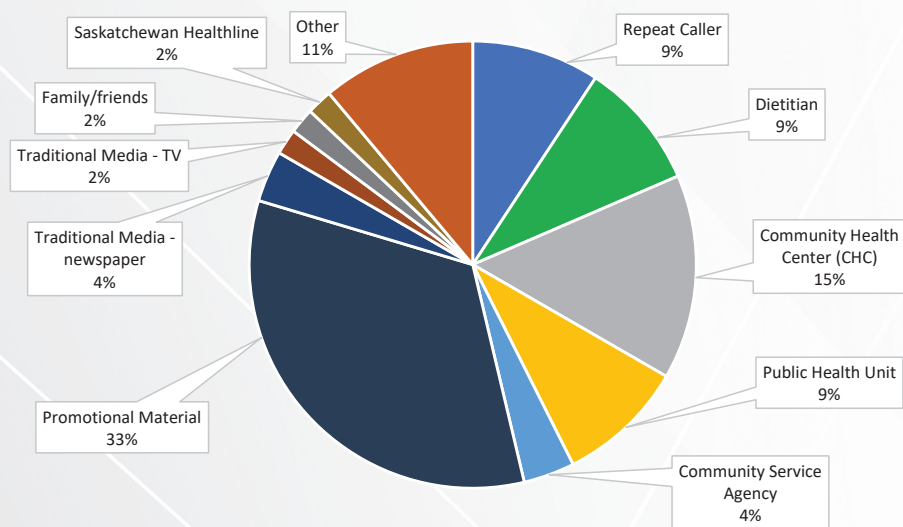


Figure 12 - How Callers Hear About the Service

Results: Client Encounter Form

Promotional material was the most popular way that callers indicated they had heard about the service.

Callers who chose the “other” option (from Figure 12 – How Callers Heard About the Service), were asked to specify how they heard about the service. Responses included:

- Discover Moose Jaw website;
- College of Dental Surgeons of Saskatchewan website;
- Community Food Centers Canada website;
- A website found on google search;
- Saskatoon Farmers Market; and
- EWS Facebook Page.

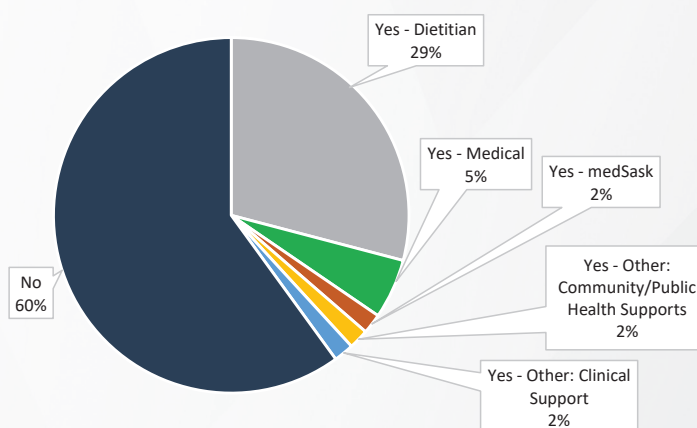
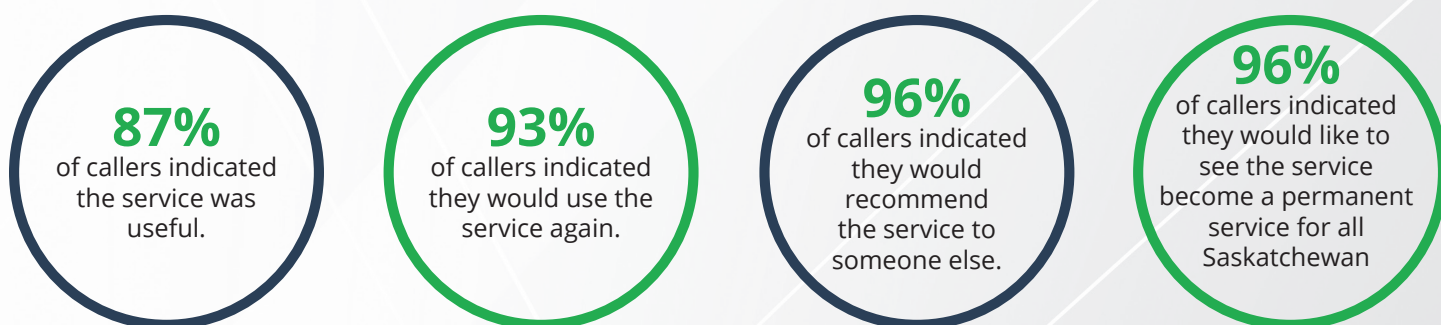


Figure 13 - Callers Referred On

Caller Satisfaction

When asked questions to assess callers' satisfaction at the end of a call:



When asked for suggestions regarding improvements for the service, callers suggested:

- Longer hours including those to accommodate people who work throughout the day.
- Using telecommunications such as Facebook messenger or text message.
- Advertising the service for everyone in Saskatchewan.
- Having the service available in different languages so Elders could call in themselves.
- A Facebook page (which was added when the extension of the service was announced).

Results: Client Encounter Form

Emails



Total Emails: 47

Average Minutes to Complete Email Response: 47 minutes

(Average based on data from 42 emails; those from Jan 24/18-June 29/18)

Of the 47 emails that were answered, only 2 emailers responded to all feedback questions. As such, data and satisfaction information from the email contacts was not analyzed.

Other emails: 34

Other emails include those received that did not meet the criteria/definition of a contact. Examples of these emails included emails from out of province, food companies inquiring about food sales, inquiries about the UnlockFood.ca website and others. Should this service continue long term, we'd recommend an online fillable template on the website. This could collect important data (including a Saskatchewan postal code to ensure questions were exclusive to in province residents) at the time that the question is submitted.

Client Testimonials (from Calls and Emails):

Story-telling is a powerful means of measuring success and impact in First Nations communities. This is what EWS clients had to say:

"Love it! Hope this pilot is successful. In my mind, it certainly sounds like it will fill a gap in available services."

"I definitely think this is a beneficial program for First Nations communities because the benefits of having information at the other end of a call makes it easier access for First Nations communities."

"I really liked it (the service) because I could call in and didn't need an appointment. I didn't receive a recording. I think people need to know how important diet is to overall health and how helpful a dietitian can be."

"It was very accessible, timely and helped me right in the exam room. It saved me and my client time."

Results: Callback Survey

Callers who agreed to Callback Survey: 35/48 (73%)

Note: 6/54 Callers were not offered Callback Surveys as they called between March 12-19/18 or June 11-29/18.

Completed Callback Surveys: 17/35 (48%)

Callback survey respondents indicated strong satisfaction with the service, specifically:

- 94%** indicated yes (88%) or somewhat (6%) in response to the statement "I felt the dietitian listened to my questions."
- 100%** indicated yes (94%) or somewhat (6%) in response to the statement "I felt the dietitian explained things to me in a way I could understand."
- 81%** indicated yes (75%) or somewhat (6%) in response to the statement "I felt better informed about the food, nutrition or health issues I was calling about."
- 100%** indicated yes (50%) or somewhat (50%) in response to the statement "I felt more confident to make healthy choices for myself and/or my family."

Respondents to the callback survey indicated positive behaviour changes since using the service, specifically:

- 67%** answered yes when asked "Have you made any changes as a result of the call you believe will help you/or your family eat healthier?"
- 64%** answered yes when asked "Have you made any changes that you believe will improve you, or your family's health?"

Examples of changes made included:

"The age appropriate foods for feeding babies are used."

"I started cooking healthier. I started cooking with lentils. My family never noticed the lentils. I also learned how to cook with beans."

"I bought more fresh fruit and vegetables. I bought brown bread instead of white bread. I cooked more fiber in the meals- beans and lentils."

"Changed the portion sizes and increased the amount of vegetables I'm eating."

"I started using oatmeal. We switched breads to whole wheat. Instead of juice, I don't make juice, I just put out water."

"I buy more greens and more fruit."

"We've been sitting at the table for all of us to sit together at supper. We've been making an effort."

"I changed my portion sizes and increased the amount of vegetables I'm eating."

Other valuable feedback regarding follow up from using the service indicated:

- Of those who were referred to a community contact, 50% followed up within 2 weeks.
- Of those who were sent handouts, 90% indicated they read some or all of the handouts sent.
- Of this, 89% indicated the handouts provided additional helpful information.

Results: Client Encounter Form

If clients had not called EWS, they indicated they would have obtained nutrition information by:

- going online
- asking another health care provider (examples provided including dietitian, nurse or physician)
- not asking the question

100% of respondents indicated they would recommend the service to family and friends.

100% indicated they would like to see the service become a permanent service for all Saskatchewan residents.

Additional comments from respondents of Callback Surveys:

"I think it will be good because some people want help but they don't want to be in a public place."

"The biggest thing for me was that the person was understanding and a good listener and sometimes that's all it takes. She was very knowledgeable and she confirmed what I was doing was correct. It's an added benefit for our health care."

"I would like to see it become like Healthline. We need this kind of help for nutrition and diet. There is so much information out there. Most of us don't have the education to obtain a good evaluation of products."

"I just hope it continues."

"I just think it's useful for children from remote communities. Some parents do not have cell phones. A text message service may be useful for follow-up services. Or an email option."

"I'm just really grateful to access the information and have someone to talk to me. It was personal and helpful. I live in Northern Saskatchewan."

Results: Health Professional Survey

Health Professional Surveys were completed by 16 respondents that included 12 dietitians and 4 nurses. Successes heard by respondents included they had promoted the service and heard their clients had used the service. Respondents also shared they had heard from other health professionals that the service is a great idea. General themes regarding barriers included limited access to phones for the First Nation communities, that cell phones have limited or no minutes therefore clients can only text, limited internet availability and limited awareness of the service.

Health professionals who completed the survey indicated strong satisfaction with the service, specifically:

87% indicated yes (81%) or maybe (6%) when asked if they would recommend the service to clients.

100% indicated yes (81%) or maybe (19%) when asked if they would recommend the service to colleagues.

94% indicated yes (88%) or maybe (6%) when asked if they would like to see the service become permanent for all Saskatchewan residents.

What health professionals had to say:

"Thank you for providing this valuable service. I hope it continues into the future because it has the potential to help reduce health gaps."

"Keep up the excellent work and remember every client reached is very significant."

"Excellent program for individuals who may be limited to the support that they can receive."

"Could get more traffic and use if it was open to all Saskatchewan residents and their health care providers. There are rural areas without dietitians all over the province."

"I feel like this service would be more beneficial if access was for all Saskatchewan residents, not just First Nations people. Wait times to see a community dietitian (if there is a community dietitian at all) are super long and often the lower priority patients don't even get seen. This service could potentially help the lower priority patients as often they are less complex and would be easier to help over the phone, email, etc."

"(Offer) a texting option from phone or have an online chat option on the website."

Strengths & Limitations

Strengths

Service

- First of its kind pilot project in Canada designed specifically for First Nations communities to increase direct access to high-quality RD services.
- The service was successful in providing nutrition information and advice to clients in northern Saskatchewan; specifically, for rural, remote, and isolated communities.
- Data collected demonstrated strong satisfaction with the service and that information and advice provided to clients led to positive behavior change and increased healthy eating knowledge.
- Assistance/support was provided by EatRight Ontario, a successful Dietitian Call Center.
- Resources could be emailed or mailed to clients.

Promotion

- A variety of ways to promote the service to First Nations communities were utilized, including promotion in Cree and Dene.
- Stakeholders across the province helped extend our reach by providing in-kind promotional support throughout the pilot project.

Evaluation

- Multiple evaluation tools were used and the data collected helped make improvements to the service throughout the pilot project. The results of this pilot project can now be used as a foundation for future Dietitian Call Centers in the province.
- Positive feedback and support came from a variety of sources including clients and health professionals.

Limitations

Service

- Lack of, or limited access, by target audience to the service. Feedback suggested that Saskatchewan First Nations residents have limited access to phones, phone minutes and the internet so they may not have been able to access the service.
- The service did not have access to the Call Center Practice-Based Evidence in Nutrition (CC-PEN), a PEN system designed specifically for the call center environment. Features include access to counseling tools developed for a call center environment, a secure email a dietitian feature, resource distribution, an online community referral database and a data collection survey.
- Limited hours of access.
- The service was only available in English; translation services were not provided.

Promotion

- Promotion requires time and given the short duration of the pilot project, there wasn't enough time to adequately

promote the service and increase awareness in the target audience.

- An additional challenge in promoting the pilot project was the remoteness and isolation of many First Nations communities.
- Limited budget to develop an effective, ongoing promotional strategy.

Evaluation

- Using postal codes to assess geographical reach of the service was difficult as some First Nations communities share postal codes with local rural and urban centers. In addition, some individuals may be from a First Nation community but have relocated to an urban setting.
- The limited responses to feedback questions for the email service decreased the generalizability of the results.
- The EWS RD conducted the Callback Surveys due to limited time and resources available for the pilot project.

Recommendations

Recommendations for Future Dietitian Call Centres

- Establish a province-wide Dietitian Call Centre for Saskatchewan to ensure all Saskatchewan residents have easy, direct access to a RD for trustworthy food and nutrition information.
- Create an ongoing promotions strategy utilizing a variety of ways to promote the service, ensuring repeat exposure to messaging and ensuring promotions are tailored to the target audience.
- Print hard copies and mail out promotional material to stakeholders rather than relying on them to print the materials.
- Use the Call Center Practice-Based Evidence in Nutrition (CC-PEN) database. CC-PEN accesses all of the practice questions, nutrition evidence, and client tools found in the PEN system but has been enhanced in several ways to accommodate the need for efficient call lengths in a call center environment. Adaptations include how information is displayed, branding of client handouts, work flow metrics, and tools that are designed to make a call centre operation efficient. Counseling guidelines and standardized responses aid the RD in quickly translating the technical information in the PEN system into practical, relevant advice that is more easily understood by caller.
- Create an online fillable form on the service's website for email questions to ensure demographic data is provided at the time of question submission.
- Explore other modes of communication to address limited phone (ex. limited cell phone minutes) and internet access. Options for contact, in addition to phone or email contact, could include Facebook messaging or text messaging options for clients who do not have minutes on their phone. Targeted promotions encouraging communities to offer use of a phone or internet service at community centers (ex. health centers or band offices) for residents wanting to access the Dietitian Call Center may also be worthy of consideration to address these barriers.
- Explore the need for increased hours of operation, including evening hours.
- Explore the need for translation services.

Conclusion

EWS was a successful pilot project for First Nation communities in Saskatchewan that allowed the public and health professionals to access timely, high-quality RD services no matter where they lived. The service made over 100 contacts in 6 months of which 65% were from the target audience of First Nations. Data collected throughout demonstrated high satisfaction with the service, with 96% of callers and 100% of Callback Survey respondents indicating they'd like to see EWS become a permanent service for all Saskatchewan residents. The information and advice provided to clients lead to positive healthy eating behavior changes and increased healthy eating knowledge, with 67% of Callback Survey respondents indicating they made a change as a result of the call and 81% indicating they felt better informed about the question they were calling about. Healthy eating behaviors are a key factor in optimum growth and development, prevention and management of chronic disease and overall well-being. Positive testimonials from the public and health professionals further demonstrated the value of this service.

Implementing a permanent Dietitian Call Center in Saskatchewan is one of many policy actions that should be taken to reduce health inequities and the disproportionate burden for chronic disease for First Nations communities and would be responsive to the Truth and Reconciliation Commissions' call to action of closing gaps in health outcomes for First Nations Communities⁹.



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Appendix: Frequently Asked Questions

Q: What is Eat Well Saskatchewan?

A: Eat Well Saskatchewan is a dietitian call center pilot project for Saskatchewan First Nations communities. The service provides FREE, confidential, easy access to the trusted advice of a dietitian via toll-free number or email to help you make healthier food choices and answer your food and nutrition questions.

Q: What is Eat Well Saskatchewan's toll-free number and email?

A: The toll-free number is 1-833-782-7800. The email is: info@eatwellsask.ca.

Q: When does Eat Well Saskatchewan open for calls and emails?

A: Eat Well Saskatchewan will be open from Monday, January 8, 2018 to Friday, June 29, 2018.

Q: What are the hours of service?

A: The toll-free line will be open Monday to Friday 10 am – 4 pm (except statutory holidays). Outside of these hours, callers may leave a voice mail message and a dietitian will return your call within 3 business days or less. You can send an email anytime of the day/week. Emails will be answered within 3 business days or less.

Q: Who can call/email?

A: The service is available for members of First Nations communities in Saskatchewan and their health providers. Callers can call/email on behalf of themselves, or on behalf of a family member or friend. Health providers can call/email on behalf of a client or for general information purposes.

Q: What languages are available?

A: For this 6-month pilot project, the service is only available in English. However, a translator can call on behalf of a client, family member or friend.

Q: I don't live in a First Nations community, can I still call?

A: Yes

Q: Why is Eat Well Saskatchewan for members of First Nations Communities in Saskatchewan?

A: This pilot project is being funded through First Nations and Inuit Health Branch, Government of Canada in partnership with Dietitians of Canada to support the health of First Nations communities and improve access to the trusted advice of dietitians for rural, remote and isolated communities.

Q: When I use this service, who will I be speaking to?

A: When you call or email, you will be speaking to a dietitian.

Q: What is a dietitian?

A: Dietitians are passionate about food and its potential to enhance lives and improve health. Dietitians respect traditional knowledge, values and health practices. They apply holistic prevention and health promotion strategies for improved individual, family and community health. Dietitians are the only regulated food and nutrition professionals and undergo comprehensive and rigorous training, both on the job and in universities.

Q: Do I need to be referred to use this service?

A: No, you do not need a referral from a doctor or other health provider to use this service. This service provides general nutrition information and cannot provide individual in-depth counselling or medical advice. We can connect you with local services if you need more personalized assistance.

Q: Does using this service replace a visit to my doctor, dietitian or other health provider?

A: No, this service is meant to answer basic nutrition questions. By calling this number, you can receive information about dietitian services in your area for further information.

Q: What are common questions from clients?

A: Eat Well Saskatchewan dietitians answer questions on food, nutrition, healthy eating, and chronic disease prevention. Here are some examples of commonly asked questions:

- How do I lower my risk of heart disease?
- I just found out I have diabetes. Where can I go to for help?
- What should I feed my baby?
- What are whole grains?
- I don't drink milk. What can I eat to make sure I get enough calcium?
- Should I do a juice cleanse?
- My child is a picky eater. How can I get her to eat more vegetables?

Q: What happens during a typical phone call?

A: Here are some of the things that might happen when you speak with a dietitian at Eat Well Saskatchewan:

- Answer your questions using an evidence-based database. The information will be explained in an easy to understand way.
- Ask demographic questions such as your age, gender and which community you live in to help us better understand your needs.
- Set goals/small steps with you that fit your needs and lifestyle.
- Connect you with local services
- Send you follow-up resources in the mail or by email.
- Treat you with respect and understanding while respecting your privacy and confidentiality.

Q: How often can I call?

A: Call as often as you like. There are no limits to how many times you can call or email our service.

Q: Is there a charge to use this service?

A: No. Service is **FREE** of charge.

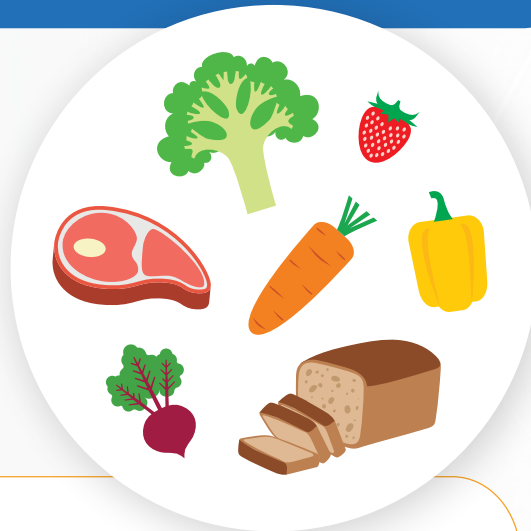
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Appendix: Client Encounter Form

A Client Encounter Form (CEF) is to be completed for each call and email handled by the dietitian. Some questions can be completed from information that the caller/emailer provides during the call/email. However, for calls, the dietitian needs to make sure that all the information in the CEF is completed before ending the call. If not all needed information is gathered during the course of discussing the caller's questions, dietitian could state "To help us improve our service, I am wondering if you wouldn't mind answering a few questions. This should only take a minute." Due to limitations of data collection for the Email a Dietitian service, not all questions will be completed.

1. Date: _____, 2018

Start Time: _____ End Time: _____ Total Minutes: _____

(Total minutes includes total time for call including the call itself and time to research information if needing to call back. For emails – try to estimate total minutes; start and end time may not work).

Check one:

- ☐ Phone call
- ☐ Email

Before asking this question, say "Information you provide during this call is confidential. As this is a pilot project, we'd like to collect information about who is using our service. This information will also help ensure I am providing you with the most accurate answers to your questions. Is it OK if I ask you a few questions first?"

2. "Is this the first time you've called our service?"

- ☐ First call
- ☐ Repeat caller
- ☐ Unknown

3. Are you a member of a Saskatchewan First Nations community or are you calling on behalf of a Saskatchewan First Nations Community (ex. where you work)?

- ☐ Yes
- ☐ No

i. If yes (a member of the community), which community: _____

a. Do you currently live in this community? Yes No (circle one)

ii. If yes (calling on behalf of a SK FN community where you work), which community: _____

iii. If no, where do you live or work, if calling on behalf of work (circle one and specify town)?

a. If you are calling on behalf of your work, are the majority of your clients First Nations? Yes No (circle one)

iv. For all callers – We want to know if people from all over Saskatchewan are using this service. As such, can you tell me your postal code (of where you live or where you work if you are calling on behalf of where you work)? _____

4. Caller/Emailer's Gender and Age Range

a) Gender (Dietitian does not need to ask gender question on call; should be able to complete without asking)

- ☐ Male
- ☐ Female
- ☐ Unknown

b) Age Range – “Do you mind telling me your age”

- ☐ Children: <15 yr
- ☐ Youth: 16-18 yr
- ☐ Adult: 19-30 yr
- ☐ Adult: 31-50 yr
- ☐ Adult: 51-70 yr
- ☐ Senior: 71+

If caller doesn't want to provide actual age, ask them if they would be willing to provide an age range.

If caller is < 15 yrs of age, ask:

- ☐ Is your parent/guardian available right now?
- ☐ If yes, can you put them on the phone so that I can get their consent to answer your question?
- ☐ If no, unfortunately I am unable to answer your questions without parent/guardian consent. Can you call back when they are available? We are open Monday to Friday from 10am-4pm.

5. Who is calling?

- ☐ Public
- ☐ Health Professional (specify below)
- ☐ Dietitian
- ☐ Doctor
- ☐ Nurse
- ☐ Nurse Practitioner
- ☐ Pharmacist
- ☐ Naturopath
- ☐ Massage Therapist
- ☐ Mid-Wife
- ☐ Other
- ☐ Media
- ☐ Other (describe): _____

6. “Who is your question about?”

- ☐ Self
- ☐ Family
- ☐ Friend
- ☐ My client (for health professionals)
- ☐ General information purposes
- ☐ Other (describe): _____

If question is about someone else, ask:

i. Gender – “Do you mind telling me their gender”

- ☐ Male
- ☐ Female
- ☐ Unknown

ii. Age – “Do you mind telling me their age”

- ☐ Infant: 0-23 mth
- ☐ Toddler: 2-3 yr
- ☐ Children: 4-12 yr

- ☐ Children: 13-15 yr
- ☐ Youth: 16-18 yr
- ☐ Adult: 19-30 yr
- ☐ Adult: 31-50 yr
- ☐ Adult: 51-70 yr
- ☐ Senior: 71+

If caller doesn't want to provide actual age, ask them if they would be willing to provide an age range.

Reason for Call:

Only select the primary topic of caller/emailers question

General Food & Nutrition:

- ☐ Healthy eating – general (e.g. food groups, water, servings)
- ☐ Healthy eating – feeding infants formula and solids
- ☐ Healthy eating – meals and snacks (e.g. packing lunches, breakfast, snacks, eating out, menu planning)
- ☐ Nutrients – macro (e.g. calories, fat, carbohydrates, protein, fibre, alcohol)
- ☐ Nutrients – micro (e.g. vitamins & minerals; supplements)
- ☐ Health properties in food (e.g. herbs, natural health products, phytochemicals)
- ☐ Food purchase/preparation/nutrient content (e.g. nutrition labeling, recipes/ingredients, food selection, nutrient analysis)
- ☐ Food safety (e.g. food prep & storage, turkey, food irradiation, hormones, additives, contaminants, food poisoning, pesticides, organic, water safety)
- ☐ Food access/cost (e.g. budgeting, food banks, food security)

Lifecycle/Lifestyle:

- ☐ Pregnancy (e.g. food choices, weight gain, supplements)
- ☐ Breastfeeding
- ☐ Vegetarian (all types)
- ☐ Physical activity/sports (e.g. food choices and supplements, hydration)

Conditions:

- ☐ Allergy/intolerances (all ages, lactose intolerance, celiac)
- ☐ Arthritis/Gout
- ☐ Bone Health (e.g. osteoporosis, relationship of specific nutrients to bone health)
- ☐ Digestive (e.g. gas, irritable bowel, colitis, Crohn's, diverticulosis, ulcer)
- ☐ HIV/AIDS/immune
- ☐ Cancer – prevention
- ☐ Cancer – management (someone has a form of cancer)
- ☐ CV- prevention (heart health)
- ☐ CV-management (someone has a form of cardiovascular disease)
- ☐ Diabetes-prevention
- ☐ Diabetes-type 2 mgt (someone has diabetes)
- ☐ Diabetes-type 1 mgt
- ☐ Diabetes-gestational
- ☐ Hypoglycemia
- ☐ Hypertension
- ☐ Weight – prevention of obesity (growth charts, BMI)
- ☐ Weight – management (weight loss, fad diets, wt loss products)
- ☐ Weight- Eating Disorder (and body image)
- ☐ Weight- Under

Other:

☐ Eat Well Saskatchewan program info (e.g. hours of service, scope of service, compliments/complaints, never got fulfillment)

☐ Other (Describe: _____)

7. How did you hear about this service? Check main source

☐ Not a first-time caller, already had Eat Well Sask phone #

☐ Dietitian (any)

☐ Community Health Centre (CHC) (any staff except dietitian)

☐ Public Health unit (any staff except dietitian/nutritionist)

☐ Doctor's office (MD, nurse, reception)

☐ Fitness centre (by fitness professional, reception)

☐ Hospital (any staff except dietitian/intern)

☐ Community Service Agency (e.g. non-medical services)

☐ Other Government Agency

☐ Telephone Directory (paper or online)

☐ Promotional Material (poster, letter, postcard, calendar, bookmark, etc)

☐ Traditional Media, (please specify - radio, TV, newspaper, magazine)

☐ Other organization's Facebook page

☐ SDA Website

☐ DC Website

☐ School (e.g. school letter)

☐ Family/Friends

☐ Saskatchewan HealthLine

☐ Other (Describe)

☐ Do not know/ prefer not to answer

8. Was this service useful?

☐ Yes

☐ No

☐ Didn't answer

9. Would you use this service again?

☐ Yes

☐ No

☐ Didn't answer

10. Would you recommend this service to someone else?

☐ Yes

☐ No

☐ Didn't answer

11. This service is currently a 6-month pilot project. Would you like to see this become a permanent service for all Saskatchewan residents in the future?

☐ Yes

☐ No

☐ Didn't answer

12. In your opinion, is there anything that could be improved about this service?

Contact referred on

- ☐ No
- ☐ Yes _____ To which service:
 - ☐ Dietitian
 - ☐ Medical (e.g. physician, nurse, OT, PT, pharmacist)
 - ☐ Health unit
 - ☐ Community Health Center
 - ☐ Community agency (non-medical e.g. meal service, mental health, child services, non-profit agencies)
 - ☐ Emergency service (911)
 - ☐ HealthLine
 - ☐ medSask
 - ☐ Other (describe)

Follow-up details

- ☐ No follow-up required
- ☐ Emailed resources (record email address on final page of CEF)
- ☐ Mailed resources (record mailing address on final page of CEF)
- ☐ Call back was required (record information on final page of CEF)

13. Callback survey- Ask: To evaluate this service, can we call you back in 2 weeks to ask you a few questions to learn whether the information shared with you today was helpful? The questions should not take more than 10 minutes of your time.

- ☐ Yes
- ☐ If yes, fill out information on next page
- ☐ Callback survey ID #: _____
- ☐ No

Appendix: Callback Survey

Callback surveys will be conducted 2 weeks after a caller phones Eat Well Saskatchewan. The dietitian will call the individual up to 3 times to participate in the survey. If the individual cannot be reached after the 3 attempts within 3 days, the dietitian will stop calling.

If callback was completed, indicate completion date: _____

If callback survey was not completed, specify reason and date (below):

- ☐ Caller was unable to be reached, attempts made on the following dates: _____
- ☐ Caller was no longer interested in completing survey when called on _____
- ☐ Caller could not remember reason and/or details of their initial call to EWS when called on _____
- ☐ Other (describe) when called on (record date): _____

Data for dietitian to enter (will retrieve this from the excel spreadsheet)

Callback Survey ID #: _____

Age range of caller: _____

Age range of person they were calling about (if call was not about themselves): _____

Gender of caller: _____

Gender of person they were calling about (if call was not about themselves): _____

Geography (pick one):

- ☐ Member of a Saskatchewan First Nations community; specify which community caller is a member of:
 - o Did caller live in community at time of call? Yes No (circle one)
- ☐ Calling on behalf of a Saskatchewan First Nations community where they work; specify which community or Tribal Council caller works at: _____
- ☐ Not a member of a Saskatchewan First Nations community; specify which community caller lives in: _____
- ☐ Calling on behalf of work but not for a Saskatchewan First Nations community; specify which community caller works in: _____
 - o Are the majority of clients FN clients? Yes No (circle one)

Geography - Postal code (pick one):

- ☐ Live: _____
- ☐ Work: _____

Hello. May I please speak to _____?

My name is Danielle, and I am calling on behalf of Eat Well Saskatchewan. When you recently called Eat Well Saskatchewan, you gave permission to be contacted for a quick follow-up survey. The survey is about how your last experience Eat Well Saskatchewan met your needs.

If the caller is not available: I would like to call back later. What would be a better time to call back between the hours of 9am – 5pm?: _____

If person is asking for details or wants to take a message: I'm sorry, I'm not able to provide details other than this call is about conducting an authorized survey. Is there a better time to call back? _____

1. Would you be willing to participate in a 5-minute survey at this time?

- ☐ Yes
- ☐ No
- ☐ Not now

Notify caller: Your individual responses will be kept confidential, your name will not be included in the survey. I will be writing out your responses, so please speak slowly. There is no right or wrong answer. Please know that your participation is completely voluntary and if at any point you would like to stop the survey please let me know.

If caller says no or not now: Since this is not a good time, can we schedule a time that would be more convenient for you? Thank you, I will call you back at/on _____

If caller says no to completing the survey and does not want to reschedule: Okay, thank you for your time.

2. When you last called Eat Well Saskatchewan, what was the main reason you called?

If caller does not recall, offer a simple prompt about the nutrition topic or category: The dietitian recorded that you spoke about _____.

If the caller recalls after prompt: Can you add details regarding the reason for the call?

If caller does still not recall: To complete the survey, details about the call with the dietitian are important, therefore we are unable to complete the survey. Thank you for your time, and please feel free to contact Eat Well Saskatchewan with any further food and nutrition questions or concerns.

3. I am going to read a number of statements to help us understand how you felt after you spoke with the Dietitian. Please answer yes, somewhat, or no; if you are unsure how to reply, you can respond "no opinion" or "not sure"; if the question does not apply you can respond with "not applicable".

(a) I felt the dietitian listened to my questions

- ☐ Yes
- ☐ Somewhat
- ☐ No
- ☐ No opinion

If caller answers no, ask: Can you share details about why you said 'no' for this statement?

(b) I felt the dietitian explained things to me in a way that I could understand

- ☐ Yes
- ☐ Somewhat
- ☐ No
- ☐ No opinion

If caller answers no, ask: Can you share details about why you said 'no' for this statement?

(c) I feel better informed about the food, nutrition or health issue I was calling about

- ☐ Yes
- ☐ Somewhat
- ☐ No
- ☐ No opinion
- ☐ Not applicable (Tell caller: you can respond "not applicable" if this question did not apply to you)

If caller answers no, ask: Can you share details about why you said 'no' for this statement?

(d) I read some or all of the handouts that I was sent

- ☐ Yes
- ☐ No
- ☐ Not applicable (Tell caller: you can respond "not applicable" if you did not receive any handouts)

If caller answers yes, ask – Did the handouts provide you with additional helpful information?

- ☐ Yes
- ☐ No
- ☐ No opinion

If caller answers no, ask: Can you share details about why you said 'no' for this statement?

(e) I feel more confident to make healthy eating choices for myself and/or my family

- ☐ Yes
- ☐ Somewhat
- ☐ No
- ☐ No opinion
- ☐ Not applicable (Tell caller: you can respond "not applicable" if you were asking questions on behalf of someone else)

If caller answers no, ask: Can you share details about why you said 'no' for this statement?

(f) Have you made any changes (as a result of the call) that you believe will help you and/or your family eat healthier?

- ☐ Yes
- ☐ No
- ☐ Not sure
- ☐ Not applicable (Tell caller: you can respond "not applicable" if you were asking questions on behalf of someone else)

If yes, would you be willing to share what changes you've made?

If no, do you plan to make a change to eat healthier within the next 30 days?

- ☐ Yes
- ☐ No
- ☐ Not sure

(g) Have you made any changes that you believe will improve you and/or your family's health?

- ☐ Yes
- ☐ No
- ☐ Not sure
- ☐ Not applicable (Tell caller: you can respond "not applicable" if you were asking questions on behalf of someone else)

If yes, would you be willing to share the changes you've made?

If no, do you plan to make changes in the next 30 days that you believe will improve you and/or your family's health?

- ☐ Yes
- ☐ No
- ☐ Not sure

(h) I followed up on the community contact that I was given by the dietitian:

- ☐ Yes
- ☐ No
- ☐ Not applicable (Tell caller: you can respond "not applicable" if you were not provided a community contact or if you were calling on behalf of someone else)

[If caller asks what is a "community contact" – A community contact means a person or place to go for

additional information or assistance. Examples are: a registered dietitian, a family doctor or other health care provider and/or registering for a program, class or workshop that the dietitian recommended]. If caller answers no, ask: Can you share details about why you said 'no' for this statement?

4. If you had not called Eat Well Saskatchewan, how would you have obtained nutrition information? (record exact response)

(Do not read the list below to the participant but check those that they would have consulted)

- ☐ Gone on the internet/gone online
- ☐ Gone to the library/bookstore
- ☐ Asked my family and/or friends
- ☐ I would not have asked the question
- ☐ Gone to see my physician
- ☐ Gone to another health care provider (describe) _____
- ☐ Other (describe)_____

5. Would you recommend Eat Well Saskatchewan to family or friends?

- ☐ Yes
- ☐ Maybe
- ☐ No
- ☐ No opinion

6. This service is currently a 6-month pilot project. Would you like to see this become a permanent service for all Saskatchewan residents in the future?

- ☐ Yes
- ☐ Maybe
- ☐ No
- ☐ No opinion

7. Are there any additional comments you would like to provide about Eat Well Saskatchewan?

Thank you for your time! The information from this survey will be used to help evaluate and improve the Eat Well Saskatchewan service. If you have any food or nutrition related questions in the future, please feel free to call Eat Well Saskatchewan. Have a nice day. (End of survey)

Appendix: Health Professional Survey

Eat Well Saskatchewan (EWS) is a 6-month Dietitian Call Center pilot project for Saskatchewan First Nation Communities and their service providers. The pilot project is funded by the First Nations and Inuit Health Branch, Government of Canada in partnership with Dietitians of Canada. The call center opened on January 8, 2018 and runs until June 29, 2018, Monday-Friday, 10 am – 4 pm. Clients and service providers can call or email their nutrition answers and have them answered for free by a Registered Dietitian. The pilot project was intended to increase access to the trusted advice of a Registered Dietitian as some rural, remote or isolated communities have minimal dietitian visits/month or no dietitian in their community. The service was meant to complement the dietitian services that already exist in communities that do have dietitian services.

The information from this survey will be used to help evaluate the Eat Well Saskatchewan service. Please know that there are no right or wrong answers and participation is appreciated but voluntary. Your responses will be kept confidential and no identifying information will be released. Please take a few minutes to fill out this survey regardless of if you have used the EWS service.

The survey will take approximately 10 minutes to complete and we would appreciate your response by Friday, June 22, 2018.

1) Please identify your role in working with First Nation Communities:

- ☐ Nurse
- ☐ Dietitian
- ☐ Other – describe: _____

2) In working with First Nation Communities, can you share any successes you've heard about Eat Well Saskatchewan?

3) In working with First Nation Communities, can you share any barriers you've heard about Eat Well Saskatchewan?

4) Would you recommend Eat Well Saskatchewan to clients?

- ☐ Yes
- ☐ Maybe
- ☐ No
- ☐ No opinion

5) Would you recommend Eat Well Saskatchewan to colleagues?

- ☐ Yes
- ☐ Maybe
- ☐ No
- ☐ No opinion

6) This service is currently a 6-month pilot project. Would you like to see this become a permanent service for all Saskatchewan residents in the future?

- ☐ Yes
- ☐ Maybe
- ☐ No
- ☐ No opinion

7) Are there any additional comments or suggestions you would like to provide about Eat Well Saskatchewan?

Thank you for your time! The information from this survey will be used to help evaluate the Eat Well Saskatchewan service. If you have any food or nutrition related questions in the future, please feel free to call Eat Well Saskatchewan until June 29/18



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