## **Education, Training and Counselling**

## Remote delivery of peanut allergy prevention in-service via Skype

J. Schneidereit-Hsu<sup>1</sup>, B.Crocker<sup>1</sup>, C. Heath<sup>1</sup>, M. Hernandez<sup>1</sup>, S. Purewal Gill<sup>1</sup>, D Rhodes<sup>1</sup> Vancouver Coastal Health, Vancouver, BC

Purpose: In 2017, National Institute of Allergy and Infectious Diseases (NIAID) released addendum guidelines recommending early peanut-food introduction at about 6-months, instead of the previously recommended 3-years of age. Vancouver Coastal Health (VCH) public health (PH) dietitians conducted a knowledge translation (KT) training on this update to 0-5-year public health nurses (PHN) to equip them to deliver this message to clients in the community.

Process: In 2017, provincial allergists contacted VCH PH dietitians to collaborate on the dissemination of the new guidelines to parent-infant groups. A 17-month pilot project was conducted at one of six community health areas (CHA). In Sept 2019, an in-service was then delivered to the remaining five CHAs. The entire process followed the principles of Pyramid of Professional Influence.

Systematic Approach Used: Two Skype sessions on separate days were offered to participating PHNs with varied work schedules. Using Skype reduced the time and cost required for in-person attendance. 52 out of 69 eligible PHNs attended, a 75% participation rate. To evaluate the impact, participants were invited to complete pre-, post-session and 3-month follow-up surveys. Five questions were asked, including PHN's general allergy knowledge, specific peanut-allergy knowledge, skills to assess allergy risk, ability to access allergy prevention resources, and confidence in communicating the new guidelines. Post-session surveys showed 25-55% improvement in all areas, with confidence in communicating showing the greatest improvement. Initial analysis of the 3-month surveys shows similar results.

Conclusion: Dissemination of the peanut allergy prevention message was achieved by following the Pyramid of Professional Influence, optimizing different skillsets of public health dietitians and nurses, and employing Skype. Similar training will continue regionally and provincially.

Recommendations: Dietitian collaboration with hospital specialists is recommended for KT in PH. Utilizing online platforms like Skype can greatly increase the efficiency of this work.

Significance: Dietitians across all areas of practice play a significant role in KT.