





# CAGP-CCSMH ANNUAL SCIENTIFIC MEETING PROGRAM

Addressing Complexity in Seniors' Mental Health

September 29 - 30, 2023 Delta Hotels St. John's Conference Centre St. John's, Newfoundland





## WELCOME FROM THE ASM CO-CHAIRS

It gives us great pleasure to welcome you to Newfoundland.

We are hosting this conference on the unceded ancestral homeland of the Beothuk [BEE-oth-uck] and the Mi'kmaq [mee-gum-maq], as well as all the First Peoples who were here before us. Those who live with us now, and the generations to come. We are grateful for the chance to honor, respect, and cherish their presence. This acknowledgement is just one step in the direction we take towards healing our relationships with the Indigenous peoples of St. John's and working towards reconciliation. We would like to thank all Indigenous peoples who, in the past and present, called and call Newfoundland home, for having us on their land.

This year the theme of the ASM is Addressing Complexity in Seniors' Mental Health. The aim is to addresses the various presentations that are common for the clinician, the clinician academician and others who deal with the various complexities involved in caring for the elderly and seeks to provide answers to many difficult to manage situations. While it is impossible to cover all situations there will be time to discuss those that we have not covered with the presenters and share ideas and thoughts while looking to forge partnerships in research and clinical partnerships.

We have a dinner planned and a hike that has over the years proven to be very popular and is also a fundraiser. As CAGP is dependent on membership subscriptions, ideas on fundraising are always welcome!

Daniel Blumberger is our Keynote speaker, who will be presenting on "Management of Difficult to Treat Depression in Late Life: Current State and Future Directions". Our Plenary sessions include "Social Isolation and Loneliness among Older Adults: Can WE Make a Difference" with David Conn, and a panel discussion on "Complexities in Long-term Care" with Julia Kirkham, Jody Woolfrey, Catherine Hickey, Adam O'Rourke, Aaron McKim.

We have had a record number of abstract submissions this year and we have many allied professionals attending as well. This is important given the critical importance of working in teams but also sharing knowledge. It is exciting indeed and I would encourage each one of you to make the most of this conference. It's an opportunity to connect with those who very often we see only as names on published research papers!

This year we will also be hosting our roundtable networking tables over lunch on Friday, September 29.th We will be using these tables to allow people to reconnect with colleagues from other provinces and regions. Feedback on how you find these discussions will go a long way in our making them even better.

We hope that you all enjoy the 2023 CAGP-CCSMH Annual Scientific Meeting.

Respectfully submitted, Shabbir Amanullah & Sameh Hassan

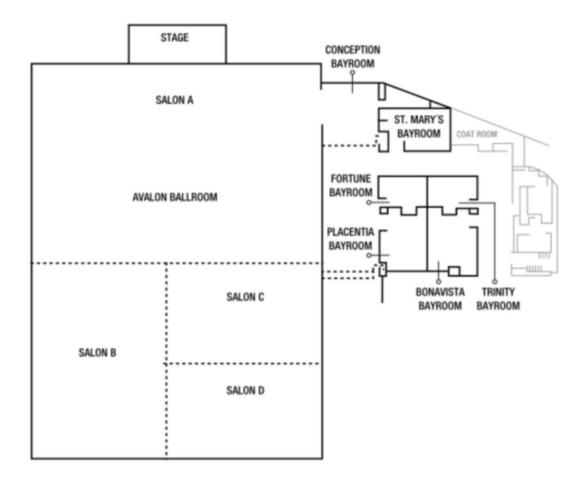
#### **CAGP-CCSMH ASM Committee**

Shabbir Amanullah, ASM Co-Chair Sameh Hassan, ASM Co-Chair Dallas Seitz Claire Checkland Simon Ducharme Tracy Hayes Karen Leung Lisa Van Bussell Erica Weir Vanessa Thoo Roger Butler





#### **CONFERENCE FLOORPLANS**



Plenary sessions will take place in Salon A, and concurrent sessions will take place in Salon A, B, C and D. Poster presentations will be held in the Brownsdale Room. Please ensure you take the time to visit the exhibit booths in the Crushlobby.

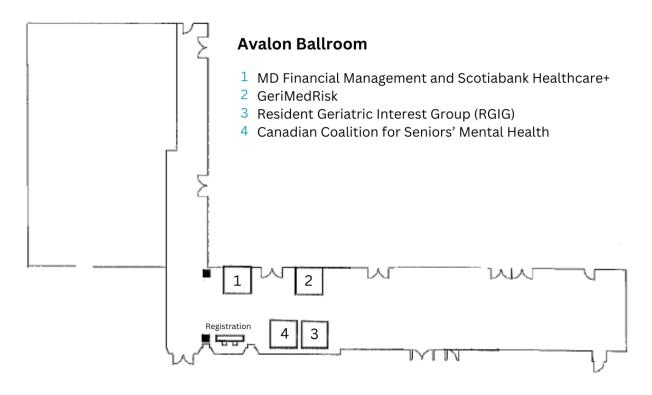
## **DISCLAIMER**

The CAGP reserves the right to make necessary changes to this program. Every effort will be made to keep presentations and speakers as represented; however, unforeseen circumstances may result in the substitution or cancellation of a presentation, topic or speaker.





### **EXHIBITOR FLOORPLAN**



## MEMBERSHIP WITH CAGP

On all occasions, we want to ensure that the content we create and deliver is beneficial to you. For that reason, please don't hesitate to reach out to us at CAGP@secretariatcentral.com with any ideas you may have and what you'd like to see. We are always looking for ways to expand Benefits of Membership – and what better way than to hear from you!

To our members, thank you for continuing to renew your membership with us. By renewing your membership, you are improving seniors' care – the CAGP needs you and seniors need the CAGP! If you are not yet a member we hope you'll join our community. We welcome interdisciplinary members to diversify our knowledge and provide platforms whereby healthcare professionals can network, have access to award opportunities, receive conference discounts, important communications within the geriatric psychiatry community, monthly news bulletins and much more. Visit www.cagp.ca/membership and become a member today!

#### ARE YOU AN AFFILIATE OF THE CCSMH?

Did you know that the Canadian Coalition for Seniors' Mental Health (CCSMH) was established by us – the CAGP as a result of a 2002 CAGP Symposium identifying gaps in mental health services for seniors? Becoming an Affiliate bears no cost. Affiliates are updated on CCSMH (and their key partners') initiatives in the field of seniors' mental health through frequent emails and e-newsletters. Become an Affiliate today by visiting www.ccsmh.ca!





#### **ACCREDITATION**

This event is an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification program of the Royal College of Physicians and Surgeons of Canada.

This activity was approved by the Canadian Society of Internal Medicine for a maximum of 9 hours.

Through an agreement between the Royal College of Physicians and Surgeons of Canada and the American Medical Association, physicians may convert Royal College MOC credits to AMA PRA Category 1 CreditsTM. Information on the process to convert Royal College MOC credits to AMA credits can be found at <a href="https://www.ama-assn.org/go/internationalcme">www.ama-assn.org/go/internationalcme</a>.

Through an agreement between the Royal College of Physicians and Surgeons of Canada and the Qatar Council for Healthcare Practitioners, healthcare practitioners participating in the QCHP CME/CPD program may record MOC Section 1 credits as QCHP Category 1 credits.

Through an agreement between the Royal College of Physicians and Surgeons of Canada and the European Board for Accreditation in Cardiology, Royal College MOC Section 1 credits are deemed to be substantively equivalent to EBAC CPD credits.

Physicians should only claim credit commensurate with the extent of their participation in the activity.

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This Group Learning program has been certified by the College of Family Physicians of Canada and the Newfoundland and Labrador Chapter for up to 9.00 Mainpro+ credits.

## **OVERALL LEARNING OBJECTIVES**

At the end of this conference, participants will be able to:

- demonstrate awareness of factors that contribute to complexity;
- integrate advances and updates in treatment for individuals with complex mental health problems; and
- apply multidisciplinary approaches in the treatment of complex populations.







#### ANNUAL SCIENTIFIC MEETING PROGRAM

Friday, September 29, 2023

TIME SESSION LOCATION

7:00 a.m. – 8:00 a.m.	Conference Check-In and Breakfast		Crushlobby
8:00 a.m. – 8:15 a.m.	Welcome and Opening Remarks		Salon A
8:15 a.m. – 9:15 a.m. Keynote Address	Management of Difficult to Treat Depression in Late Life: Current State and Future  Directions  Daniel Blumberger	P	Salon A
	At the end of this session, participants will be able to:  • evaluate the evidence for managing non-response to first line treatment for depression in older adults;  • discuss the advantages and disadvantages of current and emerging treatments for TRD in older adults; and  • describe the status of current novel treatments for TRD in older adults and where the field is heading.		
9:15 a.m. – 10:15 a.m.	Poster Session		Brownsdale
	Concurrent Block #1		
10:15 a.m. – 11:15 a.m.	<ol> <li>Positive Psychiatry to Address Complexities in Seniors' Mental Health: Introducing The "THRIVE Approach to Wellbeing" &amp; Fountain of Health's Thrive Learning Centre Chair: Marie-France Rivard</li> <li>1.1 Relevance of Positive Psychiatry to Address Complexities in Seniors Mental Healthcare: Introducing the THRIVE Approach to Wellbeing Keri-Leigh Cassidy, Cindy Grief</li> <li>1.2 Applied Positive Psychiatry in Canada: The Fountain of Health Association David Conn</li> <li>1.3 Introducing The New Thrive Learning Centre: Wellbeing Training for Individuals, Organizations and Clinicians Amy Gough</li> </ol>		Salon C
	At the end of this session, participants will be able to:  • review positive psychiatry and the "THRIVE Approach to Wellbeing";  • identify the Fountain of Health as a national example of applied positive psychiatry; and  • describe the new Thrive Learning Centre and related resources and training.		

**LOCATION** 



**SESSION** 

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#### ANNUAL SCIENTIFIC MEETING PROGRAM

Friday, September 29, 2023

10:15 a.m. – 11:15 a.m.	<ul> <li>Transforming Clinical Care for Older Adults with Complex Mental Health Needs: The Hub-and-Spoke Model Kathleen Bingham</li> <li>At the end of this session, participants will be able to:         <ul> <li>describe the hub and spoke model for clinical care and its effect on regional service integration, collaboration and capacity building;</li> <li>discuss how the hub and spoke model can be leveraged to benefit clients at an individual level, health system level and in collaboration with social services; and</li> <li>integrate relevant learnings from health system integration into local planning.</li> </ul> </li> </ul>		Salon A
	<ul> <li>Transitioning from Hospital to Community: Supporting Older Adults Living with Complex Health Issues         Stephanie Gordon, Tazim Lakhani, Nadia Rana     </li> <li>At the end of this session, participants will be able to:         <ul> <li>recognize geriatric challenges through the utilization of the coordinated care planning process, which acknowledges the clients social, physical, and mental health issues;</li> <li>draw on participant knowledge of anti-oppressive practice to develop their understanding of how it can be utilized to build rapport with clients within the therapeutic relationship; and</li> <li>manage reluctance and/or resistance from clients who find it difficult to accept help or support.</li> </ul> </li> <li>Challenges of Driving Cessation in Persons with Dementia Living in Rural and Urban</li> </ul>	In this session we will hear three 20-minute oral abstract presentations	Salon B
	Settings Ka Sing Paris Lai  At the end of this session, participants will be able to:  • recognize the challenges and opportunities of driving cessation for persons with dementia living in rural settings;  • identify mitigating factors for persons with dementia living in rural settings who undergo the transition to non-driving; and		

recognize challenges of cessation for persons with dementia living in urban





## ANNUAL SCIENTIFIC MEETING PROGRAM

Friday, September 29, 2023

TIME	SESSION	LOCATION	
10:15 a.m. – 11:15 a.m.	<ul> <li>5. Building an Integrated Team for Older Adult Care: From Theory to Practice Adam Morrison, Sarah Gimbel</li> <li>At the end of this session, participants will be able to: <ul> <li>identify the elements required for an integrated care team that supports the physical, mental, cognitive, and social health of older adults;</li> <li>apply the concepts of integrated care to practice settings; and</li> <li>engage with colleagues to build a practical model of shared care to support older adults living with complex conditions in a primary care setting.</li> </ul> </li> </ul>		
	<ul> <li>6. Sleepwell - A Simple, Effective, Direct-to-Patient Intervention for Sedative Deprescribing in Older Adults David Gardner</li> <li>At the end of this session, participants will be able to: <ul> <li>describe key components of the Sleepwell and EMPOWER direct-to-patient education resources used in the YAWNS NB study;</li> <li>compare and contrast the impact of Sleepwell, EMPOWER, and no package on BZRA and sedative use, sleep, and other health outcomes; and</li> <li>examine patient factors associated with higher and lower rates of intended changes in sleep health behaviours when receiving Sleepwell and EMPOWER interventions.</li> </ul> </li> <li>7. Factors Associated with Positive Impacts of Cannabis Use on Mental Health and Wellbeing among Older Adults with Rheumatologic Conditions in Alberta Cheryl Sadowski</li> <li>At the end of this session, participants will be able to: <ul> <li>identify factors in older adults that might predict cannabis use in practice;</li> <li>describe how older adults describe the benefits of cannabis on their rheumatologic and mental health concerns; and</li> <li>describe how logistic regression can be used to identify associations in a large data set.</li> </ul> </li> <li>8. Planning for the Future Complex Older Patients Living with Mental Health Disorders and Dementia in an Acute Care Setting Melissa Laroche</li> <li>At the end of this session, participants will be able to:</li> </ul>	In this session we will hear three 20-minute oral abstract presentations	n D

	<ul> <li>identify learning opportunities and education gaps within their organizations of clinical staff caring for patients with psychiatric, physiological and neurocognitive disorders simultaneously;</li> <li>discuss and share strategies with peers related to caring for this patient population and the very complex multi-factorial needs; and</li> <li>obtain sufficient information to plan and integrate similar strategies across their organizations if desired.</li> </ul> Concurrent Block #2		
11:30 a.m. – 12:30 p.m.	<ul> <li>9. Canadian Clinical Practice Guidelines for the Treatment of Anxiety in Older Adults:         Draft Recommendations         Andrea laboni, Sebastien Grenier     </li> <li>At the end of this session, participants will be able to:         <ul> <li>recognize the need for guidelines for the treatment of anxiety in older adults;</li> <li>review and provide feedback on the draft recommendations for the assessment and treatment of anxiety in older adults; and</li> <li>discuss opportunities for the dissemination of the guidelines and associated tools and resources.</li> </ul> </li> </ul>		Salon A
	<ul> <li>10. Incorporating Psychotherapy into Managing Complexity in Older Adult Psychiatric Care: Perspectives from Experienced Therapists and Trainees         Ari Cuperfain, Ken Schwartz     </li> <li>At the end of this session, participants will be able to:         <ul> <li>explore how participants integrate a range of psychotherapy modalities, both group and individual, into their work with older adults;</li> <li>reflect on the role of psychotherapy in grappling with complexity - both for patients and healthcare providers - in a supportive, cohesive and therapeutic manner; and</li> </ul> </li> <li>experience a group psychotherapy setting which combines both experienced therapists and trainees.</li> </ul>		Salon C
	<ul> <li>11. Trainee Education Session: Geriatric Psychiatry Across the Career Span Paris Lai, Catherine Hickey, Vanessa Thoo, Matt Tobin</li> <li>At the end of this session, participants will be able to: <ul> <li>discuss the scope and practice of a geriatric psychiatrist;</li> <li>identify academic and community practice options within the field; and</li> <li>apply communication and networking skills with learners and geriatric psychiatrists.</li> </ul> </li> </ul>		Salon B
	<ul> <li>12. Prevalence and Nursing Staff Perspectives Towards Use of Physical and Chemical Restraints as Coercive Measures in Hospitalized Older Adults with Major Neurocognitive Disorder and/or Delirium: A Mixed Methods Quality Improvement Project         <ul> <li>Danusha Vinoraj, Saumil Dholakia</li> </ul> </li> <li>At the end of this session, participants will be able to:         <ul> <li>identify prevalence of chemical and physical restraints use in hospitalized older adults with major neurocognitive disorder and/or delirium in non-emergency ward settings at The Ottawa Hospital;</li> </ul> </li> </ul>	In this session we will hear three 20-minute	Salon D







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	<ul> <li>describe precipitants of restraints use and documented outcomes, including patient clinical, and patient/ staff safety outcomes in this population; and</li> <li>describe perspectives of involved nursing staff towards use of chemical and physical restraints to inform strategies for reducing their inappropriate use as coercive measures among hospitalized older adults.</li> <li>13. Creating a Sustainable Framework to Produce Canada's National Dementia Guidelines Sarah Main</li> <li>At the end of this session, participants will be able to:         <ul> <li>distinguish between non-evidence-based guideline development processes and GIN aligned guideline development processes;</li> <li>identify skills related to recruitment strategies and community engagement techniques that are needed to create interdisciplinary and diverse working groups; and</li> <li>describe how to develop a participatory project framework, including factors that support the implementation and sustainability of guidelines and knowledge</li> </ul> </li> </ul>	oral abstract presentations	
	translation tools.  14. Social Isolation and Loneliness in Older Adults: Two Surveys to Learn About the Experience and Perspectives of Health/Social Service Providers and Older Adults David Conn, Bette Watson-Borg  At the end of this session, participants will be able to:  • summarize some perspectives and ideas of both clinicians and older adults with respect to social isolation and loneliness;  • discuss and continue to contribute to the conversations about the current and potential role(s) of health and social service providers related to social isolation and loneliness in older adults; and		
	<ul> <li>and loneliness in older adults; and</li> <li>review potential ways that the results of these surveys may support them in their own work.</li> </ul>		
12:30 p.m. – 1:30 p.m.	Please grab lunch and pull up a chair to join one of the following unmoderated CAGP-CCSMH Roundtables which are being held throughout Salon A during the lunch hour.  Networking Roundtables:  1. Francophone Attendee Table 2. CCSMH Public Policy Working Group 3. Western Canada Networking 4. Central Canada Networking 5. Atlantic Canada Networking		Crushlobby
12:30 p.m. – 1:30 p.m.	Trainee Lunch *lunch is available from the main buffet in TBD		Salon B
1:30 p.m. – 2:30 p.m.	Complexity in Long-term Care Panel Discussion		Salon A
Plenary Session	Julia Kirkham, Jody Woolfrey, Catherine Hickey, Adam O'Rourke, Aaron McKim  At the end of this session, participants will be able to:  identify individual, home and system-level contributors to complexity in LTC;  acknowledge and identify personal and systemic barriers to providing optimal, evidence-based care in LTC;	P	SuiditA







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2:40 p.m. – 3:40 p.m.	<ul> <li>describe the role for Standards in improving care in the context of complexity;</li> <li>apply key standards to support mental health in LTC;</li> <li>identify challenges for completing behavioural assessments and implementing non-pharmacological recommendations within a LTC home setting;</li> <li>Identify unique challenges to delivering quality-based long-term care in rural communities</li> </ul> Concurrent Block #3 15. Standards for Mental Health in Long-term Care and Assisted Living Settings Julia Kirkham At the end of this session, participants will be able to: <ul> <li>review recent Canadian standards for long-term care;</li> <li>provide an overview of and solicit input on the draft content for the CSA Z2004</li> </ul>		Salon A
	Mental Health and Well-Being in Long-Term Care and Assisted Living Settings Standard; and  discuss dissemination and implementation strategies for all recent standards relevant to geriatric mental health.		
	16. Burnout and Wellness in Health Care Providers Robert Madan  At the end of this session, participants will be able to:  describe signs of physician burnout;  describe the link between burnout and medical errors; and  list interventions for wellness.		Salon D
	<ul> <li>17. Addressing Complexity Through Integration: The Behavioural Supports Ontario, GeriMedRisk, and Virtual Behavioural Medicine Programs' Experience         Chair: Sophiya Benjamin     </li> <li>17.1 GeriMedRisk: Results from Five Years of Interprofessional Service Delivery in Ontario         Sophiya Benjamin     </li> <li>17.2 Advancing an Integrated Behavioural Health System: Behavioural Supports         Ontario         Andrea laboni, Sarah Denton     </li> <li>17.3 Virtual Behavioural Medicine Program: An Innovative Model of Care for Neuropsychiatric Symptoms in Dementia         Morris Freedman     </li> </ul>		Salon B
	At the end of this session, participants will be able to:  describe and differentiate specialty clinical consultation services that are provincially accessible in Ontario for older adults with responsive behaviours;  identify opportunities for scale and spread of Behavioural Supports Ontario, GeriMedRisk, and Virtual Behavioural Medicine Program; and  support the application of this model of collaborative consultation in dementia and geriatric mental health in other areas of Canada.		
	18. Evidence – Informed Approach to De-Prescribing of Atypical Antipsychotics (AAP) in the Management of Behavioral Expressions (BE) in Advanced Neurocognitive Disorders (NCD): Results of a Retrospective Study  Atul Sunny Luthra	22	Salon C









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	At the end of this session, participants will be able to:  • describe what the LuBAIR™ Paradigm stands for and how it can be applied in various contexts;  • describe the different categories of behaviors and how to approach each of them effectively; and  • summarize how the LUBAIR approach in combination with antipsychotic medications, can effectively manage challenging behaviors in patients with dementia, leading to improved outcomes and better quality of life.		
3:40 p.m. – 4:00 p.m.	Networking Break		Crushlobby
4:00 p.m. – 5:00 p.m.	19. Canadian Coalition for Seniors' Mental Health Guidelines on Assessment and Treatment of Behavioural Symptoms of Dementia Chair: Dallas Seitz  19.1 Systematic Review of Guidelines for Behavioural Symptoms of Dementia Jennifer Watt  19.2 Recommendations for the CCSMH Behavioural Symptoms of Dementia Guideline Dallas Seitz  19.3 Guideline Implementation Strategies for Behavioural Symptoms of Dementia Stacey Hatch		Salon A
	At the end of this session, participants will be able to:  • appraise current evidence from guidelines on behavioural symptoms of dementia;  • evaluate preliminary guideline recommendations for the CCSMH Behavioural Symptoms of Dementia Guideline; and  • identify effective strategies and resources for implementation of guideline recommendations in various settings.		
	<ul> <li>20. Psychogeriatric Outreach for Homeless Adults: Lessons Learned After One Year in Practice         <ul> <li>Dan Elder, Maggie Hulbert, Susan Wang</li> </ul> </li> <li>At the end of this session, participants will be able to:         <ul> <li>identify key differences in patient demographics and overall trends between general psychiatric outreach teams (ACT/ICM) and a novel psychogeriatric intensive case management team for homeless older adults;</li> <li>describe the biological, psychological, and social issues common to homeless older adults through interactive case presentations; and</li> <li>integrate the perspectives on working with older clients experiencing homelessness from a multidisciplinary team including case workers, RNs, medical learners, and psychiatrist.</li> </ul> </li> </ul>		Salon C
	<ul> <li>21. CBT for Optimal Aging &amp; Self-Care: A Positive Psychiatry Pilot Study to Promote Wellbeing in Mid to Late Career Clinicians         Amy Gough     </li> <li>At the end of this session, participants will be able to:         <ul> <li>describe the Optimal Aging 2-Part Thrive MD Physician Wellness Program, a cognitive behaviour therapy (CBT)-based webinar series that adapts the THRIVE © Approach to Wellbeing and offers knowledge translation (KT) tools to activate self-care behaviours and improve outlook in older physicians;</li> </ul> </li> </ul>	In this session we will hear three 20-minute	Salon D







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	<ul> <li>review 2023 pilot study results of the impact of the Optimal Aging course on older adult physician self-reported health attitudes and self-care behaviours, and impact on practice intentions; and</li> <li>generate feedback to inform future iterations of the Webinar Series for scale-up in Canada to promote physician wellness.</li> <li>Pulling Back the Curtain: What it Takes to Provide Collaborative Care in Crisis Leigh Williams, Deb Walko, Carolyn Donaldson</li> <li>At the end of this session, participants will be able to:         <ul> <li>assess successes and failures and apply methods used within partnership development of TSH &amp; COSS programs to explore how to replicate in their own region (How to develop and maintain cross-sectoral partnerships);</li> <li>identify skills related to the creation and use of cross-sectoral knowledge utilized by team members (Staff triage and navigation skills for fielding calls - switching gears in a moment for varied requests); and</li> <li>describe the knowledge transfer model developed for TSH &amp; COSS, and the process used to establish system partnerships across the sector (Sharing perspectives - what hoops did they have to go through to partner? What was the experience for non-lead agencies?).</li> </ul> </li> </ul>	oral abstract presentations	
	<ul> <li>23. Understanding the Complex Health Information Needs, Behaviours, and Contexts of Older Adults to Support Effective Knowledge Translation Nick Ubels</li> <li>At the end of this session, participants will be able to: <ul> <li>identify basic components of older adults' information needs, behaviours, and contexts;</li> <li>describe the relevance of information needs, behaviours, and contexts in knowledge mobilization; and</li> <li>apply promising practices for effective interventions that support older adults' information needs.</li> </ul> </li> </ul>		
	<ul> <li>24. Knowledge Translation and Equity, Diversity &amp; Inclusion: Update Your KT Skills! Peter Snow, Avneet Vats, Larissa D'Silva</li> <li>At the end of this session, participants will be able to: <ul> <li>identify the reasons and principles for integrating equity, diversity &amp; inclusion into knowledge translation processes and products;</li> <li>distinguish progressive knowledge translation approaches by actively engaging in three session exemplars; and</li> <li>apply EDI principles in health information messaging and materials.</li> </ul> </li> </ul>		Salon B
5:00 p.m. – 6:00 p.m.	CAGP Annual General Meeting (members only) - Not accredited		Salon A
7:00 p.m onwards	CAGP-CCSMH Celebration Dinner (Please note: tickets are additional and must be purchased in advance)		Spirit of Newfoundland, 208 Gower Street
9:30 p.m onwards	Trainee Social Event		Pinnacle Restaurant & Lounge,









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	Saturday, September 30		
TIME	SESSION	TYPE	LOCATION
7:45 a.m. – 8:30 a.m.	Conference Check-In and Breakfast		Crushlobby
8:30 a.m. – 9:30 a.m. Plenary Session	Social Isolation and Loneliness Among Older Adults: Can WE Make a Difference David Conn	P	Salon A
	At the end of this session, participants will be able to:  • list the negative health impacts associated with social isolation and loneliness (SI&L);  • describe developing international approaches to reduce SI&L and  • reflect on how they can assess factors that contribute to SI&L and then recommend appropriate interventions for patients.		
9:30 a.m. – 10:30 a.m.	Networking Break		Crushlobby
9:30 a.m. – 10:30 a.m.	Track Poster Session (Invite Only)		Brownsdale
	Concurrent Block #5		
10:30 a.m. – 11:30 a.m.	25. Developing and Disseminating Clinical Guidelines for Social Isolation and Loneliness in Older Adults David Conn, Bette Watson-Borg, John Saunders  At the end of this session, participants will be able to:		Salon C
	<ul> <li>describe the current status of research related to the risks associated with social isolation and loneliness;</li> <li>discuss approaches regarding the screening and assessment of social isolation and loneliness among older adults as well as possible interventions to address this issue; and</li> <li>recommend ideas and opportunities for the effective knowledge translation and dissemination of the guidelines.</li> </ul>		









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10:30 a.m. – 11:30 a.m.	26. Creating a Global Community of Practice in Geriatric Mental Health: The Key		Salon B
2000 0	Ingredients Cindy Grief, Christopher Kitamura	(0)	34.5.1.2
	At the end of this session, participants will be able to:  describe the experience (and challenges) of launching an international virtual education initiative;  discuss how to optimize engagement in virtual learning; and  review the key ingredients needed for a virtual global community of practice in geriatric mental health.		
	27. Aging and Mental Health in Canada: Working with Experts-by-Experience to Identify Priorities, Address Research Gaps and Mobilize Knowledge Chair: Paul Holyoke		Salon A
	27.1 Planning Future Aging and Mental Health Research Agendas in Canada by Working with Experts-By-Experience  Paul Holyoke		
	27.2 Working with Experts-by-Experience in the Canadian Aging Action, Research, and Education (CAARE) for Mental Health Group to Mobilize Knowledge of Aging and Mental Health Priorities Elizabeth Kalles, Mary Hynes		
	27.3 Working with Experts-by-Experience to Co-design an Evidence-based Approach to Starting Mental Health Conversations with Older Adults in the Community Paul Holyoke, Elizabeth Kalles		
	<ul> <li>At the end of this session, participants will be able to:         <ul> <li>summarize the priority research questions on aging and mental health according to older adults, caregivers, and health/social care providers in Canada which can be used for decision-making about future research and action initiatives;</li> <li>explain how of a visual model of mental health was developed and validated in partnership with experts-by-experience and its intended application in community care settings; and</li> <li>describe how the CAARE for Mental Health Group supports knowledge mobilization efforts in Canada, as well as several ways participants can get involved.</li> </ul> </li> </ul>		
	<ul> <li>28. Emotion Focused Mindfulness Therapy for Late-life Anxiety: A Feasibility RCT with a Wait-list Control Group Stacey Hatch</li> <li>At the end of this session, participants will be able to: <ul> <li>summarize the findings of the feasibility trial of Emotion Focused Mindfulness Therapy for late-life anxiety;</li> </ul> </li> </ul>	In this session we will hear five 12-minute	Salon D
	<ul> <li>critically appraise and analyze the strengths and limitations of this trial; and</li> <li>reflect on how to ethically integrate Emotion Focused Mindfulness Therapy into their mental healthcare delivery pathways.</li> </ul>	oral abstract presentations	









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#### 29. Psychiatric Complexity in the Long-Term Care Setting

Vanessa Thoo, Leslie Giddens-Zuker

At the end of this session, participants will be able to:

- describe the challenges to management of patients with severe and persistent mental illness (SPMI) and the role of community-treatment orders (CTOs);
- discuss a multidisciplinary approach to patient-centred care in the context of SPMI within the long-term care (LTC) setting; and
- integrate cultural, ethical and legal considerations with respect to autonomy
  of patients with SPMI living in LTC.

# 30. The Relationship of White Matter Microstructure with Psychomotor Disturbance and Relapse in Remitted Psychotic Depression

Kathleen Bingham

At the end of this session, participants will be able to:

- examine the potential theoretical model underlying persistent psychomotor disturbance and risk of relapse in psychotic depression;
- describe the relationships among matter microstructure, psychomotor disturbance and outcome in remitted psychotic depression; and
- identify potential future directions for research into white matter microstructure in major depression.

# 31. Impact of Psychotropic Medications on Cognition in Older Adults: A Systematic Review

Susmita Chandramouleeshwaran

At the end of this session, participants will be able to:

- examine the current evidence on the cognitive impact of psychotropic medications among older adults;
- describe the factors that influence the cognitive impact of psychotropic medications on adults, such as age, dose, duration of medication use; and
- review the mechanisms through which psychotropic medications modulate this impact.

# 32. Is the Canadian Society Ready to Make an Ethical Choice? The 'Wicked Problem' of Maid-MD-SUMC: An Ethical Analysis

Saumil Dholakia

At the end of this session, participants will be able to:

- examine MAiD-MD-SUMC as a 'wicked problem';
- reflect on the individual and societal moral compass with respect to MAiD-MD-SUMC; and
- analyse the various ethical issues emerging at the intersection of MAiD-MD-SUMC.

#### **Concurrent Block #6**

11:40 a.m. - 12:40 p.m.

# 33. Managing Substance Use Disorders in People with Dementia: An Interactive Case Discussion

Christopher Kitamura, Marilyn White-Campbell

At the end of this session, participants will be able to:

describe the prevalence and risk factors for SUDs in people with dementia;



Salon C









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<ul> <li>gain skills in assessment and treatment of SUDs in people with dementia; and</li> <li>gain skills in supporting people with dementia and SUDs at all stages of change, including via the use of harm reduction approaches.</li> </ul>		
34. Simulation Workshop: Using a Care-Plan Huddle to Help in the Non-Pharmacological Management of Responsive Behaviors Related to Major Neurocognitive Disorder and/or Delirium in a Hospital Setting: Teaching-Learning Pearls from a 10-Year Journey of the Interprofessional Dementia Behavioural Support Team (DBST) at the Ottawa Hospital Saumil Dholakia, Sarah Russell, Susmita Chandramouleeshwaran, Song Yang (Simon) Yu, Jennifer Koop, Margaret Ann Mackenzie-Neil, Vera Hula		Salon A
At the end of this session, participants will be able to:  • identify barriers and facilitators to care for hospitalized older adults with responsive behaviors related to major neurocognitive disorder and/or delirium;  • integrate non-pharmacological and educational interventions for hospitalized older adults with responsive behaviors related to major neurocognitive disorder and/or delirium, and  • discuss unique modifiable and non-modifiable individual, organizational and system level challenges in designing health-care intervention models specific for hospital-based settings for patients with responsive behaviors related to major neurocognitive disorder and/or delirium.		
35. What Factors Influence Residents to Enroll in Geriatric Psychiatry Subspecialty		Salon D
Training?: A Cross-Canada Survey  Jessica Hung King Sang, Catherine Hickey		
<ul> <li>At the end of this session, participants will be able to:         <ul> <li>review current and projected population needs for geriatric psychiatrists and the ongoing challenges in geriatric psychiatry residency recruitment in Canada;</li> <li>determine what factors may influence psychiatry residents to choose to pursue additional geriatric psychiatry subspecialty residency training and rank these factors in terms of influence; and</li> <li>consider what changes can be implemented at an educational level to improve resident recruitment into geriatric psychiatry.</li> </ul> </li> <li>Measuring The Impact of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms on a second control of the project of Deer Possels on Wayfinding and Motor Symptoms of Deer Possels on Wa</li></ul>	In this session we will hear two 20-minute oral abstract presentations	
36. Measuring The Impact of Door Decals on Wayfinding and Motor Symptoms on a  Dementia Care Unit  Amy Cockburn		
At the end of this session, participants will be able to:  describe wayfinding challenges in people with dementia and impact on behaviours and quality of life;  discuss the feasibility and implementation of door decals as environmental modification strategies; and explain the impact of door decals on wayfinding of people with dementia.  Withdrawn		
38. Evolving the Geriatric Psychiatry Online Course: Getting from A to B Cindy Grief, Leslie Giddens-Zuker, Shabbir Amanullah  At the end of this session, participants will be able to:		Salon B









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	<ul> <li>describe the GPOC course including how it fits into the current landscape of virtual education;</li> <li>discuss the results of the national needs assessment for a course in geriatric mental health; and</li> <li>reflect on the process for ensuring the evolution of the GPOC meets the needs of diverse learners.</li> </ul>	
12:50 p.m. – 1:25 p.m.	Awards Overview and Poster Award Presentation	Salon A
	Awards Chair	
1:25 p.m. – 1:30 p.m.	Closing Remarks	Salon A
	CAGP-CCSMH 2023 ASM Co-Chairs	
1:30 p.m.	Grab-and-Go Lunch	Crushlobby
2:30 p.m.	Social Event - Hike	Meet in hotel
		lobby









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