

GUIDELINES AND INSTRUCTIONS FOR ABSTRACT SUBMISSIONS

Quality in Action is the theme of the 2019 Hospice Palliative Care Conference.

In 2018, Provincial Quality Standards and an action plan to improve availability of and access to equitable high-quality hospice palliative care in Ontario were launched. **The conference theme and learning streams support this work and are an invitation to you to showcase and share your innovations, program outcomes, ideas, and research with your peers.**

The conference will be held **Sunday, April 28 to Tuesday, April 30, 2019** at the Sheraton Parkway Toronto North Hotel & Suites, Richmond Hill, Ontario. **Hospice Palliative Care Ontario is now accepting submission for workshops, posters and oral papers.**

The conference attracts over 800 delegates from across Ontario, representing all professions, roles, and care setting across the continuum of health care. We encourage submissions that showcase innovations and results in caring for people in your community, whether urban, rural, remote, First Nations, Inuit, Metis, or Urban Indigenous.

SUBMISSION DEADLINE – November 28, 2018

All abstracts/submissions that are directly related to hospice palliative care and reflect at least one of the five conference streams will be considered.

This year's conference will showcase the tremendous work underway to advance high quality palliative care. This is the opportunity to showcase the depth and breadth of quality improvement work underway across Ontario and across care settings. What innovations have you/your team successfully implemented? What are your quality improvement successes? Have you developed new quality improvement tools and approaches? What are your successes in system design and planning; evidence-based practice and best practice principles; clinical advancements; research; and health system leadership?

Conference Streams

Quality Caring for Patients, Families & Caregivers

Examples:

- Interdisciplinary team-based care
- Leadership development and team approaches a culture of quality and results
- Measuring and closing human resource gaps
- Competencies, skills, and education for health care providers and volunteers
- Empowering volunteers as members of the interdisciplinary care team

- Reflecting the face of the community – success in volunteer diversity and inclusivity
- Reaching and engaging new generations of volunteers
- Advance Care Planning
- Enhancing patient and caregiver engagement
- Education for patients, substitute decision makers, families, and caregivers
- Person-centred care planning
- Compassionate communities

Equity & Access to Quality Care

Examples:

- Innovations in providing palliative care in rural and remote communities
- Hospice palliative care by First Nations, Inuit, Metis, and Urban Indigenous Communities
- Access to care for diverse populations and marginalized people
- Palliative care for incarcerated populations

Quality Clinical Practice

Examples:

- Pain and Symptom Management
- Pediatrics
- Enabling early identification of people who would benefit from hospice palliative care
- Enabling palliative care in primary care
- Health Care Consent, Goals of Care, difficult conversations
- Palliative care for people with end-stage dementia, ALS, and other non-Cancer diseases

Quality Whole Person Care

Examples:

- Psychosocial, Spiritual, and Bereavement Care
- Measuring Impact
- Meeting the needs of diverse populations
- Complementary therapies

Leadership and System Design for Quality

Examples:

- Regional hospice palliative care Hospice development
- Connecting hospice palliative care providers
- Removing regulatory and policy barriers to improving care
- Measuring quality, outcomes, and impact
- Hospice development and partnerships
- Models of care to increase access and enable quality care

Requirements for Presenting

The primary presenter (one person only) MUST register to attend the conference. The primary presenter receives a reduced registration fee of \$400 for the three-day conference (regularly \$670 for members and \$800 for non-members for three days). Additional presenters that wish to attend and present along with the Primary Presenter MUST register at the full conference rate or if they choose, may opt to register for only the day of their presentation.

GENERAL GUIDELINES AND INSTRUCTIONS FOR ABSTRACT SUBMISSIONS

1. Abstracts/submissions must be submitted online.
2. **Health Care Consent, Advance Care Planning and Goals of Care (HCC ACP GoC) Conference Submissions:** HPCO strongly encourages all HCC ACP GoC conference submissions (workshops, oral papers and posters) to be compliant with the Ontario Legal Framework. Please visit the [Speak Up Ontario Website](#) and the [Ontario Tool Kit](#) for more information and supports on HCC ACP GoC in Ontario. If you have any questions, please contact Deanna D'Souza, Community of Practice Coordinator at ddsouza@hpco.ca.
3. A maximum of three (3) abstract submissions will be accepted by a primary author (i.e., author may be a secondary author on additional abstract submissions).
4. Abstracts are to be written in English, in clear concise language, and to be **no more than 250 words**, using standard abbreviations and key words. Please **DO NOT** type in all capitals.
5. Include author(s) post-nominal initials, credentials, designations, and other affiliations in the biographic sketch section of the submission process. If your abstract/submission is accepted, we publish the post-nominal initials, credentials, designations that you provide, exactly provided. Once published, we will not make changes.
6. Only the primary presenter/first author is eligible to receive the reduced registration fee of \$400 for the three-day conference.
7. Authors/presenters whose papers have been accepted grant HPCO permission to list their name, affiliations, and abstract in the conference program materials, both in print and online.
8. The primary presenter/first author of an abstract submission that is accepted must attend the conference and is required to register and pay a reduced registration fee of \$400 by **February 28, 2019**. All additional authors/presenters may register at the regular conference rates, full conference or single day rate. **Presentations will be cancelled if the primary presenter registration fee is not received by February 28, 2019.**

**All abstract submissions must be directly related to hospice palliative care.

WORKSHOP GUIDELINES

Workshop sessions are one hour and 15 minutes in length which includes a 5 to 10-minute question period. A limited number of spaces are available for more in-depth workshops (2-1/2 hour sessions), offered in two (2) consecutive one hour and 15 minute sessions on the same day. Please specify the length of your workshop on your submission form. Workshop sessions should be interactive focusing on outcomes, practical implications and impact on interdisciplinary patient/family centred care and/or program or service delivery.

Workshop abstracts must include three expected learning outcomes for participants; a comprehensive summary and description of the workshop; learning level (intermediate or advanced); training methods; the intended audience of the workshop and a description of the skills and/or knowledge participants will gain from the workshop and how the knowledge is applicable in their community. Workshop presenters must provide a brief biographical sketch (maximum 100 words).

ORAL PAPER GUIDELINES

Oral paper presentations must be **15 minutes in length followed by 5 minutes for discussion.**

Oral papers are limited to two (2) presenters per paper during the presentation.

POSTER GUIDELINES

Posters will be designed to fit poster board surface 4' high by 8' wide. Posters will be displayed throughout the conference. Author(s)/presenter names, degrees, organizational affiliations, city, province/state and country must be listed as briefly as possible.

Scientific abstracts should specify study/program objectives, methods, results and conclusions. Abstracts describing projects currently in progress and lacking data analysis will not be accepted. Literature review papers will not be considered.

ABSTRACT REVIEW AND SELECTION CRITERIA

All submissions will be evaluated by an Abstract Review Committee and accepted based upon the following criteria:

- relevance and significance of topic to hospice palliative care
- alignment to the one of the conference themes
- based on evidence and/or innovative hospice palliative care research
- presentation of practical tools for practice and service delivery
- abstract is well written/clearly communicated.

Workshops will be selected based on the originality, relevance to hospice palliative care, community-based outcomes, educational objectives and/or scientific merit. All workshop and oral paper abstract submissions will be reviewed by a volunteer team of reviewers. Primary presenters will receive communication regarding accepted abstracts by **December 21, 2018.**

HPCO receives significantly more abstracts than may be accommodated in the conference schedule. Individuals submitting multiple abstracts may not have all of their submission accepted, particularly if there are competing abstracts of equal quality and merit on a similar or identical topic.

For any questions, please contact:

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