

ANNUAL ASSEMBLY

HOSPICE & PALLIATIVE CARE

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AnnualAssemblyHAPC.org



Submission Guidelines

Subsequent Call for Abstracts for Case Studies and Scholarly Works in Progress for Early Career and Professionals in Training

Deadline for submission is October 1, 2024, at 11:59 PM, PST

*On behalf of the Annual Assembly Planning Committee, AAHPM and HPNA, thank you for your submission contributions to the subsequent call abstracts for the **Subsequent Call for Case Studies and Scholarly Works in Progress for Early Career and Professionals in Training**.*

Abstracts submitted through the subsequent call are for the Annual Assembly of Hospice and Palliative Care which will take place February 5 – 8, 2025 in Denver, CO. This call is specifically intended for professionals in training or early career hospice and palliative professionals.

In addition, we appreciate your support of our Accreditation Standards of Integrity and Independence designed to:

- Ensure that accredited continuing education serves the needs of patients and the public
- Present learners with only accurate, balanced, scientifically justified recommendations
- Assure healthcare professionals and teams that they can trust this accredited continuing education conference to help them deliver safe, effective, cost-effective, compassionate care that is based on best practice and evidence.

Selected content is intended to enrich hospice and palliative care, education, science, and practice. All scientific research referred to, reported, or used in this accredited educational conference in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.

We anticipate planning committee subsequent call abstract submission notifications will be communicated to authors in early-November 2024. If your abstract is accepted, all *presenting* faculty must register to attend Annual Assembly of Hospice and Palliative Care in-person in Denver during the scheduled presentation time (TBD) assigned by the planning committee at time of acceptance notification.

The Subsequent Call is specifically intended for professionals in training or early career



hospice and palliative care professionals to have an opportunity to present their peer reviewed work at a nationally accredited conference, in addition to having their work published in the Journal of Pain and Symptom Management.

This *Subsequent* call is open for the following:

- 15-minute Podium Presentation (can accept 32 - 16 case & 16 scholar
- Poster Presentation (can accept 150 - 75 case posters & 75 scholar posters)

SUBMISSION ELIGIBILITY

Early Career Professionals are defined as someone that has completed up to 5 years of post-training. Professionals in Training are defined as scholars currently engaged in a formal education/training program.

Abstracts submitted by early career and professionals in training during the *Subsequent Call for Abstracts on Emerging Scientific and Clinical Advances in the Field of Hospice and Palliative Care* that were not accepted **are eligible** for resubmission to the *Subsequent Call for Case Studies and Scholarly Works in Progress for Early Career and Professionals in Training* for reconsideration by committee.

- Final results of your research or project **are not required** to be included in the abstract text for committee review for the *subsequent call*, this call accepts both works in progress and completed studies for abstract review.
- The presenter and lead author must be an early career professional or professional in training, though more senior co-authors may be included in the submission.
- If your submission is not accepted as a 15-minute podium presentation, it will be considered a poster presentation.

GETTING STARTED WITH YOUR ABSTRACT SUBMISSION

Task: Submission Title

- Enter the title in the "Title" field only, **do not** reenter into the abstract body.
- The full title of abstract is limited to 100 characters.
- Characters/symbols/quotations/italics/bold, etc. are not accepted due to abstract platform limitations in reading character type symbols and formatting restrictions.
- Titles should be concise and descriptive for attendees to decide which sessions they wish to attend.
- When entering the abstract title, use mixed case (avoid all caps or all lowercase) and do not place a period at the end of the title.



- Example of correct title formatting:
 - ✓ Correct: This is a Properly Formatted Abstract Title
 - × Incorrect: THIS IS AN IMPROPERLY FORMATTED ABSTRACT TITLE
 - × Incorrect: This is an “*improperly formatted*” abstract title.

Preferred Presentation Length

Please choose which presentation type you would like to be considered for.

Note, the Annual Assembly Planning Committee will determine the final presentation length based on the requested preferred length, submission review, scoring, selection, and acceptance.

- 15-minute Podium Presentation (can accept 32 - 16 case & 16 scholar)
- Poster Presentation (can accept 150 - 75 case posters & 75 scholar posters)

TASK: Abstract Authors

Enter Abstract Primary and Contributing Author(s) Information

- The maximum number of abstracts allowed per primary submitter is three (3). There is no maximum number of presenters and authors for 15-minute podium & poster presentations. Presenting and contributing authors’ full name, credentials, current institutional affiliation, city, and state.
- All contributing authors are to be identified at the time of submission.
- Enter contributing authors’ full names, credentials, current institutional affiliations, cities, and states; ***NOTE: Names and credentials will be published as submitted; it is the responsibility of the presenting author to ensure submitted information is correct***

Task: Disclosures

Disclosures: relevant financial relationship(s) with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients are to be disclosed at time of abstract submission for the primary and contributing authors.

- The primary author will be asked to share disclosure information under the author’s information on the submission form.
- Emails will be sent to all listed authors to complete their disclosures via the abstract collection portal, disclosures are required for abstract consideration.
- Applicable disclosure mitigation will be completed at the time of abstract submission prior to abstract selection.
- ***Please Note:*** Per Standards for Integrity and Independence in Accredited Continuing Education: Information Package © 2020 by the ACCME® You *are not required* to disclose financial relationships as a stockholder of publicly traded companies, or holders of



shares through a pension or mutual fund.

- **Disclaimer:** Abstract acceptance is pending review and/or successful mitigation of disclosed relevant financial relationship(s) with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Task: Disclosures and Declaration of use of generative AI and AI-assisted technologies in the writing process:

Authors are required to disclose all generative AI and AI-assisted technologies used in the development of abstract content submitted for review. Authors will be required to respond to the following statement at time of submission:

During the preparation of this work, the authors used (*insert generative AI and AI-assisted technologies used in the writing process in the box below*). After using this tool/service, the author(s) reviewed and edited the content as needed **and agree to** take full responsibility for the content publication.

If no AI or AI-assistive technology was used in the development of this content, please state "*no generative AI and AI-assisted technologies were used in the development of this content*" in the text box.

Task: Abstract Topic Selection

Abstract topics are used to assign abstracts to reviewers, as well as inform the audience of topics on the mobile app. Below you will see the available topics to choose from based on your submission type.

Task: Select a Topic from the Drop-Down List.

15-minute Case and Scholar Podium (oral) Presentation Type (can accept 32 – 16 case and 16 scholar)

- Innovations in Care (new for 2025)
- Education
- Hospice
- Leadership / Program Development
- Pediatrics

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- Symptoms Assessment and Management
- Quality Improvement/Evidence-Based Project
- Scientific Research
 - Original Research/Systematic Review
 - Clinical Research
 - Health Services Research/Population-Based Research
 - Educational Research
 - Basic Science

Cases and Scholar Poster Presentation Type (can accept 150 total – 75 case posters and 75 scholar posters)

- Innovations in Care (new for 2025)
- Education
- Hospice
- Leadership / Program Development
- Pediatrics
- Symptoms Assessment and Management
- Quality Improvement/Evidence-Based Project
- Scientific Research
 - Original Research/Systematic Review
 - Clinical Research
 - Health Services Research/Population-Based Research
 - Educational Research
 - Basic Science

General Poster Information:

- Accepted posters will be displayed in the exhibit hall at the Denver Convention Center.
- Three faculty-attended poster presentation sessions will be held. As a condition of acceptance *at least one author per submitted poster* is required to participate in-person in the faculty attended poster sessions on-site in Denver (faculty-attended poster times TBD).
- Poster authors are required to share their poster digitally, as well as include a 2-minute presentation video for virtual attendees
- Faculty are encouraged to engage with both live and virtual attendees via networking channels.



Task: Sub-Topic & NCP Domain

Using the link below, identify the most relevant NCP domain reflected in your abstract submission.

https://www.nationalcoalitionhpc.org/wp-content/uploads/2020/07/NCHPCNCPGuidelines_4thED_web_FINAL.pdf

1. NCP Domain 1: *Structure and Processes of Care*
2. NCP Domain 2: *Physical Aspects of Care*
3. NCP Domain 3: *Psychological and Psychiatric Aspects of Care*
4. NCP Domain 4: *Social Aspects of Care*
5. NCP Domain 5: *Spiritual, Religious, and Existential Aspects of Care*
6. NCP Domain 6: *Cultural Aspects of Care*
7. NCP Domain 7: *Care of the Patient Nearing the End of Life*
8. NCP Domain 8: *Ethical and Legal Aspects of Care*

Task: Key Message

A Key Message statement should synopsise the presentation content and highlight its significance to the field of hospice and palliative care. The key message will be included in the Annual Assembly session description and the published abstract in JSPM as applicable. The 50-word key message is in addition to the 300-word count limit for the abstract body.

Task: Abstract Body

A concise, structured abstract is required for consideration by the planning committee. The abstract body should be no more than 300 words.

Research/QI related abstracts are to include the following headings:

- Introduction/Context
- Objectives – To Be Entered in Separate Tasks Titled: “Presentation Desired Learner Objectives”
- Methods
- Results if available
- Conclusion
- References/citations - to be entered in “references”, separate field that follows

Task: Submission Tips for Symptom Assessment & Management Focused Abstracts

- Case submissions describing a clinical condition or syndrome should include a brief narrative review of the evidence supporting best practices in assessing and/or managing that condition.
- The narrative review should include a description of the condition or syndrome, prevalence and pathophysiology, and a concise summary of treatment options with evidentiary support of all steps.



- Submissions should address cultural humility and sensitivity in their case examples, and where applicable, describes how issues of cultural diversity, equity, and inclusion would be considered in the treatment plan and the impact of proposed topic or research on underrepresented and underserved populations.

Task: References

Number references in order of their use in the text; do not alphabetize. Identify references in the text with Arabic numerals inside parentheses. When listing authors in the reference list: Five authors or less, list all five authors; six authors or more, list the first three authors followed by et al. Reference accuracy is the responsibility of the author(s). <https://www.sciencedirect.com/journal/journal-of-pain-and-symptom-management/publish/guide-for-authors>

Citations in text:

Please ensure that all references cited in the text are also present in the reference list (and vice versa). All references cited in the abstract must be given in full. For additional information please access

<https://www.sciencedirect.com/journal/journal-of-pain-and-symptom-management/publish/guide-for-authors>

Task: Desired Learner Objectives

Desired Learner Objectives are evaluated to determine the impact of educational activities on patient care and the continuing professional development of the learner. Start by asking the question "*when the learner leaves my session, what do I want them to know?*". For more information on writing cognitive learning behavioral objectives/outcomes, access Bloom's taxonomy of cognitive learning objectives via the following link:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4511057/>

Examples of cognitive learning behavioral outcome/objective:

Example 1 Utilizing a case-based approach, participants will self-report the ability to apply, analyze and evaluate shared experiences in caring for people with serious illness nearing life's end as an opportunity for healing, forgiveness, and reconciliations for future practice application in embracing whole person care.

Example 2

Utilizing simulation technology approaches, participants will self-report the ability to mitigate communication errors to support shared decision-making using evidence-based information technology resources.



Task: Submission Information

Response to Engagement of patients/public as planners and faculty of submitted abstract

Accredited education is enhanced when it incorporates the interests of the people served by the healthcare system. This is first achieved when patients and/or public representatives are engaged in the planning of the education content. Be prepared to identify whether this submission included patient or public representatives.

Did this abstract submission include planners who are patient and/or public representatives?

Yes No

Select Key Words

Abstracts are to reflect two of the listed Keywords or phrases that best describe your primary content. Key words are used in indexing and assist in the abstract review selection process. Key words will be listed in the drop-down menus.

- | | |
|--|---|
| <input type="checkbox"/> Hospice | <input type="checkbox"/> Emergency Interventions |
| <input type="checkbox"/> Pediatrics | <input type="checkbox"/> Quality Improvement |
| <input type="checkbox"/> Managing Suffering and Distress | <input type="checkbox"/> Scientific Research |
| <input type="checkbox"/> Disease specific management | <input type="checkbox"/> Advocacy / Policy / Regulations |
| <input type="checkbox"/> Emergencies / Refractory symptom Management | <input type="checkbox"/> Existential / Humanities / Spirituality / Religion |
| <input type="checkbox"/> Pharmacopalliation | <input type="checkbox"/> Shared Decision Making / Advance Care Planning |
| <input type="checkbox"/> Interdisciplinary/ Transdisciplinary Teamwork / Professionalism | <input type="checkbox"/> Communication |
| <input type="checkbox"/> Models of Palliative Care Delivery | <input type="checkbox"/> Prognostication |
| <input type="checkbox"/> Innovative Technologies | <input type="checkbox"/> Workforce / Career Development |
| <input type="checkbox"/> Diversity, Equity, Inclusion, Belonging, Justice | <input type="checkbox"/> Patient Outcomes |
| <input type="checkbox"/> Ethical / Legal Aspects of Care | <input type="checkbox"/> Global Palliative Care |
| <input type="checkbox"/> Management of Medical Interventions | <input type="checkbox"/> Resilience/Well being |
| <input type="checkbox"/> Surgical Palliative Care | <input type="checkbox"/> Other not listed |
| <input type="checkbox"/> Loss, Grief, Bereavement | |
| <input type="checkbox"/> Transplantation / Donation | |
| <input type="checkbox"/> Integrative Medicine | |



Task: Nursing Designated Pharmacotherapeutic Credit Hour Determinations

For content that includes Pharmacotherapeutic applications, submissions are to identify pharmacotherapeutic content presentation time relevant to national ANCC and AANP NP/CNS recertification which includes current clinical application of pharmacology across the life span including drug specific information, safe prescribing practices and information, safe medication administration, prescribing methodologies, new regulations and/or similar content

Pharmacotherapeutic time is determined in 15-minute increments. Select the number of minutes that pharmacotherapeutic content is addressed as defined above during the presentation

Task: Publishing of Abstract

All accepted abstracts not previously published in another peer-review journal will be published in The Journal of Pain and Symptom Management (JPSM), with an estimated publishing release in Q2-2024. *Please note*, abstracts will be published as written; no additional copy editing will be done. Please ensure your work is ready for publication at the time of submission.

Please review the *Author Information Pack Guide for Authors* provided by the Journal of Pain and Symptom Management to learn more about the abstract publication guidelines.

<https://www.sciencedirect.com/journal/journal-of-pain-and-symptom-management/publish/guide-for-authors>

If your abstract has been submitted to, or published in, a peer-reviewed journal and is accepted for presentation at the Annual Assembly, it will not be published in JPSM to avoid copyright infringement.

Task: Identify the learner experience level you are targeting in your session.

Level 2 – Basic (learner has foundational knowledge about the topic and is able to apply related skills in practice with frequent guidance)

Level 3 – intermediate (Learner has broad knowledge of the topic and is able to apply related skills in practice with little guidance)

Level 4 – advanced (Learner has in-depth knowledge of the topic and is able to apply related skills in practice independently)



Level 5 – expert (Learner has in-depth knowledge of the topic, is able to apply related skills in practice independently, and is able to advise, instruct others on the topic)

Task: DEI-B Acknowledgement

Submitted abstracts are to address the impact of the proposed topic or research on underrepresented and underserved populations to better equip hospice and palliative care professionals with knowledge and skills to deliver high quality, culturally sensitive person-centered care. You are asked to address issues of cultural humility and sensitivity in your abstract, case examples, and, where applicable, describe how issues of cultural diversity and inclusion are considered in the specific aims or session narrative of your proposed content. This inclusion criteria will be scored as part of the abstract review process. For additional information on use of inclusive language, reporting sex- and gender-based analysis, and race and racial disparities visit - <https://www.sciencedirect.com/journal/journal-of-pain-and-symptom-management>

Accepted abstracts undergo a secondary DEI title review by the AAHPM DEI and HPNA DEIB committees. Minor adjustments may be made to submitted abstract titles to reflect AAHPM's and HPNA's commitment to an inclusive and welcoming learning environment that embraces diverse perspectives, cultures, and maximizes positive impact through evidence-based programming. You will be notified of any title updates and the revised title will be reflected in accepted content.

Task: Desired Outcome

Through interdisciplinary team collaboration and integrated enactment, our Annual Assembly desired outcome is to *enhance the learners' knowledge/skills/strategy or performance, to increase competency, influence behaviors, and/or improve patient outcomes in hospice and palliative care.*

You will be asked to confirm that your abstract submission supports the above statement.

Task: Registration

- Presenting authors must be registered for the Annual Assembly of Hospice and Palliative Care.
- Presenting authors are expected to present in-person in Denver, CO during your scheduled presentation time assigned by the planning committee.
- Presenting authors are highly encouraged to participate in the end-of day Homeroom Sessions to engage with learners in discussions surrounding practical application.



Task: Session Pre-Recording

- As part of your signed presenter agreement, presenting faculty must prepare and submit an accessible self-recording of their session(s) before the opening of Annual Assembly for on-demand access to all registrants. Presenting faculty must submit a recording of their session(s) to the faculty portal *before* the conference for on-demand access to all registrants. Recorded submissions are to adhere to best practices in accessibility to ensure content is inclusive to all learners, including people with disabilities. Please use the links below to see how you can make your presentation more accessible to people with disabilities -
 - <https://support.microsoft.com/en-us/office/make-your-powerpoint-presentations-accessible-to-people-with-disabilities-6f7772b2-2f33-4bd2-8ca7-dae3b2b3ef25>
 - <https://www.section508.gov/create/presentations/>

Task: Abstract Submission Fee

There is a \$45 non-refundable abstract processing fee for submission of individual abstracts for the system that supports the peer review process to be paid upon submission completion.

For questions or clarifications regarding abstract submissions, please email info@aahpm.org for assistance. Thank you. Once the tasks are done, save your submission and click to review your abstract submission for accuracy. Any edits can be completed and re-saved for update throughout the open call timeframe. Continue to monitor your task list for outstanding invited author completion information to finalize your abstract submission before the call close August 12, 2024, at 11:59 PM PST.