ABSTRACT SUBMISSION INSTRUCTIONS

19th Annual Safe Patient Handling and Mobility Conference

Realizing Your Passions in Research, Education and Innovation to Achieve Excellence in Staff and Patient Safety and Outcomes

March 4-8, 2019
Rosen Centre, Orlando, FL

Abstracts should align with the Conference Description and Objectives, and provide participants with innovative and evidence-based practices related to safe mobility including technologies and programs for safety lifting, transferring and repositioning, early mobility in critical care, progressive mobility in long term care, maintaining mobility across care settings including the home, and the prevention of adverse events associated with immobility, such as falls, fall-related injuries, and pressure ulcers.

Conference Description:

This conference will provide participants with the knowledge and skills for making healthcare safer for all healthcare workers and patients. The ultimate goal is for safe mobility in all health care settings through technology and programmatic innovations. Participants will be exposed to cutting edge research, best practices, and lessons learned in safe patient handling and adverse events from immobility. This conference includes diverse learning opportunities, including plenary and concurrent sessions, workshops, case-based learning strategies, and a large exhibit hall that allows for interactions with vendors and opportunities for hands-on use of equipment.

Target Audience:

This conference is designed for direct health care providers (nurses, physicians, and physical, occupational, and recreational therapists), mobility program coordinators, clinical managers, risk manager, educators in professional and technical programs, industrial hygienists/safety professionals, ergonomists, insurance providers, and researchers of any discipline who are interested in safe mobility for patients and caregivers.
Conference Objectives:

Upon completion of this program, the participant should be able to:

1. Apply research and clinical evidence to build programs that promote function and quality of life for patients and safety for caregivers in all healthcare settings.
2. Evaluate technology and programmatic solutions for promoting mobility that is safe for patients and caregivers in all healthcare settings.
3. Incorporate best practices, clinical expertise and patient preferences to improve function and prevent patient adverse events associated with immobility.
4. Evaluate the state of science related to fall prevention, fall-injury prevention and mobility programs.

2019 Abstract Submission

1. Deadline:

   **Abstract Deadline**: September 1, 2018 (notification by October 1, 2018)

   **Conference Dates**: March 4-8, 2019

2. Instructions

   **2a. Poster Presentation**

   Submit the following items (prepared using Microsoft Word) using the guidelines and format below. Underline the presenting author.

   I. Title of Abstract (Bold)

   II. 1st Author, Credentials (Affiliation); 2nd Author, Credentials (Affiliation), etc.

   III. Text of Abstract that includes Background/Introduction, Goals/Objectives, Methods, Results, Discussion

   IV. Corresponding Author: Name, Address, Email Address, Phone Number

   □ Check if you would like to be considered to do a 20-minute presentation of your poster content in a concurrent podium presentation.

   **2b. Podium Presentation**

   I. Biographical Data/Conflict of Interest Form (must be signed)

   II. CV (Be sure it reflects the content you propose to present, and includes your educational background and a complete publication list)
III. Complete the description table below. If accepted, this description will be used in the program to assist attendees in choosing which sessions to attend.

IV. Subject to availability of sponsorship the conference will reimburse expenses for 1-2 nights hotel and travel for one speaker per session.

2018 Conference Participants suggested content on:
Mobility Challenges that Matter to Patients and Families: Bringing Consumers’ Voices to the Table
Universal Curricula for Students in Professional and Technical Educational Programs
Technical and Professional Education – What are the Barriers and How do We Overcome Them?
Technology Solutions for First Responders and the Barriers for Integrating Technology into Rescue and Transport
Mobility Across the Care Continuum: Bridging Transitions of Care including long term care, assisted living, labor and delivery, operating room, mental health, radiology
Special Considerations for Promoting Mobility for Specific Populations including Pediatrics, Geriatrics, and Persons with Disabilities
Building Enthusiasm to Ensure Program Success among Direct Care Providers, Ancillary Staff, and Middle Management
How to Choose Mobility Risk Assessment Tools that Work for Given Settings and Patient Populations
Applying Principles of High Reliability Organizations to Mobility Safety
Applying Innovation to Thorny Problems such as Laundering of Slings and Repositioning Patients in Bed
The Roles of Providers - Physicians, Hospitalists, Advanced Practice Nurses and Physician Assistants - in Ensuring Safe Mobility
Research that Examines the Associations Among Program Components, Program Strength and Staff and Patient Outcomes.

<table>
<thead>
<tr>
<th>Title</th>
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<tbody>
<tr>
<td>Presenters’ name(s) and credentials</td>
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<tr>
<td>Description (1 paragraph)</td>
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<tr>
<td>Objectives (Learner Outcomes in Behavioral Terms). Upon completion learner will be able to:</td>
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<td>Subject Matter (Topic Outline &amp; Content—As It Corresponds to the Objectives—2-3 examples for each objective)</td>
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<td>Participant Level* (Beginner [1], Intermediate [2], Advanced [3] or Multilevel [4])</td>
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<td>Method of Presentation (Lecture, Discussion, Psychomotor Skills Development, Role Playing, Case-Based Learning, Simulation, etc.)</td>
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<td>References (3-5 evidence-based publications)</td>
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Course Levels (Note: 2018 conference attendees felt that many presenters did not differentiate the course level well)

1. **Beginner. For individuals:**
   - With limited or no knowledge of the subject area
   - New to the field, just learning, or starting out
   - With little clinical or practical experience in the subject matter
   - Seeking to learn the fundamentals about the subject area.

2. **Intermediate. For Individuals:**
   - With basic knowledge of the subject area
   - With some experience in the subject area
   - Who have some experience in application of knowledge to the subject area
   - Who are mid-level in their field with some degree of competence
   - Seeking to build on, apply or enhance knowledge in the subject area.

3. **Advanced. For Individuals:**
   - With moderate to extensive experience and knowledge in the subject area
   - Seeking to increase depth of their knowledge
   - Seeking to aid in the growth or progress of knowledge and expertise
   - Deemed an expert in the field.

4. **Multilevel (If session is not marked as 1, 2, or 3, it is Multilevel)**
   - Can apply to individuals with any knowledge/experience level.

Abstract Instructions

- Abstracts should be 200-250 words (12 pt and left justified)
- Use Microsoft Word
- Text should be provided in sentence case. Do not type abstract titles or abstract text all in capital letters.
- Abstracts must include the main objective/s or justification, methods, results, conclusions and significance or impact. They should be written clearly in English and checked for accuracy and misspelling prior to submission. Be concise and clear.
- Incomplete submissions will not be reviewed.
- Submitted abstracts will be peer-reviewed and evaluated on merit
- Accepted abstracts will be included in the conference materials.

Submission

All items should be Emailed as an attachment to valerie.kelleher@va.gov

Acceptance and inclusion in the program

All authors of posters will be advised via Email according to the timelines listed in Section 1. Poster boards are 8’ wide x 4’ deep. **Contributions will be included only if at least one of the authors has paid registration to attend the conference by 60 days in advance of the start date of the conference.** The Program Committee reserves the right to refuse any contribution that is not appropriate to the conference or not of sufficient scientific or technological merit. Abstracts that are promotional in nature, or advertising a specific company or product, will not be accepted.