

Health and Wellbeing in Persons with Intellectual/Developmental Disabilities

Children, Youth and Adults

***Pre-Conference Workshops
September 24, 2008***

***Conference
September 25 & 26, 2008***

The Coast Plaza Hotel and Suites
1763 Comox Street, Vancouver

Sponsored by



Interprofessional Continuing Education
UNIVERSITY OF BRITISH COLUMBIA

in cooperation with



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Conference Information Online:
www.interprofessional.ubc.ca

GENERAL INFORMATION

Description

Children, youth and adults with Intellectual/Developmental Disabilities and Autism Spectrum Disorder experience high rates of both health and mental health concerns. These impact significantly on quality of life of the individual concerned as well as their families, caregivers and the community.

British Columbia has closed its institutions for individuals with Developmental Disabilities, but the struggle to develop quality specialized services where appropriate, as well as ensuring access to generic health services continues. This conference will provide education and informative updates on psychiatric, behavioural and complex health components specific to individuals with DD, and showcase best practices in the field. The conference will address topics such as Epilepsy; Aging in Down Syndrome; Prader Willi Syndrome; Autism Spectrum Disorders; Sexual Health; Self Injurious Behaviour (SIB) and other challenging behaviours as well as 'co-morbid health conditions' such as dysphagia, pain and mobility issues.

Objectives

To educate people to recognize the interrelatedness of physical and mental health

- How to maximize health in order to minimize disability

- Understanding health and mental health aspects of Developmental Disability
- Share knowledge and common experiences with other professionals working in the field of health

Who should attend

The conference will be of interest to an interdisciplinary audience including:

Administrators	Families	Psychiatrists
Behaviour Therapists	Interdisciplinary teams	Psychologists
Caregivers	Mental Health Therapists	Researchers
Case Managers/Planners	Nurses	Self-Advocates
Counselors	Occupational Therapists	Social Workers
Direct Service Professionals	Physical Therapists	Students in Health Sciences
Educators	Physicians	University and College Programs

And anyone who is interested in or who works in the field of Mental Health and Developmental Disabilities.

Location and Hotel Information

The Coast Plaza Hotel and Suites, 1763 Comox Street, Vancouver, BC, Canada V6G 1P6

Tollfree in North America: 1-800-663-1144; or (604) 688-7711. Fax: (604) 685-7210

Please make your own reservation by calling the hotel directly. Identify yourself with the **Health & Well-being conference**. Hotel tax of 10% and 5% GST must be added to all rates.

Rates: **\$169 single**, double or twin occupancy; additional person \$20, children under 18 stay free in same room as parents (max. applies). A block of rooms will be held at the conference rate until **August 25, 2008**. The Coast Plaza is within easy walking distance of world famous Stanley Park, the beaches of English Bay, and a wide variety of restaurants.

Parking: Conference Hotel: \$12 per day. West End Community Centre, 870 Denman (entrance off Haro) \$4.50 - \$5.00 per day (\$1 coins accepted)

Registration

You may register online at www.interprofessional.ubc.ca, by telephone or fax using a credit card for payment, or by mail with a cheque or credit card payment. Please see registration form for further details.

Pre-registration prior to August 31, 2008 is strongly recommended to ensure you receive all conference materials.

Tuition Fees

See Registration Form for more details. The tuition fee includes conference materials, refreshment breaks, two lunches, and the reception.

Charge-by-phone/fax: To charge by phone (Mastercard and Visa only), please call: Toll free within BC 1-877-328-7744, Other callers: (604) 822-6156; or fax your completed registration form to: (604) 822-4835.

Bursary Available

A limited number of bursaries to cover tuition fees are available for service providers and family members through a grant being provided by the Ministry of Children and Family Development. Please fax a complete registration form, along with a letter of application explaining financial need and how attending this conference will benefit you, to (604) 822-4835.

Refund and Cancellation Policy

Refunds will be made (less a \$50 processing fee) if written notice of withdrawal is received by **August 31, 2008**. No refunds will be granted for withdrawal after that date.

Interprofessional Continuing Education reserves the right to cancel or move this program if registration is insufficient. In the event of cancellation, a refund less a \$50 handling charge will be returned.

Exhibitors

Health associations and/or community organizations wanting to exhibit at this conference, please contact the organizers at (604) 822-4965 or by email: liau@interchange.ubc.ca

Professional Credits/ Certificate of Attendance

A Certificate of Attendance will be prepared for all participants listing hour for hour instruction. All participants attending will be given a certificate stating that the conference involves **19 hours** of educational instruction. Specialized credits have been applied for from several professional organizations. Please refer to our website for updates: www.interprofessional.ubc.ca

UBC Interprofessional Continuing Education is approved by the Canadian Psychological Association to offer continuing education for psychologists. UBC Interprofessional Continuing Education is approved by the National Board of Certified Counselors (Approved Continuing Education Provider #6252).

Contact Information

For questions regarding the conference program, registration or other matters, please contact Interprofessional Continuing Education at (604) 822-6156, Fax: (604) 822-4835 or email: liau@interchange.ubc.ca

Health and Wellbeing in Persons with Intellectual/Developmental Disabilities

Children, Youth and Adults

WEDNESDAY, SEPTEMBER 24, 2008
PRE-CONFERENCE HALF-DAY WORKSHOPS

You can register for ½ day workshop in the morning and for a ½ day workshop in the afternoon. Please mark your preference(s) on the registration form attached to this brochure.

8:00am Registration

12:30 – 1:30 Lunch (provided) & Afternoon Registration

MORNING WORKSHOPS
9:00 – 12:30

AFTERNOON WORKSHOPS
1:30 – 5:00

AM1) Supporting People with Difficult Behaviours

Presenter: *David Pitonyak, MD, PhD; Director, Imagine, Blacksburg, Virginia*

Difficult behaviors result from unmet needs. This workshop examines seven quality of life indicators that are often missing in the life of a person who experiences our services. Based on the idea from Jean Clarke that a person's needs are best met by people whose needs are met, this ½ day workshop examines strategies for supporting not only an individual who experiences disabilities but also the needs of his or her caregivers.

Objectives

At the conclusion of the workshop, participants will have developed knowledge in the following areas:

- Determining what people may be communicating through their difficult behaviors;
- The role of physiological or psychiatric needs in the development of difficult behaviors
- The importance of asking critical quality of life questions in building a support plan;
- The critical importance of addressing caregiver needs in the development of a support plan;
- Ways to support an individual in crisis.

AM2) A Clinical Approach to Helping Adults with Asperger's Disorder

Paul Dagg, MD FRCPC; Clinical Director, Tertiary Mental Health Services, Interior Health Authority; and Clinical Associate Professor, Department of Psychiatry, UBC, Vancouver, BC.

This workshop will review a clinical approach to individuals with Asperger's in adulthood. The role of diagnosis, identification of co-morbid conditions will be described. Video and case presentation will be used to illustrate this. A comprehensive approach to management utilizing psycho-education, vocational rehabilitation and speech therapy and medication will be presented for discussion by the audience.

PM1) Psychopharmacology In Developmental Disabilities

Difficult behaviours are non-specific indicators of distress in patients with intellectual disabilities with or without autism. The demand to reduce patients' distress and to give some relief to caregivers puts an onus on health professionals to find immediate solutions. Pharmacotherapy has some promising benefits but pitfalls as well. This symposium will review the pharmacotherapy of one of the most difficult types of behaviour to manage; self-injurious behaviour. The next two talks will address the problem of polypharmacy in these patients and try to answer two main questions; Why do we get into, and how do we get out of these messes?

1. Treating Self-Injurious Behaviour in Autism

Bryan King, MD; Director of Child and Adolescent Psychiatry, University of Washington

2. Polypharmacy: Part I: Evolution and Indicators

Lee Tidmarsh, MD FRCPC; Psychiatrist, DDMHS, Fraser Health Authority

3. Polypharmacy: Part II: Drug Interactions and Withdrawing Medications

Debbie Thompson, MD, FRCPC; Psychopharmacologist, DDMHS, Fraser Health Authority

PM2) Breaking the Cycle of Sexual Abuse: Treating Victims and Offenders

Margaret Newbury-Jones, M.Ed. (SHADE Consulting Ltd)

Peter Johnson, Ph.D. (Petrona Services Ltd)

This workshop will explore the issues of sexual abuse in people with developmental disabilities. Topics will include vulnerability and prevention, treatment of victims, community responses, and programs for offenders. Stories of successes and challenges will be presented. Participants should expect to be actively involved in this workshop.

THURSDAY, SEPTEMBER 25

**8:00 Registration and Coffee
(Exhibits Open)**

8:30 Welcome

Robin Friedlander (Conference Co-Chair); Psychiatrist; Clinical Director, DDDMHS- Fraser and Vancouver; Clinical Associate Professor, UBC, BC Children's Hospital, Neuropsychiatry; Vancouver, BC

Gerrit van der Leer, Director, Mental Health and Addictions, Health Authorities Division, BC Ministry of Health

8:45 How Much Progress in Developmental Disabilities: A 45-Year Perspective

Roger Freeman, MD FRCPC; Professor Emeritus, Dept. of Psychiatry, UBC; Clinical Head, Neuropsychiatry Clinic, BC Children's Hospital

9:25 Q & A

9:30 History & Future Prospects for Psychopharmacology in Intellectual Disabilities

Bryan King, MD, PhD; Professor and Vice Chair of Psychiatry and Behavioural Sciences, Director of Child and Adolescent Psychiatry, University of Washington and Children's Hospital and Regional Medical Center, Seattle, WA

10:25 Q & A

**10:30 Refreshment Break
(Exhibits Open)**

**11:00 CONCURRENT SESSION A
(11:00 – 12:30 P.M.)**

A1) Alcohol, Drugs and Disability: Making the Connection

Barbara Ludwig, Program Developer and Clinician, Life College by CH&S, Community Homes and Services, Inc.; International Outreach Coordinator, National Association on Alcohol, Drugs and Disability, California, USA

This presentation and discussion is for participants of all clinical and non-clinical backgrounds. After viewing the poignant and articulate videotaped testimony of a developmentally disabled woman's experiences with substance abuse, homelessness and recovery, we will discuss risk factors specific to people with intellectual disabilities and the growing service needs in this underserved population. Assessment tools anyone can utilize, standard treatment options (pros and cons) and demonstrated elements of successful specialized prevention, intervention and treatment will be presented and discussed.

**A2) Elgin Family Intervention Model:
A program that cares for those who care**

Teresa Grech, (Master's candidate, CPRP); Developmental Disabilities Mental Health Services, Youth Team Counsellor/Educator, Port Coquitlam, BC

Flora Johnson, R.P.N., BA; Developmental Disabilities Mental Health Services, Mental Health Nurse, Port Coquitlam, BC

The Elgin Family Intervention Model (EFI) is a program developed to help families cope with distress often experienced by caregivers supporting a person with a developmental disability and mental illness (Knox et al, 2000). The model encompasses the provision of education to caregivers in the areas of: (1) developmental disabilities and mental illness 2) caregiver distress, 3) resources, 4) advocacy, 5) problem solving and, 6) coping. This presentation will include an overview of the rationale behind the development of the EFI model, followed by a detailed outline of interventions utilized to respond to, and support, the range of difficulties experienced by caregivers. Participants will gain a deeper understanding of the needs of families supporting individuals with a developmental disability and mental illness, and be more equipped with specific ways to address these needs.

A3) Taught Not Caught! Frontline Education Approaches And Considerations in Addressing Complex Sexual Issues

Susan Mayson, Mental Health Clinician, Developmental Disabilities Mental Health Services; and Clinic Coordinator, Interior Health Children's Assessment Network, Interior Health Authority, Cranbrook, BC

How professionals and caregivers feel about people with developmental disabilities expressing themselves sexually is very influential in the self-concept of individuals and how they view their own sexuality. This presentation will address teaching strategies in the delivery of respectful education in both formal and informal settings as well as key considerations in tackling the more challenging sexual issues.

A4) The Fragile X Continuum: New Advances and Implications for Clinical and Educational Interventions.

Kim Cornish, PhD, Canada Research Chair, Professor, and Director, McGill Child Laboratory for Research and Education in Developmental Disorders.

Fragile X syndrome is the world's most common hereditary cause of intellectual delay in males and to lesser extent females. The disorder is caused by the silencing of a single gene on the X chromosome, the Fragile X Mental Retardation Gene – 1 (FMR1). A substantial body of research across the disciplines of molecular genetics, child psychiatry and developmental psychology bears testament to a decade of exciting and innovative science that has advanced our knowledge about the fragile X 'signature' and its impact across the lifespan. This presentation will describe the fragile X syndrome and premutation involvement in the context of current advances that demonstrate the dynamic nature of the genotype on phenotypic outcomes. The implications of these recent advances for the development of clinical and educational interventions and resource tools that target specific phenotypic "signatures" within the fragile X continuum will be highlighted.

A5) Assessing and Managing Disturbed Sleep Associated with Developmental Disabilities

Jonathan Fleming, MD; Co-Director, Sleep Program, University of British Columbia Hospital, Vancouver, BC

Sleep disturbances are common amongst patients with developmental disabilities and their carers. Although there have been more studies (both subjective and objective) in this patient population recently, the principles of management are adopted and adapted

from other patient populations. This presentation reviews the principles of sleep regulation, behavioural strategies to promote sleep and reviews what is known about effective treatments for this patient population.

A6) Early Onset Psychosis in Youth with Developmental Disorders

Robin Friedlander, Conference Co-Chair; Psychiatrist; Clinical Director, DDDMHS- Fraser and Vancouver; Clinical Associate Professor, UBC, BC Children's Hospital, Neuropsychiatry; Vancouver, BC

Tina Donnelly, RPN, BHSC; Manager Health Services, Developmental Disabilities Mental Health Services – Fraser Health Authority, Port Coquitlam, BC

Joseph Klancnik, PhD; Developmental Disabilities Mental Health Services, Vancouver, BC

We have been following and treating youth with developmental disabilities and early onset psychotic symptoms for over 10 years now. In this presentation, we will summarize our longitudinal studies and describe case histories which illustrate the rich and varied presentation and outcome.

12:30 Luncheon (registrants are on their own for lunch)

1:30 CONCURRENT SESSION B (1:30 – 3:00 PM)

B1) Prader Willi Syndrome: Promoting Health and Wellbeing through Environmental Supports

Robin Friedlander, Conference Co-Chair; Psychiatrist; Clinical Director, DDDMHS- Fraser and Vancouver; Clinical Associate Professor, UBC, BC Children's Hospital, Neuropsychiatry; Vancouver, BC

Rita Di Gagni, M.Ed., Behavioural Consultant, private practice

Prader Willi Syndrome (PWS) is a neurobehavioural genetic disorder characterized by many medical and behavioural complications, including hyperphagia and a constant sense of hunger due to an inability to feel full. Life for the person with PWS can be frustrating, stressful and anxiety producing. This presentation will discuss a variety of environmental supports which may help decrease this stress and anxiety, provide a sense of security, and promote health and wellbeing.

B2) Epilepsy 101. A Workshop for Those Supporting Patients with Epilepsy

Michael Jones, Neurologist, Vancouver General Hospital and Clinical Associate Professor, Faculty of Medicine, University of British Columbia, Vancouver, BC

Epilepsy is very common in Canada; a new patient is diagnosed every 37 minutes. Epilepsy is much more prevalent in those patients with mental/cognitive disability, Cerebral palsy, and autism. This workshop will touch on some of these unique problems that you will encounter. Some video examples of different seizure types will be shown. One will learn more about the "causes of epilepsy". The myths and misconceptions of anti-epileptic medications will be discussed and reviewed plus we will review a "seizure protocol".

B3) Moving on: Wheelchairs for living (not just for sitting)

Jo-Anne Chisholm, MSc; Occupational Therapist, Access Community Therapists Ltd., Vancouver, BC

People were meant to move and a well prescribed wheelchair and seating system can make the difference from being stuck in a health-care institution or group home living room to leading a full and active life at home, in the neighbourhood or traveling. Wheelchairs-power and manual; independently propelled or caregiver powered; able to turn on your stereo, open your front door and answer your phone. Participants will be shown a range of innovative positioning and mobility solutions to help them become informed consumers of wheeled mobility and learn what is possible.

B4) The Path to Self-Advocacy

Donna Murphy and Gladys Duran

Gladys Duran and Donna Murphy have a long and special relationship. They met when Gladys joined Donna's special education class at Guildford Park Secondary school. Gladys is now a twenty-three year old woman who lives with a dual diagnosis. It has always been important to Donna to encourage her students to be self-advocates. As a helping teacher in Surrey Donna encouraged her colleagues to promote independence and self advocacy in their students from a very young age.

This workshop will be presented by Donna and Gladys, and is from a professional point of view, as well as from the young person who lives with the disability. It gives ideas on how to encourage independence in children and youth, beginning with preschool to adult community living. Gladys speaks from the point of view of a youth who lived with a serious mental illness, while dealing with family and friend who did not understand how someone with an intellectual disability could become so ill. This workshop will show that anything is possible if a person has the right support and encouragement. Gladys' success story is that she now has a paid position at Semiahmoo House Society as a self-advocate and peer advisor.

B5) Aging in People with Developmental Disabilities

Presenter: Lilian Thorpe MD, PhD, FRCP (Psychiatry); Professor (Clinical) Psychiatry, University of Saskatchewan; Chair, Section on Geriatric Psychiatry, Canadian Psychiatric Association

This session will be a case-based presentation of aging issues in people with intellectual disabilities. Participants are welcome to bring their own cases for discussion as well.

B6) Medical Conditions Associated with Autism Spectrum Disorders

Lee Tidmarsh, Psychiatrist, Fraser Health Authority; Developmental Disabilities and Mental Health Services, Vancouver, BC

Autism spectrum disorder (ASD) is a common neurodevelopmental disorder with a prevalence rate of 1/250. Behaviours usually associated with this condition can be misinterpreted and may represent a previously undetected medical condition. This presentation will outline problems associated with ASD requiring medical attention, and will give guidelines on identifying these conditions. There will also be a practical discussion of how to approach an investigation

and implement management/treatment within a general practice. This presentation will be useful for caregivers, primary care health professional and specialists caring for people with ASD.

B7) Implementing Positive Behavioural Supports at the Individual and Agency Level

David Pitonyak, MD, PhD; Director, Imagine, Blacksburg Virginia

Dr. David Pitonyak will be available to meet with community agencies to discuss range of specific and general issues related to positive behavioural intervention with a focus on how individual responses are reflected in the culture of the agency, its philosophical commitments and its efforts to continually enhance practice. The Participants are encouraged to come to this session with questions around their specific interest area.

3:00 Refreshment Break (Exhibits Open)

3:30 CONCURRENT SESSION C (3:30–5:00 P.M.)

C1) Pain in Children with Developmental Disabilities

Tim Oberlander, MD, FRPC; Professor, Division of Developmental Pediatrics, University of British Columbia

Pain assessment and treatment in individuals with developmental disabilities is complex and confounded by many aspects of the underlying condition, its sequelae and pain treatment itself. While pain may be a frequently encountered clinical problem, this topic is only now receiving scientific and public attention. The presence of a neurological impairment changes the nature of pain perception, the pain response, the language used to express pain and may even challenge our very understanding of pain itself. The subjective and ambiguous nature of pain expression in this setting may lead to inappropriate recognition and under-treatment of pain. Emerging work is now dispelling beliefs of pain insensitivity and indifference. In this session we will discuss pain in children with developmental disabilities, review misconceptions and systematic evidence of the nature of pain experienced by individuals with diverse impairments. Particular presentations will focus on pain in populations with cognitive (self-injurious behavior), social (autism) and motor (cerebral palsy) impairments. We will examine novel assessment strategies and instruments appropriate to this setting and describe current pain management strategies. An interactive discussion with participants will follow to help move this emerging field forward.

C2) The Link Between Self-Injurious Behaviors and Arousal

Kim Barthel, BRM; Occupational Therapist, Labyrinth Journeys

Individuals engaging in self-injurious behaviors frequently possess challenges in the way their brains process and organize sensory, affective and cognitive information. As a result of poorly modulated arousal, clients may be limited to maladaptive strategies as they attempt to interact with their environment. Introductory treatment suggestions will be offered to assist clinicians with the intervention of self-injurious behaviors from a cognitive, affectual and sensory approach.

C3) From the Perspective of Caregivers: Getting From No to Go in Behaviour Therapy

Mark Weinberg, PhD; Team Leader, Behavioural Services, Developmental Disabilities Mental Health Services, Burnaby, BC

Caregivers supporting people living with developmental disability, whether family or paid, often carry the role of change-agents in the behaviour therapy process. That is, these people are usually responsible for the implementation of interventions suggested by clinicians. For this reason, obtaining caregiver input and cooperation is crucial to the success of most behavioural plans. In this presentation, we will discuss some barriers to building effective working alliances with caregivers, with an emphasis on trying to see ourselves (as behavioural and mental health professionals), our methods and our expectations from the perspectives of caregivers. This will be followed by an outline and discussion of suggestions for working more effectively and empathetically with caregivers. Please note: While this presentation ostensibly targets behaviour therapists, it will be of interest to all mental health and medical professionals working with people living with developmental disabilities. The attendance of caregivers and family members would be particularly appreciated as this would add great value to the discussion.

C4) Specialized Services: Where We Need Them? Ontario, British Columbia, and Saskatchewan

Susan Morris, Clinical Director, Dual Diagnosis Program Centre for Addiction and Mental Health, Toronto, ON

Robin Friedlander, Psychiatrist; Clinical Director, DDDMHS- Fraser and Vancouver; Clinical Associate Professor, University of British Columbia; BC Children's Hospital, Neuropsychiatry; Vancouver, BC

Lilian Thorpe MD, PhD, FRCP(Psychiatry); Professor (Clinical) Psychiatry, University of Saskatchewan; Chair, Section on Geriatric Psychiatry, Canadian Psychiatric Association

In BC and Ontario, specialized mental health services to individuals with a dual diagnosis have evolved over the last 2 decades as a result of new directions and changes in policy and practice across the health and developmental sectors. Ontario has a history of inpatient and outpatient specialized dual diagnosis services within psychiatric hospitals, whereas in BC, specialized services have evolved almost exclusively in the community. There are no specialized beds within the Health sector. Strengths and weaknesses of dual diagnosis provisions in each province will be outlined, with specific reference to inpatient services. The presentation will be followed by a lively discussion starting with comments by Lilian Thorpe from Saskatchewan.

C5) Think Mitochondria

Margaret O'Riley, RN, BScN, MA (Adult Ed); Metabolic Nurse Educator, Vancouver General Hospital

Mitochondrial disease is estimated to affect 1 in 8500 British Columbians, yet it remains one of the most unknown diseases to public and health care practitioners alike. It can present in a myriad of ways, affecting virtually every body system, at any time of life. The goal of this presentation is to raise awareness about mitochondrial disease and its presentation, and to discuss the possible implications in the developmentally delayed population, diagnosis, symptom management and genetic implications for family members.

C6) Effective Practices in Behavioural Supports

Panel Moderator: Paula Grant, Director, Quality Assurance, Community Living BC, Vancouver, BC

Trevor Hurwitz; Clinical Professor, Department of Psychiatry, University of British Columbia; Medical Director, BC Neuropsychiatry Program

David Pitonyak, MD, PhD; Director, Imagine, Blacksburg, Virginia

Doug Lee, PhD, ABPP, BCBA; Clinical Director, Behavioural Solutions Inc., Vancouver, BC

This workshop will focus on translating principles into non-restrictive action when working with individuals whose behaviours challenge those who support them. Strategies to reduce or eliminate the use of restraints, seclusion and exclusionary time-out will be reviewed in the context of community capacity and practice including access to and involvement of professional behavioural consultants and health care practitioners. The distinction between a 'behavioural support plan' and a 'safety plan' will be outlined.

Starting with the assumption that difficult behaviours result from some form of unmet needs, the speakers will discuss the essential elements of supporting individuals in avoiding crises as well as during and following a crisis.

Topics to be covered will include practical responses to challenging circumstances; the role of physiological and emotional issues in a person's behaviour; aspects of planning and developing a continuum of positive behavioural support interventions; distinguishing the use of medications to support ongoing health vs. 'chemical' restraints and best use of informal and professional response.

5:00 Networking Wine & Cheese Reception

Everyone is invited to come and enjoy a relaxing time with colleagues.

FRIDAY, SEPTEMBER 26**8:00 Registration & Exhibits Open****8:30 Welcome**

Brian Plain (Conference Co-Chair), Medical Consultant, Health Services for Community Living, BC

Paula Grant, Director, Quality Assurance, Community Living BC, Vancouver, BC

8:45 The National Mental Health Commission—Opportunities for Dual Diagnosis

Susan Morris, Clinical Director, Dual Diagnosis Program Centre for Addiction and Mental Health, Toronto, ON

9:35 Q & A**9:45 Medical Problems and Healthcare Across the Lifespan**

Leslie Rubin MD, President, Institute for the Study of Disadvantage and Disability; Medical Director, TEAM Centers and Developmental Pediatrics Specialists; Co-director, Southeast PEHSU, Emory University Visiting Scholar, Department of Pediatrics Moorehouse School of Medicine, Atlanta Georgia

10:25 Q & A**10:30 Refreshment Break (Exhibits Open)****11:00 CONCURRENT SESSION D
(11:00 – 12:30PM)****D1) Planning Guidelines for Mental Health and Addiction Services for Children, Youth and Adults with Developmental Disability in British Columbia**

Caron Byrne, Consultant Senior Psychiatrist, Developmental Disability Mental Health Team – VIHA; Clinical Assistant Professor, Department of Psychiatry, Faculty of Medicine, The University of British Columbia, Vancouver, BC

Randy James, Director, Developmental Disability Mental Health Services and Children's Assessment Network, Interior Health Authority, Kelowna, BC

In March 2007 the Ministry of Health released the document "Planning Guidelines for Mental Health & Addictions Services for Children Youth & Adults with Developmental Disability in British Columbia". This workshop will review the guidelines, service development in BC and implication for future services. Participants are encouraged to participate in discussion about their experiences with services in BC and elsewhere.

There is wide acknowledgment that people with a developmental disability are susceptible to the full range of psychiatric illnesses. The most commonly occurring disorders—similar to those in the general population—include major depressive disorder; bipolar disorder; anxiety disorders, and schizophrenia. When compared to the general population, individuals with developmental disability have a higher rate of mental health disorders: 39 percent in children and 30 percent in adults (Emerson, 2003; Hudson C., Chan J., 2002; Smiley, 2005). Despite this, many are typically under-diagnosed, misdiagnosed, and underserved. This document describes a client-centred system of care that supports positive long-term mental health outcomes for these individuals. Participants are encouraged to preview the document which is available to the public at <http://www.health.gov.bc.ca/mhd>.

D2) How Individuals with Down Syndrome Understand the World Around Them: New Evidence from Cognitive Neuroscience

Naznin Virji Babul, P.T., PhD; Research Director, Down Syndrome Research Foundation, Burnaby, BC

The ability to understand the intentions of others and to imitate actions is a central component of human social cognition. These abilities are essential for social interactions and are thought to be dependant on a number of different mechanisms including visual and perceptual-motor processing. Many individuals with Down Syndrome have difficulties in this area. I will review recent evidence from behavioural and neuroimaging studies to highlight the specific nature of these difficulties and discuss how intervention must be adapted to facilitate learning in this population.

D3) The Psychiatry of Autism

Vikram Dua, *Child and Adolescent Psychiatrist; Assistant Clinical Professor, University of British Columbia; and Co-Director, Provincial Autism Resource Centre, and BC Autism Assessment Network, Vancouver, BC*

This presentation will outline the psychiatric syndromes frequently present in children and youth with Autism Spectrum Disorder. Accurately identifying these psychiatric syndromes is very relevant to understanding the complex profiles of these children and youth. Appropriate treatment of mental health conditions – which can include both psychotherapy and medications – often results in substantial improvements in functioning and development. A review of the unique symptoms and treatment needs of specific disorders such as ADHD, anxiety, OCD, Tourette's syndrome and mood disorders will be provided.

D4) The Genetic Diagnosis of Intellectual Disabilities: It's Impact on the Medical Care and Functional Needs of an Individual

Elena Lopez, MD, MSc, FRCPC, FCCMG, *Clinical Geneticist, Developmental Pediatric Fellow, Sunny Hill Health Centre For Children, BC Children's Hospital, Vancouver, BC*

The aim of this session is to review the value of a genetic diagnosis in an individual with intellectual disabilities (ID). We will discuss how each specific diagnosis can provide the individual, their families and their health care team with information regarding their anticipatory medical care, developmental, mental health and functional needs.

D5) Gastrointestinal Disorders Among People with Developmental Disabilities: Common Conditions, Signs and Symptoms, Diagnosis and Management

Leslie Rubin MD, *President, Institute for the Study of Disadvantage and Disability; Medical Director, TEAM Centers and Developmental Pediatrics Specialists; Co-director, Southeast PEHSU, Emory University Visiting Scholar; Department of Pediatrics Moorehouse School of Medicine, Atlanta Georgia*

People with Developmental Disabilities are more likely to have Gastrointestinal Disorders. Some of the disorders are specific to the chromosomal or non chromosomal syndromes while others are related to general central nervous system dysfunction that affects smooth muscle organs such as the gastrointestinal tract as well as striated muscle organs of the musculoskeletal system. Also people with developmental disabilities are more likely to have a limited ability to describe their symptoms of pain and discomfort and are more likely to express their feelings in non-specific ways. This presentation will look at the common gastrointestinal disorders that all clinicians should be aware of and to raise awareness of their clinical features, diagnostic approaches and management strategies.

D6) "I'm Not Brain Injured: I'm in Brain Transition!"

Michelle Oucharek-Deo, BFA, BCATR; *Registered Art Therapist, Developmental Disabilities Mental Health, Van-Art Expression*

Brian Deo, BMT, MTA; *Accredited Music Therapist, SD#44 North Vancouver, Van-Art Expression*

Paul Buonassisi, BA; *Musician*

Eleven years after a life altering car accident that resulted in a severe head trauma, Paul Buonassisi fought his way back, defeated the odds, and rekindled his love of music. After 9 years of intense art and music therapy, Paul's life long passion for the piano can be heard again. You will see images of his journey and hear him play his heart out for you in this impassioned and exciting presentation of courage, pure heart and determination.

D7) Implementing Positive Behavioural Supports at the Individual and Agency Level (Repeat)

David Pitonyak, MD, PhD; *Director, Imagine, Blacksburg Virginia*

Dr. David Pitonyak will be available to meet with community agencies to discuss range of specific and general issues related to positive behavioural intervention with a focus on how individual responses are reflected in the culture of the agency, its philosophical commitments and its efforts to continually enhance practice. The Participants are encouraged to come to this session with questions around their specific interest area.

12:30 Lunch (provided)**1:30 Plenary Panel: Myths, Legalities and Realities of Consent and Adult Guardianship**

Caron Byrne, *Consultant Senior Psychiatrist, Developmental Disability Mental Health Team – VIHA; Clinical Assistant Professor, Department of Psychiatry, Faculty of Medicine, The University of British Columbia, Vancouver, BC*

Gerritt W. Clements, *Barrister and Solicitor, Health Law Educator and Consultant, Adjunct Professor, School of Nursing and School of Health Information Sciences, University of Victoria, Victoria, BC*

Kerry Baisley, *Director, Client Relations and Risk Management, Richmond Health Services, Vancouver Coastal Health, Richmond, BC*

People with developmental disability, of all ages, may need support to make health care decisions or may need substitute decision makers, temporarily or on a permanent basis. This may sound straight forward, but on a day to day basis this remains challenging especially for those that do not have active and involved family. A review of current consent guardianship laws in BC and discussion of positives, pitfalls and gaps will be addressed.

3:00 Stretch Break**3:15 Closing Summary**

Susan Morris, *Clinical Director, Dual Diagnosis Program Centre for Addiction and Mental Health, Toronto, ON*

David Pitonyak, MD, PhD; *Director, Imagine, Blacksburg, Virginia*

3:45 Prize Draw**4:00 Adjourn & Evaluation**

COMMITTEE MEMBERS

Dr. Robin Friedlander, Conference Co-Chair

Psychiatrist; Clinical Director, DDD/MHS- Fraser and Vancouver Coastal/Burnaby; Clinical Associate Professor, University of British Columbia; BC Children's Hospital, Neuropsychiatry; Vancouver, BC

Dr. Brian Plain, Conference Co-Chair

Medical Consultant, Health Services for Community Living, Victoria, BC

Dr. Caron Byrne

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Ministry of
Children and Family
Development

Program Design & Layout



Health and Wellbeing in Persons with Intellectual/Developmental Disabilities Children, Youth and Adults

PLEASE WRITE IN BLOCK LETTERS:
One registration form per person. Please photocopy if more are needed.

Ms. Mrs. Miss Mr. Dr.

Last Name First Name Initials

Organization Name/Mailing Address

Mailing Address

City Prov / State Postal Code

Daytime Telephone Number / Local Fax Number

E-Mail

Affiliation/Profession:

Please indicate which Affiliation/Profession best describes you:

- | | |
|--|---|
| <input type="checkbox"/> Administrator | <input type="checkbox"/> Occupational Therapist |
| <input type="checkbox"/> Behaviour Therapist | <input type="checkbox"/> Physical Therapist |
| <input type="checkbox"/> Caregiver | <input type="checkbox"/> Physician |
| <input type="checkbox"/> Case Manager/Planner | <input type="checkbox"/> Psychiatrist |
| <input type="checkbox"/> Counselor | <input type="checkbox"/> Psychologist |
| <input type="checkbox"/> Direct Service Professional | <input type="checkbox"/> Researcher |
| <input type="checkbox"/> Educator | <input type="checkbox"/> Self-Advocate |
| <input type="checkbox"/> Family | <input type="checkbox"/> Social Worker |
| <input type="checkbox"/> Interdisciplinary team | <input type="checkbox"/> Student in Health Sciences |
| <input type="checkbox"/> Mental Health Therapist | <input type="checkbox"/> University/College Program |
| <input type="checkbox"/> Nurse | |
| <input type="checkbox"/> Other: _____ | |

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Method of Payment:

- PO# Cheque
  

Charge by phone/fax:
Local/International: (604) 822-6156
Toll free within Canada/USA: 1-877-328-7744
Register by Fax: (604) 822-4835

Credit Card Number Expiry Date

Name of Cardholder

Please note: A \$25 processing fee will be charged for the re-issue of lost tax receipts. PLEASE SEE GENERAL INFORMATION PAGE FOR CANCELLATION POLICY

Tuition Fees:

The registration fee includes conference material, two lunches, refreshment breaks, reception, and a certificate of attendance. **Please inform us of any dietary requirements.**

EARLY BIRD RATE, BEFORE AUGUST 29TH, 2008
Pre-Conference: Wednesday, Sept. 24th, 2008

- AM Session \$135
PM Session \$135
Full Day \$250

Main Conference: Sept. 25 and 26th, 2008

- Thursday & Friday \$450

Individual Day Rates

- Thursday only \$250
Friday only \$250

RATE AFTER AUGUST 29TH, 2008:

Pre-Conference: Wednesday, Sept. 24th, 2008

- AM Session \$155
PM Session \$155
Full Day \$275

Main Conference: Sept. 25 and 26th, 2008

- Thursday & Friday \$495

Individual Day Rates

- Thursday only \$295
Friday only \$295

STUDENT RATE (limited number available) \$250

Student rates are available for the full program only. Must be paid in full before **August 29th, 2008**. A copy of valid student photo ID must be sent with registration.

Pre-Conference Fee = _____
Main Conference Fee = _____

TOTAL PAYMENT = _____

Registration prior to **August 29th** is strongly recommended to ensure you receive all conference materials. All rates are quoted in \$CAD and the tuition fee includes GST.

Half-Day Workshops:

Please refer to the program for session descriptions.

Please **CIRCLE** which Workshop Sessions you would like to attend. Note: You may only attend **ONE** in the morning and **ONE** in the afternoon.

Morning: AM1 AM2 Afternoon: PM1 PM2

Concurrent Sessions:

Please refer to the program for session descriptions.

You MUST enter your 2 choices or YOU WILL NOT BE REGISTERED

	1ST CHOICE	2ND CHOICE
Example:	_____ A1 _____	_____ A6 _____
Session A:	_____	_____
Session B:	_____	_____
Session C:	_____	_____
Session D:	_____	_____

If your organization will be paying with a purchase order on your behalf:

P.O.# _____ Manager's Tel.#: _____

Name of Manager: _____

Name of Organization: _____

Mailing Address: _____

Mailing Address & Payment by Cheque:

Please make your cheque payable to the University of British Columbia and send to: Interprofessional Continuing Education, The University of British Columbia, Room 105 - 2194 Health Sciences Mall, Vancouver, BC V6T 1Z3