Geriatric Track
(All times are in Eastern time)

Wednesday, June 24, 2020

There are no Geriatric Sessions on Wednesday

Thursday, June 25, 2020

11:00 AM – 4:15 PM 2 Part Session
Geriatric Track | Neuroscience Track
Getting up to Speed to Work Effectively with Senior Adults with Mental Health and Substance Use Disorders
Presented by James J. Messina, Ph.D.
After attending this workshop the attendee will gain and an awareness and knowledge of the needs of seniors and the skills needed in addressing their various needs such as: 1). Clinical Assessment and Treatment Planning; 2). Evidence Based Practices for treating Seniors with Mental Health Disorders; 3). Motivational Interviewing with Seniors; 4). Treating Seniors affected by the Opioid Heroin and Fentanyl Epidemic; 5). Treating Seniors with Alcohol and Substance Use Disorders; 6). Preventing and intervening in Senior’s suicides; 7). Collaborative Integrated Behavioral Health Services for Seniors; 8). Neuroscience behind working with Seniors; 9). Mindfulness Based Stress Reduction use with Seniors; 10). Assisting Seniors dealing with handling loss, grief and death and 11). Addressing the Spiritual Needs of Elderly. PLEASE NOTE: This breakout spans two sessions (11:00pm - 12:00pm and 3:00pm - 4:15pm). You must attend both sessions to receive full 2.25 CE credit.

Friday, June 26, 2020

11:00 AM – 12:00 PM Breakout Session Number 1
Geriatric Track | Specialized Clinical Assessment
How to Become an Effective Clinical Mental Health Counselor in Geriatrics and Create a Successful Specialized Practice
Presented by Greggus Yahr, PhD, DCMHS
What Are the Differences Between Alzheimer's, Depression, Grief, and Normal Aging and does this matter, the simple answer is yes. The mental health of older Americans has been identified as a priority by the Healthy People 2010 objectives (1), the 2005 White House Conference on Aging (2), and the 1999 Surgeon General's report on mental health (3). It is estimated that 20% of people age 55 years or older experience some type of mental health concern. Yet, as noted by the Geriatric Mental Health Foundations (4), the number of mental health providers skilled in geriatrics, even the rudimentary awareness of the differences between dementia's and other mental health issues, is significantly deficient to meet the needs of this rapidly expanding population. The most common conditions among seniors include anxiety, severe cognitive impairment, and mood disorders (i.e. depression or bipolar disorder) . Although the rate of older adults with depressive symptoms tends to increase with age, depression is not automatically a normal part of growing older, and its symptomology is often mistaken for early signs of Alzheimer's or dementia by concerned family members, caregivers, & providers not skilled in "senior care" (5). The fear, the angst, the family distress that results from this too often quick jump into thinking their loved one is in the early stages leading to dementia is easily avoided with better training and more clinicians skilled in these areas. That is purpose of this presentation - to assist the mental health professional in being able to identify the basic differences between dementia(s), depression, and the typical grief and transition reactions by knowing: a) the key differences between them b) learning the relevant questions to ask in order to flesh out those core differences c) have a list of available resources to better serve the client and their families.


1:00 – 2:30PM Extra Session
Geriatric Track | Ethics Track
What Are The Differences Between Alzheimer's, Aging, Depression & Grief
Presented by Greggus Yahr, PhD, DCMHS
(This session coincides with a keynote presentation. This extra session builds on the Breakout #1 session from 11:00am - 12:00pm. It is not essential to attend both.)
There are more older adults in the United States than ever before in history, making this segment one of the fastest-growing portions of the population. The appropriate care of older adults requires health care providers to have a solid understanding of the physiologic
changes that accompany aging. The mental health of older Americans has been identified as a priority by the Healthy People 2010 objectives (1), the 2005 White House Conference on Aging (2), and the 1999 Surgeon General's report on mental health (3). It is estimated that 20% of people age 55 years or older experience some type of mental health concern. Yet, as noted by the Geriatric Mental Health Foundations (4), the number of mental health providers skilled in geriatrics, or even those with only a rudimentary awareness of the differences between dementia’s and other mental health issues, the ethical considerations that often accompany this population, such as how to remain vibrant and yet approach end of life care, is significantly deficient to meet the needs of this rapidly expanding population. Along with the dearth of specialty providers, effectively serving the senior population from the clinical perspective requires different approaches to treatment, an understanding and appreciation of client stresses, that come from waking up each day knowing there’s more life in the rear view mirror than in the road head, than commonly presented in most clinical training programs. The function of this presentation is to outline the necessary educational, clinical, and professional business tools in order to become a skilled senior care clinician, and build a successful specialty practice in this vastly under served arena. The the angst among seniors, and the family distress resulting from the difficulty finding skilled providers, can be avoided by increasing the number of providers possessing the appropriate training, clinical skills, and practice creation acumen in this specialty area. (1) U.S. Department of Health and Human Services (2000). Healthy People 2010. Available at: http://www.health.gov/healthypeople. (2) U.S. Department of Health and Human Services (2006). 2005 White House Conference on Aging. Available at: http://www.whcoa.gov/index.asp. (3) U.S. Department of Health and Human Services (1999). Older Adults and Mental Health. In: Mental Health: A Report of the Surgeon General. Available at: http://www.surgeongeneral.gov/library/mentalhealth/chapter5/sec1.html (4) Geriatric Mental Health Foundation (2008). Depression in late life: not a natural part of aging. Available at: http://www.gmhfonline.org/gmhf/consumer/factsheets/depression_latelife.html (5) American Association of Geriatric Psychiatry (2008). Geriatrics and mental health—the facts. Available at: http://www.aagponline.org/prof/facts_mh.asp