DALHOUSIE UNIVERSITY The Fountain of Health for Optimal Aging: Knowledge Translation Impact of the **"5-Minute CBT" Online Course for Clinicians**

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Background

- The Fountain of Health (FoH) is a Canadian health promotion knowledge translation (KT) initiative using cognitive-behavioural therapy (CBT)-based tools and SMART* goal setting to activate behaviour change in key modifiable areas to promote brain health and well-being: 1) positive thinking, 2) social activity,
- 3) physical activity, 4) mental health, and 5) lifelong learning.¹⁻⁴ A CPD-accredited (18 MainPro+) online "5-minute CBT" course was developed as a KT initiative to \bullet increase clinician competence in using FoH behavioral activation tools to improve clinician wellbeing by activating self-care behaviors for personal benefit and use of FoH tools in practice for patient selfmanagement.
- Clinician feedback on a briefer KT initiative (2020)⁵ and on a previous iteration of the online CBT course (2020) was positive.
- Hypothesis: FoH online CBT-based course will positively impact clinician KT in self-care attitudes and behaviours, clinician professional satisfaction and application into practice. Based on strong results from much briefer KT, personal outcomes (degree and rate of goal attainment, wellbeing impact) from the course will be robust.

Objectives

Primary Objectives:

- Evaluate the feasibility of delivering 5-minute CBT online course.
- Evaluate course impact on clinician self-reported health attitudes and behaviours, goal-setting and professional satisfaction.
- Generate hypotheses for future projects. 3)

Secondary Objective:

Assess clinicians' experience using CME overall course evaluation.

Methods

- Observational quality assurance study.
- Clinicians enrolled in a 5-week accredited online CBT course in Spring 2021 offering KT on self-care using behavioural activation and S.M.A.R.T. goal-setting.
- Course facilitated by CBT experts Drs. Cassidy and Vallis.
- Course content:
 - 5 live Webinars.
- Active participation in Brightspace with completion of weekly assignments for course modules (5). Main outcomes were changes in:
- **Psychological indices** Pre-post- clinician self-report on health attitudes and behaviours, and professional satisfaction.
- **Behavioural indices** Clinician goal-attainment scaling⁶ to assess behaviour change.
- Questionnaire data analysed using paired t-test (continuous variables) and chi-square test (dichotomous variables) on Excel software for primary outcomes of change pre- to post- intervention.

*Specific, Measurable, Achievable, Realistic, Timely

References

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Results

Participants: 55 clinicians enrolled in the course, including 18 (43.9%) physicians, 7 (17.1%) RNs, 4 (9.8%) SW, 4 (9.8%) OT, and 10 (24.4%) other. Course surveys completed by 41 (pre) and 28 (post). Participant ages 20-50 (n=26/40; 65%), 51-70 (n=14/40; 35%). Most identified as female (n=34/41; 82.9%); 7 male (N=41; 17.1%).

SMART Goal Setting & Achievement:

- exceeded their goal.

Pre- and Post- Health & Resilience Questionnaire:

(N=23, p<0.05, CI 0.068, 0.972).

Health Behaviours

- not reach significance.

Professional Satisfaction

significance.

Participant Feedback:

- others.

Conclusions

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Nearly all (n=26/28; 92.3%) respondents reported at least partial goal achievement; of those, a majority (n=19/28; 67.9%) completely reached or

These findings were more robust than previous findings from briefer training (average 80% success rates).

Nearly half (n=13/28; 46.4%) of respondents indicated that working toward a SMART goal moderately or greatly improved well-being.

A vast majority of survey participants (n=24/27; 88.9%) agreed or strongly agreed they would continue to use SMART goal setting after the course.

Self-perceptions of aging score⁷ increased significantly from 2.87/5 to 3.43/5 before and after the course

Average number of hours of sleep per night increased from 6.73 to 6.91 hours (N=22, p=0.0425, CI 0.00678, 0.3569) Other health behaviours assessed trended positively but did

Professional fulfillment⁸ trended positively but did not reach

23 (N=25; 92%) agreed or strongly agreed tools are relevant to practice 24 (N=25; 96%) will continue to use the 5-minute CBT course tools in future and 21 (N=25; 84%) would recommend the course to

5-minute CBT course participants reported a high degree of SMART goal attainment and improved health outlook. The course was well-received and nearly all survey respondents plan to apply course knowledge & tools in practice. Lack of significance in other areas possibly related to attrition in post-survey and small sample size; larger samples are needed to fully assess course impact on reducing burnout and promoting well-being.

In future, we aim to assess the potential linkages between clinician health attitudes and behaviours with those of their patients.⁹

Questionnaire Item Social connectedness Seek mental health help

Interest in learning new things Mental well-being Aging well **Physical activity Healthy eating**

Total Score

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I Domain	n/28 (%)
ing Care of Mental Health	9 (32.1%)
sical Activity	5 (17.9%)
ial Activity	1 (3.6%)
rition/Healthy Eating	2 (7.1%)
itive Thinking/Health Outlook	1 (3.6%)
in Challenge/Learning New ngs	0 (0.0%)
ltiple Domains	10 (35.7%)

	Mean Change (95% CI)	<i>P</i> -value
	0.60 (0.054 <i>,</i> 1.146)	0.033
5	0.12 (-0.315, 0.555)	0.574
	0.44 (-0.007 <i>,</i> 0.887)	0.053
	0.32 (-0.0284 <i>,</i> 0.924)	0.285
	0.56 (-0.136 <i>,</i> 1.256)	0.110
	0.24 (-0.382 <i>,</i> 0.862)	0.434
	0.68 (0.041 <i>,</i> 1.319)	0.038
	3.0 (-0.032, 5.952)	0.052