

- 1) Preferences of nursing and medical students for working with older adults and people with dementia: a systematic review.
- 2) Preferences of newly qualified healthcare professionals for working with people with dementia: a qualitative study (n=27).
- 3) Student nurses' career preferences for working with people with dementia: A longitudinal cohort study (n=840).

**Results and conclusions:** The findings from these studies have contributed to the development of a conceptual framework for understanding career preferences for working with people with dementia in students and newly qualified nurses. Key factors related to dementia preferences include:

- Student characteristics (e.g. gender, attitudes and knowledge) and whether students perceive their attributes are aligned with dementia care;
- Impact of experiences including dementia educational programmes;
- Importance of making a difference to patients' lives;
- Perception of working with people with dementia as a 'different type of care';
- Perceptions of people with dementia including care challenges;
- Career characteristics.

The findings will be discussed in relation to implications for education and policy for how preferences for working with people with dementia may be developed in line with workforce needs.

**"I think the rose-tinted glasses do just sort of slowly come off": a grounded theory study on the development of empathy towards people with dementia in healthcare student education.**

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**Background:** Globally, dementia prevalence is rising. In the UK, over a million people are expected to be impacted by dementia by 2050. One in four hospital beds are occupied by a person with dementia, and it is inevitable that healthcare professionals will work with people with dementia during their career and across a variety of settings. To deliver effective person-centered care, healthcare professionals need to have the capacity and skills to practice with empathy. Greater empathy can lead to better patient relationships, reduced burnout, and enhanced recognition of personhood. However, people with dementia frequently report episodes of care that lack empathetic approaches. To improve the quality of care, high quality dementia education needs to be provided at undergraduate level. To inform the design and delivery of suitable educational resources, this study aimed to understand the major factors that impact the development of empathy towards people with dementia during undergraduate education.

**Methods:** A constructivist, longitudinal grounded theory study (Charmaz, 2014) was conducted. Data were collected in 2019 using semi-structured interviews with undergraduate nursing, physiotherapy, and medical students (n=30). A second interview was completed with students (n=26) eighteen months later. Emergent findings were informed by simultaneous data collection and analysis using constant comparison techniques, and the use of theoretical memo writing.

**Results:** Preliminary findings suggested that the development of empathy towards people with dementia was impacted by social and emotional exposure during undergraduate years. Data centered on four sub-categories. While there were barriers connecting and understanding people with dementia, students experienced conflicting expectations about empathy more widely. Positive and negative cultural experiences during placement led to emotional changes and a shift in ideals.

**Conclusion:** Environments that promote empathetic practice during clinical placement could impact the development of empathy in undergraduate healthcare education more widely. This study highlights a need for educational design that focuses on both the patient and the environment.

## **S16: Post-Acute Covid-19 Cognitive Sequelae in an Aging Population**

### **Symposium Overview**

**Background:** In the years since the beginning of the SARS-CoV-2 pandemic, research has revealed that patients with infection can experience cognitive and other neurological symptoms that do not always remit following infection clearance. Older people tend to be at particularly high risk of decline following infection.

**Research Objective:** This symposium will report studies of post-acute sequelae of Covid-19, with particular attention toward cognitive and other neurological symptoms in an aging population. It will emphasize the importance of methodological rigor in studies going forward, including large and representative samples and comprehensive, longitudinal cognitive assessments.

**Methods:** The symposium will consist of three talks and discussion.

**Results:** The first talk will summarize what is known about cognitive symptoms in post-acute Covid-19 and discuss biological and environmental mechanisms that may account for these symptoms. Importantly it will propose ways in which ongoing and future studies of post-acute cognitive symptoms can enhance scientific rigor and make recommendations for assessment and management of patients with post-acute cognitive sequelae of Covid-19. The second talk will review first- and second-wave findings of cognitive functioning in the context of neurological, pulmonological, and other psychological and daily functioning factors from a longitudinal study of recovered asymptomatic, severe, and never-infected patients. It will reveal small to medium sized effects of Covid-19 disease status in several areas of cognition, in addition to other medical outcomes, with more severe effects found in older adults relative to younger people. The third talk will present data collected in 139 older adults approximately seven months after diagnosis with Covid-19. It reports higher levels of subjective (67.2%) relative to objective (4.7%) cognitive dysfunction and finds that severity of subjective cognitive dysfunction was predicted by psychiatric distress, but not demographic, illness, or objective cognitive functioning.

**Conclusions:** Cognitive decline can occur following infection with Covid-19, and older adults are at particularly increased risk relative to the general population. Objective assessment of cognitive functioning is imperative, and future studies must employ rigorous scientific methodology to elucidate the nature and trajectory of cognitive functioning in post-acute Covid-19. Findings will inform best practices for diagnosing and managing cognitive impairment in clinical populations.

**Background:** Covid-19 infection is associated with increased rates of acute and post-acute cognitive dysfunction that may portend significant consequences for patient functioning and quality of life.

**Research Objective:** This lecture will 1) summarize what is known about cognitive symptoms in post-acute Covid-19; 2) discuss biological and environmental mechanisms that may account for these symptoms; 3) propose ways in which ongoing and future studies of post-acute cognitive symptoms can enhance scientific rigor; and 4) make recommendations for assessment and management of patients with post-acute cognitive sequelae of Covid-19.