

viewing arrangements. Some funeral firms also had essential health and safety policies in place which restricted visiting in a Chapel of Rest.

Methods To help meet the needs of grieving families whose relative died in an acute hospital setting, bereavement, chaplaincy and mortuary teams, together with essential administrative, portering and housekeeping staff implemented a service of COVID-secure supported viewing. Viewing the deceased person was facilitated in accordance with the family preference to be accompanied by the hospital bereavement nurse or by a male or female member of the hospital chaplaincy team of a specific faith, and included the option of prayer with or without family presence. Each family was offered a prayer booklet which was personalised with the name of the deceased. This was presented at the end of the viewing or sent by post.

Results In the period 14th April to 31st July 2020, 560 families were offered the service, and the uptake was 404 (72%). Of the 404 families:

- Just over half (51%, n=205) required accompanied viewings, of which:
 - 128 (62.4%) requested/received prayer/faith-based support.
 - 77 (37.6%) requested/received bereavement nurse support only.
- The majority (81%, n=327) opted for chaplaincy team involvement. This comprised:
 - 128 (39.1%) viewings with prayer.
 - 199 (60.9%) prayers without the family present.
- A total of 840 personalised prayer booklets were produced. Several families requested and received multiple copies.

Conclusion Our supported viewing service serves as an example of the extraordinary caring creativity in the wake of COVID-19. It has been a real privilege to create something very precious and meaningful at such a challenging time in peoples' lives.

Poster 33 | dementia

33 FAMILY CARERS AND PROFESSIONALS' EXPERIENCES OF MANAGING PEOPLE LIVING WITH DEMENTIA – NUTRITION AND HYDRATION NEEDS TOWARDS THE END-OF-LIFE

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Background People living with dementia may experience difficulties with eating and drinking, affecting their nutrition and hydration throughout the dementia trajectory. Such difficulties increase towards the end-of-life causing a strain on family carers. The aim of this study was to understand the needs of family carers and professionals supporting the person with

dementia with nutrition and hydration towards the end-of-life and the strategies used to manage these challenges.

Methods Forty-one semi-structured interviews with family carers (n = 21) and professionals (n = 20) were conducted in London and surrounding areas in 2019–20 to explore their experiences. Interviews were audio-recorded, transcribed verbatim and analysed using thematic analysis methods.

Results Five themes were identified: family carers struggling before seeking help, perceived priorities of care, professionals' support and educational roles, nutrition and hydration challenges, and strategies. Family carers often find it hard to adapt to the changing nutrition and hydration challenges associated with the progression of dementia. Comfort becomes the focus of care instead of nutrition once the approach of the end of life is accepted. Professionals and family carers need to work together to better respond to changing needs and may be able to learn from one another. Physical impairments also impact on initial cognitive difficulties affecting individuals' nutrition and hydration needs towards the end-of-life. Flexibility and creativity are key to adapt to these changing needs towards the end-of-life.

Conclusions We need to establish how and when is best to hold discussions with family carers about changes in nutrition and hydration associated with the progression of dementia. Professional support to understand the transition towards care provision that becomes more focused on ensuring comfort and enjoyment towards the end-of-life may be helpful to family carers. The components of this and its acceptability need to be explored as well as professional capability and capacity.

Posters 34 – 56 | education and training

34 INSPIRING THE FUTURE GENERATION OF ONCOLOGISTS: A UK-WIDE STUDY OF MEDICAL STUDENTS' VIEWS TOWARDS ONCOLOGY

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Background One in 2 people born in the UK after 1960 are expected to require oncology input in their lifetime. However, only 36% of UK medical schools provide dedicated oncology placements and teaching indicating a discordance between public health impact and training. We designed a UK-wide survey to capture medical students' views on current oncology teaching and the potential role of a national undergraduate oncology symposium as an educational, networking and motivational tool.

Methods We undertook a national cross-sectional survey of UK medical students' views in oncology and satisfaction with teaching using pre-designed questionnaires. We also distributed a dedicated survey (pre and post-conference) to compare medical students' motivation towards a career in oncology after attending the national symposium. This study was prospectively approved by QMUL Ethics Committee (Reference number QMREC2348). Statistical analysis included univariate inferential tests on SPSS and GraphPad software.