Regarding memory changes, the majority of the sample did not demonstrate reliable improvement in memory which might have been due to a variety of reasons including the fact that our sample had a high level of education and low level of memory impairment. Notably, however, this was a feasibility study, not an intervention study. Therefore, future directions should focus on randomized controlled trials to determine efficacy.

Categories: Aging Keyword 1: teleneuropsychology Keyword 2: cognitive rehabilitation Keyword 3: aging (normal) Correspondence: Whitney D. Allen & Leah D. Talbert, Brigham Young University, whitneyallen722@gmail.com & leah.d.whitlow@gmail.com

9 The Relationship Between Depressive Mood and Mini Mental Status Examination Scores in Individuals with Heart Failure

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Objective: Heart failure occurs when the heart is unable to support a flow of blood that meets the body's needs, ultimately resulting in decreased oxygenation throughout the body including the brain. Results of previous research suggest that individuals with heart failure exhibit both localized and diffuse neuropsychological deficits. The aims of this study are to metaanalytically examine a) the performance of participants with heart-failure and healthy controls on the Mini Mental State Examination (MMSE), a neuropsychological test of general cognition, and b) the role of depressive mood as a potential moderator of performance on the MMSE in these participants.

Participants and Methods: Two researchers independently searched eight databases for articles that examined the neuropsychological functioning of patients with heart failure.

Inclusion criteria identified studies that had a heart failure group with a comparable control group and reported on neuropsychological assessment for both groups. Studies were excluded if a heart failure group had any other type of major organ failure or if the comparison was between different classes of heart failure rather than between a heart failure group and healthy controls.

Results: A meta-analysis using a randomeffects model revealed a statistically significant and large effect size estimate (g= 0.727, p <.001) CI [.331, 1.123]. The heterogeneity was found to be statistically significant and in the large range, $I^2 = 83.027\%$, tau² = .155, p < .001. A meta-regression analyzing the relationship between depressive mood and MMSE effect size estimates was statistically significant, Q residual = 8.715, df = 3, p = .03.

Conclusions: This study is the first to examine the relationship between depressive mood and general cognitive status (as measured by the MMSE) in participants with heart failure. The strong relationship between cognitive status and heart failure, and the role of depression in explaining a statistically significant portion of the heterogeneity in the relationship seen in primary studies, highlights the importance of accurately assessing depression when studying the effect of heart failure on cognition. Further research needs to examine the impact of depression on quality of life in patients with heart failure as potentially mediated by difficulties in cognition.

Categories: Medical/Neurological Disorders/Other (Adult) Keyword 1: cardiovascular disease Keyword 2: depression Keyword 3: cognitive functioning Correspondence: Melody Pezeshkian, California School of Professional Psychology, mpezeshkian@alliant.edu

10 Delivering Acceptance and Commitment Therapy remotely for children and young people with neurological conditions: experiences of Clinical Psychologists

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Objective: The COVID-19 pandemic has been a catalyst for a shift towards virtual forms of working, and specific support for the provision of virtual therapy (BPS, 2020). Remotely delivered therapy has known potential benefits, such as improving access to people living in underserved areas and for those who struggle to attend face-to-face appointments due to psychosocial, physical or geographical constraints. Those with neurological conditions frequently fall in these groups.

Acceptance and Commitment Therapy (ACT) is an evidence-based psychological intervention which aims to improve the physical and mental health of people living with neurological conditions. However, there are several considerations to translating this into a virtual therapy for this clinical group that have not yet been thoroughly empirically evaluated. Such considerations include: fatigue, cognitive difficulties in the context of virtual communication, adaptations within the therapeutic alliance, and translation of dynamic and interactive therapeutic exercises within a virtual medium.

This study aimed to describe the experiences of Clinical Psychologists delivering ACT remotely in the context of two randomised controlled feasibility and acceptability clinical trials for young people (aged 11 to 24) who have experienced a brain tumour or Tuberous Sclerosis Complex. Exploring therapist perceptions and experiences provides valuable insights into potential barriers and facilitators to engagement with remote ACT delivery. **Participants and Methods:** Clinical Psychologists who were trained to deliver ACT via videoconferencing were invited to take part in virtual interviews. The semi-structured interview guide aimed to draw on their experience of ACT training, supervision, remote delivery, and perceived impact of ACT. Interviews were audio-recorded, transcribed verbatim and analysed using inductive thematic analysis.

Results: Five Clinical Psychologists were interviewed. Interview data were coded into broad themes around the experience of delivering ACT, engaging with remote systems, the wider perceived impact of ACT and the adaptability of ACT. ACT training was reported to be an effective, positive experience and the opportunity for regular peer and group supervision worked to solidify the training and support fidelity to the ACT processes. It was largely acknowledged that while remote delivery of the intervention did create some initial challenges to the therapeutic process, this approach created opportunity for the young people to access psychological support that they might not have been able to engage with due to logistical considerations. Clinical Psychologists also shared that training in and experience of delivering ACT had a positive and meaningful impact on their clinical practice and personal conduct. They also reported that ACT was adaptable to the needs of the young people in the clinical trials and felt appropriate to deliver in this context.

Conclusions: This in-depth, qualitative study demonstrated the clinical promise of remotely delivered ACT. Clinical Psychologists viewed remotely delivered ACT as an appropriate, acceptable and feasible intervention for young people with experience of brain tumour and Tuberous Sclerosis Complex within the context of research, that would be generalisable to everyday clinical practice.

Categories: Medical/Neurological Disorders/Other (Child) Keyword 1: pediatric neuropsychology Keyword 2: brain tumor Keyword 3: tuberous sclerosis Correspondence: Ingram Wright, University Hospitals Bristol and Weston NHS Foundation Trust & School of Psychological Science, University of Bristol, ingram.wright@bristol.ac.uk