

Conclusion: Findings indicated that PWD and care partners valued the individualized support for the cessation process, and highly valued the psychoeducation components and strategies to address the practical and emotional challenges. Additionally, feedback indicated that for PWD who had involuntarily retired from driving, more focused attention to coping with grief and loss was needed before moving on, accepting support, and finding alternative ways to get out and about.

FC18: Can rehabilitation improve functional independence of older people with dementia? A pragmatic randomized controlled trial (RCT) of the Interdisciplinary Home-based Reablement Program (I-HARP)

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Objective: The Interdisciplinary Home-based Reablement Program (I-HARP) integrates evidence-based rehabilitation strategies into a dementia-specific person-centred, time-limited, home-based, interdisciplinary rehabilitation package. I-HARP was a 4-month model of care, incorporated into community aged care services and hospital-based community geriatric services. I-HARP involved: 8-10 individually tailored home visits by occupational therapist and registered nurse; 2-4 optional other allied health sessions; up to A\$1,000 minor home modifications and/or assistive devices; and three individual carer support sessions. The aim of the study was to determine the effectiveness of I-HARP on the health and wellbeing of people living with dementia and their family carers.

Methods: A multi-centre pragmatic parallel-arm randomised controlled trial compared I-HARP to usual care in community-dwelling people with mild to moderate dementia and family carers in Sydney, Australia (2018-22). Assessments of the client's daily activities, mobility and health-related quality of life, caregiver burden and quality of life were conducted at baseline, 4- and 12-month follow-up. Changes from baseline were compared between groups.

Results: Of 260 recruited, 232 (116 dyads of clients and their carers, 58 dyads per group) completed the trial to 4-month follow-up (89% retention). Clients were: aged 60-97 years, 63% female, 57% with mild dementia and 43% with moderate dementia. The I-HARP group had somewhat better mean results for most outcome measures than usual care at both 4 and 12 months, but the only statistically significant difference was a reduction in home environment hazards at 4 months (reduction: 2.29 on Home Safety Self-Assessment Tool, 95% CI: 0.52, 4.08; $p=.01$, effect size [ES] 0.53). Post-hoc sub-group analysis of 66 clients with mild dementia found significantly better functional independence in the intervention group: 11.2 on Disability Assessment for Dementia (95% CI: 3.4, 19.1; $p=.005$; ES 0.69) at 4 months and 13.7 (95% CI: 3.7, 23.7; $p=.007$; ES 0.69) at 12 months.

significantly in people with moderate dementia, so did not result in better outcomes in the group overall. A different type of rehabilitation model or strategies may be required as dementia becomes more severe.

FC19: Remaining engaged through work in young onset dementia: first results of the WorkDEM study

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Background: Focus on the capacity and potential of persons with dementia is needed to enable people and their families to adapt to the changes dementia brings in their lives. For those with young onset dementia (YOD), support to remain in work for as long as possible can preserve one's self-esteem and sense of purpose in life. However, guidance on how to support people with YOD at their workplace is lacking. This study therefore aims to explore experiences, work values, and support needs of people with YOD in the workplace and other stakeholders involved.

Methods: In this qualitative study, semi-structured interviews were held with several target groups namely employees with an established dementia diagnosis, relatives of employees with YOD, employers and co-workers, occupational physicians, human resource professionals, and healthcare professionals involved in dementia care. A topic guide was developed, based on recent literature and consultation of experts, and addressed the following themes: experiences regarding the influence of dementia in the workplace, values such as the importance of work, and support needs in the workplace. Themes were explored in the period before and after diagnosis. The interview data were transcribed and analyzed by means of an inductive content analysis.

Results: In total 33 semi-structured interviews were conducted. Eight themes were derived from the interviews in people with YOD, namely 1) difficulties experienced at work, 2) long diagnostic trajectory and involvement of work-and care professionals, 3) Impact of YOD and coping with YOD, 4) Wish to work, 5) Diagnostic disclosure, 6) The role of the work environment, 7) Phasing out work and future perspectives, and 8) Perception and awareness of YOD. Data of the other target groups is currently being analysed. These results are expected in spring 2023.

Conclusion: This study will result into a better understanding of the possibilities of working with YOD. These insights can be used as a starting point to develop practical tools to support and provide guidance to people with YOD and their (work)environment to prevent loss of work or find meaningful alternatives.

FC20: Prevalence, Incidence, and Clinical Features of Lewy Body Dementia in the South Eastern of Spain

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