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Preparing student radiographers for imaging patients with dementia: An exploratory study of the “what?” and the “how?” in Higher Education strategy

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Abstract

It has been well established across the spectrum of allied healthcare literature that newly qualified practitioners, fresh from university education, often feel unprepared for their early experiences of managing patients with dementia (Baillie, Cox and Merritt, 2012; Baillie, Merritt and Cox, 2012). Moreover, this situation can have unfortunate knock-on effects regarding practitioner confidence. As Miller, Booth and Spacey (2017) observe, however, such literature rarely goes beyond proposing that ‘more education’ is the solution. Rarely unpacked is what content this education should contain at undergraduate level, and how it should be integrated into extant curricula in order to best benefit graduates in their future clinical work. This exploratory study reports findings emergent of N=6 detailed interviews with final year Diagnostic Radiography students, at the time placed in a variety of hospitals in the North West of England. Employing an analytic approach based in the Straussian model of Grounded Theory (Sloane and Miller, 2017), four global issues were identified:

1. Education around the differentiated forms of dementia should be provided before any student encounters a pertinent patient on placement.

2. Direct education about best practice in communicating with patients with dementia is essential at the earliest possible stage.
3. Bringing in dementia carers and other affected parties can help contextualise potential problems in a non-abstract way.
4. The experiences of undergraduates on other healthcare programmes (particularly nursing) can help inform a student's-eye understanding of dementia in radiography.

It is contended that these findings can open up important pedagogical discussions around an issue that has hitherto remained largely unarticulated in contemporary radiography curricula.

Keywords: Dementia, education, radiography, undergraduate

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