

health developed by social work faculty for medical students. Training in behavioral health is needed more than ever during a time of increased isolation and fear during the COVID pandemic. Older adults with untreated behavioral health concerns are a vulnerable population, which can result in negative effects, including emotional distress, reduced physical health, increased mortality, and suicide (IOM, 2012). Healthcare is increasingly complex with a need to focus on the physical, social, and behavioral aspects of daily living, and providers are realizing the importance of interprofessional collaboration. Towards that aim, I created a module for 4th year medical students in mental health and older adults, which is now part of their medical education curriculum. I will present outcomes in: (1) satisfaction; (2) acquired knowledge and skills (post-test); (3) application of knowledge and skills (pre-post competency assessment and comfort around asking about depression); and (4) patient outcomes (frequency of depression screening and number of referrals to social worker). Feedback from the 143 medical students is positive with 95% strongly agreeing or agreeing that this expanded their knowledge and understanding in mental health issues among older adults. At baseline, 17% of medical students were moderately to very comfortable in asking questions on the GDS compared to 42% at post-assessment. After completing the course, almost 25% of medical students made a referral to social work during their rotation. This collaboration resulted in curriculum that is both rigorous and impactful.

#### EXAMINING THE EFFICACY AND RESULTS OF A SHORT-FORM ALZHEIMER'S SURVEY WITH COLLEGE STUDENTS

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College students are important stakeholders in addressing the significant costs of Alzheimer's disease in their future roles as caretakers, health care consumers, taxpayers, and as individuals in the workforce whose careers may interact with and impact those with Alzheimer's and their caregivers. To assess their knowledge of Alzheimer's, a 10-item True/False on-line quiz was presented to 912 students in Introductory Psychology classes. Participants were 61% white, 13% Asian/Asian American, and 10% Latinx, with 14% reporting other racial and ethnic groups, including that of mixed heritage; 59% of the sample self-reported as female. The quiz was counterbalanced such that items appearing in one format (e.g., True) appeared in the other format (e.g., False) across the two forms of the quiz. A significant difference was found for percent correct in Form A (61.4%) versus Form B (59.3%). In order to prompt participants to consider the ways the disease may impact their own lives, additional questions examined students' own experience with Alzheimer's, their interest and willingness to take action towards supporting Alzheimer's research, and their perceptions about how Alzheimer's would impact their lives personally, financially, and in their career pursuits. The research extends the findings

of earlier research on student knowledge of Alzheimer's (e.g., Bailey, 2000; Eshbaugh, 2014) by allowing the results to be broken down by gender, race/ethnicity, and student major. It also expands upon those findings by identifying how college students project the societal effects and costs of Alzheimer's to their own lives and livelihoods.

#### ONLINE TRAINING THAT CHANGES FAMILY CAREGIVER BEHAVIOR AND ATTITUDES

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The Family Caregiver Course (FCC) is an 18-week Validation training to sensitize family carers to the psychosocial needs of their relatives, integrate new behaviors that build relationships and specific verbal and non-verbal techniques to increase communication. Validation Training Institute partnered with the Alzheimer's Association of Colorado in 2019 and 2020 in delivering this course. Due to COVID-19 limitations, the 2020 iteration was completely digital, using principles of online learning. To replace the two-day in-person component of this course, we developed four, 4-hour Zoom sessions that allowed participants to: practice specific Validation techniques, exercise, process and apply what was learned, role play and receive coaching to anchor skills. Important online rules were maintained, such as, offer opportunities for participant engagement every 10 minutes and create a community of inquiry. Pre- and Post-Surveys of the 2019 and 2020 iterations of FCC showed that after taking this course, family carers: reported that they knew what to do when faced with challenging behaviors from their relative; understood that lying or pretending to agree with a disoriented person was not an effective strategy for communication; gained knowledge of the different forms of dementia and that the differences are significant; were clear about the differences between Validation and other methods.

#### PERSON-CENTERED CARE FOR FAMILY CAREGIVERS: EVALUATING AN EDUCATION PROGRAM FOR THE HEALTHCARE WORKFORCE

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Background: While family caregivers [FCGs] provide 75-90% of care for people living in the community, most healthcare providers are not trained to provide person-centered care to FCGs. We followed research recommendations that the healthcare workforce receive competency-based education to identify, assess, support and partner with FCGs. Objective: Mixed methods evaluation healthcare workforce education program. Approach: We began by coining the concept "caregiver-centered care," defining it as a collaborative working relationship between families and healthcare providers aimed at person-centered support for FCGs. From this definition, interdisciplinary stakeholders including FCGs (n=101) co-designed the Foundational Caregiver-Centered Care education. Learning resources

included six competency-aligned educational modules with videos and interactive exercises that encourage reflection. Kirkpatrick Barr's healthcare training evaluation framework underpinned our mixed methods evaluation. We measured participant's reaction to the education (Level 1) and changes in learner's knowledge and confidence to work with FCGs (Level 2). Results: 352 healthcare providers completed the education online (caregivercare.ca). Learners were satisfied with quality of education (Mean 4.75/5; SD=.5) and the education increased their motivation to learn more about caregiver-centered care (Mean 4.75/5; SD .5). Student's paired samples T-test indicates pre-post education changes in knowledge and confidence to work with FCGs were significant [Pre (M=37.8, Sd=7.6) to post (M=47.2, SD=3.5)  $t(125) = -14.39, p < .0005$  (two-tailed)]. Qualitative results derived from open responses mirrored the quantitative results. Conclusion: The Caregiver-Centered Care education provides a foundation for educating healthcare providers working with FCGs to provide care to FCGs to maintain their wellbeing and sustain care.

## Session 4230 (Paper)

### Environment and Aging

#### ADVANCING STATE AND LOCAL HOME MODIFICATION PRACTICE AND POLICY: FINDINGS FROM AGING NETWORK SURVEYS

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Home modification (HM) can promote older adults' functioning as their needs change, reduce fall risks, and support caregivers. A supportive home environment is increasingly important as homes become healthcare delivery sites for home and community-based services (HCBS). HM is funded and administered by disparate agencies, often hindering access to HM services for at-risk older adults who need them the most. The Aging Network (State Units on Aging (SUAs), Area Agencies on Aging (AAAs), and Title VI organizations serving Native American older adults) plays an important but not well understood role in HM. To address this lack of research, the USC Leonard Davis School of Gerontology, ADvancing States, and the National Association of Area Agencies on Aging in cooperation with Scripps Gerontology Center conducted three national surveys, with support from the Administration for Community Living: 1) directors of the 56 SUAs with an 89% response rate; 2) directors of the 618

AAAs with a 79% response rate; and 3) directors of 276 Title VI programs with an 84% response rate. Exemplary practices included HM advocacy through interagency coalitions; state and local plan priority setting; creative HM financing with housing, disability, and health care sectors, including partnerships with Medicaid agencies; and integration of HMs into state and local HCBS, including nursing home transition and caregiver support programs. Findings on the types of HM activities, service delivery barriers, funding sources, collaborations, and targeted populations will inform HM policy and practice for the Aging Network's critical state and local agencies serving low-income older adults.

#### DETROIT NEEDS ASSESSMENT STUDY: A COMMUNITY ACADEMIC PARTNERSHIP WITH THE DETROIT AREA AGENCY ON AGING

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This presentation discusses a comprehensive needs assessment to inform long-term strategic planning for the Detroit Area Agency on Aging. The goal was to provide in-depth input from the older population (age 60+) and key agency stakeholders, using surveys (413 community participants), listening sessions (132 participants), 23 interviews with homebound older adults, and online surveys (94) targeting medical, church, government, academic, media and HSO stakeholders. Findings indicate that many participants were not aware of available community services. For example, one-third (33.3%) had not heard of Medicaid waivers providing services outside of nursing homes, while nearly one in five (22.0%) had not heard about senior employment services. The most common areas of unmet need were for caregiver workshops (16.3%) and diabetes management classes (15.7%). Community services most often noted as 'extremely important' included health and wellness programs (68.8%), services to help access health and supportive services (71%), easy to find service information (67.7%), home care and housekeeping services (66.4%), and caregiver support (63.7%). Stakeholder findings provide insight regarding this lack of awareness. Asked "How familiar do you think the general public is with DAAA?" , 10.8% answered 'very familiar' and 33% 'unfamiliar'. Findings related to an "Age-Friendly City" suggest the importance of access to supportive community services, transportation, safety, housing, and healthcare. Engagement of older adults in needs assessments plays a vital role in Area Agencies on Aging meeting the needs of emerging aging cohorts by developing 'age friendly' strategies to address increasing racial, ethnic, socioeconomic, and cultural diversity.

#### DEVELOPING A SHARED LANGUAGE TO DESCRIBE THE AGE-FRIENDLY ECOSYSTEM

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