

an assistive device, and 167(48.7%) had suffered  $\geq 1$  fall, 43(12.5%). Regarding depression, 117(34.3%) screened positive (PHQ2 score  $\geq 3$ ). These were significantly younger ( $66.7 \pm 9.1$ ) than those who did not ( $70.8 \pm 9.3$ ,  $p \leq 0.01$ ). They were also significantly lower functioning ( $5.37 \pm 2.1$  vs.  $6.38 \pm 2$  Lawton IADL score,  $p \leq 0.01$ ), more dependent ( $77.8 \pm 23.1$  vs.  $86 \pm 19.2$  Barthel ADL score,  $p \leq 0.01$ ). We also observed significant differences in their telephone contact with family (never to once/week) [35(29.9%) vs. 27(13.4%), ( $p \leq 0.01$ )]; in meeting with friends or relatives  $\geq 3$  times a week [12(10.3%) vs. 69(34.3%), ( $p \leq 0.01$ )]; and in likelihood of attending meetings with clubs or other organizations [94(80.3%) vs. 138(68.7%),  $p = 0.040$ ]. Detecting depression is a priority among HNHR Veterans. There is an urgent need to devise viable strategies to offer interventions that incorporate mental health needs and reduce social isolation, potentially addressing mobility, function, and transportation.

## SESSION 1335 (POSTER)

### EDUCATION AND TRAINING TO PREPARE AN INTERDISCIPLINARY WORKFORCE IN GERIATRICS AND GERONTOLOGY

#### TEACHING ABOUT GERONTOLOGY AND AGING THROUGH INTERPROFESSIONAL EDUCATION AND COLLABORATION

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Repeatedly as multidisciplinary professionals we are concerned about the individual patient we serve. Inter-professional collaboration across disciplines such as primary care medical practice, physician assistants, social workers and psychologists does not occur naturally, since educational programs are often taught independently of each other, but these disciplines are required to work collaboratively with each other. The objective was to promote communication across disciplines (Medicine, Social Work, Physician Assistant and Psychology) and help each discipline understand the roles played in promoting mental health and general health for older adults. An educational seminar was conducted using cases and guide questions focused on identifying strategies for care. The teams consisted of Medical Residents, a Social Work student, a Psychology student and a Physician Assistant student. A series of guide questions were provided, and teams were asked to discuss and identify a care plan. Debriefing followed to discuss the outcomes across all teams. Pre-post test results examined variables related to interdisciplinary collaboration. Findings suggest professionals were surprised at what they learned from the other disciplines they were collaborating with. They also learned about community based resources available as well as strategies to promote health outcomes. All participants felt that the opportunity to

collaborate outside of their disciplines would strengthen their impact when working with older adults and their families. In conclusion, a problem based learning approach coupled with the opportunity to collaborate with other disciplines through (IPE) is a venue to improve overall collaboration across professionals and ultimately improve mental health outcomes of consumers.

### IMPROVING GERIATRIC CARE OF INTERPROFESSIONAL PRACTICING PROVIDERS

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Practicing providers often struggle with the care of older adults due to knowledge, skill, and attitude barriers. In an attempt to improve employee engagement in the care of older adults, the Geri-EMPOWER (Empowering Medical Providers and Older adults With strategies to Escape Readmission) program was initiated. In this program, case managers and visiting VA rural geriatric scholars participated in a two days of intensive educational sessions including lectures, shadowing inpatient teams and clinic providers, a dementia simulation learning exercise, and an Observed Structured Clinical Exam (OSCE) with standardized patient encounters. The 15 initial participating trainees came from a variety of medical backgrounds including physicians, nurse practitioners, nurses, social workers, and psychologists. A 10 item knowledge based pretest and posttest was constructed using the learning objectives of the course. Skills of attendees were directly observed during 4 OSCE stations. Attitudes towards older adults were measured before and after the intervention using the Caroline Opinions on Care of Older Adults (COCOA) scale. Geriatric and palliative care knowledge improved with average knowledge test scores improving from 63% to 86% before and after the course. Participants obtained all minimum competencies during their OSCE exam, and rated this session very highly in their course feedback. Attitudes towards older adults were also found to improve with an average COCOA score increase of 9 points before and after the educational sessions. This innovative course based in adult-learning theory demonstrates that employed interprofessional providers can quickly improve knowledge, skills, and attitudes towards older adults.

### FORMAL TRAINING IN TELEHEALTH UNIQUELY PREPARES AN INTERDISCIPLINARY WORKFORCE IN GERIATRICS AND GERONTOLOGY

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Geriatric Research Education and Clinical Centers (GRECCs) are centers of excellence funded by the Veterans Administration for the advancement and integration of research, education and clinical activities in geriatrics and gerontology to improve the health, and health care of, older Veterans. The GRECC Connect program expands access to