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Many Americans avoid end-of-life care planning; only 26% have completed an advance directive (AD). An AD promotes end-of-life care with dignity allowing individuals to make end-of-life treatment and care decisions before they are unable to do so. Previous studies related to ADs are focused on older adults with serious illness or people with functional/mental disability. The objective of this survey is to better understand young adults' knowledge of and attitude toward ADs and their preferences for ADs related to treatment and care options. Methods. Participants include graduate students (n=25) attending a state university in New York State (NYS). Data were collected using two ADs (Five Wishes; Medical Orders for Life-Sustaining Treatment (MOLST)) and one survey questionnaire. Summary statistics and multivariate models will be used to address the study aims. Results. Preliminary results show the average age was 23 years, 72% were female, 48% White, and 44% Black. The majority of young adults hadn't completed an AD; however, their attitude toward ADs was positive; the majority believe it is important to have an AD prepared at their current age; and they believe young adults would willing to fill out ADs. Young adults can make difficult treatment and care decisions when the situation requires it. Conclusion. The study findings can be useful to policy makers, healthcare providers and other stakeholders in promoting populationbased healthcare decision-making. Limitation. Participants were recruited from one university in NYS; thus, the study results may be generalized to a population sharing similar characteristics.

EFFECTIVENESS OF SUPERVISION ON WORK ENGAGEMENT AND TURNOVER INTENTION OF CARE MANAGERS IN JAPAN

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In Japan, care managers engage frail older adults to support their assisted living in long term care insurance system. However, due to the lack of some or all supervision, many care managers face problems such as low work engagement and high turnover rate. This study aims to examine what types of supervision have positive effects on work engagement and turnover intensions of care managers in Japan. The sample of 241 care managers were asked whether they have received individual supervision in the workplace (ISVW), individual supervision in the community (ISVC), group supervision in the workplace (GSVW), or group supervision in the community (GSVC). Independent samples t-tests and one-way ANOVAs were conducted to examine the effectiveness of each types of supervision on work engagement and turnover intension. T-tests showed that only GSVW was significantly related to work engagement (t=-2.06, p<0.05). Whereas, only ISVW had a significant effect on turnover intensions (t=2.37, p<0.05). One-way ANOVAs revealed that 28 care managers receiving GSV had significantly higher

work engagement than 92 care managers who did not receive any SV (F=5.33, p<0.01). 40 care managers receiving both ISV and GSV showed significantly lower turnover intentions than 92 care managers who received neither ISV nor GSV (F=2.84, p<0.05). Since the results have implications for the importance of supervisions to enhance work engagement or to reduce turnover intension of care managers, a larger sample will need to confirm these effects.

EVIDENCE-BASED RECOMMENDATIONS TO INFORM BEST PRACTICES FOR LGBTQ OLDER ADULTS IN LONG-TERM CARE SETTINGS

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Lesbian, gay, bisexual, transgender, and queer (LGBTQ) older adults are more likely to live alone and have less familial support, which disproportionately contributes to a reliance on long-term care facilities as they age. Best-practice guidelines supported by scholarly literature to care for LGBTQ older adults in long-term care settings do not exist. This review synthesizes literature about LGBTQ older adults in long-term care facilities and provides recommendations for best practice guideline development. Four electronic databases were searched in June 2019 for studies conducted between 2000 - 2019 related to caring for LGBTO older adults in long-term care settings. An integrative literature review was completed on the twenty eligible studies. Findings showed that LGBTQ participants fear discrimination in long-term care leading to the invisibility of their identities. They recognize a need for increased staff training and the importance of community networks and facility preferences. Long-term care staff have mixed experiences with inclusive practices and complex views of LGBTQ older adults. They experience training deficits and have a need for more expansive training modalities. The recommendations offered by both LGBTQ participants and long-term care staff are to revise policies and forms as well as provide widespread training and education. LGBTQ participants recommend that their unique identities be recognized within long-term care while long-term care staff recommend leadership involvement to change culture and practice. This review provides evidence-based recommendations to promote equitable healthcare to the LGBTQ older adult population and calls to attention the need for long-term care settings to uniformly follow best-practices.

INTERGENERATIONAL ENGAGEMENT IN RESIDENTIAL SETTINGS: A SCOPING REVIEW OF THE LITERATURE

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Intergenerational engagement provides a rich environment for people of different ages to come together and exchange life stories, skills, and knowledge. Today,