In 2012, the American Health Care Association/National Center for Assisted Living (AHCA/NCAL) launched the Quality Initiative, which was focused on four measurable goals: reduce hospital readmissions; reduce off-label use of antipsychotics; improve staff stability; and improve customer satisfaction. With this initiative, assisted living providers required measures to track their progress. In 2015, to enable benchmarking and comprehensive tracking, these measures were added to LTC Trend Tracker, AHCA/NCAL's online data collection portal. There have been challenges to getting providers to voluntarily submit data, including time, concerns about privacy, understanding the measures, and learning to use LTC Trend Tracker. We have worked consistently with providers to understand challenges of data submission and assist with lessening the burden such as enabling vendors to upload data. To increase participation, we have learned that measures should be easily understood; measures should be specific and important to providers and consumers; and education and training are important.

EVALUATING ENHANCEMENTS TO ADDRESS SAMPLE DIVERSITY, RESPONDENT BURDEN, AND DIFFICULTY REACHING RESPONDENTS

Melissa Hobbs,[1] Melissa Hobbs,[2] Angela Greene,[2] Christine Caffrey,[3] Manisha Sengupta,[3] and Lauren Harris-Kojetin[3], *1. RTI International, RTP, North Carolina, United States, 2. RTI International, Research Triangle Park, North Carolina, United States, 3. NCHS, Hyattsville, Maryland, United States*

Every two years since 2012, the National Study of Long-Term Care Providers includes provider surveys with residential care communities (RCCs) and adult day services centers (ADSCs), via a multi-mode approach using Web, hard-copy questionnaires, and computer-assisted telephone interviewing. In each wave, we struggled to achieve target response rates. First, diversity among providers surveyed—e.g. RCC size, type of ADSC—presents unique challenges. For RCCs, small communities have lower response compared to larger ones. For ADSCs, how they define themselves (medically vs socially oriented) influenced their decision to participate. Second, respondents' perceived burden, particularly the time required to complete the survey, is a recurring concern especially for directors of multiple RCCs and ADSCs. Finally, reaching target respondents—directors, administrators or operators—is problematic. These challenges affect data quality. In this presentation, we share results of our efforts to enhance contacting and interviewing protocols intended to address low participation associated with these challenges.

SESSION 3065 (SYMPOSIUM)

PRESIDENTIAL SYMPOSIUM: HARNESSING SOCIAL NETWORKS TO OPTIMIZE ENVIRONMENTAL CONTEXTS FOR DIVERSE AGING EXPERIENCES

Chair: Philip A. Rozario, *Adelphi University, Garden City, United States*
Co-Chair: Emily Greenfield, *Rutgers University, New Brunswick, New Jersey, United States*
Discussant: Nancy Kusmaul, *University of Maryland, Baltimore County, Baltimore, Maryland, United States*

Social networks provide opportunities for engagement with others and structure the receipt and provision of emotional, instrumental, informational and appraisal support. Indeed scholars in this field have documented the importance of having strong social networks in influencing older adults' well-being and quality of life. The three papers in this symposium draw on the convoy model of social relations and ecological model to examine and better understand the micro, mezzo, macro contexts that shape and influence how older people engage with and benefit from their networks in three areas: low-income senior housing communities, urban areas specifically targeting older Latinos with dementia, and disaster preparedness in micropolitan counties in eastern Iowa. The first paper, a cross-sectional study focusing on social connections in senior housing communities, examines levels of social networks, engagement, support and loneliness and their relationship with well-being outcomes. The second paper, a community-based participatory research project, reports an intervention that seeks to train natural helpers in a predominantly Latino urban neighborhood to identify and refer older Latinos with dementia to bilingual assessment services. The third paper, synthesizing findings from interventions targeting network building at the individual and state levels as well as a community-based network analysis, presents ways to strengthen networks at the mezzo and macro levels as well as environmental contexts that enable better disaster preparedness for community-based older adults. These papers will consider practice, policy and research implications in strengthening social networks and engagement to optimize older adults' well-being in various settings.

SOCIAL CONNECTIONS AND HEALTH AMONG OLDER ADULTS IN SENIOR HOUSING COMMUNITIES

Harry O. Taylor,[1] and Nancy Morrow-Howell[2], *1. Washington University in St. Louis, St. Louis, Missouri, United States, 2. Brown School, Washington University in St. Louis, St. Louis, Missouri, United States*

Our study describes social connections among residents in two low-income senior housing communities and then examines if these connections influence their well-being. Operationalization of social connections included social network size, informal social support, social engagement, and loneliness. The Convoy Model of Social Relations guides our study in identifying objective and subjective social connections and examining how they affect well-being. Most residents maintained active connections: 53% saw five or more family members in the previous month, 52% felt they could rely on their family members and over 60% participated in group and/or Church activities; however, 70% of residents were moderately or severely lonely. Greater loneliness and less informal social support were associated with worse self-rated physical health, worse mental health, and lower life satisfaction. This residential setting offers promise for developing interventions to decrease loneliness and strengthen social connections to improve residents' health and well-being.

TAPPING NATURAL NETWORKS TO ADDRESS DEMENTIA IN A LATINO COMMUNITY

Caroline Gelman,[1] and Nancy Giunta[2], *1. Silberman School of Social Work, New York, United States, 2. Silberman School of Social Work, Hunter College, New York, New York, United States*