

when shipping packages to home addresses while about one in seven (15%) always require a signature. More education is needed to raise awareness of scams that are common during the holidays.

#### **SUBSTANCE USE IS COMMON IN ELDER ABUSE CASES: QUALITATIVE FINDINGS FROM A MULTI-DISCIPLINARY TEAM**

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Elder abuse is mistreatment of an older adult by a caregiver or another person in a position with an expectation of trust. Adversely affecting as many as 10% of community-dwelling older adults in the US, it may include physical abuse, sexual abuse, psychological abuse, financial exploitation and neglect. Mental illness and substance use by caregivers, family members and victims themselves have been described as risk factors for multiple forms of elder abuse in prior cross-sectional analyses but the impact on these cases is poorly understood. To explore this association we conducted a focus group using a semi-structured format involving an inter-disciplinary group of elder abuse professionals that are part of the New York City Elder Abuse Center enhanced multi-disciplinary team (EMDT) in Staten Island, New York. Focus group participants reported that opioid, cocaine, cannabis and alcohol use is common among perpetrators of elder abuse, especially in cases of financial mistreatment, verbal and physical abuse. Other potential consequences included eviction of the older adult victim, co-dependency and involvement of the older adult in the procurement of illicit substances, and substance use by the older adult. Respondents specifically expressed concerns that the opioid epidemic, including rising heroin use, may be changing the frequency and nature of elder abuse, and that case investigations offer an opportunity to facilitate referrals for formal substance use disorder assessment and treatment. Future work includes additional focus groups and quantitative analysis to clarify the intersection between substance use and elder abuse and inform intervention and prevention strategies.

#### **THE EFFICACY OF PALLIATIVE CARE EDUCATION AND TRAINING IN PRIMARY CARE SETTINGS: A SCOPING REVIEW OF THE LITERATURE**

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Primary care providers play an important role in palliative care service provision. A scoping review of the literature was undertaken in an attempt to gain insight into and awareness of palliative education and training needs in primary care settings. Four scientific databases covering the medical and social science fields were searched, alongside Grey literature. A total of 5,109 hits were generated, leading to

2,875 titles for individual review. Of these, 33 articles were included in the final review. Five major themes were identified: (1) communication skills; (2) knowledge of spiritual/psychosocial needs; (3) pain and symptom management; (4) cultural proficiency; and (5) experience working within interdisciplinary teams. Many primary care practitioners felt inadequately trained in palliative care and felt unprepared to provide the necessary care. Specifically, poor communication between healthcare professionals and patients were found to adversely affect the level of palliative care that is provided. Additionally, practical experience in palliative/end-of-life care was cited as one of the most beneficial methods in helping to improve knowledge about and ability to practice in the field. The majority of articles emphasized the need for education and training programs to enhance the quality of palliative/end-of-life care service provision. Palliative care education appeared to have numerous benefits, including enhancing providers' knowledge of and attitudes towards this subject, ability to provide palliative/end-of-life care, and self-perception of preparedness. As the landscape of education needs are constantly changing, this review serves as one of the steps in an ongoing evaluation of palliative care providers' training needs.

#### **THE FEASIBILITY AND ACCEPTABILITY OF TRAINING DIETITIANS TO HAND FEED PEOPLE LIVING WITH DEMENTIA**

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The purpose of this study was to evaluate the feasibility and acceptability of a training program using the interactive Positive Approach to Care<sup>®</sup> dementia care curriculum to Registered Dietitians (RDs). To recruit RDs, the Alabama Dietetic Association emailed its member twice about the training opportunity, and a maximum of 25 potential participants could register online. Of those who registered, 80% (20/25) attended the training, and all attendees agreed to the informed consent. The total cost for the two training sessions, including travel, supplies, and labor hours, was approximately \$800. The primary challenge for the facilitator was accurately following the script due to time constraints. Two weeks after completing the training, participants answered open ended questions, and many shared how they enjoyed the hands-on activities and watching videos of people living with dementia being fed using the Hand-Under-Hand<sup>®</sup> technique. Some participants would have preferred a longer workshop at a location that was more convenient for them. All participants shared how this training may impact their professional practice, such as how it changed the way they approach and communicate with people living with dementia. Since receiving the training, many shared how they have either already started or are interested in sharing the information with interdisciplinary healthcare professionals and/or caregivers. Overall, the training session is considered a feasible, acceptable, and low-cost approach to training RDs on providing hands-on care to people living with dementia. Lengthening the training may improve the replicability of the script in addition to providing opportunities for more hands-on activities.