

DEVELOPMENT AND PSYCHOMETRIC TESTING OF THE PERSON-PLACE FIT MEASURE FOR OLDER ADULTS

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Person-environment fit models are at the core of gerontological theory and practice. The Person-Place Fit Measure for Older Adults (PPFM-OA) was developed to capture key place domains arising from the expansion of aging in place and age-friendly concepts across the continuum of care, increasingly diverse older populations, and the changing meaning of place. The goal of this study was to create a validated measure to assess “fit”. Data from in-depth interviews, focus groups, review of literature and existing comparable measures, and cognitive interviewing created an initial instrument of 90 items. Through the use of a Delphi panel of experts, 60 items were selected and tested in the final measure on Mechanical Turk (MTurk). Results from a sample of persons 60 and older are discussed. Findings from psychometric testing of the PPFM-OA measure are reported. These findings show the final, further-reduced-item version of the Person-Place Fit Measure for Older Adults has good internal consistency and validity. Both this measure and its development process can advance understanding and measurement of place models.

OLDER ADULTS AND THE WORLD CAFÉ APPROACH: CROSS-GENERATIONAL INITIATIVES IN RESEARCH AND EDUCATION

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In Canada, numbers of older adults are considered to be increasing, and by 2036, it is expected that seniors will reach 25% of the total population. Since 2009, the Saskatchewan Population Health and Evaluation Research Unit (SPHERU) has developed an interdisciplinary approach to a community-based research program focused on rural older adults. The world café approach is recognized as collaborative and ideal for encouraging dialogue, sharing knowledge, and developing action plans. Set up like a café, four to six participants at each table engage in a series of three conversational rounds lasting approximately 20 minutes each. At the end of each round, participants move to different tables while the facilitator(s) remain at their original tables. We incorporated a world café approach in three distinct research projects, facilitating a total of five world café events. For each of these events, we also engaged with graduate and undergraduate students who were trained to serve as table facilitators. Participating students represented a variety of disciplines including social work, nursing, and gerontology. Older adults participating in the world café events reported positive experiences and appreciation for the opportunity to discuss new information. Student facilitators identified their participation as a “real life” learning and networking opportunity that enhanced their classroom experiences. Challenges identified included issues related to individual mobility, and issues related to noise and sound quality for those with hearing deficiencies. A community-based approach to research is effective when engaging with this population, and a word café event brings seniors directly into the discussion.

THE RELEASE OF TECHNICAL QUALITY AND PATIENT EXPERIENCE STAR-RATINGS FOR HOME HEALTH AGENCIES AND AGENCY SELECTION

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To facilitate informed Home Health Agency (HHA) selection for the 3.5 million annual Medicare home health (HH) users, CMS introduced technical quality and patient experience summary star-ratings on the Home Health Compare website in July 2015 and January 2016. There is no information about the relationship between the introduction of these two unique sets of star-ratings and HHA selection. We utilized a conditional logit, discrete choice model, which accounts for all HHAs that each patient could have selected (their “choice-set”) based on ZIP codes, to assess this relationship. We selected a random 5% sample (203,966 admissions) of new Medicare Fee-for-Service HH admissions that occurred in the year before, or the year after star-ratings were released. Star-ratings were obtained from the HH Compare website and categorized as low (=4 stars). We found the introduction of HHA star-ratings was associated with an increased likelihood of selecting an HHA with a high technical quality star-rating, and a decreased likelihood of selecting an HHA with a high patient experience star-rating. After controlling for each patient’s choice-set, patients had 19% increased odds (OR 1.19, 95% CI:1.16,2.23) of selecting a high technical quality HHA and a 12% decreased odds (OR 0.88, 95% CI:0.84,0.92) of selecting a high patient experience HHA, compared to low quality HHAs. Findings suggest patients and referring providers may prioritize technical quality over patient experience. Policy-makers should provide resources to enable HH patients to utilize and interpret the two different HHA star-ratings.

SESSION 3145 (SYMPOSIUM)

AGING SUPPORT, HEALTH, AND WELL-BEING OF THE ELDERLY IN CHINA AND JAPAN

Chair: Emma Zang, *Duke University, Durham, North Carolina, United States*

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Countries in East Asia have the largest aging population in the world. The consequences of aging largely depend on whether it is accompanied by a healthy, active, and high-quality life. This symposium aims to gain a better understanding of aging support and determinants of health in the contexts of two major East Asian countries - China and Japan. We will present new research using data from the Fukui Longitudinal Caregiver Study (FLCS) in Japan, and two most important aging surveys in China – the China Health and Retirement Longitudinal Study (CHARLS) and the Chinese Longitudinal Healthy Longevity Survey (CLHLS), addressing critical topics including retirement, family care, social mobility, and mortality. Song and Smith investigate the impact of hukou change on mental health