

LOS \leq 30 days and LOS \geq 99 days were modeled via binary probit. The key independent variable was the ownership status of the agency (FP vs. NFP). Patient level covariates includes demographics (age, gender, race/ethnicity, marital status), comorbidity index, agency characteristics (metropolitan statistical area, hospital-based). Patients in FP agencies were 5.1% ($p < 0.01$) less likely to discharge to community, 15.3% ($p < 0.001$) less likely to have LOS \leq 30 days but 7.5% ($p < 0.001$) more likely to have LOS \geq 99 higher compared to patients from NFP agencies under the PPS. Our results have important implications for clinicians, patients and healthcare professionals to be cognizant about the influence of agency ownership on the delivery of healthcare services in home healthcare sector.

QUALITY IMPROVEMENT EFFORTS IN VA COMMUNITY LIVING CENTERS INCREASED FOLLOWING PUBLIC REPORTING OF PERFORMANCE

Heather Davila,¹ Whitney Mills,² Valerie Clark,³ Christine Hartmann,⁴ David Mohr,⁵ Dan Berlowitz,⁶ Amy Baughman,⁷ and Camilla Pimentel,³ 1. *Iowa City VA Healthcare System; University of Iowa Carver College of Medicine, Iowa City, Iowa, United States*, 2. *Providence VA Medical Center, Providence VAMC/Brown University, Rhode Island, United States*, 3. *VA Bedford Healthcare System, Bedford, Massachusetts, United States*, 4. *VA Bedford Healthcare System, VA Bedford Healthcare System, Massachusetts, United States*, 5. *VA Boston Healthcare System, Boston, Massachusetts, United States*, 6. *UMass-Lowell, UMass-Lowell, Massachusetts, United States*, 7. *Massachusetts General Hospital, Massachusetts General Hospital/Boston, Massachusetts, United States*

In 2018, the US Department of Veterans Affairs (VA) began publicly reporting performance ratings for its 134 Community Living Centers (CLCs; nursing homes) based on health inspections, staffing, and clinical quality measures. CLCs operate within a large, integrated healthcare system with unique financial and market incentives. Although public reporting has led to quality improvements in non-VA nursing homes, we do not know whether CLCs respond to public reporting differently than private sector nursing homes. To address this knowledge gap, we used a comparative case study approach involving 3 purposively selected CLCs with varied (low, medium, high) performance ratings. We conducted semi-structured interviews with personnel ($n=12$) responsible for quality measurement and improvement. Interviews focused on opinions of public reporting, actions taken to improve performance ratings, and motivations for change. Participants indicated public reporting improved transparency and provided an “outside perspective” on their performance. Strategies to improve performance ratings involved 1) data/information, 2) individual roles, and 3) teamwork/communication. All 3 CLCs made changes in these areas, yet respondents in the higher performing CLCs described implementing more strategies immediately after learning their ratings. Respondents in all 3 CLCs described being motivated to deliver good care and achieve public ratings that reflected the care they provided. This meant addressing internal weaknesses that contributed to lower scores for 2 CLCs. Our findings suggest public reporting may improve internal data collection, reporting, and quality improvement

efforts in CLCs. They highlight the potential positive impact of public reporting in prompting quality improvement in nursing homes.

Session 1080 (Paper)

Information Technologies and COVID-19

COVID-19 AND BRAIN HEALTH: GLOBAL COUNCIL ON BRAIN HEALTH RECOMMENDATIONS

Sarah Lock, and Lindsay Chura, *AARP, Washington, District of Columbia, United States*

With growing evidence that the coronavirus directly harms the brain and indirectly harms mental well-being due to social isolation and new, increased stressors, the GCBH recognized the urgent need to inform adults age 50+ about ways to their protect brain health as the pandemic continues. In our latest report, the GCBH describes the known neurological symptoms occurring in the short and long term for adults, providing 10 recommendations to protect brain health and urging research in 11 different areas. Calling for an all-of-society approach to protect the brain health of everyone, the GCBH described the negative effects of COVID-19 on people living with Alzheimer’s disease and other dementias and to the impact of health care inequalities. For example, people with dementia were twice as likely to catch the virus as those without dementia; African Americans with dementia had nearly three times the risk of COVID-19 as Caucasians with dementia. The GCBH also points out that caregivers for those living with dementia have experienced particular stress and provided resources and guidance. The Council spotlights the disproportionate toll of COVID-19 on the vulnerable, including racial and ethnic minorities and those living in low- to middle-income countries. After attending this session, participants will be able to identify the neurological impacts of COVID-19, understand the various ways to mitigate risks to brain health, and learn which areas of research will be critical in the future. These recommendations were developed and put forth by the Global Council on Brain Health Governance Committee and Issue Experts.

EVERYDAY LIFE EXPERIENCES OF SWEDES AGE 70+ DURING THE COVID-19 PANDEMIC

Torbjorn Bildtgaard,¹ and Peter Öberg,² 1. *Stockholms University, Stockholm, Stockholms Lan, Sweden*, 2. *University of Gävle, Gävle, Gavleborgs Lan, Sweden*

As many other countries Sweden has been hit hard by the Corona pandemic, with high numbers of dead in the older population. Since march 16, 2020, the authorities have encouraged people 70+ to voluntarily quarantine and avoid contacts outside the household. How has this affected older people’s everyday lives? This study reports on results from a web-survey on the everyday life experiences of Swedes 70+ carried out between May 28 and July 13, 2020 ($n=1926$). The presentation focuses answers to an open-ended question: “Describe with your own words how your life has been affected by the Corona pandemic”. A qualitative content analysis was used to investigate changes in the everyday lives of the respondents and their appreciations of these