

patients (65+) to examine the relationship between higher qualifications of social service workers and various discharge outcomes. National data (2011-2015) were drawn from the Online Survey Certification and Reporting system, the Certification and Survey Provider Enhanced Reports, and the Minimum Data Set. Findings: Patients in facilities with a greater proportion of more qualified social service staff (qualified social workers vs. paraprofessionals) had better discharge outcomes. Post-acute care patients were more likely to be discharged home within 30 days, compared to being re-hospitalized or remaining in the facility. Conclusion: Policymakers and providers should support efforts to increase the qualifications of social service staff.

#### THE RELATIONSHIP BETWEEN ADVANCE DIRECTIVE COMPLETION AND POTENTIALLY AVOIDABLE HOSPITALIZATIONS

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Advance directive (AD) completion can improve transitions between hospitals and skilled nursing facilities (SNF's). One CMS Innovations Demonstration Project, The Missouri Quality Initiative (MOQI), focused on improving advance directive documentation and use in sixteen SNF's. An analysis was conducted of data collected from annual chart inventories occurring over four years. Using a logistic mixed model, results indicated statistical significance ( $p < 0.001$ ) for increased AD documentation. Greatest gains occurred at project mid-point. The relationship between having an advance directive and occurrence of transfer to a hospital was tested on a sample of 1563 residents with length of stays more than 30 days. Residents who did not have an advance directive were more likely to be transferred. A logistic regression was conducted and the results were statistically significant ( $p < 0.02$ ). The MOQI model and initiatives will be explained followed by a discussion of research methodology, data collection, and analyses. Practice implications will be discussed.

#### ADDRESSING AN UNMET NEED FOR MENTAL HEALTH SUPPORT DURING CARE TRANSITIONS FROM NURSING FACILITIES

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Mental health (MH) disorders are common among skilled nursing facility (SNF) residents and may inhibit rehabilitation goals. Moreover, discharges to the community from SNFs are periods of heightened suicide risk within the

Veterans Health Administration (VHA), suggesting an urgent need for improved continuity of MH care. This paper presents results of medical records reviews indicating a potential gap in MH services at discharge from VHA SNFs. A quality improvement project ("Suicide Awareness for Veterans Exiting Community Living Centers" – SAVE-CLC), designed to address this gap, will also be discussed. Piloted in 3 sites (N = 66) in 2018, SAVE-CLC clinicians administered depression screens by phone to 47 Veterans (71%) after SNF discharge and helped connect Veterans to MH services. 24 Veterans (26%) received a second such call. Patients and caregivers expressed high satisfaction with SAVE-CLC (n = 35, 97%). Implications for quality improvements in SNF care transitions will be discussed.

#### TRANSPORTATION IS THE DRIVER TO VISIT: DOES COMMUNITY CONNECTEDNESS AFFECT DEPRESSION SYMPTOMS OF RESIDENTS?

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A recent study found that lack of transportation access (or transportation disadvantage), together with travel time, is a major barrier for community members to visit their loved ones residing in long-term care nursing homes (Miller, 2018). This transportation disadvantage not only may contribute to decreased visitation but also prohibits family from providing social support to residents, which is imperative for residents to maintain decreased symptoms of depression, a sense of belonging, and highest well-being. A sequential mixed-methodological study was conducted across 11 CMS-certifiable nursing homes in North Central Texas to examine this effect of transportation disadvantage of community members on depressive symptoms of their family in long term care (N=89 dyads). Findings from this study will be presented. Additionally, implications for social work, transportation planning, policymakers, and other key professions will be discussed.

### SESSION 1485 (SYMPOSIUM)

#### MIGC 2019 SYMPOSIUM: STRENGTH IN CREATING DIVERSIFIED SPACES IN EDUCATION AND RESEARCH ON AGING

Chair: Adrienne T. Aiken Morgan, *North Carolina A&T State University, Greensboro, North Carolina, United States*  
Co-Chair: Candace Brown, *Duke University, Durham, North Carolina, United States*

Discussant: Gregory R. Samanez-Larkin, *Duke University, Durham, North Carolina, United States*

Populations of minority older adults will continue to increase at an accelerated pace in the coming decades. As such, it is increasingly important to disseminate minority aging education and research topics in spaces that will prepare gerontology scholars to address the needs of diverse elders. This symposium will highlight efforts to diversify academic spaces by scholars engaged in minority aging education and research. The first presentation describes a service-learning pedagogical approach to teaching minority aging topics to graduate students. It will discuss how a gerontological social work course seeks to offer real-world learning experiences through community partnership. The second presentation