first speaker presents the results of a co-creation approach in developing an intervention aimed at preventing unnecessary care transitions. The second speaker presents an overview of interventions aiming to improve a transition from home to a nursing home, highlighting the clear mismatch between theory and practice. The third speaker presents the impact of the COVID-19 pandemic on transitions into long-term residential care using an ethnographic study in a long-term residential care facility in Switzerland. The final speaker discusses the results of a recent Delphi study on key factors influencing implementing innovations in transitional care. The discussant will relate previous findings on transitional care with a U.S. perspective.

DEVELOPING A REABLEMENT PROGRAM AIMED AT PREVENTING UNNECESSARY CARE TRANSITIONS AFTER GERIATRIC REHABILITATION

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Patients returning home after geriatric rehabilitation may encounter several challenges related to daily functioning, which only manifest after returned home due to the large difference in environment and amount of support provided in both settings. This study aimed to develop an intervention preventing transitional care. A co-creation design was used, including literature research, observations, interviews, and working groups including a variety of stakeholders (n=13), including care professionals, policymakers of the municipality, client representatives, and an expert in the field of geriatric rehabilitation. Results indicated four main causes for transitional care problems: lack of communication between patients and professionals, coordination and continuity of care, patients' limited self-management skills, and insufficient preparation. To solve these problems, an intervention was developed consisting of six intervention components aiming to increase self-management during meaningful daily activities, narrow the gap between the rehabilitation and home setting, and enhance communication and coordination.

A MISMATCH BETWEEN THEORY AND PRACTICE IN THE TRANSITION FROM HOME TO A NURSING HOME: A SCOPING REVIEW

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The transition from home to a nursing home is a complex process, existing of three transition phases (pre-, mid- and post-transition). It is often fragmented, leading to negative outcomes for older persons and informal caregivers. To prevent these negative outcomes, knowledge of existing transitional care interventions is paramount. Therefore, a scoping review was performed, summarizing current interventions aiming to improve transitional care. The review identified 17 studies, describing eight multi- and five single-component interventions. From the multi-component interventions, seven main components were identified: education, relationships/communication, improving emotional well-being, personalized care, continuity of care, support provision, and ad hoc counseling. This review identified a clear mismatch between theory on optimal transitional care and current transitional care interventions. All interventions focused on either a specific phase or target population throughout the transition process. This inhibits a continuous transition process in which a partnership between all stakeholders involved exists.

TRANSITION INTO LTRC DURING THE COVID-19 PANDEMIC: AN ETHNOGRAPHIC CASE STUDY

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COVID-19 has affected long-term residential care (LTRC) disproportionally due to the high-risk population, lack of resources and insufficient preventative measures. Protective measures, including quarantine and strict visitation restrictions have made transitions into LTRC more challenging. Further insight is needed to understand how residents, relatives and staff have experienced this during the COVID-19 pandemic. During four months of fieldwork in a LTRC facility in Switzerland, a rapid ethnography consisting of interviews, observations, informal conversations and document analysis was conducted. This study included a total of 14 residents, 21 healthcare staff from varying departments and 7 relatives of residents. First results indicate that protective measures interfere with a resident's ability to find meaningful activities and interactions within LTRC as well as the possibility to maintain mobility. This and limited family contact following a move into LTRC prevents a smooth transition from home to LTRC and impacts overall resident quality of life.

IMPLEMENTATION OF TRANSITIONAL CARE INNOVATIONS: CONSIDERING THE ORGANIZATIONAL CONTEXT AND PROCESS IS KEY

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Many transitional care innovations (TCI) are implemented to improve long-term care services for older persons during the transition between various care settings. Nevertheless, multiple contextual factors (barriers; facilitators) influence the implementation of TCI at different levels such as but not limited to the organizational environment, outer setting, or innovation's characteristics. By conducting a modified Delphi study involving 29 international experts from 10 countries, eleven influencing factors were prioritized and agreed upon (with ≥ 85% consensus level) as the most important for implementing TCI. These top factors were linked mostly to the organizational setting (e.g. resources, financing) or the implementation process (e.g. engaging key stakeholders). Moreover, the feasibility to address the majority of these factors with implementation strategies was rated as difficult. Our work concludes a compilation of major