living in affordable housing communities. Finally, H. Xu will present the results of an analysis examining the effectiveness of telehealth in reducing readmissions among heart failure patients during the COVID-19 pandemic. While the COVID-19 pandemic has especially impacted older adults and those who care for them, these talks highlight the potential of telehealth services and interventions to provide support and facilitate the continuity of care during times of crisis.

AN INTERDISCIPLINARY HOME-BASED MEDICAL CARE PROGRAM TO REACH HOMEBOUND ADULTS LIVING WITH DEMENTIA

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The COVID pandemic has impacted access to care, particularly for older, homebound persons living with dementia (PwD). At the beginning of the pandemic, our interdisciplinary team introduced a home-based medical care program (HBMC) to address chronically ill and homebound PwD and caregivers' needs to promote aging in place. The purpose of this presentation is to describe PwD and caregiver service use and experiences with Virginia at Home (VaH) HBMC during the pandemic. All PwD participating in VaH program are offered home telehealth access with necessary devices. We will discuss telehealth access and use and dyad-care provider communication across up to 20 dyads to facilitate continuity of care. These data are supplemented by qualitative interviews with dyads presenting needs, preferences, and experiences accessing and using services across the first six months of program launch. We will conclude with a discussion of participant-informed program alterations to facilitate optimal overall care and outcomes.

ADAPTATIONS TO IN-HOME HEALTH CARE DUE TO COVID-19: THE VA'S HOME-BASED PRIMARY CARE PROGRAM

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The COVID-19 pandemic disrupted traditional Home Based Primary Care (HBPC) care processes, including changes to provision of face-to-face care in-home for older adults. Our study describes and explains care delivery changes Department of Veterans Affairs (VA) HBPC programs made in response to the pandemic. We fielded a national survey to all 140 VA HBPC programs, targeting interdisciplinary care teams and HBPC leadership. We structured survey questions using a mixed method approach with both closed and openended questions, applying a qualitative content analysis approach to open-ended responses complemented by analysis of descriptive quantitative data. Preliminary findings highlight the value and consideration of different telehealth modalities when caring for an older, homebound population, as well as creative adaptations HBPC teams made to deliver care during the pandemic. Implications include nascent development of decision-making paradigms beyond the pandemic particularly for appropriate use of telehealth modalities for older homebound adults.

USE OF TELEHEALTH TO SUPPORT FAMILY CAREGIVERS OF HOSPICE PATIENTS DURING THE COVID-19 PANDEMIC

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Family caregivers of hospice patients faced additional challenges in the context of the COVID-19 pandemic where social isolation and loneliness that are often observed among those taking care of a loved one at the end of life, were exacerbated by social distancing rules and workflow changes introduced by hospice agencies. The use of telehealth technologies has the potential to facilitate the delivery of supportive services for family caregivers. We conducted a study examining the use of telehealth for the delivery of a supportive intervention based on problem solving therapy and positive appraisal theory designed specifically to support family caregivers of hospice patients during the COVID-19 pandemic. We recruited 248 caregivers who each participated in three telehealth sessions over a month; caregivers reported higher levels of quality of life and lower levels of anxiety post intervention. Specific recommendations for inclusive telehealth design are discussed based on lessons learned.

LESSONS FROM LIGHTHOUSE: OPERATIONALIZING TECHNOLOGY TO SUPPORT OLDER ADULTS IN AFFORDABLE HOUSING COMMUNITIES

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Lighthouse for Older Adults, an innovative public-private partnership, was developed in response to COVID-19 as a means of advancing telehealth for low-income older adults living in affordable housing communities. Residents of these communities often don't have reliable access to devices, sufficient bandwidth for telehealth, or adequate social services, further complicated by the need for multi-lingual and culturally sensitive programs. This presentation will share program implementation strategies and outcomes, including the essential role telehealth services play in the care and wellbeing of older adults during and beyond COVID-19. This session will review evidence-based components of a telehealth intervention, including digital literacy training and technology support. Key drivers for successful implementation (e.g., peer led training, user input into technology selection) as well as barriers to implementation (e.g., broad band installation, internet service availability/cost, tech support) will be reviewed. Lessons learned through program replication and scaling of Lighthouse telehealth services will be discussed.

TELEHEALTH AND 30-DAY READMISSIONS AMONG HEART FAILURE PATIENTS DURING THE COVID-19 PANDEMIC

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