

THE RELATIONSHIP BETWEEN COGNITION, FUNCTIONAL ABILITIES, AND THE LATENT DEMENTIA PHENOTYPE AMONG CENTENARIANS

Jonathan Sober,¹ John L. Woodard,¹ L. Stephen Miller,² Adam Davey,³ Peter Martin,⁴ and Leonard Poon², 1. *Wayne State University, Detroit, Michigan, United States*, 2. *University of Georgia, Athens, Georgia, United States*, 3. *University of Delaware, Newark, Delaware, United States*, 4. *Iowa State University, Ames, Iowa, United States*

Adequate assessment of cognitive abilities and functional capacity is essential for a diagnosis of dementia. However, cognition is only moderately related to functional status, and this relationship is poorly understood among centenarians, a group of older adults with high risk for dementia. A bifactor structural equation model can be used to delineate the variance attributed to dementia-specific related cognitive changes (i.e., the latent variable delta) and the variance due to general intelligence (i.e., g^2). This study aimed to determine the validity of delta as a marker of cognitive decline among centenarians. It was hypothesized that delta was correlated with cognitive status, functional abilities and, dementia severity. Overall, 244 community dwelling centenarians (Mage = 100.58, 84.8% female) were recruited through the Georgia Centenarian Study, a population-based study of octogenarians and centenarians from northern Georgia. Older adults were administered measures of cognition and a self-report measure of functional abilities. Latent variable scores (i.e., g^2 and delta) were modeled and correlated with standard global cognitive screening measures (i.e., MMSE) and measures of dementia severity. Results indicate that delta was significantly correlated with functional ability and cognitive abilities. Consistent with our hypotheses, delta was also significantly related to dementia severity. Overall, estimates of the latent dementia phenotype, delta, were significantly related to cognitive and functional abilities among centenarians, providing validation of delta as a useful index of dementia severity.

ADULT FOSTER HOME OWNERS' PERSPECTIVES ON REWARDS AND CHALLENGES OF OPERATING AN ADULT FOSTER HOME

Sheryl Elliott,¹ Sarah Dys,² Jaclyn Winfree,³ and Paula Carder⁴, 1. *The Institute on Aging at Portland State University, Portland, Oregon, United States*, 2. *Institute on Aging, Portland, Oregon, United States*, 3. *Portland State University, Portland, Oregon, United States*, 4. *Portland State University Institute on Aging, Portland, Oregon, United States*

Adult foster homes (AFHs) are small, residential settings providing older adults and persons with disabilities an alternative to nursing facilities and larger residential care settings. Some groups, including individuals with Alzheimer's disease and related dementias, are well served by smaller settings. Although AFHs are common throughout the US, research on this setting is scant and dated. This study summarizes four years of qualitative data from Oregon AFH owners' (N=726) responses to open-ended questions about the challenges and rewards of owning and operating an AFH. Content analysis of 924 comments indicate that providing resident care (42%), finding the work meaningful and "a life calling" (21%), developing a family-like connection

with residents (15%), and working at home (8%) were the most commonly reported rewards. The most frequently described challenges included caring for residents with multiple chronic health conditions—including those with difficult behaviors (17%), difficulty hiring and retaining qualified caregivers (15%), low Medicaid reimbursement rates (14%), and adhering to administrative rules (14%). Results highlight AFH providers' personal satisfaction with caring for and establishing connections with residents, and challenges associated with residents' increasingly complex care needs, Medicaid reimbursement rates, and attitudes about state regulations. Although AFHs are licensed by states, they are subject to federal regulations, including the 2014 Centers for Medicare & Medicaid Services home and community-based services ruling. The new regulations, Oregon administrative rules, Medicaid reimbursement rates, and caregiver supply are presented to contextualize AFH owner comments and regulatory considerations.

EXPLORING OLDER ADULTS' EXPERIENCES IN CARE TRANSITIONS

Flora Vieira Zamora,¹ Michelle Silver,¹ Whitney Berta,¹ Michelle Nelson,¹ and Angela Hamilton¹, 1. *University of Toronto, Toronto, Ontario, Canada*

Older adults are Canada's largest growing demographic. Later adulthood is frequently accompanied by increased comorbidities, resulting in more people living with chronic conditions for longer portions of their lives and requiring care across multiple settings. These individuals are also the most susceptible to challenges within health care systems, especially during vulnerable times such as care transitions, which can be challenging due to issues of care integration and coordination. A scoping review was conducted to explore the experiences of older adults transitioning through various levels of care. The main themes found included personal realizations, social connectedness, importance of navigating the system and recommendations for the future. During care transitions, older adults must carefully consider their personal circumstances and limitations and often accept a new baseline, thus, adapting their lives and activities to match possible limitations. Older adults indicate the need for strong social networks, accessible and available services, as well as effective communication, information, education and engagement during care transitions. Issues with care transitions can be exacerbated in smaller communities, where resources and services may be limited. As such, this scoping review is the foundation for an ongoing systematic review which aims to summarize what is known about care transitions for older adults living in small and rural communities. By better understanding the different interacting factors that might influence care transitions for older adults living in small communities, important and sustainable changes can be identified and implemented to ensure that care transitions for older adults are safe, positive and empowering.

EXPECTATIONS, ROLES, AND EXPERIENCES OF GRANDPARENT-CAREGIVERS OF CHILDREN WITH RARE DISEASE

Jasmine Manalel,¹ Betina Hollstein,² and Laura M. Koehly³, 1. *National Institutes of Health, Bethesda, Maryland, United States*, 2. *University of Bremen, Bremen, Germany*,