Administration (HRSA)-funded Geriatric Workforce Enhancement Program (GWEP). GWEP goals include the promotion of Age-Friendly Health Systems by focusing on the 4 Ms: What Matters Most, Medication, Mentation and Mobility. GWEPs commonly operationalize the Mobility component via falls risk screening and prevention programs. Though CBOs are well suited to deliver falls prevention programs, implementing, disseminating and sustaining community-based falls prevention programs in an environment of cost containment, limited funds for community-based services and workforce issues is challenging. Previous Administration for Community Living (ACL) grant funding enabled us to develop the Dartmouth Falls Prevention Training Center (D-TC) using our expertise in training and community-based implementation of evidence-based interventions. The D-TC offers training and implementation support to primary care and CBOs on screening, referring and capacity-building for falls prevention programs. We will discuss challenges and successes implementing the Dartmouth falls prevention model with two additional GWEP grantees, Baystate and the University of Rhode Island. Benefits of leveraging ACL and HRSA funding to achieve synergistic goals to reduce falls in older adults will be explored.

THE DARTMOUTH FALLS PREVENTION TRAINING PROGRAM: PRIMARY CARE AND COMMUNITY-BASED ORGANIZATION COLLABORATION

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Falls are a leading cause of fatal and non-fatal injuries in older adults. Older adult participation in community-based falls prevention programs can significantly reduce falls risk, however, identifying and referring individuals to appropriate programs can be challenging. Through Administration for Community Living (ACL) funding, we have developed a comprehensive Dartmouth Falls Prevention Training Program for healthcare and community based organizations that includes (1) Falls screening in primary care; (2) "Balance Days", a community-based education and balance screening event encompassing falls risk stratification and coaching into programs; (3) Instructor Training for Tai Ji Quan: Moving for Better Balance®, a highly effective falls prevention program; and (4) Implementation Training, a research informed workshop shown to enhance community-based program sustainability through participant retention. We will share strategies for sustainable collaborations between primary care and CBOs to reach at-risk individuals and improve lives and decrease costs associated with falls.

ADOPTING AND ADAPTING A FALLS PREVENTION PROGRAM: LESSONS LEARNED FROM IMPLEMENTING A MODEL FROM A DIFFERENT CONTEXT

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Geriatric Workforce Enhancement Programs (GWEPs) are ideally suited to develop and implement educational programs to transform the geriatric care system. They link academic programs, clinical partners, and community-based organizations to bridge care system gaps to improve the health and social care of older adults. Such a collaboration is especially important in falls prevention, where primary care assessments generate referrals to community programs that enroll older adults to reduce their risk of falling. However, exporting an evidence-based model developed in one context for implementation in another is not without its perils and pitfalls. This paper explores the challenges of applying a model developed elsewhere to the Rhode Island context, including the need to understand how structural differences in academic, primary care, and community-based systems require flexibility, innovation, and persistence in overcoming the networking challenges in these different settings. Recommendations for implementing program models in a variety of settings are explored.

ADAPTING TO CREATE INNOVATIVE VIRTUAL FALLS PREVENTION PROGRAMS FOR AT RISK OLDER ADULTS DURING A GLOBAL PANDEMIC

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Baystate Health's Geriatrics Workforce Enhancement Program (GWEP) postponed implementation of Group Medical Visits focused on falls reduction for older adults in Springfield, Massachusetts due to COVID-19 and quickly shifted efforts to participate in Dartmouth's Falls Prevention Training Program. Long standing GWEP Community Based Organizations (CBOs) were consulted, and all believed that the virtual Tai Ji Quan Moving for Better Balance® (TJQMBB) program would combat social isolation and improve older adults' comfort with technology in addition to reducing falls during the COVID-19 pandemic. Baystate's GWEP was able to reallocate grant dollars to support the purchase of equipment for CBOs to deliver TJQMBB virtually. While many challenges continue to arise, the innovative and collaborative approach between the two GWEPs and Baystate's CBOs leveraging Administration for Community Living falls prevention funding has led to high level engagement and rapid implementation. Dartmouth's model capitalizes on and strengthens existing GWEP partnerships with its CBOs.

Session 3425 (Symposium)

LEVERAGING PROMISING POLICIES TO SUPPORT LONG-TERM CARE RESIDENTS' QUALITY OF LIFE POST-PANDEMIC

Chair: Deanne Taylor
Co-Chair: Janice Keefe
Discussant: Heather Cook

Long-term care (LTC) is highly regulated and often the policy language is complex and in tension with residents' quality of life goals. Prior to COVID-19, LTC policy levers prioritized safety over other quality domains such as privacy, dignity, spirituality, and comfort. During the pandemic, this focus on safety regulations, while important, intensified in ways that often negatively impacted residents' overall quality of life. In this symposium, we share findings from a five- year research project where we conducted a unique and expansive review of regulatory policy across four Canadian