behavioral symptoms of dementia (BSD), with 86 Community Living Center (CLC nursing home) teams between 2013 and 2018. Results of a VHA Quality Enhancement Research Initiative (QUERI) partnered evaluation project are presented, including a multi-site interprofessional network created to collaborate on evaluation of the longitudinal impact of STAR-VA on CLC Veteran- and site-level outcomes, and to determine factors associated with sustained implementation and positive outcomes. The development and validation of a Minimum Data Set quality indicator of behavior symptoms of dementia (BSD) is presented. Characteristics of STAR-VA trained and untrained CLCs are presented, along with facilitators and barriers to sustained program implementation. Findings support the effectiveness of implementation of STAR-VA on decreased use of psychotropic medication. Qualitative outcomes demonstrate importance of having the appropriate staff, positive team relationships, supportive usual routines, and culture as critical for STAR-VA sustainability efforts. Results emphasize the importance of using a valid, routine measure of BSD to provide feedback to CLC teams, and to develop a sustainability intervention focused on addressing reported barriers to program sustainability through interprofessional networks. Both qualitative and quantitative outcomes will inform development and recommendations for an implementation and evaluation strategy for an outcome-driven, tailored intervention to support CLC teams in sustaining STAR-VA and to improve poor-performer and maintain high-performer outcomes. The potential benefit of our findings for other interprofessional behavioral nursing home interventions will be discussed.

PARTNERED EVALUATION OF LONGITUDINAL IMPACT OF STAR-VA: IMPLICATIONS FOR PROGRAM SUSTAINABILITY

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Between 2013 and 2018, 86 Community Living Center (CLC) teams received STAR-VA training and consultation and implemented the intervention. Program evaluation has consistently demonstrated that STAR-VA Veteran training cases experience significantly decreased frequency and severity of target behaviors, symptoms of depression, anxiety, and agitation. VA Central Office leaders responsible for ongoing STAR-VA implementation and evaluation sought to understand the program's systemic impact on important outcomes, if outcomes are maintained, and factors influencing variation in sustained adherence to STAR-VA. This presentation will describe the rationale for and methods used to develop a valid quality improvement metric to assess behavioral

symptoms of dementia, to compare Veteran- and site-level outcomes at trained and untrained CLCs, and to identify factors associated with sustained STAR-VA implementation. This partnered evaluation, combining quantitative and qualitative methodologies, is critical for informing operational strategies for promoting STAR-VA and supporting its sustained implementation in VA CLCs.

AN MDS 3.0 BEHAVIORAL INDICATOR: RELIABILITY AND VALIDITY WHEN MEASURING BEHAVIOR SYMPTOMS OF DEMENTIA IN CLCS

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Persons with dementia frequently demonstrate behavior symptoms of dementia (BSD), associated with poorer outcomes. A measure of BSD was created for routine use in VA Community Living Centers (CLCs). Reliability and validity of Minimum Data Set (MDS 3.0) behavior items was established using exploratory factor analysis and a multitrait, multimethod correlation matrix. 385 CLC residents with BSD were assessed using validated measures of BSD, depression, and anxiety, and team ratings of the frequency and severity of target behaviors identified for intervention. Factor analysis on MDS items closest to baseline resulted in two stable factors. MDS behavior factors related to validated clinical measures in predicted ways at baseline and post-intervention. MDS distress behavior factor sensitivity to change was evaluated by using change score correlations with validated clinical measures. The MDS distress behavior factor can be used routinely, evaluate the impact of intervention effectiveness, and provide quality improvement feedback.

FACILITY CHARACTERISTICS, STAFF INJURY, AND DISRUPTIVE BEHAVIOR REPORTING RATES IN VA COMMUNITY LIVING CENTERS

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