

period approximately 18 months post-implementation. Facilitators included: (a) Adoption - physician champion and administrative support; (b) Implementation - wellness coordinators, preparation and training, and organizational quality measures; (c) Maintenance - feedback from patients, local and national recognition, and impact on fall-related outcomes. Barriers included: (a) Adoption - organizational priorities and complexity of electronic health records; (b) Implementation - resistance to change and competing patient care demands; (c) Maintenance - staff turnover and follow through of referrals.

SESSION 7135 (SYMPOSIUM)

INNOVATIVE INTERVENTIONS: CARING FOR PERSONS WITH ALZHEIMER'S DISEASE AND THEIR CAREGIVERS

Chair: Stacy Andersen

Co-Chair: Allison Gibson

Discussant: Katherine Marx

There are 5.8 million Americans living with Alzheimer's disease and more than 16 million Americans providing unpaid care for people with AD and related dementias. Since a treatment that can slow or stop progression of this disease has yet to be discovered, novel interventions are sorely needed to maintain cognitive function and quality of life among individuals with dementia, improve the health and well-being of caregivers, and provide assistance in caregiving duties. This symposium addresses novel interventions in the dementia care continuum ranging from social and leisure activities for improving cognition to incorporation of emerging technologies to assist with caregiving and provides recommendations and priorities for future studies. The first presentation introduces evidence that participation in an intergenerational choir can improve cognition, social connectedness, and quality of life among people with dementia and their caregivers. The second presentation systematically assesses recent randomized controlled trials of computerized cognitive training (i.e., brain games) aimed at improving cognitive function among individuals with cognitive impairment or dementia. The third presentation examines the evidence that interventions employing artificial intelligence such as robots may improve care for persons with Alzheimer's disease and caregivers' quality of life and provides suggestions for future studies to better assess the efficacy of these interventions. The session concludes with a presentation on a survey method used to build consensus among a panel of experts across academia and industry which identified the emerging technologies that are expected to become the most prevalent in dementia care and provides recommendations for limiting associated risks.

ONE SONG, MANY VOICES: DEMENTIA AND THE POWER OF MUSIC

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Choral singing is a novel approach to reduce dementia stigma and social isolation while offering participants a sense of purpose, joy and social connection. The pervasiveness of

stigma surrounding dementia remains one of the biggest barriers to living life with dignity following a diagnosis (Alzheimer Society of Canada, 2018). This paper examines how a social inclusion model of dementia care involving an intergenerational choir for people living with dementia, their care partners and high school students can reduce stigma and foster social connections. Multiple methodologies are used to investigate the effects of choir participation on cognition, stress levels, social connections, stigma, and quality of life. Results demonstrate the positive impact of choir participation and indicate that this socially inclusive intervention offers an effective, non-pharmacological alternative for older adults living with dementia in the community. Discussion focuses on the importance of instituting meaningful and engaging dementia-friendly activities at the community level.

BRAIN GAMES FOR DEMENTIA: DO THEY HELP?

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Brain Gaming (BG) Interventions have been shown to improve the cognitive function of older adults with cognitive impairments (CIs). However, rigorous evaluation supporting BG effectiveness is needed. Thus, we used meta-analysis to evaluate the effectiveness of BG. Several search databases (i.e. Pubmed) were used to identify relevant randomized controlled trials (RCTs). Cochrane RoB tool evaluated risk of bias. The main outcome was the composite score of cognitive function. Inverse-variance random effects model was used to compare the pooled standardized mean difference (SMD) across studies. A total of 16 RCTs included 909 participants. The RCTs varied in sample size, gaming platform, training prescription, and cognition. The meta-analysis showed no significant effects of BG on overall cognitive function (pooled SMD = 0.08, 95% CI [-0.24 - 0.41], p = 0.61, I² = 77%). However, due to high heterogeneity, we cannot confidently refute that BG is an effective cognitive training approach.

ARTIFICIAL INTELLIGENCE FOR ADRD CAREGIVERS: A SYSTEMATIC LITERATURE REVIEW

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Artificial intelligence (AI) may improve the care for persons with Alzheimer's disease and related dementias (ADRD) and caregivers' quality of life. To examine existing research on this topic, we searched 5 publication databases using keywords related to Alzheimer's, dementia, caregiver, and artificial intelligence, and found 113 relevant results. We then screened the titles, abstracts, and full texts, and excluded studies not including family caregivers, not involving