were assigned to one of six teams representing clinical services for a client with complex clinical needs (medical care, outpatient therapy, dental, nutrition, speech and hearing, leadership). Each student within the team was assigned a specific role (e.g., primary care, policy maker, family member). A critical component of this activity is that each participant adopted the role and perspective of an individual in a different clinical area than their own. In preparation for a live discussion by all participants, each team met to study their assigned clinical roles and to prepare a one-page slide addressing specific questions given only to their team. At the live session, the overall goal was to develop a coherent clinical plan for the client. This is an effective approach for IPE in care of clients across the lifespan.

### USING CANVAS FOR AN INTERPROFESSIONAL VIRTUAL TEAM VISIT

# Ashley Reed, and Jennifer Mendez, Wayne State University, Detroit, Michigan, United States

The is session will demonstrate how to use the Canvas learning management system (LMS) to organize and facilitate interprofessional education experiences (IPE) amongst students and faculty. Emphasis will be placed on the use modules as a way to organize content and facilitate requirements associated with IPE. In addition, the session will include demonstration on how to assign disciplines to sections to aide in faculty abilities to review of student submissions.

#### CURRICULAR APPROACH TO IPE: PREPARING HEALTH PROFESSIONS STUDENTS TO DELIVER TEAM-BASED CARE

Stacy Barnes, and Kelly Horton, Marquette University, Milwaukee, Wisconsin, United States

Interprofessional education (IPE) is essential to prepare students for future healthcare careers and to meet accreditation requirements for health profession schools. After surveying successful IPE programs across the country, Marquette University developed a curricular approach. Over 1,500 students from 10 health professions (Athletic Training, Medical Laboratory Science, Counseling Psychology, Dentistry, Medicine, Nursing, Occupational Therapy, Physical Therapy, Physician Assistant Studies, Speech-Language Pathology) currently participate in a series of four interactive, halfday courses which are aligned with the Interprofessional Education Collaborative (IPEC) core competencies. Courses were moved online in response to the pandemic and are currently delivered using Microsoft Teams. Feedback from learners and faculty is gathered using post-event surveys and has been overwhelmingly positive. Learner outcomes are measured using the Interprofessional Collaborative Competencies Attainment Survey. Overall, this approach has proven to be an effective and efficient model for delivering IPE to large numbers of students.

#### Session 1405 (Symposium)

### GOING VIRTUAL WHEN THE DOORS CLOSE: ADDRESSING GERIATRIC WORKFORCE TRAINING NEEDS DURING A PANDEMIC Chair: Linda Edelman Co-Chair: Gail Towsley

Discussant: Timothy Farrell

The focus of our Geriatric Workforce Enhancement Program (GWEP) is to enhance long-term services and support (LTSS) and primary care healthcare workforce capacity through interprofessional education (IPE) and to increase patient, family, and caregiver engagement. When it became evident that LTSS settings, schools, and communities were going to be adversely impacted by the COVID-19 pandemic for the unforeseeable future, our GWEP quickly pivoted to address new challenges and initiate technology to continue our programs. In this symposium, we describe four programs implemented or revised during the COVID-19 pandemic. We utilized CARES (Coronavirus Aid, Relief and Economic Security) funding to develop a 3-part Project ECHO on utilizing telehealth in LTSS settings. We pivoted quarterly Fireside Chats - community-based educational programs held at partnering LTSS settings for older adults and caregivers - to bi-weekly and now monthly webinars addressing topics relevant to COVID-19 and combatting social isolation. Because students could no longer attend an in-person IPE course introducing them to long-term care, we revised the course to be online with a partnering nursing home participating in an interactive mock care conference. Finally, a 2-semester undergraduate Honors College project-based course introducing students to successful aging utilized virtual activities to expose students to the challenges of hospice care during a pandemic. With these adaptations, as well as activities that advocated for, and supported, LTSS settings and older adults, our GWEP program was able to continue to provide education and support to the setting and individuals most impacted by COVID-19.

# VIRTUAL TRANSITIONS AND OPPORTUNITIES IN LTSS EDUCATION POST-PANDEMIC

Gail Towsley,<sup>1</sup> Jacqueline Telonidis,<sup>2</sup> Cherie Brunker,<sup>3</sup> and Linda Edelman,<sup>1</sup> 1. University of Utah College of Nursing, Salt Lake City, Utah, United States, 2. University of Utah College of Nursing, Salt lake City, Utah, United States, 3. University of Utah School of medicine, Salt Lake City, Utah, United States

The Utah Geriatric Education Consortium Learning Community transitioned to the Age-Friendly Long-Term Services and Support (LTSS) ECHO with support from Comagine Health, our local QIN-QIO. ECHO sessions utilize case-based learning and mentorship to help community providers gain the expertise required to provide needed care and/or services to older adults. Since March 2020, and in response to the needs of our partners, four ECHO sessions (average of 47 attendees per session) have focused on COVID-19 training including COVID-19 briefings, infection prevention, positive thinking and coping with stress. With our partners, we also co-created a 3-part LTSS telehealth ECHO series to illustrate how telehealth can address the unique challenges of COVID-19. We will discuss 1) how we met the educational needs of our partners during a health crisis 2) the process we took to develop the LTSS telehealth ECHO series, and 3) opportunities for continued virtual education application.