

Policies and practices have increasingly focused on person-centered care (PCC) to improve quality of life for long-term care residents and staff. Adequate staffing has been a consistent barrier to implementing and sustaining PCC practices. The purpose of this paper is to explore the association between job satisfaction and PCC practices. This research was conducted in a stratified random sample of 33 Oregon nursing homes which were representative in terms of quality, profit/nonprofit ownership, and urban/rural location. Data were collected from 415 staff who completed the staff assessment of person-directed care, direct care worker job satisfaction scale, turnover intention, and organizational belongingness. Consistent with other research, job satisfaction is significantly and negatively correlated with turnover intention ($r=-.66$) and positively associated with belongingness ($r=.66$). It is also significantly correlated with scales related to five PCC practices: personhood, autonomy, knowing the person, individualized care, and relationships. Regression analyses examined how these five aspects of PCC practices were associated with 1) job satisfaction and 2) number of deficiencies. Perceptions of practices to support autonomy, personhood, and relationships were associated with higher ratings of job satisfaction among staff. In general, those reporting these practices were in place at least half of the time or with at least half of the residents, showed significantly greater positive associations with job satisfaction ($p<.05$). Only lower staff reports of autonomy practices were associated with higher deficiencies ($p<.05$). Findings from this research suggest that supporting PCC practices benefit staff through increased job satisfaction and potentially reduced turnover.

EVACUATING OR SHELTERING IN PLACE DURING A DISASTER: HOW ASSISTED LIVING ADMINISTRATORS MAKE THE DECISION

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The decision to evacuate or shelter in place during a natural disaster such as a hurricane is complicated and poses risks to long-term care residents. While research has documented the difficulty of the evacuation decision for nursing home administrators, little is known about how assisted living residence (ALR) administrators make this decision. This is a concern given the physical and cognitive impairment level of many ALR residents, the increasing number of ALRs in the U.S., and the frequency of natural disasters. The purpose of this paper was to explore the factors that influenced whether assisted living administrators evacuated their ALRs for Hurricane Irma, a large hurricane that made landfall on Florida's Southwest coast in September, 2017. This qualitative study used semi-structured interviews and focus groups with ALR owners or administrative staff (N=60) with questions including how they prepared for Hurricane Irma, their experiences during the hurricane, including whether they evacuated or sheltered in place, and lessons learned.

The sample includes small (< 25 beds) and large ALRs in the multiple Florida counties affected by the hurricane. A content analysis approach was used. Atlas.ti version 7 was used for initial and axial coding. Prevalent themes included "emergency management planning", "logistics", "pressure", "storm characteristics," and "staffing". The results of this study have implications for long-term care policy and training, potentially leading to changes in how ALR leaders prepare for and respond to disasters to improve the safety of residents.

ORGANIZATION OF WORK AND DECISION-MAKING OF PROFESSIONALS WORKING IN NURSING HOMES IN CATALONIA (SPAIN)

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The long term care environment demands specific requirements of the staff, namely that they provide a holistic approach to care. Providing holistic care leads to complex decision-making processes which go beyond just finding a solution to a specific health problem. It requires that staff are able to respond to the diverse needs expressed by the residents and which, in many cases, are only identified through the relationship that professionals have with them. However, this relationship that staff establishes with the resident often leads to burden for these professionals. The researchers sought to identify characteristics of the nursing homes that lead to positive outcomes for staff. The study involves collecting questionnaires (n=132) and conducting semi structured interviews (n=35) in 9 Catalan nursing homes with number of staff, utilizing a quantitative questionnaire and semi-structured interviews. Practices in organisations that led to positive outcomes for staff included coordinated care that includes processes of support for staff, effective communication and decision making practices, clear responsibilities for staff, and utilization of care plans. Effective long term care practices can favour both patient care and professional practice in residences for elderly.

A CASE STUDY: THE INVISIBLE LABOR OF CULTURALLY SENSITIVE CARE

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Nursing homes are increasingly becoming more racially/ethnically diverse yet racial disparities in resident's quality of life and quality of care continue to persist. One reason for these disparities is lack of culturally-sensitive care and racial/ethnic similarity between residents and staff. This study examines a case of a high proportion minority nursing home with racially/ethnically diverse staff to understand how shared culture among direct care staff and residents may influence care delivery. We used three months of