

music activities, known as occupations. The researchers' aim was to examine how music occupation interventions lower risks of occupational deprivation (i.e., prolonged restriction from participation in necessary or meaningful activities) that could occur due to the COVID-19 pandemic. Eight adults participated who were 65 years or older, lived in the community, and enjoyed music. The researchers used narrative qualitative methodology to analyze pre- and post-intervention focus group data. The participants completed seven intervention sessions designed to increase and sustain music engagement outside of the sessions. The pre-intervention focus group data resulted in an occupational pattern analysis and a single occupational narrative. Triangulation of data post-intervention included the two focus groups and their pattern analyses and narratives, field notes from each intervention session, and documents produced through group completion. The final analysis produced an occupational change pattern analysis and narrative. The focus of the change narrative was on the participant's management or prevention of occupational deprivation. The researchers identified several common themes involving change in routines and habits to include regular engagement in meaningful music activities, skills for using occupational participation as an important method of coping with COVID-19, and developing new technological skills to access music to replace in-person participation of attending live concerts and shows when deemed unsafe because of potential for virus transmission.

Session 4335 (Paper)

Aging and Technology Interventions II

ACTIVITY SPACE AND FUNCTIONAL OUTCOMES IN FRAIL OLDER PERSONS USING GPS ANALYSIS

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With increasing age, walking becomes a main functional ability to participate in activities of daily living and supports independence and mobility. Frailty in older, multimorbid patients has a negative impact on physical activity and may reduce the personal activity space (AS). In this pilot study, GPS data were used to identify walking tracks to define individual AS and to compare functional performance in frail older persons. GPS data of 20 community-dwelling adults (84.5(±5.2) years, 85% women, mean frailty phenotype 1.9 (70% ≥2) points) were analyzed using a customized software to assess individual AS over a ten-months period. A geriatric home assessment including Short Physical Performance Battery (SPPB), gait speed (GS) and Timed-up-and-Go (TUG) was conducted monthly. GPS analysis revealed three different walking types presenting AS similarities: Type A walkers prefer smaller short walks nearby the home while Type B can be characterized by taking larger regular walks. Type C presents the widest AS using different transportation modes, but only a moderate number of walks. Mean group difference

in functional performance of Type A walkers showed significantly reduced GS (0.45(±0.1)m/s), TUG (23.4s(±4.9)) and SPPB scores (3.8(±0.8) points; $p < 0.05$) compared to Type C (0.82(±0.1)m/s (GS); 13.2(±1.4)s (TUG); 7.0(±1.3) points (SPPB)). Functional performance of Type B walkers (0.63(±0.2)m/s (GS); 17.1(±4.4)s (TUG); 6.5(±2.4)points (SPPB)) revealed significantly higher SPPB scores compared to Type A ($p < 0.05$). Walks and individual AS can be mapped via GPS under everyday conditions. High heterogeneity within frail older people was observed. Persons with lower functional performance showed a reduced AS and physical activity.

DEVELOPING, TESTING, AND IMPLEMENTING A FALLS PREVENTION AND HEALTHY AGING APP (KEEP-ON-KEEP-UP) FOR OLDER ADULTS

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Falls are a common and costly concern for older adults. Digital technologies can offer new, inexpensive approaches to increase access and engagement with falls prevention programmes. Keep-On-Keep-Up is a personalised, falls prevention App with strength and balance exercises plus health literacy games. This study reports on the user-centred design, usability testing and implementation of the KOKU App. Older adults aged 55 years and older in the UK were invited to take part in the study. Data collection included focus groups; baseline and 6 week questionnaires and assessments; semi-structured interviews and one focus group with falls prevention therapists to explore App usability. Thirty older adults were invited to use KOKU unsupervised, 3 times a week for 6 weeks. Data were analysed using thematic content analysis. Focus groups (n=11) with 66 older users and 11 therapists informed development. Thirty older adults (mean age = 75) were recruited for the in-depth testing. Mean SUS score was 71 indicating high usability. Qualitative themes included: ease of use (app usability; iPad properties; exercise presentation), usefulness (physical/psychological benefits; falls education), attitude towards the App and intention to use (technological barriers; flexibility of use; exercise class versus App). Therapists (n=6) viewed the KOKU platform positively and suggested extensions for further progression. No adverse events were reported during the study. This research demonstrates that KOKU is an acceptable and easy to use falls prevention intervention that facilitates older adults' ability to access falls prevention training at a time, and in a location, that suits them.

FEASIBILITY AND ACCEPTABILITY OF AN MHEALTH ACP TOOL IN PRIMARY CARE

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With only 7% of Medicare beneficiaries having completed Advance Care Planning with their physicians, engagement in Advance Care Planning in the clinical setting has been historically low. This study investigated the feasibility of introducing the Koda Health Advance Care Planning software platform in