

chair stands are two measures of frailty. We face a number of clinical implementation challenges: (1) We lack normative data for U.S. older adults and (2) The clinical relevance of change in frailty measures is unclear. The National Social Life, Health and Aging Project dataset allows an examination of the distribution of 3-meter gait and 5-repeated chair stands times as well as 5-year change in these measures in a nationally-representative, community-dwelling older adult sample. Dr. Huisinigh-Scheetz will describe demographic predictors of change in these measures as well as determine whether baseline plus 5-year change in these measures predicts loss of independence in activities of daily living (ADLs).

## SESSION 4075 (SYMPOSIUM)

### PARTNERING IN GERIATRICS WORKFORCE ENHANCEMENT PROGRAMS: MODELS TO ENHANCE COLLABORATION AND ENGAGEMENT

Chair: Leland Waters, *Virginia Commonwealth University, Richmond, Virginia, United States*

Discussant: Nina Tumosa, *Health Resources and Services Administration, Rockville, Maryland, United States*

To achieve their healthcare system transformational goals to improve care for older adults, Geriatrics Workforce Enhancement Programs (GWEPs) facilitate the building of strong relationships among academia, community-based organizations, and primary care networks. Each GWEP develops strategies to formalize collaborations and build sustainable networks to meet program goals while addressing partner needs. Unique models from four GWEPs addressing stakeholder engagement are described, and factors facilitating collaboration are explored. One GWEP achieves mutual goals by collaborating with statewide coalitions that have a history of successful partnerships. Another GWEP achieves programmatic goals through an “all-in” interprofessional model called the Plenary. A third GWEP has capitalized on a shared complex outcome that requires multi-level stakeholder engagement to support aging in place. The final GWEP has coopted the resource exchange model as a conceptual foundation in order to enhance collaboration. Themes emerging from these four models include: (1) the enhancement of interpersonal relationships through communication, trust, and engagement; (2) the importance of commitment to the overall partnership itself; (3) the critical component of resource sharing and synergy across projects; and (4) strategies for sustainability in the face of changes and challenges across healthcare systems. Given the complex nature of person-centered interventions in geriatrics, it truly takes a village to develop and provide services for a heterogeneous, targeted population. This symposium emphasizes key elements of the structures and processes of these transformational GWEP villages.

### FACTORS FACILITATING COLLABORATION AND ENGAGEMENT: BUILDING AND SUSTAINING STATEWIDE COALITIONS

Cristine B. Henage,<sup>1</sup> Ellen C. Schneider,<sup>2</sup> Ellen Roberts,<sup>2</sup> Vicki Tilley,<sup>3</sup> and Jan Busby-Whitehead<sup>3</sup>, 1. *University of North Carolina, Chapel Hill, North Carolina, United States*, 2. *The University of North Carolina at Chapel Hill, Chapel*

*Hill, North Carolina, United States*, 3. *The University of North Carolina at Chapel Hill School of Medicine, Chapel Hill, North Carolina, United States*

Sustaining collaboration across multiple community-based organizations (CBOs) creates synergies and economies of scale to support age-friendly communities beyond the provision of direct services any single CBO can achieve. The Carolina Geriatrics Workforce Enhancement Program (CGWEP) created and sustained multiple statewide coalitions focused on geriatrics syndromes. More than 290 CBOs, including Area Health Education Centers, social services programs and nongovernmental organizations, meet quarterly to form linkages, promote education and build infrastructure to support rural and underserved older adults. Shared governance with pooled resources has been achieved because of a long history of partnership, mutually beneficial relationships, flexibility, and frequent communication. The strength of the partnership is evidenced by continued growth in number of CBOs, number of sponsored events, and number of referrals to CBOs. Two coalitions, focused on falls prevention and mental health respectively, have been adopted by partners and sustained beyond grant funding.

### STAKEHOLDER ENGAGEMENT IN THE PLENARY AS A MODEL FOR PROFESSIONAL-COMMUNITY PARTNERSHIPS

Edward F. Ansello,<sup>1</sup> Sarah A. Marrs,<sup>1</sup> and Leland H. Waters<sup>1</sup>, 1. *Virginia Commonwealth University, Richmond, Virginia, United States*

The Virginia Geriatric Education Center (VGEC), a consortium of four Virginia universities, directs all initiatives in its Geriatrics Workforce Enhancement Program (GWEP) through an “all-in” interprofessional model called the Plenary. Both the structure and the process of the Plenary can serve as a model for building and maintaining successful, interdisciplinary, and intersystem partnerships that work toward shared goals. In addition to faculty and staff from the four institutions who represent nine health professions, representatives from CBOs also serve on the Plenary and attend in-person meetings twice monthly to engage in a continuous, democratic, and hands-on PDSA (Plan-Do-Study-Act) cycle to improve GWEP programs. This allows our community partners to be engaged in all components of identifying and addressing unmet needs in current and emerging interprofessional gerontology and geriatrics training, increasing CBO’s stake in the overall success of the GWEP beyond their specific involvement. Team science principles guide program improvement and growth.

### CUSTOMIZING STAKEHOLDER ENGAGEMENT TO SUPPORT AGING IN PLACE

Elyse Perweiler,<sup>1</sup> Jennifer DeGennaro,<sup>2</sup> Sherry Pomerantz,<sup>2</sup> Lisa Bodenheimer,<sup>2</sup> Marilyn Mock,<sup>3</sup> and Margaret Avallone<sup>4</sup>, 1. *Rowan School of Osteopathic Medicine, Stratford, New Jersey, United States*, 2. *Rowan University School of Osteopathic Medicine, Stratford, New Jersey, United States*, 3. *Fair Share Housing Inc., Northgate II, Camden, New Jersey, United States*, 4. *Rutgers University School of Nursing-Camden, Camden, New Jersey, United States*