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This study used a qualitative observational design to identify the team-, clinic-, and system-level resources necessary for effective geriatric medical home (i.e., GeriPACT) implementation and to differentiate the needs of GeriPACT compared to traditional PACT. Analysis of 80 interviews conducted with team members from 8 geographically dispersed GeriPACTs identified needs that may be unrecognized by primary care leadership, including: clinical space to accommodate caregivers and patients with impaired visual, mobility, cognitive, or hearing acuity; greater utilization of caregiver support programs and social workers to facilitate aging-in-place; age-sensitive clinical reminders; team member continuity and direct phone lines to reduce patient anxiety; and longer standard appointment lengths to reflect clinical complexity. In contrast to traditional primary care teams, GeriPACTs are not simply “PACTs for older adults”: GeriPACT members articulate population-specific resources that require support from facility leadership to accommodate the complex, age- clinical and social resources needed to support aging-in-place.

CLINICIAN-PERCEIVED CHALLENGES OF OSTEOPOROSIS CARE IN AN INTEGRATED HEALTHCARE DELIVERY SYSTEM

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The burden of osteoporosis, both on the health care system and individuals, is high. Despite this, a high percentage of patients with or at risk of osteoporosis are not identified, screened and treated appropriately. Delivering osteoporosis care to at-risk patients is complicated by a fractured health care delivery system. In this presentation, we present data from interviews with VA clinicians in order to identify challenges of osteoporosis care within the VA health care system. While clinicians reported initiating a range of bone health care delivery interventions, they identified challenges that inhibited long-term sustainability: 1) low prioritization of bone health among national and facility leadership; 2) fragmentation of clinical responsibility and care delivery; and 3) barriers endemic to the osteoporosis care delivery system. Our results indicate that, even within an integrated health care delivery system, significant coordination challenges exist.

SPREAD AND SUSTAINMENT OF QUALITY IMPROVEMENTS IN VA RURAL PRIMARY CARE CLINICS

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The VA has invested in developing the skills of its primary care workforce through the longitudinal Geriatric Scholars Program. Now in its 11th year, the program has increased career satisfaction and job retention, standardized provider behaviors, improved clinical decision-making and reduced dispensing of potentially inappropriate medications. The program consists of: intensive coursework in geriatrics; workshop in quality improvement (QI); and initiation of a micro QI projects in the Scholar’s clinic. Electives enable learners to tailor the program to self-identified gaps in knowledge, skills and competencies. This presentation focuses on the sustainment and spread of these QI projects based on a recent survey of Scholars. Differences between rural and urban QI projects are compared. Commonality among rural QI projects is explored based on topic, team composition, and the types of efficiencies gained in clinical and/or organizational processes to improve care for older Veterans living in rural areas.

SESSION 3490 (SYMPOSIUM)

THE APPLICATION OF MASS OBSERVATION DATA IN SOCIAL RESEARCH

Chair: Paul Kingston, *University of Chester, Chester, United Kingdom*

Responding to the opportunities and challenges of an ageing world the University of Chester established the Centre for Ageing, Mental Health and Veterans’ Studies in 2013 to provide research, consultancy and education, with the aim of promoting innovation in health and social care services for older people. This symposium brings together researchers from a wide range of disciplines and career stages, to explore the utility of Mass observation data in social research in the field of gerontology. The Mass Observation Project, established in 1937, documents the lives of ordinary people living in the UK, and explores a wide range of social issues. The symposium comprises four separate papers. The Methodological Relevance of Mass Observation Data: This preliminary overview will outline the mass observation archive, highlighting challenges and issues encountered utilising the data produced in social research. Personal Narratives of Ageing: This paper presents personal narratives reflecting on the ageing process, and growing older in the UK. The Health Impact of Scams: This presentation will offer new and alternate insights into ‘scams’ and the health effects of fraud on older people, using data from the mass observation directive commissioned by the centre. Perceptions of Dementia: This paper presents a perspective on the public knowledge and understanding about dementia not previously considered, where