agree that PASRR legislation was well intentioned, but also expressed concern regarding the completion of PASRR as an issue of compliance versus meaningful assessment. More work is needed to determine how best to develop and support the care needs of people with SMI, while being mindful of the original goals of deinstitutionalization that prompted OBRA passage. In order to assess the impact of the PASRR program on quality of care and mental health outcomes, further research should take an evaluative approach through meaningful use of PASRR data.

## PREVENTABLE? LONG-TERM CARE POLICY SUCCESSES AND FAILURES DURING COVID-19 PANDEMIC: A SCOPING LITERATURE REVIEW

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The number of older adults who live in long-term care (LTC) is expected to increase worldwide. The COVID-19 pandemic has caused serious consequences in Canadian LTC homes, while homes in China and Japan reported minimal infection and death rates in residents. The differences in LTC policies may be one of the contributors. The purpose of this literature review was to identify elements of the LTC policies that might have impacted COVID-19 outcomes in LTC homes in Canada, China, and Japan. A scoping review was conducted following the framework proposed by Arksey and O'Malley. Scholarly articles and grey literature published between January 2015 and June 2020 were identified in six databases, four in English (CINAHL, Scopus, ProQuest, and PubMed), one in Chinese (CNKI), and one in Japanese (CiNii), using MeSH terms for LTC and health policy. Grey literature was identified using Google. Data were extracted, summarized and common themes identified through content analysis. A total of 52 articles and 26 grey sources were included in the review based on determined inclusion criteria. They were research articles, reviews, government or association reports, policy briefs, policy documents, and guides. Four common themes of challenges emerged: caregiver workforce, service provision, funding, and physical environments. Three sub-themes were identified for caregiver workforce and service provision. Differences in COVID-19 consequences in LTC homes in the three countries seem to be related mainly to the challenges with the caregiver workforce and the lack of funding. The result suggests Improvements of LTC policies are required, especially in Canada.

## SCOPING REVIEW: HOME AND COMMUNITY-BASED SERVICE WAIVER PROGRAMS AND PERSONREPORTED OUTCOMES

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State Medicaid programs are rebalancing their long-term care spending from nursing home to home and community-based services (HCBS). Emphasis on person-centered and person-directed care warrants investigation into models of HCBS delivery that promote quality of life. We performed

a scoping review of the literature to catalogue the breadth of the studies describing HCBS waiver programs targeting adults (18+). We identified 757 articles, and after duplicate removal and reconciliation, we excluded articles on children or adolescents, non-peer reviewed reports, international studies, and articles that did not describe HCBS waiver programs. After abstract and title review, 292 articles met our inclusion criteria. Most included articles (22.3%) were single state descriptive evaluations or evaluations of service use patterns among participants. 17.8% of included articles examined multi-state or national variation in program trends, while 17.1% made national program conclusions without a major focus on interstate comparison. Less common were studies examining integrated care or dual-eligibles (7.5%), PACE (3.4%), medication management (3.1%), quality and satisfaction of both consumer and caretaker perspectives (3.8%) and consumer-only perspectives (5.1%). The remaining articles focused on HIV (4.1%), TBI (1.4%) or ID/DD (14.4%) waiver programs. The 8.9% of articles addressing quality and satisfaction consisted mostly of interviews, either with state Medicaid administrators or with care recipients and/ or caregivers. Consumer reported satisfaction and unmet care needs were the primary outcomes examined. Given the heightened focus on long-term care as a result of the ongoing coronavirus pandemic, this review justifies further exploration into the delivery and outcomes of state-directed HCBS waiver programs.

## THE DEVELOPMENT OF A SELF-APPRAISAL TOOL FOR THE LEVEL OF LONG-TERM CARE SERVICE INTEGRATION.

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Introduction Taiwan is the fastest aging countries in the world. In 2016, Taiwan implemented Long-Term Care Plan 2.0 (LTC Plan 2.0), aims to provide coordinated and integrated LTC services. However, how to assess the level of integration and which integration mechanisms are better applied are still unclear in the literature. This study intended to address a research question regarding "How can agencies measure their level of service integration?" and, therefore, aimed to develop an integration assessment tool-the Taiwanese Self-Assessment for LTC Systems Integration (TwSASI)- for LTC agencies to use to self-evaluate their current "level" of providing integrating LTC services. Methods was first developed base on Connie J. Evashwick's (2005) framework and literature review, including four domains: inter-entity planning and management, care coordination, integrated information system, and integrated financing, and 11 dimensions with 51 items. Through the Delphi method, with two rounds of investigation and feedback from 26 experts, RAND/UCLA Appropriateness Method (RAM) was used to assess the consensus regarding the dimensions and items developed and refined the tool content accordingly. Results After two rounds of investigation, four domains remained with 10, 11, 4, and 5 items in each domain respectively. All items reached good experts' consensus with medians of the 30 items' importance, feasibility, and appropriateness all over 8. The Scale Content Validity Index (SCVI) of the 4