functional decline and increased time spent in sedentary activity. Function Focused Care was developed. Function Focused Care involves teaching caregivers to evaluate residents’ underlying functional capability and physical activity and engage them in physical activity during all care interactions. Prior research has demonstrated that implementing function focused care improves or maintains function and increases physical activity, improves mood and decreases behavioral symptoms among residents. To optimize implementation of Function Focused Care, a theoretically based implementation strategy, Function Focused Care for Assisted Living Using the Evidence Integration Triangle (FFC-AL-EIT), was developed. FFC-AL-EIT combines the social ecological model, social cognitive theory and the Evidence Integration Triangle. The social ecological model includes intrapersonal, interpersonal, environmental, and policy factors that influence behavior. Social cognitive theory guides the interpersonal interactions that motivate caregivers and residents to engage in function focused care. Lastly, the Evidence Integration Triangle facilitates systemic implementation of function focused care. A total of 85 facilities from three states were randomized (FFC-AL-EIT versus Education Only) and 794 residents consented. The Reach, Effectiveness, Adoption, Implementation, and Maintenance (RE-AIM) model was used to evaluate outcomes. This symposium will provide the implementation outcomes and value of the Evidence Integration Triangle, the effectiveness of FFC-AL-EIT on function and physical activity and the effectiveness on psychosocial outcomes and care interactions.

THE VALUE OF THE EVIDENCE INTEGRATION TRIANGLE
Barbara Resnick, University of Maryland School of Nursing, Baltimore, Maryland, United States

The Evidence Integration Triangle involved engaging stakeholders in the 12 month FFC-AL-EIT activities including identifying community specific goals, supporting the staff implementing the intervention, and intervening when champions or staff were not engaged in intervention activities. Ongoing participation of the stakeholder team occurred through monthly meetings. Evaluation of implementation was based on the Reach Effectiveness Adoption Implementation and Maintenance (RE-AIM) Model. Reach was based on 85 of 90 communities participating and 794 residents recruited. Effectiveness was supported based on less functional decline and more function focused care performed by residents. Adoption was based on evidence that monthly meetings were held, 77% of settings engaged as, or more than expected, and caregivers increased the amount of function focused care provided. The intervention was implemented as intended, knowledge was received, and environments and policies supporting function focused care were maintained. The Evidence Integration Triangle is an effective implementation approach for assisted living.

THE IMPACT OF FFC-AL-EIT ON RESIDENT AND SETTING OUTCOMES
Marie Boltz, Pennsylvania State University, University Park, Pennsylvania, United States

FFC-AL-EIT was implemented by a Research Nurse Facilitator working with a community champion and stakeholder team for 12 months to increase function and physical activity among residents. FFC-AL-EIT included four steps: (Step I) Environment and Policy Assessments; (Step II) Education; (Step III) Establishing Resident Function Focused Care Service Plans; and (Step IV) Mentoring and Motivating. A total of 85 communities and 794 residents were included. The age of participants was 89.48 (SD=7.43), the majority was female (N=561, 71%) and white (N=771, 97%). Resident measures, obtained at baseline, four and 12 months, included function, physical activity, and performance of function focused care. Setting outcomes, obtained at baseline and 12 months, included environment and policy assessments and service plans. Effectiveness was based on less decline in function (p<.001), more function focused care (p=.012) and better environment (p=.032) and policy (p=.003) support for function focused care in treatment sites.

THE EFFECTIVENESS OF FFC-AL-EIT ON PSYCHOSOCIAL OUTCOMES AND CARE INTERACTIONS
Elizabeth Galik, University of Maryland, Baltimore, Maryland, United States

This study included a subset of 59 communities and 550 residents from the full FFC-AL-EIT study. Participants were mostly white (98%), female (69%) and had a mean age of 89.30 (SD=7.63). Sites were randomized to the four step FFC-AL-EIT intervention implemented by a function focused care nurse facilitator working with a facility champion over 12 months versus education only. Resident measures included depression, agitation, resistiveness to care and the quality of care interactions and were obtained at baseline, 4 and 12 months. There was a significant positive treatment effect related to depression, agitation, resistiveness to care and quality of care interactions with either less decline or some improvement in these behaviors and symptoms and improvement in the quality of care provided between the treatment versus control group. The study suggests there is some benefit to implementing FFC-AL-EIT for psychosocial outcomes and care interactions among residents in assisted living communities.

Session 3320 (Symposium)

2020 EDITOR’S CHOICE ARTICLES FROM JGMS: FOCUS ON VULNERABLE POPULATIONS
Chair: Lewis Lipsitz Discussant: Tamara Baker

This symposium will present four 2020 “Editor’s Choice” articles from the Journal of Gerontology Medical Sciences that focus on issues relevant to vulnerable older populations. Justin Golub and colleagues, in their article “Auditive Age-Related Hearing Loss and Cognition in the Hispanic Community Health Study”, broaden the scope of age-related studies on audimetric hearing loss by using a large Hispanic cohort, a community largely excluded from previous hearing loss studies. By examining audiometrically-defined hearing loss and cognitive measures, Golub found links between hearing loss and lower neurocognition. Janice Atkins and colleagues, in “Preexisting Comorbidities Predicting COVID-19 and Mortality in the UK Biobank Community Cohort”, challenge the practice of simple age-based targeting of older adults to prevent severe COVID-19 infections, and show