empathic skills was rated 3.6 (range: 1-4). FCOM promotes awareness of the importance of measures to mitigate development of chronic conditions and frailty, and provides a resource for clinicians in multiple settings to engage in conversations with older adults while physiologic compensatory mechanisms are still intact. FCOM discussions can facilitate a shift from disease-oriented discussion to patient-centered, holistic care.

LESSONS ON LEARNING IN LATER LIFE WITH THE MIT AGELAB 85+ LIFESTYLE LEADERS
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Previous research has established the role of lifelong learning in promoting psychological wellbeing and active aging. Population aging necessitates an understanding of the unique opportunities and challenges around formal and informal learning in later life. This paper will share findings from a mixed methods study with the MIT AgeLab 85+ Lifestyle Leaders, a panel comprised of octogenarians and nonagenarians from across the United States. Drawing on an online survey and virtual focus groups with 29 Lifestyle Leaders from January 2021, findings suggest the Lifestyle Leaders most often learned new things from talking with others (46%) and reading print (54%) or online (54%) sources. The majority were familiar with attending in-person lectures or classes (89.7%) and were now using videoconferencing to do these (78.6%). A majority (56.7%) had or are currently participating in a lifelong learning program. Most consider themselves lifelong learners and described this around remaining curious and engaged with life, choices around what one learns, and greater enjoyment of learning. In the survey, a plurality of Lifestyle Leaders indicated the top two challenges affecting their ability to learn were sensory burdens (e.g., hearing loss, declining eyesight) (35%) and their energy level (32.4%); focus group data revealed that recall also is a barrier. Focus group data further highlighted generational experiences around early life learning and career paths, specifically how gender roles, diagnoses of learning disabilities, and evolving digital technology have affected these and changed over the course of their lifetimes.

METHODOLOGICAL AND ETHICAL REFLECTIONS FROM RESEARCH ON NEIGHBOURHOOD-BUILT ENVIRONMENT AND DEMENTIA
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The neighbourhood is widely regarded as a setting that affords emotional and practical support and opportunities to maintain community-based activities and social participation for people living with dementia (PLWD). Creating a supportive neighbourhood built environment that facilitates outdoor mobility, wayfinding, and access to community destinations is key to making our communities dementia-inclusive. Research on the built environment and dementia-inclusive planning is relatively sparse in the broader research domain of neighbourhoods and dementia. Further, how PLWD perceive, interpret, and interact with the neighbourhood built environment is not adequately understood. Although it is acknowledged that PLWD should be more meaningfully included and engaged in research in this area, there is a lack of guidance on methodological and ethical considerations necessary to explore people-place relations in the neighbourhood built environment through the lens of the lived experience of PLWD. To address this gap, our paper draws from the Dementia-inclusive Streets and Community Access, Participation, and Engagement (DemSCAPE) study to highlight reflections on conducting walk-along interviews, embodied videography, photo documentation, semi-structured sit-down interviews, and visual elicitation to explore the influence of the neighbourhood built environment on the outdoor walking experience of PLWD. We discuss 1) methodological strengths, including the triangulated strategy of capturing experiential data in-situ in real time and in retrospect, and flexibly working around memory and communication-related challenges experienced by PLWD, 2) ethical challenges and measures for mitigation, 3) logistical difficulties in undertaking complex fieldwork with PLWD, limitations of the research methods, and potential alternative methods to explore in future research.

OLDER PEOPLE’S ACTIVITY PARTICIPATION (OPAP): FACTOR STRUCTURE AND PSYCHOMETRIC PROPERTIES OF A SCALE
Daniel Rong Yao Gan1, Yuxin Cao2, Wen Liu3, John Chye Fung2, and Tze Pin Ng2, 1. Simon Fraser University, Vancouver, British Columbia, Canada, 2. National University of Singapore, Singapore, Singapore, 3. University of Iowa, Iowa City, Iowa, United States

Older people’s participation in activities is critical to their health and well-being. Active lifestyle in old age reduces the risk of mortality, prevents chronic diseases, promotes physical and mental wellbeing, and is conducive to active and healthy aging. While various measures of participation have been proposed, a holistic measure that includes both social and individual activity participation is currently unavailable. To enable lifestyle medicine recommendations, we developed the Older People’s Activity Participation (OPAP) scale to understand the constituent factors of older people’s everyday activities. This study examined OPAP’s internal consistency using Cronbach’s alpha, convergent validity using regression analysis, as well as factor structure using exploratory and confirmatory factor analyses in a dense urban setting. Preliminary items assessed engagement in 27 health-related, fitness, recreational, social, productive, and cognitive activities, and were administered to 270 community-dwelling adults aged 50 and older in Singapore. The 17-item OPAP showed acceptable internal consistency (Cronbach’s alpha= .69), and demonstrated convergence with a validated measure of social cohesion (B=.27, p<.001) and Instrumental Activities of Daily Living (B=.32, p<.001). It has a 5-factor structure, namely socializing (alpha=.63), physical training
The purpose of this presentation is to report results from the novel Wyoming Geriatric Workforce Enhancement Program (WyGWEP) is to utilize partnerships and training, create programs to address gaps in care, implement practice innovation, and advocate for needs of rural and frontier communities. Access to support and psychoeducation is limited in rural and frontier communities, and solutions are needed to reach caregivers across sparsely populated regions.

SESSION 3460 (SYMPOSIUM)

THE POWER OF RURAL PARTNERSHIP: MEETING NEEDS AND FOSTERING INNOVATION THROUGH THE WYOMING GWEP
Chair: Christine McKibbin Co-Chair: Catherine Carrico

The challenges of supporting the health and social needs of older adults and caregivers in rural and frontier areas are well-documented. It is common for rural older adults to experience barriers in accessing geriatric specialists, care coordination services, and caregiver support and education programs. The Wyoming Geriatric Workforce Enhancement Program (WyGWEP) is an innovative partnership comprising an academic geriatrics program, primary care delivery sites, single-unit on aging representing community-based organizations, and a tribal health program. This partnership, funded by the Health Resources and Services Administration, provides the infrastructure to assess needs, provide education and training, create programs to address gaps in care, implement practice innovation, and advocate for needs of rural older adults. This symposium includes five presentations detailing the unique projects of the WyGWEP partnership and the impact of this collaborative work on a variety of stakeholders. The results of a mixed-methods evaluation of the WyGWEP partnership will describe the benefits to the partners and areas for growth. A collaborative effort to assess the needs of older adults informs recommendations to support rural aging in place. Schenck et al. will describe the adaptation of the widespread ECHO model for use with dementia caregivers in rural and remote locations. Representatives from Wyoming's only Program for All-Inclusive Care of the Elderly (PACE) will explain the cost of a recent decision to de-fund and close this important program. Finally, the impact of a novel Chronic Care Management implementation program will be discussed, including sustainable billing revenue produced by rural primary care clinics.

EVALUATING THE WYOMING GWEP PARTNERSHIP
Catherine Carrico1, Irene Lujan1, Trena Anastasia1, and Christine McKibbin1, 1. University of Wyoming, Laramie, Wyoming, United States, 2. Eastern Shoshone Tribal Health, Ft. Washakie, Wyoming, United States, 3. Thrive Alive, Masonville, Wyoming, United States

The goal of the Wyoming Geriatrics Workforce Enhancement Program (WyGWEP) is to utilize partnerships to improve health outcomes for older adults by developing a healthcare workforce trained to address unmet health and social determinant needs of Wyoming's older residents. The purpose of this presentation is to report results from the novel mixed-methods evaluation of the WyGWEP partnership. Data were gathered from WyGWEP stakeholders through the Partnership’s Self-Assessment Tool (n=17; Center for the Advancement of Collaborative Strategies in Health, 2002), which assesses domains of Synergy, Leadership, Resource Sharing — Non-financial and Financial, Benefits and Drawbacks, Decision Making, and Administration/Management and Satisfaction. Semi-structured interviews (n=12) with partnership participants provided additional information and context. Evaluation results indicate that WyGWEP partners are highly satisfied across all domains of the Partnership’s Self-Assessment Tool. WyGWEP partners from Eastern Shoshone Tribal Health will share what has contributed to a successful collaborative. Additional results related to how this type of partnership has influenced participants’ ability to complete objectives and activities will be reviewed.

ADAPTING THE ECHO MODEL TO MEET THE NEEDS OF RURAL DEMENTIA CAREGIVERS
Sabine Schenck, Catherine Carrico, and Stacy Carling, University of Wyoming, Laramie, Wyoming, United States

Caring for an individual with dementia may result in caregiver stress and burden (Cassie & Sanders, 2008), which can lead to detrimental health outcomes if not managed with effective coping skills and support (Shulz & Martire, 2004). Access to support and psychoeducation is limited in rural and frontier communities, and solutions are needed to reach caregivers across sparsely populated regions. Project ECHO (Extension for Community Health Outcomes) is an evidence-based model designed to improve patient outcomes through healthcare provider education. The Wyoming Dementia Together Caregiver Network is the first of its kind to adapt the ECHO model for family caregivers of persons with dementia. This presentation details evaluation results of 24 session across 52 weeks (n=162). Results suggest that adaptation of Project ECHO for family caregivers is feasible and palatable. In addition, the adapted program shows promise for improving caregiver outcomes such as depressive symptoms and caregiver burden.

CONNECTING THE DOTS: CHRONIC CARE MANAGEMENT PROGRAM IMPLEMENTATION IN RURAL PRACTICES
Faith Jones1, Kevin Franke2, Tonja Woods3, Emma Bjore4, and Elizabeth Punke4, 1. HealthTech, Brentwood, Tennessee, United States, 2. University of Wyoming, Laramie, Wyoming, United States, 3. Ivoryson Medical Group, Laramie, Wyoming, United States, 4. University Of Wyoming, Laramie, Wyoming, United States

As the focus of healthcare changes from a “sick” care model to a population health model, primary care and specialty clinic practices have new opportunities supported through Medicare reimbursement. The incorporation of team-based care coordination programs into clinic practices is an important step towards value-based care and achieving the Triple Aim: better health for the population, better care for individuals, and lower costs through improvements. Since 2019, six rural Wyoming primary care practices have completed training to implement and expand care coordination programs. HealthTechS3 provides participating clinics with team-based training in

(α=.56), listening (α=.69), home-making (α=.59), and outing (α=.58). Acceptable model fit was obtained (RMSEA=0.48, SRMR=0.06, CFI=.90). The OPAP scale is valid and reliable to assess activity participation in Asian older adults. It can be a useful tool to understand older people's everyday life and lifestyles, relationships between activity participation and health outcomes, and further guide the development and use of effective interventions to promote active and healthy aging.

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