AGE-FRIENDLY CARE, PA: A COLLABORATIVE FOR AGE- AND DEMENTIA-FRIENDLY CARE
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The Penn State College of Nursing (including the Center for Geriatric Nursing Excellence [CGNE] and Center for Nursing Research [CNR]) has partnered with the Primary Health Network (PHN) to work collaboratively toward implementing the 4Ms framework of an Age-Friendly Health System at PHN’s primary care sites in Pennsylvania. PHN is the largest FQHC in the state and spans 16 counties in PA and 2 in Ohio. Twenty of PHN’s PA primary care sites are in rural counties, and both rural and urban sites serve older adult populations with major health disparities. Connecting primary care practices with local community resources and programs is an important step in serving rural populations, and we have used the ECHO model to help facilitate connections. This session will focus on how we are using the ECHO model to engage our partners in a collaborative learning environment.

SESSION 6315 (SYMPOSIUM)
UNDERSTANDING DRIVING AS AN EVERYDAY ACTIVITY: INTERNATIONAL PERSPECTIVES
Chair: Anne Dickerson
Co-Chair: Isabelle Gelinas
Discussant: Moon Choi

This international symposium brings together leading occupational therapy researchers from around the world with a shared focus on evaluating and improving the driving performance of older adults to decrease their crash risk and facilitate their community participation. In this session, five groups of international scholars will share their collective and individual research outcomes for driving as a means of community mobility. The first presentation will outline their collective international, cross-sectional study of 247 older adults from seven countries where the impact of driving on out-of-home mobility was compared. Each presentation that follows will then present results from innovative studies of ways in which to assess and address fitness to drive in older adulthood. Our discussant will summarize the potential expansion of the current work and engage the audience through interactive questions. Transportation and Aging Interest Group Sponsored Symposium.

INTERNATIONAL COMPARISON OF OLDER DRIVERS AND NON-DRIVERS FOR ACTIVITY ACCESS AND QUALITY OF LIFE
Cilla Harries,1 Carolyn Unsworth,2 Brenda Vrkkljan,3 and Anne Dickerson,4 1. Kingston University and St George’s Joint Faculty, London, England, United Kingdom, 2. Central Queensland University, Melbourne, Victoria, Australia, 3. McMaster University, Hamilton, Ontario, Canada, 4. East Carolina University, Greenville, North Carolina, United States

Driving is crucial for many people to age in place, as it is the most convenient option, and sometimes the only option for personal transport. This international, cross-sectional, cohort study of older adults (n=246) compared drivers’ and non-drivers’ quality of life and levels of community participation. Following ethical approval, data were collected across seven countries. The EQ-5D-5L was used to measure health related quality of life and a modified version of the Participation in Activities and Places Outside the Home (ACT-OUT) was used to measure community participation (T-ACT-OUT). Drivers accessed more out-of-home activities than non-drivers, suggesting higher community participation among this group. Health related quality of life was generally high among all participants, but slightly higher for drivers (U=3186, z=-2.78, p=.003, r=0.18). These findings resonate with recent evidence, which suggests supporting older drivers to continue to drive for as long as possible provides critical access to their communities (O’Neill et al., 2019). Part of a symposium sponsored by Transportation and Aging Interest Group.

IMPROVING THE DRIVING OF COMMUNITY-DWELLING OLDER CANADIANS: A RANDOMIZED CONTROLLED TRIAL
Brenda Vrkljan,1 Ruheena Sangra,2 Lauren Griffith,1 Lori Letts,1 and Michelle Porter,1 1. McMaster University, Hamilton, Ontario, Canada, 2. University of Manitoba, Winnipeg, Manitoba, Canada

Older Canadians, similar to aging drivers in many other countries, want to drive, need to drive, and live in communities where driving is both valued and necessary for out-of-home participation. Many community-dwelling seniors are medically fit-to-drive, yet their collision risk remains higher than most other age groups, which some have attributed to their propensity to drive shorter distances in high-traffic areas (Antin et al., 2017). In this randomized controlled trial, the effect of a customized video-based older driver training program on behind-the-wheel performance was captured using the latest technology for an on-road evaluation. Results indicated the mean reduction in number of driving errors [mean (95% CI)=-12.0(-16.5, -7.6),p<0.001] favoured the intervention group where their change between baseline and 4-week follow-up was statistically significant [mean(95% CI)=10.3(-13.8, -6.8),p<0.001], but not for the control group [mean (95% CI)=1.7(-0.08, 4.2), p>0.03]. Our novel, video-based approach that provided individualized feedback improved driving performance for older drivers. Part of a symposium sponsored by Transportation and Aging Interest Group.

USE OF A DRIVING SIMULATOR TO FACILITATE OLDER PEOPLE TO RETURN TO DRIVING
Carolyn Unsworth,1 Megan White,2 and Natasha Lannin,3 1. Central Queensland University, Melbourne, Victoria, Australia, 2. Alfred Health - Caulfield Hospital, Caulfield, Victoria, Australia, 3. Monash University, Melbourne, Victoria, Australia

Driving simulators are a relatively underutilized therapy tool that provide an opportunity for older drivers with a range of health-related problems to participate in simulated driving scenarios in a low cost and safe environment. The aim of this paper is to (i) describe the use of a Forum 8 driving simulator prior to a driver assessment, (ii) detail the story-boarding technique used to develop and grade driving
scenarios to enable older drivers to increase confidence, practice using vehicle modifications such as a spinner knob (e.g. for one-handed driving following stroke), and train specific skills including visual scanning and attention, and (iii) present five case studies to identify the strengths and limitations of incorporating the simulator into therapy programs with older drivers. of simulator use. The establishment and use of a driving simulator in a rehabilitation unit highlights both the challenges and benefits of using this kind of technology in practice. Part of a symposium sponsored by Transportation and Aging Interest Group.

USING A PERFORMANCE BASED ASSESSMENT TOOL OF EVERYDAY IADL TO DETERMINE DRIVING RISK IN OLDER ADULTS
Anne Dickerson, East Carolina University, Greenville, North Carolina, United States

For older adults living in rural/suburban communities, driving is often their only means of transportation. Although considered safe drivers, drivers older than 70 years have higher crash rates with fatality rates amplified due to the increased frailty/fragility. However, research evidence clearly indicates that cognitive factors contribute to driving impairment in older adults. Occupational therapists, as experts in observation of functional performance, use the Assessment of Motor and Process Skills (AMPS), for measurement of performance in everyday activities using two scales (motor and process). Previously demonstrated as a sensitive tool for cognitive changes, this presentation will summarize the research outcomes between older adults with cognitive impairment (N=57+) and without (N=53) who completed a comprehensive driving evaluation. Analysis of the two samples using receiving operating curves suggests the AMPS has potentially excellent specificity and sensitivity, specifically AUC = 0.826(0.73-0.92) for motor, AUC = 0.909(0.84-0.98) for process, and AUC = 0.936(0.88-0.99) together. Part of a symposium sponsored by Transportation and Aging Interest Group.

EVALUATING OLDER DRIVERS IN THEIR EVERYDAY DRIVING ENVIRONMENTS
Isabelle Gelinas,1 Barbara Mazer,2 Yu-Ting Chen,3 Brenda Vrkljan,4 Shawn Marshall,4 Judith Charlton,4 and Sjaanie Koppel, 1. McGill University, Montreal, Quebec, Canada, 2. McGill University School of Physical and Occupational Therapy, Montreal, Quebec, Canada, 3. McMaster University, Hamilton, Ontario, Canada, 4. University of Ottawa, Ottawa, Ontario, Canada, 5. Monash University Accident Research Centre, Clayton, Victoria, Australia

Developing tools that accurately detect at-risk driving behaviors is a public-health priority. There is a need for a measure that accurately assesses older drivers’ level of competence on familiar roadways. The objective of this presentation is to describe the development of the procedures and scoring of a new approach, the Electronic Driving Observation Schedule (eDOS), to observe everyday driving in the community. The eDOS was used to record and compare the driving environment and performance of older drivers and low-risk younger drivers during their everyday driving. Older (n=160, 67-74y) and younger (n=60, 35-64y) drivers completed a 20-30-minute drive from their home to destinations of their choice. Older drivers drove on simpler routes with fewer intersections and lane changes. Both groups made few driving errors, which were mostly low-risk. Younger drivers tended to demonstrate poor driving habits (not signaling, speeding, poor lane position) and compliance with road rules. Part of a symposium sponsored by Transportation and Aging Interest Group.

SESSION 6320 (SYMPOSIUM)

USING SUBJECTIVE AND OBJECTIVE MEASURES OF FINANCIAL SITUATION TO IMPROVE PROGRAM OUTCOMES FOR OLDER ADULTS
Chair: Hector Ortiz
Co-Chair: Jan Mutchler

Researchers in the field of aging rely on various measures of financial security to assess the needs of older adults and the outcomes of interventions. Recently, subjective measures have gained attention among researchers and organizations that serve older adults. This symposium brings together researchers from academia, government, and the non-profit sector to discuss the relationship between subjective financial well-being and objective financial situation. The first project describes the relationship between the Consumer Financial Protection Bureau’s Financial Well-being Score and the Elder Index. The CFPB Financial Well-Being Score provides a standardized and validated measure of a person’s sense of financial security and freedom in the present and future. The Elder Index provides a measure of older adults’ income against the average income needed for adults age 65 or older to live independently in their communities. The second project discusses the findings of a study into the changes in outcomes among older adults assisted through the National Council on Aging’s Benefits Enrollments Centers. The third project describes the overall findings and changes in financial well-being among SCSEP participants who attended a series of financial education workshops offered through the Benjamin Rose Institute on Aging’s subsidiary Empowering and Strengthening Ohio’s People. Together, the studies show that both measures are, on average, strongly correlated and predictive of a range of factual experiences such as material hardship and financial stress. The studies, however, show that subjective measures may help identify and target underlying behavioral and attitudinal factors that influence people’s satisfaction with their economic situation.

EXPLORING THE RELATIONSHIP BETWEEN THE CFPB FINANCIAL WELL-BEING SCORE AND THE ELDER INDEX
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The Elder Index is a cost of living indicator that measures the income older adults need to meet their living expenses while staying independent in the community, calculated on a county-by-county basis for the United States. Analyses based on the Elder Index show that a large segment of the age 65+ population has incomes below the Index, reflecting a level of insecurity that is considerably higher than suggested by the poverty rate. Moreover, comparison of the Elder Index to