Springfield, MA. A third GWEP is implementing age-friendly practice workflows in programs that connect primary care and community-based organizations to address specific needs of an underserved older population. By integrating CBOs within the age-friendly health system framework, we can better create sustainable partnerships with health systems to improve health outcomes for our elders.

HOW GWEPS ARE IMPACTING AGE FRIENDLY AND DEMENTIA-FRIENDLY COMMUNITIES: BAYSTATE HEALTH
Maura Brennan, Baysate Health, Northampton, Massachusetts, United States

Baystate has collaborated with Community Based Organizations (CBOs) to secure designation for Springfield, MA as both age and dementia friendly. We worked together so our city could be recognized as the first in the nation which was age and dementia friendly and also had an age-friendly health system within it. Baystate joined a Springfield coalition of CBOs with the assistance of the Massachusetts Healthy Aging Coalition, AARP, State and local Elder Affairs, the Massachusetts Councils on Aging and the Institute for Healthcare Improvement, we secured and celebrated all three recognitions at a public forum in June 2019. The event was attended by the Mayor, Baystate Health and local Elder Affairs leaders, the press and other stakeholders as well as older adults from the community. Along with ongoing efforts to improve transportation and housing, access to age-friendly health care is now also an additional area of focus for the coalition.

AGE-FRIENDLY COMMUNITY EDUCATION: FOSTERING HEALTH BEHAVIOR CHANGE IN A MEDICALLY UNDERSERVED COMMUNITY
Katherine Thompson, University of Chicago Medicine, Chicago, Illinois, United States

The University of Chicago GWEP, SHARE Network (Supporting Healthy Aging Resources and Education), is located on the South Side of Chicago, an urban medically underserved community. SHARE Network partners with a variety of community based organizations (CBOs) to support Age Friendly care through an Age Friendly Community Education Curriculum. In a one year period, 28 events were held in 13 CBO sites. Each of these events addressed the 4Ms of Age Friendly care with a specific content focus on Mentation (5 events), Mobility (5), Medications (4), and What Matters (10), and 4 events focused on multiple domains. There were 458 attendees, 290 completed surveys (63% response rate). Eighty-eight percent of participants planned to make a healthy behavior change after participation. Age Friendly Community Education can complement health system transformation to lead to health behavior change for community-dwelling older adults in medically underserved communities.

PARTNERSHIPS CONNECTING HEALTHCARE AND COMMUNITY-BASED ORGANIZATIONS IN VIRGINIA
Patricia Slattum,1 Pamela Parsons,2 Mary Rubino,3 and Leland Waters,1 1. Virginia Commonwealth University, Richmond, Virginia, United States, 2. Virginia Commonwealth, Richmond, Virginia, United States

3. Family and Community Medicine, Eastern Virginia Medical School, Norfolk, Virginia, United States

The Virginia Geriatric Education Center (VGEC)’s Geriatrics Workforce Enhancement Program (GWE) partners with two programs, Senior Strong at Eastern Virginia Medical School in Norfolk, VA and the Richmond Health and Wellness Program at Virginia Commonwealth University in Richmond VA to support their age-friendly initiatives. These programs enhance primary care for an older population experiencing adverse social determinants of health by providing screening around the 4Ms pillars of age-friendly healthcare and connecting participants with healthcare and community-based organizations. These programs offer a rich learning environment for interprofessional students. The VGEC GWE strengthens these programs by developing faculty and student training in collaboration with the programs and facilitating program participation in the GWE-CC Age-Friendly Action Community to develop and refine age-friendly practice workflows, referral pathways and documentation.

AGE-FRIENDLY INITIATIVES AND PRIMARY CARE IN RURAL ARKANSAS
Robin McAtee,1 and Leah Tobey,2 1. UAMS, Little Rock, Arkansas, United States, 2. University of Arkansas for Medical Sciences, Little Rock, Arkansas, United States

The Arkansas Geriatric Education Collaborative (AGEC)’s Geriatric Workforce Enhancement Program is partnering with a plethora of community based organizations (CBO) and with ARcare, an Arkansas federally qualified healthcare clinic network, to implement the 4Ms of age-friendly care in rural clinics. Baseline clinical data related to the Age-Friendly 4M Framework has been gathered and quality improvement projects initiated to improve the outcomes. Initiatives to improve depression and cognitive screenings are addressing Mentation; fall prevention screens and the offering of fall prevention programs have been added for Mobility; high risk medication screens and chronic pain educational programs are being implemented to address Medications; and finally, Medicare Annual Wellness Visits is the cornerstone to improve what Matters to older adults. A campaign that involves partner CBOs to address health literacy and increase involvement in evidence-based programs is also helping to drive improvements in age-friendly care in rural Arkansas.

SESSION 5065 (SYMPOSIUM)

INNOVATIONS IN GERONTOLOGY EDUCATION: A MULTIFACETED APPROACH
Chair: Melissa O’Connor
Discussant: Melissa O’Connor

By 2030, older adults are projected to outnumber children. This growth among older adults presents both opportunities and challenges on how to care for this unprecedented older adult population. In 2010, there were 7.2 family caregivers for every person 80 and older; this is expected to fall to 3 by 2050. Many older adults are at risk of becoming an elder orphan - someone aging alone with no family available to address their caregiving needs. This underscores the urgent need for the education of nurses who are prepared to care for older adults with complex social and health needs, many
of whom are suffering from three to five chronic conditions. This symposium highlights cutting-edge research designed to transform nursing education to better prepare students to advance the health of older adults. Our first presentation describes ageism among undergraduate students and innovative curricula to positively influence their preference for working with older adults. Next, the groundbreaking tool-kit that encourages self-reflection on beliefs about aging and reframes how students view older adults. Third, the qualitative results of a collaborative learning experience designed to introduce students earlier and more often to older adults. Finally, findings from a student-led study investigating the unique needs of caregivers of older adults with diabetes highlights the importance of funding students to conduct research related to older adults. Our symposium ends with a discussion of how these approaches are transforming nursing education to adequately prepare nurses to improve the health and health care of older adults.

CURRICULA INNOVATION TO POSITIVELY INFLUENCE PREFERENCE FOR WORKING WITH OLDER ADULTS: A REVIEW OF THE LITERATURE
Christine Brewer, Villanova University, Villanova, Pennsylvania, United States

Few nursing students show preference in working with older adults. The purpose of this study was to review the U.S. nursing education evidence-based literature to determine curricula innovation to positively influence preference for working with older adults. CINAHL, Medline, Ovid Emcare, PsycINFO, and PubMed databases were searched for relevant U.S. studies published between 2009 and 2020 using the search terms “nursing students”, “geriatrics OR gerontology OR older adults OR elderly OR aging”, “career OR work”, and “choice OR preference OR attitude”. Nine studies were eligible for inclusion. Nursing education may play a role in influencing how students perceive and prefer to work with older adults. Promising interventions include stand-alone gerontology courses, intergenerational service-learning experiences, and clinical experiences with community dwelling older adults. More evidence-based research with larger sample sizes are needed to determine effective nursing education interventions to improve nursing students’ attitude and preference for working with older adults.

IMPLEMENTING A POSITIVE LEARNING EXPERIENCE RELATED TO OLDER ADULTS FOR UNDERGRADUATES: A TOOLKIT
Ann Scheve, and Elizabeth Bruderle, Villanova University, Villanova, Pennsylvania, United States

Undergraduate nursing students are frequently exposed to older adults in the clinical setting, where they assess and manage their diseases and its consequences. But that is not enough! To support healthy aging, students need positive intergenerational learning experiences with older adults to discover the gifts of aging early in their curriculum. The goal of these experiences is to help students reflect on their thoughts about aging and reframe how they view older adults. During this presentation we will provide a tool kit based on our experience incorporating positive intergenerational learning early in our curriculum, offer practical guidelines and share constructive feedback.

PROVIDING EXPERIENCE FOR UNDERGRADUATE NURSING STUDENTS TO CARE FOR OLDER ADULTS: A QUALITATIVE STUDY
Christine Pariseaut, Christina Whitehouse, and Melissa O’Connor, Villanova University, Villanova, Pennsylvania, United States

Care of the older adult can be complex and frequently influenced by ageism. Nursing students do not have the frequent opportunity to provide care for older adults. The purpose of this pilot study was to expose sophomore nursing students to older adults earlier and more often in the undergraduate curriculum by providing a unique clinical experience at St. Thomas of Villanova Monastery, a residential facility for retired Augustinian priests. This study examines the experience of students’ participation in this clinical experience. Qualitative content analysis of 12 student logs was conducted. Themes that emerged included: age-related changes, environmental considerations, psychosocial needs and changes, and consideration of gerontology as a career choice and existing bias. Students gained a valuable understanding of the unique age-related changes that older adults are experiencing. Early experiences are vital in the curriculum and provide enhanced engagement in gerontology.

ENGAGEMENT AND MENTORSHIP OF UNDERGRADUATE STUDENTS IN AGING RESEARCH
Alyssa Danner, Christina Whitehouse, and Melissa O’Connor, Villanova University, Villanova, Pennsylvania, United States

Education and mentorship of undergraduate students extends beyond the classroom and clinical setting into research. This presentation will discuss the experience of the student and research mentor as well as provide findings from an important qualitative research study. Through a university funded grant, a student nurse partnered with faculty to investigate the needs and experience of caregivers of recently hospitalized older adults with diabetes. Caregivers play a vital role in caring for older adults, often they do not receive the education necessary to achieve optimal health outcomes. Qualitative interviews of 20 caregivers were conducted. The main themes that emerged from the data were: the role itself, challenges, preparation, and additional comorbid diagnoses. These findings provide an understanding of experience, tasks, and needs of caregivers for older adults with diabetes. This research experience provided exposure and education that is essential to developing future aging research scientists.

SESSION 5070 (SYMPOSIUM)

OLDER ADULTS AS TEACHING ALLIES: OPPORTUNITIES FOR AGE-FRIENDLY UNIVERSITY INNOVATION
Chair: Joann Montepare
Co-Chair: Kimberly Farah

Changing age demographics are reshaping societies and challenging institutions of higher education to consider how they can respond to aging populations through new approaches to teaching, research, and community engagement. As well, institutions are facing a range of challenges as they look to respond to the contemporary needs of traditional-aged students. The pioneering Age-Friendly University (AFU)