TRAJECTORIES OF COMMUNITY-BASED SERVICE USE AMONG KOREAN ELDERS: THE IMPORTANCE OF LIVING ARRANGEMENT AND POVERTY
best quality dementia care. Innovative implementations of person-centred principles have demonstrated that there are significant improvements in quality of life and quality of care to be made when a person-centred approach is practised across an organisation. Unfortunately, such innovative care models have been adopted in only a small percentage of facilities providing care to older people in the residential setting worldwide. This paper argues that conceptual confusion around what constitutes person-centred practice and the dominance of the institutional environment undermines better practice in long term care settings. Using data from a random sample of staff and management from across Australian residential aged care homes the presentation explores the relationships between the general institutional environment, staff perceptions of person-centred practice and management views of good leadership practices for person-centred dementia care.

TRAJECTORIES OF COMMUNITY-BASED SERVICE USE AMONG KOREAN ELDERS: THE IMPORTANCE OF LIVING ARRANGEMENT AND POVERTY


As in many other countries facing population aging, community-based services are designed to help older adults to age in their place in Korea. Understanding of the service use patterns among older adults is a key step in developing an effective community-based long-term care system. Drawing on life-course and cumulative disadvantage perspective, we examined to what extent living arrangement and poverty status affect changes in service uses independently and in combination. Data came from eight waves of panel data from Korea Welfare Panel Study (2006 - 2013), a national representative sample of community-dwelling people over age 65 (N=3,337; obs. =22,450). Random slope nonlinear mixed effect analyses were conducted to examine to what extent (elders living alone, elderly couples, and inter-generational living) and poverty status (poor or not) affects use of three distinctive services (health support, functional support, out-home service). Results show that after adjusting for socio-demographic attributes and health conditions, compared to elders in inter-generational household, both elders living alone and elderly couples were more likely to use all three services. Among elders living alone, no effect of poverty was found over time. Interestingly, poor elderly couples were more likely to use health support and out-of-home service overtime. Our findings highlight the importance of understanding on different contexts of aging-in-place by living arrangement and poverty status in later years. Future research need to examine effect of changes in living arrangement and dynamics of poverty status (i.e. poverty gap, poverty level or poverty persistence) on service uses.

BUILDING A POSITIVE CHAIN OF RELATIONAL LEADERSHIP TO IMPROVE PERSON-CENTERED CARE: A CASE STUDY

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Working Better Together (WBT), grounded in the theory of relational coordination, promotes person-centered approaches through strengthening staff leadership and relationships. WBT has yielded measurable improvements in numerous nursing homes (NHs). We conducted a WBT case study to understand how the WBT process is individualized and implemented in a facility. Experienced WBT consultants conducted nine 4-day site visits over one year in a VA facility with multiple NH neighborhoods. Consultants met iteratively with neighborhood supervisors, managers, and front-line staff during every visit. All consultation events were documented by a participant ethnographer. Analysis of the ethnographic notes identified several themes regarding principles and practices taught to staff: teamwork, interdisciplinary communication, person-centered care, and relational management. Process themes regarding how consultants elicited staff support and continued participation were also identified. 1) Heavy reliance on Socratic methods and non-directive approaches. 2) Emphasis on “just-in-time” teaching approaches in which managers were taught to use multiple, short stand-up staff “huddles” focused on current resident challenges rather than classroom-based instruction. 3) Identification and prioritization of quality improvement (QI) projects that addressed particular problems that a) created front-line staff stress, b) would lead, if solved, to improved quality of life for residents, and, c) required solutions necessitating teamwork across staff hierarchies and discipline “silos” for successful project completion. Participants noted that these approaches contrasted with typical “culture change” approaches that engender resistance because they are seen as extra work. The WBT approach ensured staff support by simultaneously reducing staff stress and improving teamwork.

INFLUENCE OF CONTEMPLATION ON STABILITY OF PREFERENCES AMONG OLDER ADULTS

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Numerous studies have documented the preference of older adults to remain in their homes for as long as possible, and the predominance of social policy is aligned with this preference for aging in place (AIP). The goal of this study was to examine whether stated preferences of older adults in regards to AIP would vary as a function of contemplation. A randomized experimental study using an on-line survey captured data from 389 subjects. The study asked questions regarding preferences for AIP under different scenarios. The experimental condition varied only in asking subjects...