the impact on person-centered care and be able to address provider needs in real-time. This qualitative method focused on nursing home providers who are a part of PEAK 2.0, a Medicaid pay-for-performance program in Kansas. Interviews with nursing home staff (n=168) revealed two critical themes of need: mandated responses disregarded elders’ autonomy and self-determination in decision making, and infection control strategies required new approaches to facets of resident care that still maintained dignity. This data, along with COVID-19 guidance were then used to inform feasible resource development and education to maintain PCC practices during the pandemic.

COVID-19 PERSPECTIVES OF ASSISTED LIVING AND HEALTH CARE PROVIDERS IN SEVEN STATES
Philip Sloane,1 Johanna Hickey,2 Kali Thomas,3 Julia Thorp,2 Meredith Poole,2 Aisha Chaudhry,2 Paula Carder,4 and Sheryl Zimmerman,1 1. UNC Medical School, Sheps Center, Chapel Hill, North Carolina, United States, 2. University of North Carolina at Chapel Hill School, Chapel Hill, North Carolina, United States, 3. Brown University, Brown University/Providence, Rhode Island, United States, 4. OHSU-PSU School of Public Health, Portland, Oregon, United States, 5. Cecil G. Sheps Center for Health Services Research, Chapel Hill, North Carolina, United States

Thirty percent of COVID-19 deaths in long-term care were in assisted living (AL), indicating challenges providing care. This project recruited AL administrators and medical and mental health care providers in a seven-state stratified random sample of 250 communities; it asked what was most challenging responding to COVID-19, what was successful, how to have better dealt with COVID-19, and how others could have helped. The most common challenge was addressing residents’ psychosocial needs, explained as “No contact - no hugging. The seniors require touch. It’s something we’ve always done, and we can’t do; we’re required not to do it.” Successes included infection prevention, and in hindsight, administrators discussed staffing. Related to external entities, one commented, “Come in the building and see what we’re doing. Don’t sit behind a freaking screen and act like you know what we’re doing.” Providers stressed patient access to care and social isolation. Implications will be discussed.

Session 3020 (Symposium)

DISRUPTION TO TRANSFORMATION: AGING IN THE NEW NORMAL: A CHAT WITH NIA SENIOR LEADERSHIP
Chair: Melinda Kelley Discussant: Melinda Kelley
The National Institute on Aging (NIA) at the National Institutes of Health, Department of Health and Human Services, is the federally designated lead agency on aging research and supports significant research on aging as a life-long process. In the last six years, NIA has experienced a tripling of its budget. Although much of this funding is targeted to Alzheimer’s disease (AD) and AD-related dementias research, there has been an increase in funds allocated to non-AD research in keeping with the overall growth of NIH. This symposium will provide a forum for exploration of the implications of the budget increases for the general research community. NIA’s senior staff will discuss research priorities and programs supported by the Institute. A question-and-answer session will follow these remarks on current funding and future priorities and research directions of NIA.

NIA DIVISION OF EXTRAMURAL ACTIVITIES
Kenneth Santora, National Institute on Aging, Bethesda, Maryland, United States
Dr. Santora will discuss the work of the NIA Division of Extramural Activities. Dr. Santora will also be available for small group discussion.

NIA OFFICE OF SPECIAL POPULATIONS
Patricia Jones, National Institute on Aging, Bethesda, Maryland, United States
Dr. Jones will discuss the work of the NIA Office of Special Populations. Dr. Jones will also be available for small group discussion.

OVERVIEW OF NIA BUDGET
Richard Hodes, National Institute on Aging, Bethesda, Maryland, United States
Dr. Hodes will discuss budget and overall research priorities for the National Institute on Aging.

NIA DIVISION OF AGING BIOLOGY
Ronald Kohanski, National Institute on Aging, Bethesda, Maryland, United States
Dr. Kohanski will discuss research priorities for the Division of Aging Biology. Dr. Kohanski will also be available for small group discussion.

NIA DIVISION OF GERONTOLOGY
Evan Hadley, National Institute on Aging, Bethesda, Maryland, United States
Dr. Hadley will discuss research priorities for the Division of Geriatrics and Clinical Gerontology. Dr. Hadley will also be available for small group discussion.

NIA DIVISION OF NEUROSCIENCE
Eliezer Masliah, National Institute on Aging, Bethesda, Maryland, United States
Dr. Masliah will discuss research priorities for the Division of Neuroscience. Dr. Masliah will also be available for small group discussion.

NIA DIVISION OF BEHAVIORAL AND SOCIAL RESEARCH
Lisbeth Nielsen, National Institute on Aging, Bethesda, Maryland, United States
Dr. Nielsen will discuss research priorities for the Division of Behavioral and Social Research. Dr. Nielsen will also be available for small group discussion.

RISING STAR EARLY-CAREER FACULTY AWARD LECTURE AND CYBER-PEDAGOGY PANEL DISCUSSION
Kara Dassel,1 and Candace Brown,2 1. University of Utah, Salt Lake City, Utah, United States, 2. Duke University, Durham, North Carolina, United States
The Rising Star Early-Career Faculty Award lecture will feature an address by 2021 recipient Candace S. Brown, PhD,