HEALTHCARE UTILIZATION

EXPLORING DEMENTIA CARE IN AN ACUTE CARE SETTING: PERSPECTIVES OF SOCIAL WORKERS AND NURSES.
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Nurses and social workers in acute care settings have unique perspectives about providing care to persons living with dementia (PLwD) who experience behavioral and psychological symptoms of dementia (BPSD). Their distinctive roles and training have important implications for the recovery and well-being of PLwDs during hospital stays. This study utilized the "rigorous and accelerated data reduction" (RADaR) technique to compare perspectives of social workers (n=12) and nurses (n=5) in a Midwestern tertiary care facility about their caring for PLwDs with BPSD. Three major themes were identified: 1) patient engagement and coordination with family and professionals, 2) treatment and medical management, and 3) barriers to care. Similarities between social workers and nurses emerged within the themes, including the importance of family involvement and providing person centered care. Differences emerged particularly within the treatment and medical management theme, as nurses utilize medications to treat BPSD and social workers were more likely to use redirection. While there is distinctive training for nurses and social workers, both identified similar barriers to providing care to PLwDs with BPSD, including time constraints, competing demands, and lack of training on BPSD management. Results demonstrate how an understanding of the critical and complementary roles that nurses and social workers play in dementia care and work together to build a care team can inform best practices to support symptom management and quality of life in PLwDs. Continuing education and training could be beneficial for both professionals to improve the quality of care for PLwDs.

INSUFFICIENT SLEEP AND HEALTH CARE UTILIZATION: A SCOPING REVIEW
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Insufficient sleep is a common problem among older adults with 26% over the age of 65 reporting less than seven hours sleep in a 24 hour time period. Evidence indicates that untreated sleep disorders are associated with osteoarthritis, heart disease, hypertension, diabetes, obesity, falls, decreased cognitive performance, and decreased health related quality of life in older adults. A scoping review was undertaken to determine what is known about the association between insufficient sleep or insomnia and health care utilization. The Joanna Briggs Institute, Methodology for JBI Scoping Reviews was used to guide the review. Searches were conducted in PubMed, HINARI, Google Scholar and Cochrane databases. Twenty nine studies were included. Overall, the review indicates that reduced sleep is associated with a greater odds of difficulties in daily activities, higher rates of health care utilization and costs, and poly pharmacy. Findings also reveal sociodemographic and geographic variations in prevalence of healthy sleep duration. Although the majority of studies focused on the causes and consequences of insomnia and recommended clinical and behavioral health promotion interventions, there is a gap in studies related to the public health or economic impact of insufficient sleep. Research in this area will provide perspectives on the need to raise awareness of the importance of sleep and to incorporate the awareness into policies that improve sleep health.

OLDER NONMEDICAL AND MEDICAL CANNABIS USERS: HEALTH CHARACTERISTICS, CANNABIS USE PATTERNS, AND CANNABIS SOURCES
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Despite rapidly growing number of older medical cannabis users, research on them is scant. In this study, we examined medical and nonmedical cannabis users aged 50+ on health-related characteristics and cannabis use patterns and sources. Hypotheses were that compared to nonmedical users, medical users are more likely to have physical and mental health problems, use healthcare services, discuss their drug use with a healthcare professional, use cannabis more frequently, and purchase cannabis from a medical dispensary and other sources rather than obtain it as a gift, share someone else’s, or use other means. We used the 2018 and 2019 National Survey on Drug Use and Health data (N=17,685 aged 50+; male=8,030; female=9,655) and multivariable logistic regression analysis to test hypotheses. Of the sample, 8.9% reported past-year cannabis use. Of past-year users, 18.5% reported any medical use. Of medical users, 70.9% reported using cannabis more frequently, and purchase cannabis from a medical dispensary and other sources rather than obtain it as a gift, share someone else’s, or use other means. We used the 2018 and 2019 National Survey on Drug Use and Health data (N=17,685 aged 50+; male=8,030; female=9,655) and multivariable logistic regression analysis to test hypotheses. Of the sample, 8.9% reported past-year cannabis use. Of past-year users, 18.5% reported any medical use. Of medical users, 70.9% reported exclusive medical use and 29.1% reported using medically and nonmedically. A large proportion obtained cannabis from private/informal sources. Any medical use, compared to nonmedical use, was associated with lower odds of alcohol use disorder but higher odds of discussing drug use with a healthcare professional (AOR=4.18, 95% CI=2.53-6.89), more days of use (AOR=2.56, 95% CI=1.35-4.86 for 200-365 days), and purchase at a medical cannabis dispensary (AOR=4.38, 95% CI=2.47-7.76). Medical and nonmedical users did not differ on physical health, and both had high behavioral health problem rates. However, only a small portion discussed their drug use with a healthcare professional. More healthcare professional attention to older cannabis users is needed.