

career as a geriatric health services researcher. Specifically, I will address early studies that defined the field, challenges and opportunities for studying deprescribing in older adults, and future directions and priorities in deprescribing research.

#### A PATIENT WORK LENS TO UNDERSTANDING AND SUPPORTING HEALTH CARE AT HOME

Nicole Werner, *University of Wisconsin-Madison, Madison, Wisconsin, United States*

A majority of healthcare today occurs in private homes and is performed by older adults and their informal caregivers. However, only recently have we begun to understand more about the healthcare work of older adults and their caregivers and the home as a healthcare delivery system. Work science allows us to conceptualize the healthcare activities of older adults and their caregivers as a type of health-related work that has been conceptualized under the broad term, patient work. Applying a patient work lens can offer a unique perspective to addressing the persistent and pervasive challenges faced by older adults and their caregivers as they manage their healthcare at home and across healthcare settings. I will describe the historical development of the patient work approach and highlight recent efforts to use a patient work approach to understand and support the work of older adults and their caregivers providing care in the home.

#### GEROSCIENCE BRINGS NEW FOCUS ON THE LIFE-COURSE APPROACH TO HEALTH IN HUMANS

Luigi Ferrucci, *National Institute on Aging, Bethesda, Maryland, United States*

The geroscience paradigm stands on two assumptions:

1. Major changes in health are caused by accelerated aging;
2. The rate of aging can be modified by interventions with significant effects on health span. These simple statements change dramatically the portrayal of aging research in medicine. In the past, aging was considered fixed and irreversible, and the study of aging a speculative science, closer to anthropology than to physiology. However, if biological aging is the root cause of chronic disease and if the rate of aging can be changed, then the study of aging becomes the most important branch of medical research. The last twenty years of research support this view and suggest that the rate of aging is set during early development but is modifiable by appropriate interventions. These findings suggest that the architecture of disease development and subsequent loss of function may be more easily influenced by early interventions.

#### SESSION 7240 (SYMPOSIUM)

##### THE PAST, PRESENT, AND FUTURE OF HEALTH SCIENCES RESEARCH

Chair: Cynthia Brown

Co-Chair: John Batsis

The health sciences have experienced an evolution in research over the past 75 years, moving along the translational

spectrum from bench to bedside to the community. This transformation has impacted health outcomes for older adults at a global and public health level. Expansion in geroscience and implementation science research has changed the lens through which we view how aging occurs, precision management of disease, and has allowed the integration of tested interventions into healthcare systems. This Presidential symposium will showcase investigators, ranging from junior to senior researchers, who will share where their science began, how their research has built on the past, provide insights into their own work, and share their perspectives on the continuing trajectory of their scientific work.

#### SESSION 7245 (SYMPOSIUM)

##### TRANSITIONAL CARE MANAGEMENT: EVIDENCE FOR NOVEL IMPLEMENTATION MODELS AND REHABILITATION IMPLICATIONS

Chair: Margaret Danilovich

Discussant: Margaret Danilovich

The transition between healthcare settings is a complex process presenting challenges for effective and consistent communication between older adults, their caregivers, and healthcare providers. These challenges often result in adverse health events and re-hospitalizations. Further, once transitioned to home, older adults often need ongoing care management and support and evidence for models remains unclear as to the precise parameters of supports needed for comprehensive care. This symposium will provide an overview of the evidence for both interdisciplinary care management models and transitional care programs, present the implementation of a care management program for low income older adults at one social service agency, and provide evidence-based tools for older adult functional assessment and decision-making for transitional care. The speakers will present new tools from the American Physical Therapy Association home health toolbox that promote patient-centered health care decision-making to facilitate successful transitions that reduce resource use and hospital readmission. The speakers will also discuss the implementation of a care management program for older adults in a care gap (having too much income for Medicaid home and community-based services, but still <200% of the federal poverty line). An implementation framework for the needs assessment will be highlighted and 1-year program outcomes will be presented. Attendees will learn strategies for interprofessional collaboration, enhanced communication, and advocacy within the interprofessional team to facilitate improved care management and transitional services for older adults.

##### EVIDENCE FOR A NOVEL CARE MANAGEMENT PROGRAM FOR LOW-INCOME OLDER ADULTS

Rachel Lessem,<sup>1</sup> and Margaret Danilovich,<sup>2</sup> 1. *CJE SeniorLife, Chicago, Illinois, United States*, 2. *CJE SeniorLife, Evanston, Illinois, United States*