

restrictions, and lack of disease specific clinical knowledge. Self-reported stress was high, with 53% of participants screening positive for potential severe depression and anxiety (PHQ-4 total score  $\geq 9$ ) and 29% screening positive for possible post-traumatic stress disorder (PTSD) based on the IES-6 (mean score  $\geq 1.75$ ). Interview data offered evidence of the sources and nature of psychological impact of a COVID-19 outbreak. Participants experienced decreased stress when they reported increased knowledge, increased experience, decreased mortality, resolution of outbreak, and access to vaccination.

**Conclusion/Discussion:** Nursing home staff described pandemic advance care planning as impersonal and uncomfortable compared to prior experiences. In future crises, maintaining in person conversations or equivalent interactions and supporting staff with adequate clinical knowledge and personal mental health resources is important in ACP.

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### Impact of COVID-19 on Infection Control Practices in Skilled Nursing Facilities



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**Introduction/Objective:** Infection control practices in the skilled nursing facility (SNF) setting have been a critical priority during COVID-19. Our study observed specifically which practices, as predicted by SNF infection management staff, are likely to remain in place in the future, and how they may change.

**Design/Methodology:** 26 semi-structured, qualitative interviews were conducted with administrators, directors and assistant directors of nursing, infection preventionists, and Minimum Data Set (MDS) coordinators at 13 SNFs across the country from June to September 2021. Interview transcripts were analyzed using a content analysis approach.

**Results:** SNF infection management staff agreed that there is increased awareness of infection control practices due to COVID-19, as well as greater education and monitoring of ongoing infection control practices. Staff, families, and other visitors entering the SNF are screened upon entering the SNF. When someone has symptoms of an influenza-like illness, testing increased and training of staff about proper protocol when an individual is symptomatic increased. Overall visitation within the facility is more controlled. Other changes to infection control practices include enhanced capabilities of isolating symptomatic residents, presuming that new admissions are infectious by placing them in a quarantine unit, closing common areas of the SNF, having more easily accessible personal protective equipment throughout the SNF, and quicker, more frequent, and more thorough cleaning. Prior to the COVID-19 pandemic, infection control practices varied more widely by facility. For example, during influenza season some facilities required staff to wear masks if they chose not to receive a flu vaccine, while other facilities did not. However, since the pandemic, mask-wearing mandates for anyone inside a SNF, including staff, residents, and visitors, are nearly universal. Most people that were interviewed agreed that mask-wearing would continue well into the future and that decreases in influenza outbreaks over the course of the COVID-19 pandemic were due in part to increased infection control practices, such as mask-wearing. However, continued mask wearing was not always viewed as positive; some worried that continued mask-wearing would disincentivize staff from getting a flu vaccination, particularly in facilities where staff needed to wear masks if they did not receive their influenza vaccine prior to COVID-19. Some expressed that continued mask-wearing, in addition to continued increased screening and monitoring, would lead to staff burnout, making it difficult to staff SNFs in the future.

**Conclusion/Discussion:** The COVID-19 pandemic led to significantly enhanced and more uniform infection control practices in SNFs. While there may be some negative consequences of continued enhanced

infection control practices, such as staff burnout, infection management staff at SNFs agreed that enhanced infection control practices have contributed to decreases in influenza outbreaks.

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### Increasing Sense of Purpose Reduces Loneliness in Long-Term Care Residents



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**Introduction/Objective:** Loneliness poses a risk to long-term care residents' physical, mental, and emotional health. The COVID-19 pandemic has exacerbated the psychosocial challenges in long-term care. To address these long-standing challenges, programs focused on temporary companionship are not enough. Create Circles, a 501(c)(3) nonprofit, developed an evidence-based curriculum for volunteers and health professionals to develop a sense of purpose rather than provide companionship. By encouraging goal-oriented projects like compiling a cookbook or writing a memoir, the older adult-volunteer pair use past experiences to find meaning in the present. We hypothesize that the Create Circles intervention will 1) develop a sense of purpose and 2) reduce loneliness in residents over 8 weeks. We tested the efficacy of this curriculum and intervention with the Crumbaugh & Maholick Purpose in Life Test and the UCLA Loneliness Assessment.

**Design/Methodology:** The study population was drawn from 3 skilled nursing facilities, including 2 rural and 1 suburban facility. Residents were enrolled based on cognition, ability to speak, and perceived loneliness by the Activities Directors at each facility. Undergraduate students paired with the residents were trained by the 4-hour Create Circles Resident Engagement training online. The training consists of long-term care background knowledge, perspective taking, rapport-building strategies, engagement activities, sample interactions, and role-plays. Volunteers virtually met through video chat 2 times per week with their respective residents for 8 weeks. Residents completed the Crumbaugh & Maholick Purpose in Life Test and the UCLA Loneliness Assessment before and after the 8-week program. After the program, Activities Directors were asked about perceived resident loneliness, engagement, and niceness with staff.

**Results:** Twelve residents from 3 skilled nursing facilities and 12 volunteers from 6 universities participated in the program from March 1 to April 30, 2021. Paired-sample t-tests showed a 31% increase (6.7 vs. 8.8,  $p < .001$ ) in purpose in life and a 28% (3.3 vs. 2.4,  $p < .001$ ) decrease in loneliness due to the intervention. Activities Directors averaged a 5 on a 5-point scale (1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree) when asked if the intervention made the residents less lonely, more engaged, and nicer to staff.

**Conclusion/Discussion:** The Create Circles program was well-received by residents and volunteers, and nursing home staff. The data suggest that programs that focus on instilling a sense of purpose for long-term care residents effectively reduce loneliness. Limitations for this study include small sample size and lack of long-term follow-up. A study with a larger sample size and longer follow-up would validate these preliminary results.

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### Pain Management Among Nursing Home Residents Before and After COVID-19: A Systematic Review



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**Introduction/Objective:** Pain is underrecognized and undertreated in nursing home settings. Pain management represents a challenge in