

associations were with order, dutifulness, and self-discipline ($ps < .01$). These associations were independent of a range of behavioral and cardiovascular covariates. The results suggest that arterial health may be one mechanism through which Conscientiousness contributes to healthier aging.

PERSONALITY TRAITS (. . . BUT NOT THE BIG FIVE) PREDICT THE ONSET OF DISEASE

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The utility of personality measures as predictors of distal outcomes (e.g., mortality, longevity) is well-documented. Few have reported on more proximal outcomes; one prominent exception (Weston, Hill, & Jackson, 2014) considered personality predictors of chronic disease onset. We report here on efforts to (1) replicate their findings in a second cohort of participants from the Health and Retirement Study and (2) extend their analyses to evaluate the effects of socioeconomic factors. For 7 chronic diseases and the Big Five scales, the only significant measure in both samples when controlling for SES was Openness as a protective factor in the development of a heart condition. SES, by contrast, was a significant predictor in more than one-third of the models. We also demonstrate methods for empirically deriving outcome-specific scales with substantially improved predictive utility and advocate for broader use of these methods when prediction is more important than taxonomic description.

SENSE OF PURPOSE IN LIFE AND RISK FOR ONSET OF CHRONIC ILLNESSES

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Chronic health conditions have become increasingly common in recent years and may prove to become an even greater problem given the aging population. Having a sense of purpose in life has been linked to a reduced risk for several chronic health conditions, though the mechanisms behind this relationship remain underexplored. The current study examined whether purpose in life predicts risk for development of seven common chronic ailments (arthritis, cancer, diabetes, high blood pressure, heart conditions, lung disease, and stroke) over an eight-year period using data from the Health and Retirement Study. Bootstrapping tests were used to examine the direct effect of purpose on onset of illnesses, as well as potential health behaviour mediators (physical activity, alcohol, smoking, and sleep quality). Sense of purpose in life was associated with onset for some but not all conditions. Results will be discussed in the context of implications for future research and practice.

SESSION 5155 (SYMPOSIUM)

INTERNATIONAL ADVANCES IN INTERPROFESSIONAL GERIATRIC MEDICINE EDUCATION

Chair: A. Blundell, *Nottingham University Hospitals NHS Trust, Nottingham, United Kingdom*

Co-Chair: R. Roller-Wirnsberger, *Medical University of Graz, Graz, Austria*

Discussant: A. Gordon, *University of Nottingham, Derby, Derbyshire, United Kingdom*

With our ageing population there is increased recognition of the needs of older adults with frailty within health systems. The UK's Health Service Journal reported in 2015 that older adults with frailty, dementia and multiple co-morbidities are now "core business" in all health and social care settings. Comprehensive Geriatric Assessment is an evidence-based model of care that delivers better outcomes for older adults with frailty and which mandates a multidimensional and interprofessional approach. All healthcare professionals require the core skills to deliver CGA to keep pace with the growing prevalence of frailty in all care sectors. This will require competencies in interprofessional working best attained through interprofessional learning. Further international emphasis on interprofessional working has been stressed by the World Health Organisation in their publication "Framework for Action on Interprofessional Education and Collaborative Practice".

This symposium presents recent advances in interprofessional geriatric medicine education in Europe including both policy and curriculum development in addition to novel approaches in interdisciplinary teaching. The subject areas cover both undergraduate and postgraduate arenas and include reference to patient and public partners and involvement of patients within educational programs.

DEVELOPMENT OF THE ROLE OF AN ADVANCED NURSE PRACTITIONER IN GERIATRIC MEDICINE IN THE UK

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Advanced Nurse Practitioners (ANP) are experienced nurses who undertake activities traditionally performed by medical staff. There are four pillars of advanced practice: advanced clinical skills, leadership/management, education and service development/research. ANPs are starting to specialise in the care of older people with frailty. The education of the ANPs in core geriatric topics has been core to the success of this project. Both the learning and service provision is interprofessional, allowing the ANPs and junior doctors to learn with and from each other, improving collaboration and care quality.

To ensure consistency in standards, we have developed a role description and ANP competencies through a Modified Delphi process. The development of the curriculum, the continuing professional development and the implementation of the integration of our ANPs into the medical ward teams will be presented. In addition we will share the results of an independent service evaluation that is currently taking place.

THE EUROPEAN INTERDISCIPLINARY COUNCIL ON AGING: A HUB FOR RESEARCH, EDUCATION, AND KNOWLEDGE

R. Roller-Wirnsberger, *Medical University of Graz, Graz, Austria*

Numerous policy initiatives across EU member states have been put in place in order to analyze and deal with the impact of this development e.g. on future concepts of welfare states, on health care demands, on respective access and