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Florida Association of Aging Services Providers

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Message from the President

By Darrell J. Drummond, Council on Aging of St. Lucie, Inc.



It's that time of year, the ending of our fiscal year. Like many non-profit organizations here in Florida, my agency follows the fiscal calendar used by Florida's State government; July 1 – June 30. Like the State legislature, we are finalizing and approving our budget for the next fiscal year. All of us, with the exception of the federal government, must produce a balanced budget, free of any deficit spending to meet our needs. The State legislature has finalized their budget for the new year, after a special session was required in order to accomplish their work.

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This Issue's Sponsors





The finalized budget now sits on the Governor's desk awaiting his signature or veto as prescribed by law. The senior network, in conjunction with FCOA's advocacy and the Department of Elder Affairs (DOEA) successfully lobbied for and received additional funding for critical programming for Florida's senior population. Please thank your legislative representatives for all of their efforts in making these increases possible for our seniors

A total of \$13,500,000 in additional funding was secured for critical home and community-based programs this legislative session. Over the course of the last ten (10) years, FCOA's advocacy has brought in more than \$150,000,000 to support our most vulnerable senior population. These programs insure the ability of our network providers to help seniors remain in their homes and communities, living productive lives and not forced into long term care facilities prematurely.

Thank you all for your past support in these efforts and I ask that in addition to your membership fee, please consider continuing your donations to the FCOA Advocacy Initiative supporting efforts to increase funding for home and community-based programs.

August is right around the corner, and we will be convening for our annual FCOA/FASP Conference the first week in the month, August 4th- 6th. The full schedule of workshops, meetings and dates and times can be found on the FCOA website (Conference). A part of FASP's commitment to the Conference is helping secure sponsors for the event. We are still below our budget for sponsors, so please reach out to Colette Vallee at cvallee@mlduggar.com to see how you may assist us in reaching our goal.

Please bring key staff and Board members to the Conference; there will be great information and opportunities for networking for all attendees. FCOA is celebrating seventy years (70) in existence and we look forward to many more successful years of service to this State and our seniors.

Happy 4th of July! Please look for me during the conference, I would love to chat with as many of you as possible.

Darrell Drummond





Social Security is Turning 90!

Quick Facts:

- * The 90th Anniversary of Social Security will be celebrated on August 14, 2025.
- * Social Security was established on August 14, 1935, when Franklin D. Roosevelt signed the Social Security Act into law.
- * Every working American pays into the system through payroll taxes with the promise that Social Security will be there for them too, when they need it.
- * Social Security benefits are instrumental in reducing poverty in every state, and they lift more people above the poverty line than any other program in the United States..
- * The Social Security Program has played a critical role in providing financial security for retired workers, their families and people with disabilities.
- * Currently, more than 69 million Americans receive Social Security.





Evolution of Medical Alert Devices

By Darrell J. Drummond, St. Lucie Council on Aging

The phrase “I’ve fallen and I can’t get up,” which became widely known in the late 1980s, was many Americans’ first introduction to medical alert technology. These early devices were simple: a user would wear a pendant or wristband that, when activated, sent a signal via a landline base to a monitoring center or caregiver. While groundbreaking for their time, these systems had one critical drawback—they depended entirely on the user being conscious and physically able to activate them. Over the years, advancements in technology have significantly transformed these systems into dynamic tools that promote both safety and independence for older adults.

From Buttons to Smart Detection

A key advancement has been the move from manual input to automatic fall detection. Previously, users had to initiate an alert—something not possible if they lost consciousness or were otherwise incapacitated. To solve this, engineers began incorporating motion-sensing technologies—specifically accelerometers and gyroscopes—into wearables. These sensors work together to detect sudden shifts in motion and body orientation, which are telltale signs of a fall.

However, interpreting motion data isn’t always straightforward. Everyday movements can mimic the patterns of a fall, so developers introduced machine learning algorithms trained on thousands of movement scenarios. These algorithms now help distinguish between routine activity and serious incidents. When a potential fall is identified, the system can automatically send alerts, share location information, and initiate voice communication with emergency services—without requiring any user input.

This is especially important for individuals with medical conditions that increase fall risk or impair mobility. Some systems even monitor less severe slips or hesitations over time, using that data to detect rising instability and alert caregivers before a more serious fall occurs.

Preventing Falls Before They Happen

Modern systems don’t just detect emergencies—they’re increasingly focused on preventing them. Predictive monitoring uses real-time data to identify patterns that might suggest a higher fall risk. These systems track walking speed, gait consistency, posture, and balance. Subtle changes—like a shorter stride, hesitation when standing, or increased sway while walking—can indicate physical decline or health issues.



By building a behavioral profile, these tools can alert caregivers or suggest interventions if unusual patterns emerge. Some platforms create a fall risk score based on these findings, enabling proactive steps like scheduling a checkup, adjusting medications, or beginning balance training. For the user, the system may offer gentle prompts, encouraging rest or suggesting when to avoid overexertion.

This shift to early warning mirrors broader trends in healthcare that prioritize prevention over treatment. Much like cardiac monitors can flag heart irregularities before a crisis, predictive fall tools allow users and caregivers to act before an accident occurs—potentially avoiding injury, hospitalization, and long-term consequences.

Smarter Devices, Greater Acceptance

Early alert systems were often large, utilitarian, and stigmatized. Many users felt self-conscious wearing them in public. That changed with the integration of medical alert features into consumer-friendly wearables like smartwatches and fitness bands. These modern devices provide a range of health tools—emergency alert functions, heart rate monitoring, blood oxygen measurement, step counting, and medication reminders—all in a sleek, familiar package.

This design shift encourages daily use. Seniors can stay safe without wearing something that signals vulnerability. These devices also collect continuous health data that can be shared with caregivers or doctors through apps and cloud-based dashboards. This helps families monitor changes in activity or vital signs and respond quickly if something seems off.

Wearable-based systems work anywhere—at home, in the park, or while traveling—unlike earlier models tied to a base unit. This mobility makes them an excellent option for active older adults who still value their independence.

Location Tracking That Keeps Up

With more seniors leading active lifestyles, being confined to home-based alert systems is no longer enough. GPS-equipped alert devices have become essential. These tools track the user's location in real time and can guide emergency responders directly to them—even if the person can't speak.

This feature is especially helpful for people who live alone, frequently travel, or are affected by memory loss. Some devices use “geo-fencing,” alerting caregivers if the person leaves a safe zone or doesn't return home as expected. This layer of protection can be critical in avoiding dangerous wandering or delayed responses during emergencies.

This voice connection helps assess the severity of the situation. If the user is coherent but dizzy, the operator may advise them to rest rather than send emergency responders. If the user is confused or distressed, the operator can stay on the line until help arrives—providing calm and reassurance in high-stress situations.

Talk Through the Crisis

Another major improvement is built-in two-way communication. Older systems only sent alerts, with no way for the user to speak to someone unless they were near the base unit. Today's models often include microphones and speakers within the wearable itself, allowing for immediate voice contact with trained operators.

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The infographic features a background image of a bedroom with a large bed, nightstands, and a window. Overlaid on this image are several teal-colored circles containing statistics about falls. At the bottom, a teal banner contains the title 'FALLS POSE MAJOR PROBLEMS'.

- Men are **40% MORE LIKELY** to die from a fall
- Those who fall are **THREE TIMES MORE LIKELY** to fall again
- One third of those **65 AND OLDER** fall each year
- EVERY 13 SECONDS**, an older adult is treated in the emergency room for a fall
- 55% OF FALL INJURIES** occurred inside the house
- Falls are the **LEADING CAUSE OF DEATH DUE TO INJURY** among seniors

FALLS POSE MAJOR PROBLEMS



TIPS TO **PREVENT** FALLS

MAINTAINING SAFE MOBILITY



REACH

Resources & Education
for Aging, Community, and Health

Many people worry about changes in their mobility. Learn how to make small changes to maintain your mobility as you age.

WHAT YOU CAN DO

- ✓ **Strength and balance exercises**
Find an activity you like doing, such as walking, chair exercises, or strength training. Start slow if it has been a while since you last exercised. Increase time or distance once you become more comfortable with the activity.
- ✓ **Talk to your healthcare provider**
Some medical conditions and medications may increase your risk of falling. For example, vision and ear issues can affect your balance. Talk with your healthcare provider about your risk and before beginning any challenging activities.
- ✓ **Make your home safer**
 - Clear walking paths
 - Check for loose rugs
 - Install grab bars inside & outside your tub or shower
 - Make sure all areas are well lit
- ✓ **Use supportive tools and devices**
Consider using tools like walkers or canes if you have an unsteady gait or pain or weakness in your legs. These tools can help you stay mobile for longer. Wear clothing such as sturdy shoes or nonskid socks to help reduce your risk of falling.

ONLINE AT
REACH.MED.FSU.EDU

Nourishing Minds

Addressing Nutrition and Mealtime Challenges in Dementia Care

Presented by: Kristen Neises, APRN, FNP-C, DipACLM

Diet & Brain Health - What We Eat Shapes How We Think

- Diet affects memory, focus, and risk for cognitive decline • Nutrition supports brain structure, reduces inflammation, promotes healthy aging
- Mediterranean and MIND diets are linked to lower dementia risk
- Key nutrients: omega-3s, antioxidants, B vitamins



Nutrition, Inflammation, & Neurodegeneration

Poor diet → chronic inflammation → neural injury

Inflammatory diets linked to higher dementia risk

Key role of antioxidants linked to higher dementia risk

Nutrition can help modulate brain inflammation



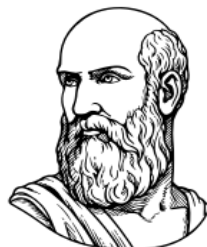
The Gut-Brain Connection & Dementia

- Gut and brain are in constant communication via vagus nerve
- Gut microbiota produce neurotransmitters (serotonin, dopamine)
- Dysbiosis= inflammation, leaky gut, neuroinflammation
- Altered gut microbiome found in people with Alzheimer's • Microbiome transfer studies show potential causal role

“

Let food be thy medicine, and
medicine be thy food.

-Hippocrates



Mediterranean “Diet”

Emphasizes:

- Olive oil, nuts, legumes, fruits & veggies
- Fish and lean proteins
- Whole grains and moderate red wine
- Reduces inflammation and supports blood flow to the brain
- Linked to slower cognitive decline and lower risk of Alzheimer’s



MIND “DIET”

1

Partially based on the Mediterranean and DASH diets that have been proven to reduce cognitive decline

2

Increases plant foods and decreases animal foods

3

Recommends specific brain healthy foods to incorporate and unhealthy foods to limit

4

Studies show that the MIND diet can reduce cognitive decline even more than the Mediterranean and DASH diets alone

Implementing Brain-Healthy Nutrition in Dementia Care

1

Guiding meal
planning and food
choices

2

Promoting nutrient
intake for brain
health

3

Addressing
barriers to healthy
eating

Addressing Barriers to Nutritious Foods

Food Insecurity Challenges:

- Fixed incomes
- limited transportation
- mobility issues

Strategies:

- Recommend shelf-stable healthy foods (beans, pasta, fortified plant milks)
- Suggest SNAP-accepting delivery services
- Teach about low-cost, nutrient-dense options
- Eating on a Budget Handout



Connecting to Support Programs

- SNAP: Grocery assistance
- Home-Delivered Meals: Meals on Wheels
- Congregate Nutrition Services: Meals at senior centers
- Senior Farmers Market Nutrition Program
- Commodity Supplemental Food Program (CSFP)

(For entire presentation: [www.fasp.net/info/Neises Nutrition in Dementia Care.pdf](http://www.fasp.net/info/Neises_Nutrition_in_Dementia_Care.pdf))



Are You Noticing These Signs of Cataracts In Your Clients?

Collaboration By: Dr. Stephen Tate at New Vision Eye Center-Vero Beach and Erin Miller, Senior Resource Association, Inc

June is **Cataract Awareness Month**, a timely opportunity to recognize your clients' early signs of cataracts. Cataracts, a leading cause of vision impairment, develop gradually and can significantly impact daily life if left untreated. As service providers for older adults, understanding these symptoms can help facilitate timely intervention and improve quality of life.

Recognizing the Symptoms

Cataracts occur when the eye's natural lens becomes cloudy, leading to vision impairment. Clients may describe their vision as looking through a foggy window, making everyday tasks like reading and driving more challenging. Common symptoms include:

- A halo sometimes appears around lights
- Poor night vision
- Difficulty driving at night due to glare from headlights
- Frequent changes in prescriptions for eyeglasses or contact lenses
- Double vision
- Vision problems that interfere with daily living
- Colors seem faded

It's important to note that cataracts can develop in one or both eyes, but they are not contagious and cannot spread from one eye to the other.

[What Are Cataracts? - American Academy of Ophthalmology](#)

Risk Factors and Prevention

While aging is the most common cause, other factors such as diabetes, prolonged sun exposure, smoking, and certain medications can accelerate cataract formation. Encouraging clients to wear UV-protective sunglasses, maintain a healthy diet, and schedule regular eye exams can help slow progression.

After the age of 40, cataracts become increasingly common. In fact, more than half of all Americans by the age of 80 have experienced a problem with cataracts or have had them removed.

"Cataracts develop for most people later in life. For patients needing living assistance, cataract formation can worsen symptoms of dementia and increase the risk of fractures," said Dr. Stephen Tate, Ophthalmic Surgeon at New Vision Eye Center in Vero Beach, specializing in advanced cataract surgery techniques.

Cataract Surgery: What to Expect

For patients experiencing significant vision impairment, cataract surgery is the only treatment option. The procedure involves replacing the clouded lens with an artificial intraocular lens (IOL), restoring clarity and improving overall vision.

“Removing cataracts involves a straightforward 15-minute procedure performed in an outpatient setting. Cataract surgery is one of the most common and successful surgeries performed around the world,” explains Dr. Tate.

The Role of Aging Service Providers

As professionals working with older adults, recognizing the early signs of cataracts is essential to preserving their quality of life. Encouraging clients to seek ophthalmologic evaluations and explore treatment options can help prevent unnecessary vision loss. As Dr. Tate emphasizes, “Patients who think they are developing cataracts should have a routine eye exam.”

Dr. Stephen Tate is the Director of New Vision Eye Center’s cataract service and Medical Director of their state-of-the-art surgery center. As a board-certified ophthalmic surgeon, Dr. Tate is an expert in cataract and lens implant surgery.

Dr. Tate is Board Certified by the American Board of Ophthalmology, a member of the Indian River County Medical Society, American Medical Association, American Society of Cataract and Refractive Surgeons and the Florida Medical Association. He is also a volunteer professor for the Florida State University College of Medicine

Additional information about cataracts can be found at:

[American Academy of Ophthalmology](#)
[Cataracts | National Eye Institute](#)
[Cataract Surgery - Prevent Blindness](#)



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