



Florida Association of
Aging Services Providers



Florida Association of Aging Services Providers e-Newsletter

Volume 50: November/December 2015

Guest Editor: Mary Jo McKay, Hillsborough County Department of Aging Services

Table of Contents

<i>Presidents Message</i>	1
<i>Caregiver: Commitment and Confusion</i>	2
<i>Caregiver's Workshop</i>	3
<i>FASP CIRT's Advocacy Position</i>	4
<i>The Residences of United Home Care</i>	5
<i>Stand Up for Older Adults Infographic</i>	6-7
<i>Medicaid Managed Care</i>	8
<i>The Giving Tree</i>	9
<i>National Institutes of Health</i>	10-11
<i>National Aging and Disability Transportation Cen. 12</i>	
<i>Resources</i>	13
<i>Social Media Links</i>	14
<i>Sponsor Spotlight</i>	15

Message from the President

by Andrea Busada, Broward County Elderly and Veterans Services

Dear FASP Members:

Your Board of Directors is hard at work in anticipation for the 2016 Legislative Session. Your involvement in advocacy efforts will remain crucial as we all strive to engage our Legislators about the importance of home and community based services. If you have photos of you with Legislators or of Legislators visiting a senior program or event, you can send them to FASP (moreinfo@fasp.net) for a chance to be featured in advocacy promotions or the FASP Newsletter.

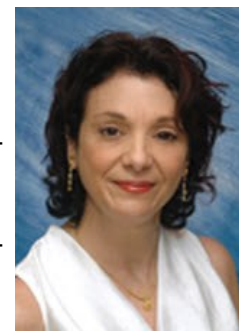
Here is a review of the Advocacy Initiative priorities to mention when speaking with Legislators:

- Increase General Revenue funding to serve high-risk frail seniors on the Department of Elder Affairs Waiting List for the Community Care for the Elderly (\$18,429,112 to serve

THIS ISSUE SPONSORED BY:



- an additional 2,536 consumers)
- Alzheimer's Respite Care (\$9,334,896 to serve an additional 886 consumers)
- Home Care for the Elderly (\$8,203,680 to serve an additional 2,532 consumers) Programs.
- Additionally, we request that Local Services Programs be funded at continuation levels.



We are wrapping up a successful year in 2015 with much to be grateful for, and look forward to the opportunities next year will bring! Here's to a fresh start in 2016.

Sincerely,
Andrea Busada

Caregiver: Commitment and Confusion

It is an all too common problem. Spouses, daughters, sons and other relatives become caregivers and they are not ready. It is a combination of busy lives, long distances, and often subconsciously denying that it is time to step in. Those who receive the call are ill-equipped. They didn't anticipate becoming a nurse, chauffeur, personal assistant, housekeeper, physical therapist, or psychologist.

Let's face it. Searching the web only provides basic information and a starting point. It is still very confusing to navigate the varied resources, services, and eligibility requirements.

As a lead agency for Hillsborough County, the Aging Services Customer Care Team hears the familiar refrain: My parents can no longer care for themselves, and I have no idea where to start!



Callers have heard that services are available, but don't know who provides them or how to apply for them. The questions begin: Will Medicare, Medicaid, or private insurance pay for services? How do I get someone to look in on my Mother since I live in another state? My Grandfather no longer drives, so how is he going to get to his doctor appointments? My Dad is a hoarder, his house is not safe and he won't listen to me. Can someone go in and clean it up for him? My Mom moved in with me, but I can't leave her alone because she leaves the stove on. How am I going to work?

Whether the elder person live with a caregiver or the caregiver live elsewhere, finding the right resources is a daunting task. And, the number of Americans caring for an elder person is ever increasing. There are 34 million adults involved in caregiving to persons aged 50 or over. There 8.9 million informal caregivers providing care for someone aged 50+ with dementia. Most family caregivers are women; spouses, and daughters. It starts with small amounts of help and escalates. It is typically a 5-10 year commitment, providing 60+ hours per week at home. For those providing care for someone with dementia, there are additional stresses of controlling dangerous or embarrassing behavior, agitation, anger, depression, suspiciousness, and wandering away. (Haley, William E., PhD, School of Aging Studies, University of South Florida. "Care for the Caregivers: Becoming a Resilient Caregiver", Caregiver's Workshop, Tampa, FL, Nov. 10, 2015)

The goal of the caregiver is keep the aging adult in a home environment as long as possible. As providers, our goal is the same. We continue to advocate for caregivers, and know what is truly needed is more funding. Caregivers need transportation provided to adult day service facilities, increased respite care, and a more realistic stipend to help with expenses incurred on behalf of the person aging in place. In addition, caregivers need accessible support networks. We know that both monetary and emotional support encourages and enables caregivers to continue loving, low-cost care.

Aging Services Hosts Annual Caregiver's Workshop

One of the ways Hillsborough County Aging Services is supporting caregivers is with its annual caregiver's workshop. Over 100 caregivers and those anticipating it as a future role, attended the *Putting the Pieces of Caregiving Together* workshop on November 10, 2015. The workshop's positive, supportive atmosphere along with practical coping strategies were the cornerstones of the event.

U.S. Representative Kathy Castor attended and spoke about the importance of support for caregivers and families, and her continued efforts to keep support for the elderly visible in Congress.



US Representative Kathy Castor

Expert panelists from the Alzheimer's Association, USF Health Byrd Alzheimer's Institute, AARP, Lifepath Hospice, Senior Connection Center, Inc. (formerly the West Central Florida Area Agency on Aging), an elder law attorney, along with the USF Director of Florida Policy Exchange Center on Aging answered questions from attendees.



Aging Services Caregivers Workshop – Presenting Strategies, Caregivers Share Experiences, Information Booths



Elder Law Attorney Emma Hemness

The Keynote Speaker was Cheryl Kuba, a gerontologist, author (*Navigating the Journey of Aging Parents: What Care Receivers Want*), and humorist who used her humor to connect with the audience. She shared her personal story of stepping in when her parents became dependent. She stressed that the most important step is starting the conversation before it happens. According to AARP, 70% of adult children do not talk to parents about aging.

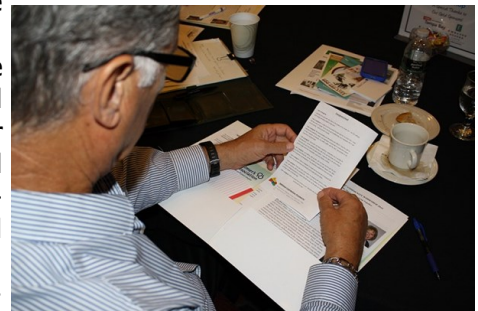
Once there is a need to intervene, Ms. Kuba believes the first challenge is patience: With the aged person; agencies, governments and insurance companies; and sometimes other well-meaning family members.

The second challenge is reaching out to the right resources: Local lead agencies for senior services; the Area Agencies on Aging; professionals who handle long term care insurance, financial planning, reverse mortgages; and support of a spiritual or life affirming sponsor.

The third challenge is self-care of the caregiver: Physical and emotional

health, watching for the common warning signs of caregiver depression. Depression can manifest itself through increased blood pressure, heart attack scares, arthritis flare-ups, acid reflux, headaches, etc. Maintaining one's own health is essential for the continued care of others.

Most of all, it is imperative to keep a positive attitude: Celebrate everything! Be thankful for small successes, a good day (or night), family and community support, and the ability to provide loving care.



Supporting and Educating Caregivers

FASP Advocacy Position on DOEAs CIRTs Request



December 17, 2015

Secretary Sam Verghese
Florida Department of Elder Affairs
4040 Esplanade Way
Tallahassee, FL 32399

Dear Secretary Verghese:

The Florida Association of Aging Services Providers (FASP) values our partnership with the Florida Department of Elder Affairs (DOEA). We appreciate the amount of time you spent traveling the state talking to the area agencies on aging, providers and consumers, which lead you and your staff to identifying that the aging database CIRTs may no longer be the most efficient way to track services that consumers are receiving.

The Florida Association of Aging Services Providers Board of Directors has voted to support the DOEAs Legislative Budget Request of \$250,000 to fund a study/assessment of the 24 year old CIRTs database as an advocacy priority for 2016. Please let us know if there is anything we can do to assist you during the upcoming Legislative Session in support of this funding.

Thank you for all you do for Florida's Aging Network and we look forward to working with you during the upcoming Legislative Session.

Cordially,

Margaret Lynn Duggar, Executive Director



FASP Endorsed FCOA Advocacy Priorities

The Florida Council on Aging continues advocacy to increase funding to General Revenue Funded home and community based programs: Community Care for the Elderly, Home Care for the Elderly, Alzheimer's Disease Initiative/Respite Programs and Local Services Programs. FCOA is requesting significant increases to reduce the waiting lists for services for Florida's most frail older adults. This year we are requesting an increase of **\$35.9 million to serve 5,954 people on the waiting list.**

FCOA and advocates all over the state have been attending Delegation Meetings and getting out and sharing information about aging services programs with Legislators and their staff.

How can YOU help?

1. Invite a Legislator or their staff to deliver meals, visit a senior center or adult day center. They will see for themselves how important these programs are to the lives of older adults and their caregivers.
2. Make a donation to help FCOA to support grassroots advocacy work. Your donation will help cover expenses associated with the FCOA advocacy work. [CLICK HERE to make your tax-deductible donation.](#)

The Residences of United Home Care



From left to right: Carlos Martinez, Maria Torre, Tom Duggar and Margaret Lynn Duggar

FASP Executive Director Margaret Lynn Duggar recently visited The Residences of United Home Care in Miami, FL. She was treated to a tour of the facility by United Home Care President and CEO Carlos Martinez, and Maria Torre, Administrator. The Residences is brand new and will open to residents in January 2016.

You can find out more about The Residences of United Home Care [here](#).



Stand Up for Older Adults Task Force



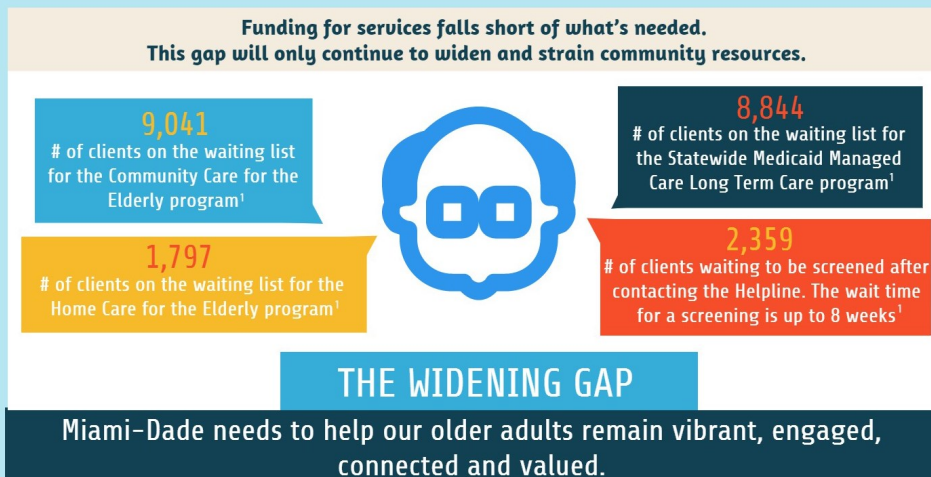
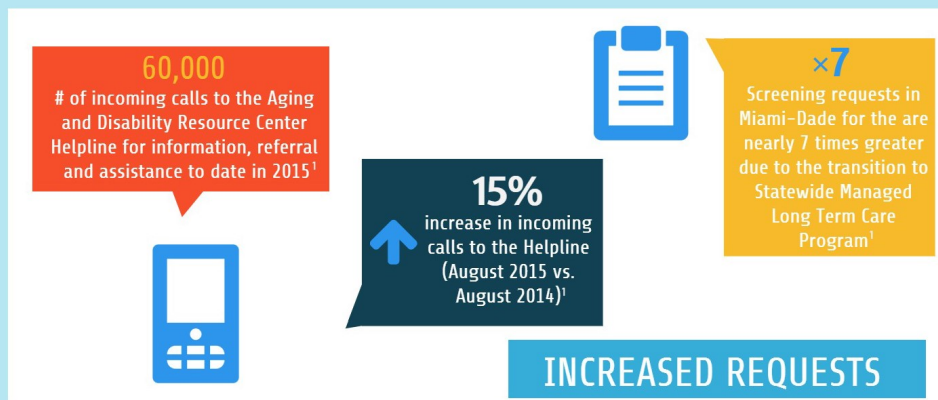
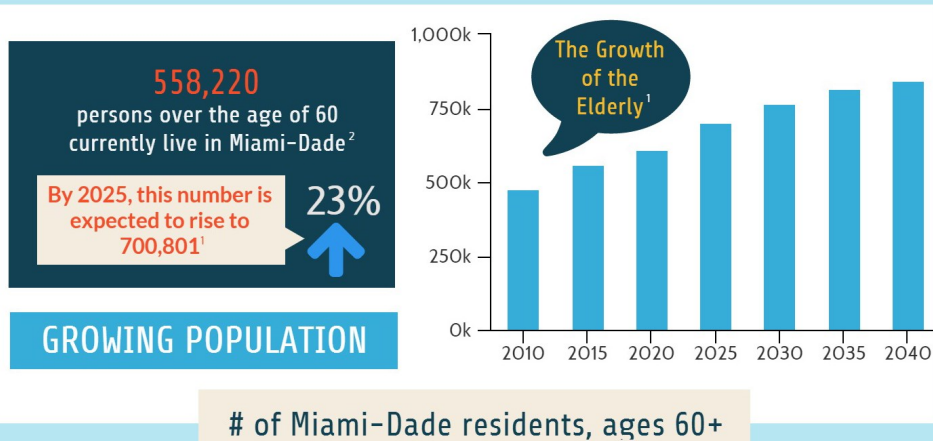
The Stand Up for Older Adults Task Force held an event on November 13, 2015 to garner wisdom from past successes, and spark new ideas to address the growing needs of the community. The attendees were an even mix of non-profit organizations, direct service providers and the business community. With any movement, it is important to engage each sector for success. United Way of Miami-Dade helped facilitate the event and provided a helpful infographic (shown on pages 6-7) to demonstrate the needs of the community.

The event agenda included insights from community leaders such as Senator Gwen Margolis, Department of Elder Affairs Secretary Samuel Verghese, Miami-Dade Board of County Commissioners Chairman Jean Monestime, Health Foundation of South Florida President and CEO Steve Marcus, The Children's Movement President David Lawrence, Bendixen & Amadi International Principal Fernando Amadi and Florida Council on Aging Executive Director Margaret Lynn Duggar.

Next steps include exploring the role of traditional and non-traditional players, building political will, identifying the champion or key figure of the movement, developing an articulate case and message and engaging the media and the public.

Stand Up for OLDER ADULTS

Creating a movement for older adults in Miami-Dade



Sources: 1. Alliance for Aging, Helpline, Intake, Eligibility, Miami-Dade Elder Demographic Projections, as of October 9, 2015

2. Department of Elder Affairs, 2015-2034 Projections, <http://elderaffairs.miamidade.gov/elderaffairs/2015-2034-projections/>

Continued on page 7

Stand Up for OLDER ADULTS

Creating a movement for older adults in Miami-Dade

Miami-Dade County is home to the largest number of seniors in Florida. There are 536,607 persons over the age of 60 currently living in our community. This number is expected to rise to 700,801 persons, or a 23% increase by 2025. As a natural consequence of aging, health and social service needs increase.¹

It is well-documented that seniors do best when they can “age in place” in the comfort of their own homes surrounded by friends and loved ones. Florida has taken a leadership role in providing community-based alternatives to institutional care that provide the necessary care for older adults at home. These services are more cost-effective than nursing home care. Unfortunately, these programs are not being funded commensurate with the needs. As a result, there are thousands of seniors waiting for these services. This results in the premature institutionalization of seniors, which dramatically increases the cost of services for long term care.

There is a network of community-based social service agencies providing support to seniors. Funding for these services comes from many sources including federal, state and local government, community organizations and local foundations. The continued availability of funding is unable to meet the current and future needs of our aging seniors. It is crucial to start preparing now to meet the needs of an aging population.

The purpose of the Older Adult Advocacy Taskforce is to determine how to launch a successful movement on behalf of older adults in Miami-Dade. For more information, contact Shannon Kelley at kelleys@unitedwaymiami.org.

Partners



Miami-Dade needs to help our older adults remain vibrant, engaged, connected and valued.

Sources: 1. Alliance for Aging, Helpline, Intake, Eligibility, Miami-Dade Elder Demographic Projections, as of October 9, 2015

Medicaid Managed Care: What They Don't Know Could Hurt You

By Bob Asztalos



It's a typical Monday, and you've made all the arrangements for "Ms. Smith," a resident in your center, to be transported to the doctor for her routine dialysis. She is bathed, dressed and prepared to go, but her ride never shows up. You call the transportation company and the managed care organization, only to experience phone exhaustion from being placed on hold, transferred and disconnected. Ultimately, you make other arrangements for Ms. Smith to make it to the doctor to receive the care she needs. The system failed you and Ms. Smith. You've heard you should report this to the Agency for Health Care Administration's (AHCA) complaint line but you think, "I don't have the time" or worse yet, "what does it matter?"

Bob Asztalos

It matters a lot. AHCA has set up this process, though not perfect, to resolve issues for providers and Medicaid recipients. Believe it or not, FHCA has heard feedback where provider complaints were resolved; not always, but it does happen. Beyond just logging in complaints, the Medicaid Managed Care Complaint process is used to set policy for AHCA and the Legislature. Thus, when we don't call or submit complain forms, there is a ripple effect that returns to us in the form of policy and regulation.

Recently, AHCA's Medical Care Advisory Committee met in Tallahassee to review the progress of the Medicaid Managed Care program in Florida. AHCA's representative opened the meeting by calling the program a success. She stated, "All quality measures are moving in the right direction which is a tribute to the plans." One reason for this conclusion, she told the packed room, is the "very low level of complaints for the program of this size." AHCA explained that it only receives about 500 complaints for long term care services per month via the complaint line or the online complaint form. In Tallahassee, unless we tell AHCA there is a problem, one does not exist.

Much like tossing rocks on the water, the ripple effect continues to spread. FHCA's Government Affairs team has been informing legislators about the managed care issues you have shared with us. We have asked them to look into problems that include late payments, admission and length-of-stay obstacles, copayment delays, and of course, late or inappropriate transportation.

On October 8, the Senate Appropriations Committee held an in-depth hearing to explore the health care expenses in Florida's state budget. The Committee queried Amy Baker, Florida's well respected state economist, about the impact of Medicaid managed care. Senator Alan Hays (R-Umatilla) spoke about his concern for doctors, dentists and other providers whose practices are being "squeezed" by managed care billing and paperwork practices. When asked by the Senator if she had any evidence of negative impact on health care providers due to managed care squeezing them, Ms. Baker responded that she "could not think of one off the top of her head." Our policymakers, including those advocating for providers and residents, cannot make a case for fixing the system if they do not have the data they need to support their argument. Thus, the ripple from not making the call continues.

If you're not taking the time to make that phone call or submit that complaint form when no one picks up Ms. Smith, you allow a managed care company to quietly escape having to provide the care your residents deserve. You also deprive the policymakers in Tallahassee from seeing a complete picture of the shortfalls in the managed care system and how it is affecting residents more often than not.

You can play a part in the effort to educate regulators and policymakers about the negative side of our State's managed care experiment. You can help FHCA's Government Affairs team advocate solutions to the current system. Next time the taxi shows up instead of the ambulance, you're put through an improper paperwork maze or you can't obtain payment entitled to you, take the time to formally submit a complaint to AHCA via their electronic complaint form – available at https://apps.ahca.myflorida.com/smmc_cirts/ - or call a Medicaid representative directly at (800) 226-6735.

Reprinted with permission of the Florida Health Care Association.

Bob Asztalos is FHCA's Chief Lobbyist and can be reached at basztalos@fhca.org.

The Giving Tree: Supporting Low Income Seniors & Their Caregivers



In December 2015, Hillsborough County Aging Services will sponsor its third annual Giving Tree event. The department solicits donations for low income seniors and their caregivers, and provides locations throughout the County for citizens to drop them off. The seniors' wish lists include socks, blankets, personal care items, slippers, and puzzles. Many seniors consider these luxury items since they are struggling to pay for food and medications.

For the first year, there were over 350 donations received. The donations were delivered to the homes of seniors who were very surprised and grateful not to be forgotten during the Holidays.



Pictured first is a homebound senior who received gifts and a gift card from a local merchant, and Hillsborough County Employee who filled her car with gifts she delivered.

The second year was a super success with citizens demonstrating again that the Holiday Season is truly about giving. One of the donors remarked as he dropped gifts at one of our Wellness Centers, "We always hear about the collections for needy children during the holidays, but not for needy seniors." Aging services collected over 650 gifts from corporations, individuals, and other Hillsborough County Departments.



Pictured left are Clerk of the Circuit Court employees who joyfully donated more than 50 gifts to Aging Services Director, Tracy Gogichaishvili.

Aging Services expects to break the previous record with additional corporate partners and Hillsborough County Departments participating this year. Once donors hear about the expressions of joy when the gifts arrive, they adopt senior citizens as their annual Holiday charity. This is one of those special occasions when givers receive as much joy as the benefactors!

Like us, communities around the country give generously during the Holidays to those less fortunate. It is part of who we are as citizens, as humanitarians.

As we look back reflecting on 2015 and counting our blessings, let's pledge to support seniors and caregivers in all ways possible.

National Institutes of Health: Alzheimer's Disease



Alzheimer's disease is an irreversible, progressive brain disorder that destroys memory and thinking skills, and eventually the ability to complete the simplest tasks. Typically, symptoms first appear in those in their mid-60s. Experts suggest that more than 5 million Americans may have Alzheimer's. It is currently ranked as the sixth leading cause of death in the United States, but recent estimates indicate that the disorder may rank third, behind heart disease and cancer, as a cause of death for older people.

Alzheimer's is the most common cause of dementia. Dementia is the loss of cognitive functioning—thinking, remembering, and reasoning—and behavioral abilities that interferes with daily life. Dementia can be mild and later become severe, whereby the person must completely depend on a caregiver. The causes of dementia vary. Other dementias include Lewy body dementia, frontotemporal disorders, and vascular dementia. Mixed dementia is common — two or more disorders, at least one of which is dementia. For example, some people have both Alzheimer's disease and vascular dementia.

Signs and Symptoms: Memory problems are typically the first sign of cognitive impairment related to Alzheimer's disease and vary from person to person. For many, decline in non-memory aspects of cognition, such as word-finding, vision/spatial issues, and impaired reasoning or judgment, may signal early stages of Alzheimer's disease.

Mild Alzheimer's Disease: As the disease progresses, people experience greater memory loss and other cognitive difficulties. Problems can include wandering and getting lost, trouble handling money, repeating questions, taking longer to complete daily tasks, and personality and behavior changes. People are often diagnosed in this stage.

Moderate Alzheimer's Disease: In this stage, people experience problems with language, reasoning, sensory processing, and conscious thought. The memory loss and confusion worsen, and an inability to recognize family and friends begins. They may be unable to learn, carry out multi-step tasks such as getting dressed, or cope with new situations. People may also have hallucinations, delusions, paranoia, and behave impulsively.

Severe Alzheimer's Disease: Ultimately, plaques and tangles spread throughout the brain, and brain tissue shrinks significantly. People in this stage may not communicate and become completely dependent on others for care. Near the end, the person may be in bed most or all of the time as the body shuts down.

What Causes Alzheimer's: Scientists don't yet fully understand all aspects of the disease, but it is usually caused by a genetic mutation. Late-onset Alzheimer's arises from a complex series of brain changes that occur over decades. Causes may be a combination of genetic, environmental, and lifestyle factors. The importance of any of these factors differs from person to person. There may also be a relationship between cognitive decline and conditions such as heart disease, stroke, and high blood pressure as well as diabetes and obesity. A nutritious diet, physical activity, social engagement, and mental stimulation have all been associated with the reduction of cognitive decline and Alzheimer's disease.

Diagnosis of Alzheimer's Disease: Doctors use several methods to assess if "possible Alzheimer's dementia" (dementia may be due to another cause) exists or "probable Alzheimer's dementia" (no other cause for dementia can be found). To diagnose Alzheimer's, doctors may:

Continued on page 11

- Ask the person, a family member, or friend questions about overall health, past medical problems, ability to carry out daily activities, and changes in behavior and personality
- Conduct tests of memory, problem solving, attention, counting, and language
- Carry out standard medical tests, such as blood and urine tests, to identify other possible causes
- Perform brain scans, such as computed tomography (CT), magnetic resonance imaging (MRI), or positron emission tomography (PET), to rule out other possible causes for symptoms.

Memory issues may also be related to other causes such as stroke, tumor, Parkinson's disease, sleep disturbances, side effects of medication, an infection, or a non-Alzheimer's dementia. Some of these conditions may be treatable and reversible. If Alzheimer's is diagnosed, early treatment may preserve some daily functioning, though the disease cannot be stopped or reversed. An early diagnosis also helps families plan for the future, taking care of financial and legal matters, addressing safety issues, learning about living arrangements, and developing support networks.

Support for Families and Caregivers: Caring for a person with Alzheimer's disease can have high physical, emotional, and financial costs. Demands of day-to-day care, changes in family roles, and decisions about placement in a care facility can be difficult. Being well-informed about the disease is one important long-term strategy. Programs that teach families about Alzheimer's stages, ways to deal with difficult behaviors, and other caregiving challenges can help. Good coping skills, a strong support network, and respite care are other ways to help caregivers handle the stress of caring for a loved one. For example, staying physically active provides physical and emotional benefits. For some, joining a support group is a critical lifeline. Support groups allow caregivers to find respite, express concerns, share experiences, get tips, and receive emotional comfort. Many organizations sponsor in-person and online support groups, including groups for people with early-stage Alzheimer's and their families.

For more information, see [Caring for a Person with Alzheimer's Disease: Your Easy-to-Use Guide from the National Institute on Aging](#).

For More Information:

Alzheimer's Disease Education and Referral (ADEAR) Center

1-800-438-4380 (toll-free)

adear@nia.nih.gov

www.nia.nih.gov/alzheimers

The National Institute on Aging's ADEAR Center offers information and [publications](#) for families, caregivers, and professionals on diagnosis, treatment, patient care, caregiver needs, long-term care, education and training, and research related to Alzheimer's disease. Staff members answer telephone, email, and written requests and make referrals to local and national resources. Visit the ADEAR website to learn more about Alzheimer's and other dementias, find clinical trials, and [sign up for email updates](#).

Alzheimer's Association

1-800-272-3900 (toll-free)

1-866-403-3073 (TTY/toll-free)

info@alz.org

www.alz.org

Alzheimer's Foundation of America

1-866-232-8484 (toll-free)

info@alzfdn.org

www.alzfdn.org

Eldercare Locator

1-800-677-1116 (toll-free)

eldercarelocator@n4a.org

www.eldercare.gov

Family Caregiver Alliance

1-800-445-8106 (toll-free)

info@caregiver.org

www.caregiver.org

MedlinePlus

www.nlm.nih.gov/medlineplus/

National Aging and Disability Transportation Center



CONTACT: Carol Wright, NADTC Co-Director, Easter Seals - Phone: (202) 347-3066 - Email: cwright@easterseals.com

A cooperative agreement of Easter Seals, the National Association of Area Agencies on Aging, and the U.S. Department of Transportation, Federal Transit Administration

National Aging and Disability Center will Promote Availability and Accessibility of Transportation for Seniors, People with Disabilities and Caregivers

Washington, D.C. - Easter Seals and the National Association of Area Agencies on Aging (n4a) are pleased to announce the launch [on Oct. 1, 2015] of the National Aging and Disability Transportation Center (NADTC), a new national technical assistance center funded by the Federal Transit Administration (FTA). Building on more than 20 years' experience of these two national leaders in accessible transportation, the NADTC will promote the availability and accessibility of transportation options for seniors, people with disabilities, caregivers and communities throughout the U.S. The new Center will work to support the delivery of more effective, efficient, high-quality and coordinated specialized services that maximize federal investments.

NADTC will provide technical assistance, information, and referral; develop and field training; implement an interactive communication and outreach strategy; and offer grant funding to support communities in assessing their needs and developing innovative transportation solutions. To ensure that the Center's work responds to the needs of our target audiences, we will engage consumers and other stakeholders as partners, offering opportunities to provide feedback and guidance.

"FTA is committed to improving quality of life for seniors and individuals with disabilities by making public transportation an easy and efficient way for them to access jobs, schools, and services," said FTA Acting Administrator Therese McMillan, "The National Aging and Disability Transportation Center

(NADTC) will help aging and disability networks leverage funding from FTA and others to improve access to community supports and services."

"People with disabilities and older adults often rely on public transportation systems to engage in the community and live their lives to the fullest," said Administration for Community Living Administrator Kathy Greenlee. "The National Aging and Disability Transportation Center will connect transportation leaders and the aging and disability networks to ensure that the perspectives of people with disabilities and older adults are incorporated into every aspect of transportation planning. We look forward to continuing our work with FTA to support transportation systems that work for people of all ages and abilities."

"The lack of access to viable transportation options is a major reason why many older adults can no longer live with dignity and independence in their homes and communities," said n4a Chief Executive Officer Sandy Markwood. She went on to note, "It's exciting to know that through its work to improve the mobility options of seniors and others, NADTC will also be in a position to improve the quality of life of so many Americans."

"Innovations in transportation and technology are making it possible for people with disabilities and older adults to live more independently and remain in their homes longer," said Randall L. Rutta, President & Chief Executive Officer of Easter Seals, Inc. "Through the NADTC, Easter Seals and n4a will be able to share information on creative ways to improve transportation services and involve in the transportation decision-making process the individuals most affected by it."

To find out more about the NADTC, request technical assistance, or to sign up for the Center's e-News, send an email to contact@nadtc.org or call (866) 528-6278.

Resources

IRS Scam - See the story on [CNBC.com](#)

2014-2015 Alzheimer's Disease Progress Report: Advancing Research Toward a Cure. [Click Here.](#)

Green House Projects - [Click Here.](#)

A New Year's Resolution for Non-Profits - [Click Here.](#)



FASP President to Receive Award

FASP is proud to announce that our President, Andrea Busada, has been selected to receive the Project Personality of the Year Award at the Areawide Council on Aging of Broward County, Inc.'s 36th Annual Board & Advisory Council Installation Dinner.

Robert Beck has been selected to receive the award for Legislative Advocate of the Year and Broward County Government will be recognized for 20 consecutive years of providing local match to the ADRC.

The awards will be presented at the Areawide Council on Aging of Broward County, Inc.'s 36th Annual Board & Advisory Council Installation Dinner on Thursday, January 21, 2016.

More information about this event can be found [here](#). Congratulations to the winners!



January 27, 2016: Florida Senior Day. [More information here.](#)

March 3-7, 2016: Long Beach, CA. Association of Gerontology in Higher Education Conference. [More information.](#)

March 20-24, 2016: Washington, DC. American Society on Aging - Aging in America Conference. [More information.](#)



FASP is on Facebook - Are You?



Do you or does your organization have a Facebook or Twitter account?
We would love to “like” “Friend” and/or “follow” you too.

FASP - Florida Association of Aging Services Providers Facebook page

<http://www.facebook.com/home.php?#!/pages/FASP-Florida-Association-of-Aging-Services-Providers/186392068069967>

FASP - Florida Association of Aging Services Providers Twitter

<http://twitter.com/1FASP>

follow us on
twitter

DOEA - Florida Department of Elder Affairs Facebook page

<http://www.facebook.com/pages/Florida-Department-of-Elder-Affairs/128604923878650?sk=wall>

FCOA - Florida Council on Aging Facebook page

<http://www.facebook.com/home.php?#!/pages/Florida-Council-on-Aging/74320166787>

FCOA - Florida Council on Aging Twitter

<http://twitter.com/#!/FCOA1>



Real Possibilities

<http://www.aarp.org>



Council on Aging
of St. Lucie, Inc.

<http://www.coasl.com>



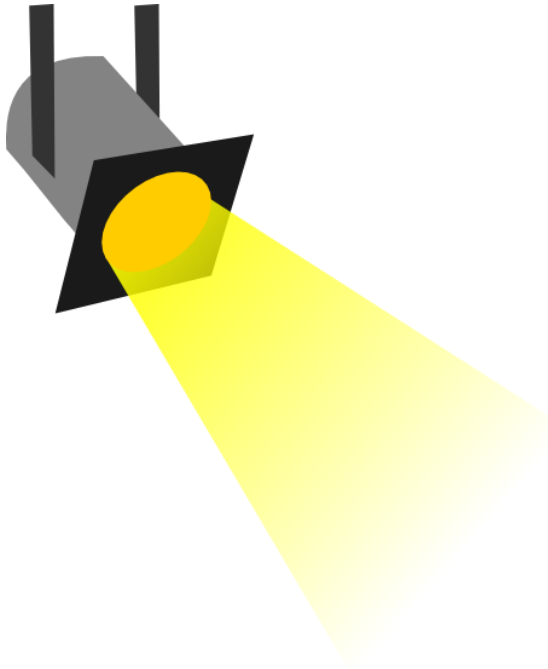
<http://www.bmbinc.com>



<http://www.volencenter.com>



www.newvisioneyecenter.com



SPONSOR SPOTLIGHT



<http://www.hillsboroughcounty.org/aging/>

The intent of the FASP Newsletter is to keep you informed about program updates and information relating to aging services providers. If you have any comments about the newsletter, suggestions on ways to improve it and/or items you would like included, please contact FASP by e-mail at moreinfo@fasp.net or by phone at (850) 222-3524.

FASP's Mission: Supporting older adults and the providers that serve them through information, connection, and resources.

Mark your Calendars and Save the Date
2016 FLORIDA CONFERENCE ON AGING!

AUGUST 8-10, 2016

The Caribe Royale
Orlando, Florida

