

3 DAYS
2 CONFERENCES

DECEMBER 7-9
2004

BEST PRACTICES EXCHANGE
INTERGENERATIONAL SYMPOSIUM





Florida Department of Elder Affairs

2004

Best Practices ExCHANGE & Intergenerational Symposium



December 7 & 8

Florida Department of Elder Affairs



2004 Intergenerational Symposium Conference

Renaissance Tampa Hotel International Plaza
4200 Jim Walter Blvd., Tampa, FL 33607

Join us December 7-8, 2004 at the Renaissance Tampa International Hotel in Tampa, Florida for the 2nd Annual Intergenerational Symposium, hosted by the Florida Department of Elder Affairs, to showcase and share Florida's Intergenerational Programs. The two-day Intergenerational Symposium will provide opportunities to gain insight into the successful practices from other intergenerational organizations. Intergenerational programs and initiatives provide opportunities for individuals, families and communities to once again enjoy and benefit from the richness of an age-integrated society. In addition, the programs and initiatives help bring people together to address the needs of all ages through cooperation and pooled resources. Intergenerational programs increase community participation and awareness about issues that affect both young and old.

Symposium Highlights

Intergenerational program grants funding source

Experts on program development and leadership

Showcase and celebrate intergenerational programs and learn the keys to their success

Who should attend

Intergenerational Program Directors

Volunteer Program Directors

School Volunteer Coordinators

Community Program Directors

Health and Wellness Program Directors

Individuals Responsible for Community Service Projects and Initiatives

Award to be presented

Youth Intergenerational Volunteer Award

For questions, please contact Genelle L. Frazier, phone: (850) 414-2047, email: fraziergl@elderaffairs.org or Melba Carpenter, phone: (850) 414-2086, email: carpenterm@elderaffairs.org

Intergenerational Symposium

Function Information Agenda

December 7, 2004

11:30a.m. - 1:30p.m.	Intergenerational Symposium Opening Luncheon
2:00p.m. - 2:45p.m.	Intergenerational Symposium Session 1
3:00p.m. - 3:45p.m.	Intergenerational Symposium Session 2
4:00p.m. - 4:45p.m.	Intergenerational Symposium Session 3
5:30p.m. - 7:30p.m.	Intergenerational Symposium Dinner Advocacy and Intra-dependent Forum

December 8, 2004

9:00a.m. - 12:00p.m.	Intergenerational Symposium Leadership Forum
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December 8 & 9

Florida Department of Elder Affairs

2004 Best Practices ExCHANGE Conference

Renaissance Tampa Hotel International Plaza
4200 Jim Walter Blvd., Tampa, FL 33607

On December 8-9, 2004, the Florida Department of Elder Affairs will host the 3rd Annual Best Practices ExCHANGE Conference in Tampa, Florida. The ExCHANGE provides a forum to showcase and share Florida's Best Practices in aging services and programs. It also serves as a catalyst in fostering greater program innovation and collaboration among service providers. A best practice may include any number of innovative applications that substantially improve the lives of elders. The Best Practices ExCHANGE is a celebration of our innovation and creativity in servicing our most vulnerable members of society. This conference will:

Build a knowledge base of "Best Practices" in Florida

Help attendees develop their ideals for program innovation

Enable attendees to walk away with new concepts, models and contacts

Inspire attendees to introduce change in local communities

Engage and challenge attendees to learn in new ways

Topics

Caregiver Support & Guardianship

Information & Referral as a Single Point of Entry

Senior Centers as a Community Resource

Home, Community and Family Directed Care Options

Health Insurance and Medical Services

Disaster Relief and Awareness

Who should attend

Aging Network Professionals

Area Agencies on Aging

Anyone Associated with Caregiving Needs of Elders

Lead Agencies

Service Providers

Award to be presented

C. Colburn Hardy Older Advocate Award

For questions, please contact Genelle L. Frazier, phone: (850) 414-2047, email: fraziergl@elderaffairs.org or Melba Carpenter, phone: (850) 414-2086, email: carpenterm@elderaffairs.org

Best Practices ExCHANGE

Function Information Agenda

December 8, 2004

12:00p.m. - 1:55p.m.	Best Practices ExCHANGE Opening Luncheon
2:05p.m. - 2:40p.m.	ExCHANGE Sessions 1-4
2:50p.m. - 3:25p.m.	ExCHANGE Sessions 5-8
3:40p.m. - 4:15p.m.	ExCHANGE Sessions 9-12
4:30p.m. - 5:05p.m.	ExCHANGE Sessions 13-16
5:30p.m. - 7:00 p.m.	Best Practices ExCHANGE Reception/Dinner

December 9, 2004

7:30a.m. - 8:45a.m.	Best Practices ExCHANGE Networking Breakfast
8:55a.m. - 9:30p.m.	ExCHANGE Sessions 17-20
9:40a.m. - 10:15a.m.	ExCHANGE Sessions 21-24
10:45a.m. - 11:15a.m.	ExCHANGE Sessions 25-28
11:30a.m. - 12:05p.m.	ExCHANGE Sessions 29-32
12:15p.m. - 2:00p.m.	Best Practices ExCHANGE Closing Luncheon

December 8 & 9

Florida Department of Elder Affairs

2004 Best Practices ExCHANGE

Call For Proposals

On December 8 and 9, 2004, in Tampa, Florida, the Florida Department of Elder Affairs will host its 3rd Annual Best Practices *ExCHANGE* Conference to showcase and share Florida's best practices in aging services and programs. If you have a program, service, method or practice that meets the outlined definition, we welcome your response to this open call for proposals. This year, 32 proposals will be selected for presentations at the 2004 Best Practices *ExCHANGE* Conference. The proposals selected for presentation at the 2004 Best Practices *ExCHANGE* will be notified by November 15, 2004 and given the opportunity to make a 30 minute presentation. This presentation shall convey your idea(s) of a Best Practice. Be sure to build in a question and answer period within the 30 minute time constraint. As presenters, you will be responsible for paying all costs associated with your attendance and presentation, (i.e. travel, registration, pamphlets and any necessary miscellaneous supplies).

Program Purpose

This *ExCHANGE* was developed to showcase and share Florida's Best Practices in aging services and programs as well as foster collaboration and program innovation among Florida's service providers.

Florida Best Practice Programs

Florida Best Practices *ExCHANGE* Program is a program, service or delivery method that:

Demonstrates the effectiveness of collaborative efforts.

Draws on innovative concept or application of a "traditional" approach in aging service.

Results in increased consumer satisfaction.

Results in a more efficient delivery of services.

Use non-traditional funds, partners, or other innovative resources.

Submission Deadline: November 12, 2004

The proposals should be emailed to Genelle L. Frazier at: DOEABestPractices@elderaffairs.org, subject line should read: Best Practices Exchange Proposal. If you have any questions or concerns, please contact Genelle Frazier at (850) 414-4047 or Melba Carpenter at (850) 414-2086.

Special Instructions

All selected proposals are subject to editing due to space constraints. Please be clear and concise as possible when completing your proposal response. Please make selections from the pre-selected categories that your Best Practices relates to. The sub-topics should be used as guides. If you have a sub-topic that fits into a preselected category but is not provided, please list your specific sub-topic on the proposal response. Responses received that do not adhere to the prescribed format may not receive full consideration.

Best Practices Exchange

Pre-selected Categories

Caregiver Support & Guardianship

Caregiver Survival Tips
Caregiving 101
Caregiving Challenges
Guardianship
Long Distance Caregiving
Respite
Tools for Caregiving

Information and Referral as a Single Point of Entry

Aging and Disability Resource Center-Transitions for the Future
Information and Referral (Eligibility)

Seniors In Action - A Community Resource

Advocacy
Employment
Fitness and Wellness
Identifying Unmet Needs
Intergenerational
Senior Center
Volunteerism

Home, Community, and Family Directed Care Options

Broad Policy Goals/Issues
Consumer Directed Services
Hospice
Housing Alternatives
Innovative Community-Based Service
Public/Private Partnerships
Transportation

Health Insurance and Medical Services

Prescription Drugs-How to Navigate the System
Private/Public Sector Options
Medicare and Medicaid
Risk Factors/Issues

Disaster Relief and Awareness

Lessons Learned From the 2004 Hurricane Season

Best Practices ExCHANGE

Proposal Format

Microsoft Word Document

Single Spaced

12 Point Font

One Inch Margins

- 1) Proposal Title: Title of the Best Practice
- 2) Agency: The agency where the Best Practice was implemented or lead organization implementing Best Practices.
- 3) Contact Person: Contact Person's name, address, phone number, fax number, and email address
- 4) Best Practice Category: Pre-selected category
- 5) Best Practice Sub-topic: Pre-selected subtopic
- 6) Description: A 500 word or less description of the Best Practice which answers the following questions.
What is the innovative and/or existing approach used to convey your Best Practice?
How has your program impacted the quality of life of elders, their caregivers and/or families?
- 7) Dissemination Choice: By submitting a response to this Call for Proposals you are thereby authorizing the Department of Elder Affairs to disseminate and use the information contained in your submission in any format or venue, including electronic formats, for any purpose.
- 8) Budget: Annual budget for your Best Practice and the number of staff or volunteers utilized in the Best Practice implementation. If your Best Practice does not have a budget or staff, please indicate on the proposal.

Best Practices ExCHANGE

Sample Proposal Response

- 1) Title:** FAU-Well Program
- 2) Agency:** Florida Atlantic University, College of Education, Department of Exercise Science and Health Promotion, Dr. Don Torok, Dept. Head
- 3) Contact Person:** Anita D'Angelo-Herold
Department of Exercise Science and Health Promotion
Florida Atlantic University-Gym 152
777 Glades Road
Boca Raton, Florida 33431
Phone: (561) 297-3752, Fax: (561) 297-2421
E-mail: aherold@fau.edu
- B. Sue Graves, Ed.D
Department of Exercise Science and Health Promotion
Florida Atlantic University
2912 College Avenue, ES 279
Davie, Florida 33314
Phone: (954) 236-1263, Fax: (954) 236-1259
E-mail: sgraves@fau.edu
- 4) Best Practice Category:** Wellness/ Disease Prevention
- 5) Best Practice Sub-Topic:** Health Screening, Injury Prevention, and Physical Fitness

6) Description: The FAU Well Program is an innovative exercise program open to qualified older adults from the university and surrounding community. Participants vary in age from 50-85 years. The overall enrollment has average 40 participants each year for over ten years. This program is under the supervision of a FAU faculty member from the Department of Exercise and Health Promotion. The program serves as a practical experience for FAU undergraduate students in Exercise Science and Health Promotion during their senior year. Being that the program serves as a required class for the students, staffing is guaranteed. The students must prove proficiency in exercise leadership skills such as heart rate and blood pressure monitoring. The knowledge base of the students provides the participants with a safe and effective program. All of the program personnel are certified in CPR and First Aid.

The exercise program meets three mornings a week from 7:00 a.m. to 8:30 a.m. in the Teaching Gymnasium at FAU in Boca Raton. The program has been running consistently for twelve years. Acceptance into the program is based on physician's approval following an extensive health history review. The exercise program is based upon the participant's medical history, fitness evaluation, and personal goals, following the American College of Sports Medicine Guidelines for safe and effective exercise participation.

Daily activities of the program include walking in the gymnasium, stationary biking, strength training, and flexibility exercises. Blood pressures and heart rates are monitored throughout the sessions. The last half hour of the morning consists of an organized cool down section which can include flexibility and resistance band exercises. In addition to the exercise participation, weekly "well spot" lectures are included at the end of the stretching period. These are quick, informative health-fitness mini-lectures prepared by the students and faculty on topics of interest to the participants.

Both participants and students seem to benefit from this collaborative exercise program. Many of our participants have been regulars for at least five years or more. The participants enjoy the program because they feel it affords them appropriate exercise in a safe environment. With the student staff changing every semester, it gives them a fresh prospective each time. The students gain experience in dealing with the older adult and a chance to practice their learned skills. The program does help bridge the generation gap from both sides.

- 7) Dissemination Choice:** I wish to be considered for a 30 minute presentation at the 2003 Best Practice ExChange on December 3-4, in Tampa, Florida.
I give permission for the submitted information to be disseminated in electronic and/or print format if not selected for presentation.

- 8) Budget:** The FAU-Well Program does not have a separate budget as it is run through the Department of Exercise Science and Health Promotion.

Instructions

Filling Out Your Registration Forms

Included in your package is three registration forms. Form A for the Intergenerational Symposium, Form B for the Best Practices ExCHANGE Conference and Form C for both the Intergenerational Symposium and Best Practices ExCHANGE. If you are attending only one conference, complete form A or B, but if you plan to attend both conferences, please complete the Dual Conference Registration Form and receive a \$20 savings. We encourage you to register as early as possible because space is limited.

Conference Payment Method

First select your method of payment. If you are paying for your conference with a credit card, write your credit card number in the proper box and the expiration date, sign and print your name that appears on your credit card in the print name field. If you are paying by check, sign and print your name that appears on your driver's license and enclose the check along with the registration form. If you are using a purchase order as a method of payment, write your purchase order number in the P.O. field provided, sign and print your name and send a copy of your purchase order form along with your registration.

Special Requirements

If you have any special requirements, list them on the special requirements lines (i.e. handicap room or wheel chair requested, transportation needed, etc.).

Form A- The Intergenerational Symposium Conference

Complete this form if you plan to only attend the Intergenerational Symposium. The Intergenerational Symposium Conference takes place on December 7 and 8, 2004. The conference price is \$75 dollars. Your registration fee includes two meals, the Intergenerational Symposium Opening Lunch and Dinner on December 7.

Form B- Best Practices ExCHANGE Conference

Complete this form if you plan to only attend the Best Practices ExCHANGE Conference. The Best Practices ExCHANGE Conference takes place on December 8 and 9, 2004. The full conference price is \$140. Your registration fee includes four meals, the Best Practices ExCHANGE Opening Lunch and Dinner on December 8, 2004 and the Best Practices ExCHANGE Network Breakfast and Closing Lunch on December 9. If you plan to only attend on Wednesday, December 8 or Thursday, December 9 you must check the box of the day you wish to attend. Single day registration fee is \$65. Your single day registration fee on Wednesday, December 8 includes two meals, The Best Practices Exchange Opening Lunch and Reception/Dinner. Your single day registration fee on Thursday, December 9, includes two meals, The Best Practices Exchange Network Breakfast and Closing Luncheon.

Form C- The Dual Conference Registration

Complete this form if you plan to attend the Best Practices ExCHANGE and the Intergenerational Symposium Conferences. The Best Practices ExCHANGE and the Intergenerational Symposium take place on December 7, 8, and 9, 2004. The conferences price is \$195 dollars. Your registration fee includes six meals, the Intergenerational Symposium Opening Lunch and Dinner on December 7, The Best Practices ExCHANGE Opening Lunch and Reception/Dinner on December 8 and Best Practices ExCHANGE Network Breakfast and Closing Luncheon on December 9.

December 7 & 8

Florida Department of Elder Affairs
Intergenerational Symposium

Form **A** Symposium Registration Form

Registration: October 11-November 8, 2004

Late Registration: November 9-15, 2004

Hotel Registration Deadline: November 15, 2004

Important Instructions

Please type or print clearly. Completely fill out a separate form for each attendee. (Forms may be copied and keep a copy of completed form for your records)

Cancellation & Refund Policy

All cancellations must be in writing. A 50% refund will be made on cancellations prior to November 21, 2004. No refunds will be made on cancellations after November 21, 2004.

Late Registration Fee

A fee of \$25 will be added to any registrations submitted after November 8, 2004. Registrations will not be accepted after November 15, 2004.

Hotel Reservations

Renaissance Tampa International Plaza
4200 Jim Walter Blvd.
Tampa, Florida 33607

Hotel reservations must be made separately. Registration fee does not cover hotel room fees and taxes. For hotel reservations please call (813) 877-9200, Fax (813) 877-3000.

Special Requirements

Please list all disabilities and required accommodations in order for your participation.



BADGE AND CONTACT INFORMATION (Print or Type)

First Name:

Last Name:

Agency/Position:

Address:

Apt #

City:

State:

Zip Code:

Phone Number:

Email:

REGISTRATION AND PAYMENT METHOD

- ☐ \$75 Full Conference Registration, December 7 and 8
☐ **\$100[after Nov.8]** Full Conference Registration, December 7 and 8
Includes the Intergenerational Symposium Opening Lunch and Dinner, 12/07

☐ Vegetarian Meal Required, check box if yes.

Payment Method:(check method of payment)

Visa ☐

MC ☐

AX ☐

Check ☐

P.O. No. ☐

Card Number:

Exp.Date:

Po. No. (Please send copies of P.Os with registration)

Signature:

Print Name:

Save \$20 Dollars!
Register for both conferences!

Submit Registration And Payments To:

Meeting Spots
148 Long Leaf Drive
Crawfordville, Florida 32327
Phone: (850) 926-2508
Fax: (850) 926-7130

Email: joice@meetingspots.net or

Web register at: www.meetingspots.net

Meeting Spots FEID No. 59-3354138



December 8 & 9

Florida Department of Elder Affairs Best Practices ExCHANGE Conference

Form **B** Best Practices Registration

Registration: October 11-November 8, 2004

Late Registration: November 9-15, 2004

Hotel Registration Deadline: November 15, 2004

Important Instructions

Please type or print clearly. Completely fill out a separate form for each attendee. (Forms may be copied and keep a copy of completed form for your records)

Cancellation & Refund Policy

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Special Requirements

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Submit Registration And Payments To:

Meeting Spots
148 Long Leaf Drive
Crawfordville, Florida 32327
Phone: (850) 926-2508
Fax: (850) 926-7130

Email: joice@meetingspots.net or

Web register at: www.meetingspots.net

Meeting Spots FEID No. 59-3354138

BADGE AND CONTACT INFORMATION (Print or Type)

First Name:

Last Name:

Agency/Position:

Address:

Apt #

City:

State:

Zip Code:

Phone Number:

Email:

REGISTRATION AND PAYMENT METHOD

- ☐ \$140 Full Conference Registration, December 8 and 9
- ☐ **\$165[after Nov.8]** Full Conference Registration, December 8 and 9
Includes the Best Practices ExCHANGE Opening Lunch and Reception/ Dinner, 12/08
and the Best Practices ExCHANGE Network Breakfast and Closing Luncheon, 12/09
- ☐ \$65 Single Day Registration, Wednesday Only
- ☐ **\$90[after Nov.8]** Single Day Registration, Wednesday Only
Includes the Best Practices ExCHANGE Opening Lunch and Reception/Dinner, 12/08
- ☐ \$65 Single Day Registration, Thursday Only
- ☐ **\$90[after Nov.8]** Single Day Registration, Thursday Only
Includes the Best Practices ExCHANGE Network Breakfast and Closing Luncheon, 12/09
- ☐ Vegetarian Meal Required, check box if yes.

Payment Method:(check method of payment)

Visa ☐

MC ☐

AX ☐

Check ☐

P.O. No. ☐

Card Number:

Exp.Date:

Po. No. (Please send copies of P.Os with registration)

Signature:

Print Name:

December 7, 8 & 9

Florida Department of Elder Affairs

Best Practices ExCHANGE Conference & Intergenerational Symposium



Form C Dual Conference Registration

Registration: October 11-November 8, 2004

Late Registration: November 9-15, 2004

Hotel Registration Deadline: November 15, 2004

Important Instructions

Please type or print clearly. Completely fill out a separate form for each attendee. (Forms may be copied and keep a copy of completed form for your records)

Cancellation & Refund Policy

All cancellations must be in writing. A 50% refund will be made on cancellations prior to November 21, 2004. No refunds will be made on cancellations after November 21, 2004.

Late Registration Fee

A fee of \$25 will be added to any registrations submitted after November 8, 2004. Registrations will not be accepted after November 15, 2004.

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Fax: (850) 926-7130

Email: joice@meetingspots.net or

Web register at: www.meetingspots.net

Meeting Spots FEID No. 59-3354138

BADGE AND CONTACT INFORMATION (Print or Type)

First Name:

Last Name:

Agency/Position:

Address:

Apt #

City:

State:

Zip Code:

Phone Number:

Email:

REGISTRATION AND PAYMENT METHOD

- ☐ \$195 Dual Conference Registration, December 7, 8 and 9
- ☐ **\$220[after Nov.8]** Dual Conference Registration, December 7, 8 and 9
Includes the Intergenerational Symposium Opening Lunch and Dinner, 12/07,
the Best Practices ExCHANGE Opening Lunch and Reception/Dinner, 12/08 and
the Best Practices ExCHANGE Network Breakfast and Closing Luncheon, 12/09

Save \$20 Dollars!
Register for both conferences!

☐ Vegetarian Meal Required, check box if yes.

Payment Method: (check method of payment)

Visa ☐

MC ☐

AX ☐

Check ☐

P.O. No. ☐

Card Number:

Exp. Date:

Po. No. (Please send copies of P.Os with registration)

Signature:

Print Name: