

# HAMASPIK GAZETTE



May 2012 · Issue No. 96

News of Hamaspiik Agencies and General Health

## Hamaspik Honors Housing Commissioner Towns, Rockland County "Hamaspik Day"

State official main guest at Hamaspik Terrace event;  
Rockland County Legislature proclaims March 5 as "Hamaspik Day"

It was the most appropriate of preparations for Passover, the Festival of Freedom, as New York State's top housing official paid his first-ever visit to Hamaspik, an agency that liberates people to make full use of their own homes, as Rockland County Legislator Phil Soskin put it.

Soskin's comments set the right tone at the formal yet casual event hosted by Hamaspik to honor visiting New York State Homes & Community Renewal (HCR) CEO Darryl C. Towns.

Mr. Towns was also getting a first-hand look at the homes bettered by Hamaspik's state-funded and far-reaching Access to Home, RESTORE and HOME programs.

The Commissioner's appearance also conjoined a celebration marking the earlier designation of March 5 as "Hamaspik Day" in Rockland County. That date, cemented with



Together for good: (R-L) Rockland Co. Legislators Soskin, Wieder; CEO Towns; Exec. Dir. Wertheimer; Rockland Co. Legislator Ilan Schoenberger; Nita Lowy aide Stephen Papas

an official Proclamation, marked the day that Hamaspik of Rockland County officially took up residence in the vast new wing of its administrative center at 58 Rt. 59 in the heart of Monsey.

Commissioner Towns, and several Rockland County Legislators, didn't opt for written greetings but made personal appearances instead, converging on the Hamaspik Terrace ballroom on Monday, April 2 for an event that did an agency and its community proud.

Close to the appointed hour of 11:00 a.m., Commissioner Towns entered the newly-expanded Hamaspik of Rockland County administrative offices.

But the Commissioner had already had quite some time for acquainting himself with the

*Continued on Page E6*

## Reflecting Cutting-edge Trend, HHS Creates New Administration for Community Living

Merges offices, efforts of several HHS depts. to push community integration

On Monday, April 16, the federal U.S. Department of Health and Human Services (HHS) announced the creation of the Administration for Community Living.

The new Administration for

Community Living (ACL) merges three existing departments within the HHS—the Administration on Aging, the Office on Disability and the Administration on Developmental Disabilities.

"All Americans—including people with disabilities and seniors—should be able to live at home with the supports they need, participating in communities that value their contributions rather than in nursing homes or other institutions," said HHS Secretary Kathleen Sebelius.

"For too long, too many Americans have faced the impossible choice between moving to an institution or living at home without the long-term services and supports they need," said Sebelius. "The goal of the new Administration for Community Living will be to help people with disabilities and older Americans live productive, satisfying lives."

According to Sebelius, the new

agency will work on increasing access to community supports and achieving full community participation for people with disabilities and seniors.

"The Administration on Community Living will seek to enhance and improve the broad range of supports that individuals may need to live with respect and dignity as full members of their communities," said Sebelius. "These support needs go well beyond health care and include the availability of appropriate housing, employment, education, meaningful relationships and social participation."

*Continued on Page E12*

### INSIDE

\*

State Housing Ruling

Overruled — E2

\*

Passover All Across

Hamaspik — E3, E4

\*

Watch out for...

PANDAS?! — E10

\*

IBS to empower Orange

County parents — E12

\*

### HAMASPIK GAZETTE

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**Child & Adult Care Food Program**

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Providing: Skilled observation and assessment · Care planning · paraprofessional supervision · clinical monitoring and coordination · Medication management · physician-ordered nursing intervention and skill treatments

**HCR**

**Access To Home**

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**HOME**

**Rehabilitation Program**

Providing: Remodeling dilapidated homes for low income home owners

**NYS ED**

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**Central Intake**

Providing: The first contact for a person or family in need of Hamaspik services

**Hamaspik Gazette**

Providing: A bilingual monthly newspaper informing the community of available Hamaspik services

**Parental Retreats**

Providing: Getaways and retreats for parents of special needs individuals · Parent support groups

# Appeals Court Overturns Lower Court's Integrated Housing Order

*But case against New York State still has merit, ruling finds*

In a decision that may delay continued community integration of New York State's special-needs adults for years, a federal appeals court has overturned a key decision by a lower court.

The 2010 decision, issued by U.S. District Judge Nicholas Garaufis in Brooklyn, ordered New York State to provide 4,500 New York City adult home residents with community-based homes.

But on Friday, April 6, the 2nd U.S. Circuit Court of Appeals in Manhattan spiked that decision.

The appeals court ruled that the plaintiff in the years-old case, Albany-based non-profit organization Disability Advocates Inc. (DAI), did not possess sufficient legal standing to represent the population it claimed to be representing.

"There is scant evidence in the record that the individuals with mental illness whom DAI purports to represent have the power to elect its directors, make budget decisions, or influence DAI's activities or litigation strategies," the appeals court wrote. "Finally, the record does not establish that DAI ever notified its 'constituents' or any of their legal guardians that it was filing this suit purportedly on their behalf."

In plain English, the appeals court ruled that DAI could not claim it worked for individuals with disabilities when it only got minimal input from individuals with disabilities.

While DAI could represent individuals with intellectual disability and litigate cases in the names of those individuals, it could not bring a lawsuit on behalf of the entire class, the court also ruled.

However, in overruling the earlier decision

due to a legal technicality, albeit a critical one, the appeals court did not negate or deny the merit of the plaintiff's primary arguments.

The judge said Disability Advocates had proven in a bench trial that virtually all its constituents were qualified to live in "supported housing," including apartments where they could continue to receive needed services.

The court also wrote, "We are not unsympathetic to the concern that our disposition will delay the resolution of this controversy and impose substantial burdens and transaction costs on the parties, their counsel, and the courts."

"This controversy" refers to the ongoing battle by the disability-services private sector to procure more publically-funded community-based housing, in keeping with the industry's decades-old trend of moving intellectually-disabled individuals away from the institutions of the past.

The new development throws a monkey wrench into what many in the Empire State's disability community had seen as a watershed breakthrough.

Under Judge Garaufis' order, New York State was to create 1,500 housing units in New York City, mostly apartments and small homes in the community, over a three-year period.

Garaufis had ruled that the state must provide services "in the most integrated setting appropriate to their needs," enabling them to interact with people who aren't disabled as much as possible.

Responding to the new ruling, DAI's Cliff Zucker said that his organization will "work with New York to solve this problem," but left open the possibility that the case could be filed again as a class action. ■

## Paperwork, Phone Calls, Saving Children's Lives

*For Hamaspik MSCs, extraordinary is routine*

Hamaspik of Kings County Medicaid Service Coordinator Chedva Freund, like her peers, may be forgiven for looking and sounding a tad weary at times.

After all, it only took an entire weekend of off-duty work (excluding Shabbos, of course) at March's end to prevent the removal of a child from her family's struggling home.

Besides serving as a weekend warrior of a different type in defense of a defenseless little girl, and not getting paid for it, Mrs. Freund also singlehandedly addressed and counteracted the cause beneath the symptoms of family dysfunction that had attracted the wrong attention.

She accomplished that by arranging for intense therapy for the beleaguered parents, a loving father and mother squarely mired in the looped ruts of working poverty, unable to escape.

Earlier in the year, the indefatigable Service Coordinator had gotten the teenager into a school that specializes in her particular need, but one of the individual's several diagnoses. And to ensure that she stayed there, Freund became a fixture on the school's premise, working with an oft-hesitant or reticent staff to smooth over difficulties and provide support.

And when the New York State Hamaspik Association (NYSHA) opened Williamsburg's first-ever Article 16 Clinic in that classic Brooklyn neighborhood, Mrs. Chedva Freund, a classic of Hamaspik's own, took pains to make sure that the young woman was its very first client.

Says Hamaspik of Kings County MSC Supervisor Shalva Sashitzky: "This is what MSCs do," also noting that most have close to 30 such clients in their caseloads.

Singlehandedly pulling souls from the brink of loss, keeping lives together and turning families 180 degrees won't readily be found in any official MSC job description.

But for Freund and her professional peers across three agencies, it's all in a day's work. ■

# Hamaspik Hosts 5th Exciting Passover Event at Fun Time America

*Annual family outing fills venue with special-needs individuals for day*

Hundreds of special-needs individuals and their loving family members, caregivers and Hamaspik staffers converged on Fun Time America this past Tuesday, April 10 for an exclusive day of indoor and outdoor fun hosted by Hamaspik.

The exciting event, held for the fifty year now by the health and human-services agency, gives individuals with developmental or intellectual disabilities and their loved ones a day of mainstream family fun and bonding.

From as far north as Kiryas Joel in upstate Orange County and, of course, from all across Brooklyn as well as Rockland County, buses filled with happy revelers converged on the Cliffwood, New Jersey-based family fun center.

Those crowds, which departed from previously assigned central meeting points in those locales, were augmented by the many Hamaspik beneficiaries who arrived by private car.

Also coming in droves were numerous special-needs Hamaspik-serviced individuals who were transported to the center in Hamaspik's trademark accessibility-equipped

Transport Vans.

The event featured full access to all of Fun Time America's diverse offering of exhilarating indoor rides and attractions (and not just for kiddies either).

Making this year's even more efficient and smoothly operating was the elimination of game tokens, allowing event-goers to merely press "start" on the dozens of video games throughout the center and simply play away.

To heighten the indoor excitement, no less than four shows put on by "bubble expert" Jeff Boyer were staged in Fun Time's spacious ballroom throughout the day. Mr. Boyer, a veteran children's entertainer, wowed his crowds with amazing displays of the physics of soapy bubbles.

With lively Jewish music blaring from the center's PA system, special-needs children and adults of all ages could be seen gleefully flitting back and forth along the center's main corridor and shuttling from ride to ride or video game to video game.

Substantial lines were seen as such popular attractions as the motion simulator ride, the bumper cars, the "Laser Tag" indoor maze and even the rock climbing wall.

Making a thrilling day out with fathers, mothers, siblings and friends even more thrilling was this year's addition of more outdoor rides than ever.

Hamaspik's annual event typically takes advantage of Fun Time's spacious parking lot with a substantial array of outdoor attractions like "Moon Bouncers" and other air-filled amusements.

This year, however, more of the parking lot was occupied by said rides than in any previous year.

A colorful train snaked its way across the lot throughout the afternoon, its cars filled with happy faces, passing enormous inflated "kid magnets" like a pirate ship, a



On the scene: Arcadian residents and staff having a fun time

maze and even an epic clash between an enormous gorilla and lizard. (Fortunately, riders on that one escaped unharmed.)

A colorful mini-swing was also in operation all day long, and the carnival-like atmosphere was only enhanced by the delightful performances of two street clowns who regaled everyone with their feats of juggling, not to mention their silly clown gags.

The outdoor rides and inflatable attractions, purveyed once again by Mr. David Zaitschek of Long Island-based Amazing Amusements, provided the two shifts of visitors—the first occupying the midday hours and the second the mid-to-late afternoon—with ample fun.

Mr. Zaitschek was on hand all through the day to personally oversee the proceedings. In a quiet moment between issuing directions to his blue-shirted staff, Zaitschek noted that while he's worked with several special-needs agencies in the past, Hamaspik is "the most organized."

Standing behind a greeting table

at Fun Time's front door—and standing behind that record of organization—was Hamaspik's Special Events Coordinator Mrs. Brenda Katina, who was on her feet quite possibly all day directing the huge event's logistics in real time.

Backing her up as always was Hamaspik of Orange County's indefatigable Early Intervention (EI) Director Leah Klar, who has regularly volunteered for several years now to assist at the event.

Keeping individuals and family members from getting too hungry, and well-fueled for maximum fun, was the menu of Passover foods provided in ample amounts in Fun Time's spacious cafeteria.

Food items free for the taking—make that eating—included bananas, yogurts, water bottles, juice drinks, American cheese, chocolate "Leben" puddings and, of course, plenty of matzah, the age-old Biblically-mandated Passover flatbreads.

By the time buses and other vehicles were ready to roll out by each shift's end, individuals and family members alike were equally

exhausted and exhilarated, spent by a full day of travel and fun but fully satisfied by the enriching and reinvigorating family experience.

Nary a frown could be seen as the special-needs individuals settled into their charter-bus, van or car seats. It was Passover, after all—a holiday the Torah itself describes as a time for family... and an outing delivered by Hamaspik yet again that synthesized family, fun and inclusion.

Fusing those themes seamlessly as it did, the only issue remaining was the one perhaps best encapsulated by two girls on their way home: "We can't wait until next year!" ■



The many faces of Passover fun

# At Passover Festival, Hamaspik Community Remembers and Recharges

*History-laden family holiday celebrated across Hamaspik agencies*

Few holidays so invoke history as does Passover.

In Jewish communities spanning continents and crossing eras, homes were transformed into bustling beehives of preparation as early as one month before the Biblical holiday.

The eight-day festival marks the legendary Exodus from ancient Egypt—a supernatural series of events remembered by a number of practices.

These include eating the matzah flatbreads, conducting the 15-step Seder ritual meal, and expunging one's home and properties of all visible and accessible leavened grain-based items.

It is the latter weeks-long endeavor, an exercise in controlled but oft-frantic chaos (and a furious contrast to the serene, silvery majesty of the Seder), that leaves homes spic and span—with the cli-

matic meal, and even the cleaning, rife with intergenerational tips, tricks and traditions.

And across the Hamaspik universe, the run-up to Passover was likewise marked with all formal and informal features... and a multitude of pre-Pesach pedagogical and preparatory activities.

## Ready, set...

"What their parents are doing, they're actually experiencing," said Mrs. Reizy Weichbrod, Master Teacher at Hamaspik of Rockland County's classroom-based Early Intervention (EI) Program.

At that program in the weeks preceding the holiday, Passover cleaning was the dominant theme of students' daily routines—with gross-motor, fine-motor and other critical skills-building activities updated to

incorporate activities seen at home such as washing toys clean of crumbs.

Other activities simultaneously building skills and holiday familiarity were dividing piles of mock matzah and *chometz* (leavened grain-based items) into separate bins.

The young EI students were also engaged with hands-on, experiential activities that both incorporated standard sensory stimulation activities and brought the Seder and its 15 steps to life.

In like-minded Passover preparation, Hamaspik of Rockland County's After-School Respite Program reported a robust holiday theme.

Issue #6 of the *Respite Scoop*, the program's in-house newsletter, recounted a range of Pesach-related activities, including rounds of Bingo using hand-made cards featuring Pesach pictures.

The program also had participants decorating a bulletin board with Passover items—turning oak tag into "matzos" and glitter, silver foil and red sand into the Seder's five silver wine goblets.

At the Concord Briderheim residence, creative Home Manager Mrs. Shaindel Goldberger had residents craft a "Ten Plagues" diorama during the week of March 18-24, bringing to life the Biblical account of the ten supernatural phenomena that struck the ancient Egyptian empire.

Mrs. Goldberger, as is her wont, also purchased the traditional white *kittel* robes for all the group home's resident gentlemen. Normally worn by married men at their Passover

tables as they preside over extended family like kings, Mrs. Goldberger ensured that her charges would assume full-fledged royal status at Concord's Seder table too.

Hamaspik of Orange County's Day Hab program got into the "cleansing spirit" of Passover with the perennially fun pastime of cleaning cars. Armed with buckets of soapy water and outdoor vacuums, the young women tackled a number of vehicles, leaving them Pesach-ready.

In the same vein, the Day Hab's sizable activity-room windows were daubed with images symbolizing the Seder's 15 steps. The ladies also played a "Find the Chometz" round of Hide and Seek—and the weekly bake sale program even had a Pesach touch.

The individuals also spent a considerable number of daily activity sessions crafting hand-made holiday jewelry—plus hand-decorated boxes to hold the lovely bracelets and other items.

But across Hamaspik, Passover preparation extended well beyond incorporating holiday-related activities into the daily curriculum.

At the agency's group homes in three counties, in-house cooks—backed by Managers, Direct Support Professionals (DSPs) and other staff—were whipping up a storm, or had already done so, as of the last week of March.

"Everything is cooked already," Feish Horowitz, Manager of Hamaspik of Rockland County's Wannamaker Briderheim IRA, told the *Gazette* on March 26.

At the Forshay Briderheim, also of Hamaspik of Rockland County, Manager Mrs. Sarah Fischer told the *Gazette* on March 27 that while Pesach cooking would be starting the next week, new linens, towels and other items for the holiday had already been purchased.

As mentioned in *Gazette* #95, Hamaspik of Kings County's 61st St. Briderheim had gotten a heady jump start on Passover cleaning; with the gentlemen away on vacation in Florida, the agency's maintenance staff did a great job in cleaning the home for the holiday well in advance.

At Hamaspik of Orange County's Acres Briderheim, Home Manager Lipa Laufer reported on March 29 that kitchen preparations were well underway. More important than that, however, were "his boys'" preparations for the holiday—with one already knowing the Seder's "Mah Nishtanah" recitation comfortably by heart.

"They're all looking forward to asking for the Afikoman," Laufer added, referring to the custom of "ransoming" that so-labeled piece of

Seder matzah for a toy, game or other gift.

(A similar situation transpired at Hamaspik of Orange County's Seven Springs Shvesterheim IRA, where "the girls" helped unpack all Pesach paper goods and helped with peeling vegetables and fruits for cooking, the *Gazette* learned after the holiday.)

"Beautiful! We're all into it!" said Mrs. Malkie Cziment, Home Manager of Hamaspik of Kings County's South 9th Shvesterheim residence, asked how Pesach preparations were coming along.

According to the long-time agency stalwart, all of the group home's residents would be staying at South 9th for the holiday, in contrast to some Hamaspik residences at which some denizens would be spending Passover with their biological families.

"Some may decide to change last-minute, but everyone is excited to be here," said Mrs. Cziment.

Reviewing her home's pre-Passover prep, the Manager described a Pesach-ready kitchen presided over by a team of capable and proud residents backed by staff as they peeled fresh vegetables for various holiday dishes and culinary concoctions.

Likewise were the young ladies proud of their new holiday clothes—wardrobe updates that were reflected in new-clothing purchases made across the agency's group homes.

And perhaps best underscoring the consummate home-like atmosphere that is the Hamaspik group home, and not just at Passover but all year 'round, was the following sentiment expressed by a South 9th resident as reported by Mrs. Cziment: "I don't want to go home!"

## ...Passover!

Where's a better place to pick up than exactly where we left off?

For this latter half of our Passover report, being penned as it is on a fine April 16 morning, we begin with the South 9th Shvesterheim.

At that residence, where all residents did indeed remain on the premises throughout the holiday, Passover was most crowned by a glorious Seder, Mrs. Cziment reports.

Under the loving leadership of DSP couple Mr. and Mrs. Binyomin Landau, the young ladies enjoyed a Seder that was "beautiful beyond description," according to Mrs. Cziment.

That ideal atmosphere was only furthered with the four fun-filled Chol Hamoed "Intermediate Days" that followed the holiday's first two days—with the residents variously trekking to a New Jersey aviation



**Making it:** The Hamaspik of Rockland County Men's Day Hab's mock matzah bakery before Passover



**Field commanders:** "Day Happers" and staff on a visit to picturesque Croton Dam

museum, the Brooklyn-based Jewish Children's Museum, the Discovery Zone, a boat ride to and from lower Manhattan, and, of course, joining the rest of HamaspiK for the agency's grand annual Passover outing at Fun Time America in Cliffwood, New Jersey.

"Gorgeous. What would you imagine?" rhetorically responds Home Manager Yossi Moskovits, he of HamaspiK of Kings County's 61st St. Briderheim IRA, when asked "How was Pesach?"

The Home Manager goes on to recount how while some residents went home for the holiday's first and last days, all were together during Chol Hamoed. Those four days were marked with a two-hour Circle Line cruise around Manhattan, an outing to New Jersey's popular Bowcraft amusement park, and—for the home's highest-functioning residents—a visit to the New York Auto Show.

Throughout their local peregrinations, the Manager adds, passers-by and fellow revelers alike offered more than a few comments on the positive care being publicly rendered out to the group of special-needs individuals.

At the Acres Briderheim of HamaspiK of Orange County, Home Manager Mrs. Laufer recounts a "beautiful" Seder at which all residents remained awake throughout—Seders traditionally run well past midnight—with all collecting gift pledges in exchange for their Afikoman "ransoms."

For Chol Hamoed family fun, the "Bridersheimers" put a different spin on "family" by visiting a fellow resident who's been hospitalized for a chronic condition for quite some time now—in addition, of course, to such standard outings "to all kinds of places," including a thrilling aquarium, Mrs. Laufer reports.

Not missing out on the once-a-year opportunity for fun—especially what with this year's Passover calendar configuration creating four consecutive Chol Hamoed weekdays—HamaspiK of Rockland County's Fosse Shvesterheim indulged in an outing to Bowcraft, a bowling jaunt, and a local showing of an inspiring slide show.

Regardless of your age, there's a time for work and a time for play—or at least for taking in the live performance of a play—if you were a Wannamaker Briderheim IRA resident, that is.

That's because several residents of that HamaspiK of Rockland County home spent one day of Chol Hamoed enjoying a spectacular and well-staged production put on by the equally professional Zishe Shmeltzer, a renowned and notably creative childhood educator in New York's Hasidic community.

However, the special moment of the entire holiday—as was the case with most other homes—was the Seder night itself, reports Wannamaker DSP Hersh Cohen. As the several young men recited the "Four Questions" and otherwise made their way through the symbol-



**Getting ready:** HamaspiK of Orange County's young Early Intervention (EI) program at a pre-Pesach mock seder

ism-rich, spiritual meal, that special spirit that can only be felt on Passover was in ample presence.

For the several young men who remained on the premises for the holiday, HamaspiK of Rockland County's Forshay Briderheim delivered on several fronts.

Besides a customarily grand Seder replete with regal table settings befitting the holiday, the gentlemen were tended to throughout Pesach by live-in DSP Mr. Ayalon Mauda and family, as well as Mr. Mauda's team of DSP staff, who came in on Chol Hamoed to lend a hand.

Said tending-to included "Intermediate Day" outings to concerts put on by such popular Jewish-community performers as Uncle Moishy, the Miami Boys Choir and superstar singer Avraham Fried.

"The staff was very devoted," Home Manager Mrs. Sarah Fischer tells the *Gazette*. "They did a great job."

The Grandview Briderheim IRA, another entry in HamaspiK of Rockland County's suite of group homes, was rendered even further ready for Passover with the pre-holiday arrival of Rabbi Binyomin Gruber.

The rabbi, a field representative of the upstate Kiryas Joel-based Vaad Hakashrus [Kosher Committee—ed.], ensured that Grandview's kitchen was properly prepared for the festival—allowing Home Manager Joel Rubin and staff to proceed worry-free with purchasing new coats, hats and other holiday appurtenances for their beloved young charges before the holiday, as well as to engage in all standard activities throughout the holiday, Seder, Chol Hamoed trips and all.

At HamaspiK of Rockland County's sizable Arcadian Briderheim IRA, the majority of residents who remained "at home" for the Seders instead of going home took in a lovely Passover meal led in lavish HamaspiK style by live-in DSPs Mr. and Mrs. Asher Wolner—meals also lovingly and professionally "catered" with remarkable taste and variety by Mrs. Wolner, DSP Joel Fried informs the *Gazette*.

Compounding their Seder joy was the fact that they marked those

meals sporting new wardrobes, from hats to shoes. The home's highest-functioning residents even asked the "Mah Nishtanah."

"There was a lot of good food," says Home Manager Shlomo Lebowitz, with an added caveat: "Healthy food!"

On top of that, Arcadian "Bridersheimers" also enjoyed their Chol Hamoed by joining HamaspiK for its Tuesday, April 10 outing to Fun Time America—as well as delighting in a well-deserved romp through the popular and colorful Palisades Mall the next day. They even visited a local pet store, where they collected colorful live fish for addition to their home's aquarium.

The high-functioning special-needs residents of HamaspiK of Orange County's Seven Springs Shvesterheim IRA went home for the first two days of Pesach—falling into the loving arms of their parents who had invited them to spend their Seders with their families, and driving home the overarching mission of family and community embrace that is the Individualized Residential Alternative (IRA) care model.

Following the first two days,



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however, the young ladies—and their exemplary staff—converged once again on Seven Springs for a litany not of excuses but of excursions over Chol Hamoed, which included a leisurely outing around a local lake, a trip to Bowcraft and an "in-house" stay-at-home day filled with fun games.

Chol Hamoed's fourth and final day (April 12), Home Manager Mrs. Miriam Heilbrun reports, presented "the girls" with a culinary marathon of sorts. "Everybody had a great time cooking!" Mr. Heilbrun informs the *Gazette*. "One filled blintzes, another made apple compote (peeled, sliced and cored all apples) and another helped cook the fish and chulent."

With all that irresistible cuisine, it's no wonder that "During Yom Tov [the formal days—ed.] and after, the girls were busy commenting about the food," the Manager continues. "'The fish was good? Who made it? Did you like it?'"

**Beginnings ever new**

"Though Pesach is gone, the spirit and rejuvenation that was acquired in those precious days will lead us through our upcoming summer days," 38th St. Shvesterheim Home Manager Israel Indig wrote in an e-mail to the *Gazette*.

Following a "heartwarming" first two days of the holiday cele-

brated with family and friends, the home's residents made their way through a string of Chol Hamoed trips including the smile-inducing Bowcraft, the grand Fun Time America outing and the Riverside Aquarium.

At HamaspiK of Rockland County's Concord Briderheim IRA, splendid Seders and delightful day trips were par for the course. Each individual had his own Ka'arah [traditional and usually decorative Seder plate—ed.], recited the "Four Questions" to the best of his ability, and had a great time on the several trips that marked the Chol Hamoed middle days of the holiday.

Among those trips were the taking in of a superbly-staged Passover play put on at a Manhattan theater, a visit to the sylvan Haverstraw Park, and participation in HamaspiK's Fun Time America group outing, reports Concord DSP Moshe Einhorn.

But the Passover experiences of these two homes speak not just for themselves but for the entire agency—an observance at once a celebration of the past, confirmation of family values in the present, and commitment to moving thus charged, and recharged, forward into the future.

It was thus perhaps only appropriate that, with the arrival of Passover's final day, Concord residents could be heard asking: "When will Day Hab start again?" ■



**All set to go:** The Concord Briderheim's splendid Seder table the day before Passover

# Hamaspik Honors Housing Commissioner

Continued from Page 1

agency's work, what with his familiarization over the past year with HCR's programs, many of which Hamaspik has put to direly-needed use throughout the greater New York City and Hudson Valley regions. (Mr. Towns was tapped by Gov. Cuomo to head HCR about a year ago.)

Chief among said HCR-funded programs purveyed to its public by Hamaspik are the Access to Home, RESTORE and HOME programs, which respectively accessorize, "de-hazardize" or subsidize privately owned residences which meet various exacting criteria.

After a brief front-line tour of several Hamaspik-improved homes before the luncheon reception, Commissioner Towns came in powerfully impressed with what he saw with his own eyes.

That tour of the immediate Monsey area was led by Hamaspik of Rockland County Executive Director Meyer Wertheimer and a group of Hamaspik housing-program "top brass."

Among the families helped by Hamaspik's Access to Home program was a family blessed with a child with a difficult physical disability. But with the installation of a chair lift, the young man would not have to crawl up and down the steps to get to and from his own bedroom.

The commissioner was visibly moved at the critical boost created by the lift for the young man and his entire family.

"I don't want to think about where that boy might have been if not for the help he got in making his home comfortable for his situation," the Commissioner later said.

The second location visited was that of a home that had stayed functional and stable despite the severe disability of the lady of the house, a proud mother and wife.

At this visit, Commissioner Towns saw firsthand how even minimal assistance from Access to Home can keep an entire family on its feet, what with a front-door wheelchair ramp, lowered kitchen appliances



**On the front lines:** Commissioner Towns and Hamaspik visiting homes

and widened interior doorways allowing the family matriarch to keep rolling in more ways than one.

This is what Access to Home is all about, Hamaspik of Rockland County Access to Home Coordinator Eliezer Eizikovits told the Commissioner at that visit, with the Commissioner nodding in silent assent.

Both visits drove home the same central point: Even small renovations to a house are often all it takes to keep an entire family—parents, children and even grandchildren—together.

Commissioner Towns then asked to see further real-life examples of the Access to Home Program, resulting in several unscheduled pop-ins at other Hamaspik-helped homes across the greater Monsey area.

Said help included such staples as wheelchair lifts and ramps, with the Commissioner further impressed by the assistance that his state agency had authorized Hamaspik to render.

It's a splendid example of how government programs should work, said the Commissioner outside one such Monsey residence, walking under blue skies across a grassy tree-dotted yard. Mr. Towns also remarked that the program keeps families together by preventing the out-of-home placement of special-

needs children, parents or whoever the individual in need may be.

After a brief personal tour of the lovely Fosse Shvesterheim in the South Monsey area, the Commissioner and his entourage returned to Hamaspik Terrace, where an elegantly-set hall packed with dozens of Hamaspik staff members delivered a rousing round of welcome applause.

At the front of the room were seated public servants or their surrogates at local, county, state and federal levels.

Said guests included Rockland County Legislators Phil Soskin, Ilan Schoenberger, Aaron Wieder and Ed Day, a contingent headed by Legislature Chairwoman Harriet Cornell.

Also in attendance was Stephen Papas, a top aide to U.S. Congresswoman Nita Lowy, who stood in for his boss after Ms. Lowy was not able to attend at the last minute due to an urgent call.

Commissioner Towns and the public servants shook hands all around and then settled in at the VIP table at the head of the chamber.

The first item on the agenda was formally welcoming and greeting the Commissioner.

Longtime Hamaspik stalwart and regular event emcee Brenda Katina, the agency's Special Events

Coordinator and herself a doting mother of several special-needs children, took the stand.

After a crowd-warming icebreaker, Mrs. Katina first welcomed the public servants, then the Commissioner, on behalf of the entire Hamaspik community—parents, staff and beneficiaries alike.

The emcee then directed the crowd's attention to two large screens in either corner of the room, where there was shortly shown a fast-paced, exciting and informative video on Hamaspik.

After the moving presentation in a darkened room, the house lights came back on; tears could be seen in several eyes after the touching footage on what individuals with special needs endured before Hamaspik stepped in to assist.

Against that background, the Master of Ceremonies introduced the agency's founder and Executive Director of Hamaspik of Rockland County, Mr. Meyer Wertheimer.

In his imitable style, Mr. Wertheimer first greeted the guests who came out to honor Commissioner Darryl C. Towns as well as to formally celebrate the recent Rockland County Legislature Proclamation declaring March 5 as "Hamaspik Day."

However, Wertheimer pointed out, the truth is that "every day is a Hamaspik Day."

This is all the more true what with Hamaspik being the largest Orthodox Jewish health and human-services agency in New York by far, the Executive Director continued—helping as it does individuals from every denomination and philosophy within that community, and with services ranging from home accessibility and health care to programs

for the physically, developmentally and intellectually disabled, and not infrequently 24 hours a day.

But building up that repertoire over a full quarter-century of community services would not have been possible without the extraordinary efforts of an extraordinary staff.

Whether working with infants or even the occasional centenarian, employees new and old alike put their heart and soul into their work, furthering a corporate culture in which going above and beyond the call of duty is standard operating procedure.

Still, maintaining such heartfelt devotion in the private sector is only possible with equivalent partnerships in the public sector, the speaker continued—and Hamaspik remains fortunate to have friends in government at all levels who share its mission.

The Hamaspik founder then cited the Commissioner as one of those friends, through whose agency was Hamaspik able to provide so much help to the disabled, the elderly and homebound worthy others in keeping them out of nursing homes—thus saving New York copious outlays.

After a robust round of cheers for Mr. Towns, the Executive Director turned his attention to the other Hamaspik public-sector partners, particularly those of Rockland County, who were present.

Those would be Chairwoman Cornell and Legislators Soskin, Schoenberger, Day and Wieder—and the county should rightly be proud of its teamwork with Hamaspik on CDPAP, Mr. Wertheimer noted.

The Consumer Directed Personal Aide Program (CDPAP), a self-explanatory initiative now the PACE (Personal Aide Consumer Empowerment) program under the purview of HamaspikCare, as well as Hamaspik of Rockland County's Early Intervention (EI) program, are now both sturdy pillars in the edifice of Hamaspik's numerous programs and services to the entire region.

Mr. Wertheimer concluded his remarks with heartfelt thanks to the



**Taking a stand for special-needs housing:** (L-R) Commissioner Towns and entourage visiting Fosse, Stephen Papas, Rockland County Legislator Ed Day

entire HamaspiK staff body present for all that they do.

The Rockland County Legislators next converged on the podium, where Chairwoman Cornell recited the Legislature's official proclamation declaring March 5th as "HamaspiK Day."

In the formal parlance standard for such proclamations, the public servant recounted that "Whereas, in 1987, a group of individuals who recognized the ever-growing need to assist those with physical and mental impairments established HamaspiK of Rockland County" and "Whereas, for more than twenty-five years, this organization has provided health and human services to individuals in need, enabling them to achieve their highest personal potential."

Concluding the proclamation, Ms. Cornell recited, "Whereas, this Legislature wishes to recognize and applaud the dedication and commitment of the staff of HamaspiK of Rockland County who assist clients with the highest degree of respect and kindness; Now therefore, I, Harriet Cornell, Chairwoman of the Rockland County Legislature, on behalf of the entire Legislature, take this occasion to properly and formally proclaim March 5, 2012 HamaspiK of Rockland County Day in the County of Rockland."

"We wish you the greatest success in your new facility," the Chairwoman said to cheers.

Though nearly an entire month

had passed between the proclamation's official adoption and its reading at HamaspiK Terrace, it did not diminish the significance or impact of an Orthodox Jewish social-services agency in Rockland County receiving such an honor.

Congresswoman Lowy, Democrat of Westchester and among the House's most influential members, had dispatched aide Steven Papas to represent her at the event. Mr. Papas was thus called upon to recite Ms. Lowy's letter of greeting at the occasion, a missive which conveyed her respect for HamaspiK and for the event welcoming Commissioner Towns.

In remarks delivered next, Legislator Schoenberger invoked his years of working with HamaspiK, standing by its side at many a need—a record resulting in up-close familiarity with an agency "doing Hashem's [G-d's—ed.] work."

"I can't imagine what this world would be like" if not for HamaspiK's leadership and staff, he added.

"Whatever way we in County government can ever help you, please—feel free to call us," Schoenberger concluded.

In remarks remarkably candid and from the heart, Mr. Soskin, the senior of the Legislature's contingent, waxed nostalgic over the day in the not-too-distant past (or so it seemed) when he was honored with affixing a traditional mezuzah scroll on a doorpost of the then-new HamaspiK of Rockland County administrative office complex—and how the agency had grown so quickly since then.

Soskin also noted the range of headgear among the men in attendance, from flat-brimmed Chasidic beaver hats and Western fedoras to simple yarmulkes—all reflecting the rainbow of Orthodox-community nuance serviced by HamaspiK.

"The only time I get to wear a shtreimel [formal fur hat—ed.] is on Simchas Torah," he joked.

"As we approach Pesach, the period of freedom," Mr. Soskin concluded, "let yourselves know that you have given freedom to many of those who cannot help themselves."

"I'm glad I got here because I'm familiar with your work but I've never been here close up," said Legislator Ed Day, a former police officer, after being called to the podium by Emcee Katina.

Mr. Day mentioned his non-profit involvement with other special-needs agencies and the resulting familiarity with special-needs work. "I've seen the daily challenges but more importantly, the daily victories—and those victories come through the efforts of the families," said the Legislator.

"I salute you on a very special day in your history now, and keep up the good work!" concluded Mr. Day. "Thank you for what you do."

First congratulating HamaspiK "for their continued success and growth," Mr. Aaron Wieder, the newest Legislator of the four, hailed the agency for its extraordinary work every ordinary day.

"While we celebrate March 5th, HamaspiK can have that celebration each and every day for their service and dedication to those of society that need their and our help," Wieder said.

Mr. Wieder also thanked the Commissioner for attending and took note of the presence of his Legislative peers. "HamaspiK couldn't have better friends," he concluded to applause.

Next came a high point of the event, as Yossi Katina, the Katinas own son, rolled up to the podium in his custom-made wheelchair wearing an beaming smile.

Young Mr. Katina, a non-verbal but happy-go-lucky 13-year-old, was introduced by the emcee. Mrs. Katina, speaking for her son, then shared the resolution of Yossi's dilemma when a stair lift was installed in their home, allowing him once again to access his own second-floor bedroom.

Once on the sub-

ject of Access to Home, the program that had helped make possible the happiness they saw before their own eyes, the crowd was asked to turn its attention to the screens once again, where a dramatic "before and after" video presentation was run depicting often-perilous conditions in private homes corrected by HamaspiK via various HCR programs.

All eyes, including those of Mr. Towns, were glued to the screens, with heads nodding at the practical impact made by the Access to Home and RESTORE work done by HamaspiK—and almost in disbelief at what a profound difference in quality of life can be effected with a few bricks and a little plumbing.

With the lights turned back on once again, Yossi Katina, speaking through his mother, asked Commissioner Darryl C. Towns to share a few words.

But before the Commissioner actually took the floor, the Katinas "accosted" him with a small gift—a delightfully wrapped package of decorative dominoes, symbolizing the positive "chain reaction" effect even one "minor" decision from HCR can have across the Empire State and its millions of lives.

Commissioner Darryl C. Towns, himself hailing from an old-time Brooklyn family, opened with a telling anecdote that his own father, Congressman Ed Towns, likes to repeat.

A friend of the family, seeking to

reinvest himself as a New Yorker after relocating from Georgia, once rode the Big Apple's subway—only to witness no one budge when an older rider with her grandchild and armfuls of shopping board a standing-room-only car.

As car and grandmother leaned to and fro with nary a seated rider rising, the family friend "just sat there in total amazement that no one would get up to give her a seat. He just sat there," Towns related.

"Well," declared the Commissioner, "I'm happy that you're giving someone a seat. When duty calls, we cannot afford to sit there in amazement. We have to go out and do something."

In his central comments, Mr. Towns took note of the lean, party-neutral effectiveness of Gov. Andrew Cuomo and the positive changes ushered in under otherwise dire state circumstances.

In particular, the Commissioner highlighted Mr. Cuomo's fiscal austerity, then segueing to a clever play on words in saying that, unlike other organizations, HamaspiK's government-supplied dollars "make sense."

Commissioner Towns later echoed those comments in remarks made after the event to the *Gazette*, saying that there remained "tremendous things to do" with small organizations like HamaspiK.

Concluded the Commissioner: "This gives us the impetus to work with partners." ■



**Congratulations, and best wishes:** Rockland County Legislator Aaron Wieder hails HamaspiK (above); Executive Director Wertheimer welcomes CEO Towns

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# IN THE KNOW

## All about... Lyme disease

Bet the town fathers didn't see this one coming.

Chances are the founders of Lyme, an otherwise charming Connecticut village, would have loved the publicity—but not because their town is now synonymous with a bacterial epidemic.

Yet Lyme disease, spread through the bites of deer ticks infected with the *Borrelia burgdorferi* bacteria, is indeed named for the eponymous Connecticut village where it was first detected.

Today, many years later, Lyme disease remains a growing public-health menace being closely monitored by the U.S. Centers for Disease Control (CDC)—with suburban Connecticut the epicenter of the epidemic still spreading across the country, mainly in the Northeast.

In 2010, 94% of Lyme disease cases were reported from 12 states, with Connecticut (as might be expected) topping the list, and New York State coming in 9th behind New Hampshire (8th), New Jersey (7th), and... Minnesota (6th). (Second place was snagged by Delaware.)

Unfortunately, with its close proximity to Connecticut, New York State's Rockland County, home to a substantial community of Hamaspik beneficiaries, is in prime "Lyme disease country."

But the good news is that Lyme disease is largely curable—and largely preventable too.

When it comes to separating Lyme disease fact from myth, here's everything you need to know to stay in the know.

### Definition

Lyme disease is a bacterial infection that causes a number of serious symptoms that usually cause no long-term permanent damage if diagnosed and treated promptly and properly. Lyme disease is not contagious from human to human.

Lyme disease is caused by the *B. burgdorferi* bacteria entering the bloodstream. This happens when one is bitten by a deer tick, also known as a blacklegged tick, carrying the bacteria. (A tick is a tiny insect.)

### Symptoms

Lyme disease is divided into three stages:

1. Early localized stage
2. Early disseminated stage
3. Late disseminated stage

Each of these three stages has its own set of symptoms.

The signs and symptoms of Lyme disease are variable, usually involving more than one system.

If you were bitten by a tick (or think you were bitten by a tick), live in an area known for Lyme disease (like the greater Monsey area) or have recently traveled to an area known for Lyme disease (like the greater Monsey area), and observe any of these symptoms, seek medical attention!

#### I. Early localized stage (first three to 30 days after bite)

##### A. General symptoms

These general symptoms may be the only evidence of infection:

- Fatigue
- Chills
- Fever
- Headache
- Muscle and joint aches
- Swollen lymph nodes

##### B. Erythema migrans (EM) "bull's-eye" rash

Erythema migrans (EM), an unusual form of skin rash, is a early-stage Lyme disease symptom in a category of its own.

• An EM rash gradually expands over a period of several days and can reach up to 12 inches across. Parts of the rash may clear as it enlarges, resulting in the "bull's-eye" appearance of concentric circles

• EM rash may appear on any area of the body

• Some people may get this expanding red rash alone, or in addition to the general symptoms

• The EM or "bull's-eye" rash occurs in approximately 70-80 percent of infected persons

• It begins at the site of a tick bite after a delay of three to 30 days (average seven days)

• Rash usually feels warm to the touch but is rarely itchy or painful

#### II. Early disseminated stage (days to weeks after bite)

Untreated, the infection may spread from the site of the bite to other parts of the body, producing an array of specific symptoms that may come and go, including:

- Additional EM rashes in other areas of the body
- Facial or Bell's palsy (loss of muscle tone on one or both sides of the face)
- Severe headaches and neck stiffness due to meningitis (inflammation of the spinal cord)
- Pain and swelling in the large joints (such as knees)

• Shooting pains that may interfere with sleep

• Heart palpitations and dizziness due to changes in heartbeat

Many of these symptoms will resolve over a period of weeks to months, even without treatment. However, lack of treatment can result in additional complications, described below.

#### III. Late disseminated stage (months to years after bite)

##### A. Arthritis

Approximately 60 percent of patients with untreated Lyme disease infection may begin to have intermittent bouts of arthritis, with severe joint pain and swelling. Large joints are most often affected, particularly the knees. Arthritis caused by Lyme disease manifests differently than other causes of arthritis and must be distinguished from arthralgias (pain, but not swelling, in joints).

Up to five percent of untreated patients may develop chronic neurological complaints months to years after infection. These include shooting pains, numbness or tingling in the hands or feet, and problems with short-term memory.

B. Lingering symptoms after treatment (PTLDS, or post-treatment Lyme disease syndrome)

Approximately 10-20 percent of patients treated for Lyme disease with a recommended two- to four-week course of antibiotics have

symptoms that can last for months or even years after treatment, including muscle and joint pains, cognitive defects, sleep disturbance or fatigue. This condition is often called "chronic Lyme disease," but is properly referred to as post-treatment Lyme disease syndrome (PTLDS).

The exact cause of PTLDS is not yet known, but there is no evidence that it is due to ongoing Lyme disease.

There is some evidence that PTLDS is caused by an autoimmune response, in which a person's immune system continues to respond even after the infection has been cleared, damaging the body's tissues.

### Cause

As mentioned, Lyme disease is caused when the *B. burgdorferi* bacterium enters the bloodstream via the bites of deer ticks.

Deer ticks, in turn, are tiny brown insects. Adults are about the size of a sesame seed. Babies are about the size of a poppy seed (which can make them nearly impossible to spot).

However, they feed on animal and human blood—and swell to many times their size when doing so. It is during such feedings that they physically attach themselves to their hosts, swelling greatly in size so as to become visible as well as detachable.

Deer ticks typically feed on the blood of mice, small birds and deer, but they can also feed on the blood of humans, cats, dogs and horses.

They live in low bushes and tall grasses of wooded areas, waiting for warm-blooded animals to pass by.

Deer ticks are most active in the summer.

To contract Lyme disease, you must be bitten by an infected deer tick. The bacteria enter your skin through the bite and eventually make their way into your bloodstream. Before bacteria can be transmitted, a deer tick must take a blood meal, which can take at least 24 hours of feeding but typically 36 to over 48 hours.

Only ticks that are attached to your skin and are feeding can transmit the bacteria. An attached tick that has a swollen appearance may indicate that enough time has elapsed to

transmit bacteria. Removing the tick as soon as possible may prevent infection.

### Risk factors

The most common risk factors for Lyme disease include spending time in wooded or grassy areas, not wearing long sleeves and long pants, and not removing ticks promptly or properly.

### Diagnosis

The best way to find out if you have Lyme disease is to talk to your family doctor about your symptoms.

Lyme disease is diagnosed in several ways.

Because Lyme disease has many symptoms that often are also found in other conditions, like viral infections, various joint disorders, fibromyalgia, chronic fatigue syndrome and even depression, it can be hard to diagnose Lyme disease.

Additionally, these common conditions are sometimes misdiagnosed themselves as Lyme disease. What's more, the ticks that transmit Lyme disease also can spread other diseases at the same time.

For this reason, Lyme disease is sometimes only diagnosed when Lyme-specific symptoms pop up—particularly the EM “bulls-eye” rash.

In plain English, Lyme disease can be hard to diagnose because you may not have noticed a tick bite—and because many of its symptoms are like those of the flu and other diseases.

A doctor may begin by asking patients if they were in any high-risk wooded or grassy areas recently.

If one only has the common nonspecific symptoms, a doctor may order blood tests to check for the Lyme-causing bacteria if it is suspected. These tests work by checking for the presence of antibodies, which are produced by the immune system, in response to the bacteria's presence.

Some of these tests are the enzyme-linked immunosorbent assay (ELISA) test, the Western blot test, and the polymerase chain reaction (PCR) test.

However, blood tests aren't always necessary to make the diagnosis. They can often give false results, especially in early-stage Lyme disease.

People who have been sick with Lyme disease for less than a month often don't yet have antibodies to the disease. This means they won't have positive blood tests. Also, if a person with early Lyme disease takes antibiotics, he or she may never have positive Lyme disease tests. However, the blood tests are almost always positive in people who have been sick for over four weeks and haven't taken antibiotics.

### Treatment

#### Lyme disease

Treatment for Lyme disease is most effective if begun early.

Oral antibiotics. Oral antibiotics are the standard treatment for early-stage Lyme disease. These usually include doxycycline for adults and children older than eight, or amoxicillin or cefuroxime for adults, younger children, and mothers. These drugs often clear the infection and prevent complications. A 14- to 21-day course of antibiotics is usually recommended, but some studies suggest that courses lasting 10 to 14 days are equally effective.

Intravenous antibiotics. If the disease has progressed, doctors may recommend treatment with an intravenous antibiotic for 14 to 28 days. This is effective in eliminating infection,

although it may take some time to recover symptomatically. Intravenous antibiotics can cause various side effects, including a lower white blood cell count, mild to severe diarrhea, or colonization or infection with other antibiotic-resistant organisms unrelated to Lyme.

Patients treated with antibiotics in the early stages of the infection usually recover rapidly and completely. Most patients who are treated in later stages of the disease also respond well to antibiotics, although some may have suffered long-term damage to the nervous system or joints. Approximately 10 to 20 percent of patients experience fatigue, muscle aches, sleep disturbance, or difficulty thinking even after completing a recommended course of antibiotic treatment. These symptoms cannot be cured by longer courses of antibiotics, but they generally improve on their own, over time.

Untreated Lyme disease in expectant mothers may lead to especially serious complications.

#### Post-treatment Lyme disease syndrome (PTLDS)

Regardless of the cause of PTLDS, studies have not shown that patients who received prolonged courses of antibiotics do better in the long run than patients treated with placebo. Furthermore, long-term antibiotic treatment for Lyme disease has been associated with serious complications.

The good news is that patients with PTLDS almost always get better with time; the bad news is that it can take months to feel completely well.

After treatment, a small number of people still experience some symptoms, such as muscle aches and fatigue. The cause of these continuing symptoms is unknown, but extended antibiotic treatment doesn't make them go away. Some experts believe that certain people who get Lyme disease are predisposed to develop an autoimmune response that contributes to their symptoms. More research is needed.

If you have been treated for Lyme disease and still feel unwell, see your doctor to discuss how to relieve your suffering. Your doctor may want to treat you in ways similar to patients who have fibromyalgia or chronic fatigue syndrome. This does not mean that your doctor is dismissing your pain or saying that you have these conditions. It simply means that the doctor is trying to help you cope with your symptoms using the best tools available.

You may be tempted to try treatments that are unproven or non-standard in order to feel better. Unfortunately, there are many fraudulent products out there claiming to treat “chronic Lyme disease.” These products have not been shown to help and can be toxic and even deadly.

Specifically, the FDA warns the public against using bismacine (a.k.a. chromacine), an injectable compound whose ingredient bismuth is safe for some digestive conditions but not as a treatment for Lyme disease. This is because bismacine can cause bismuth poisoning, which in turn can cause heart and kidney failure.

It is normal to feel overwhelmed by your ongoing symptoms. Some things that may help you manage your PTLDS include:

- Check with your doctor to make sure that Lyme disease is not the only thing affecting your health
- Become well-informed. There is a lot of inaccurate information in circulation out there. Learn how to sort through this maze
- Track your symptoms. It can be helpful

to keep a diary of your symptoms, sleep patterns, diet, and exercise to see how these influence your wellbeing

- Maintain a healthy diet and get plenty of rest

- Share your feelings. If your family and friends can't provide the support you need, talk with a counselor who can help you find ways of managing your life during this difficult time. As with any illness, Lyme disease can affect you and your loved ones. It doesn't mean that your symptoms are not real. It means that you are a human being who needs extra support in a time of need

### Prevention

Reducing exposure to ticks is the best defense against Lyme disease.

There are several steps you and your family can take to prevent and control Lyme disease.

While it is a good idea to take preventive measures against ticks year-round, be extra vigilant in warmer months (April-September) when ticks are most active.

Many types of ticks bite people, but only deer ticks transmit the bacteria that cause Lyme disease. Furthermore, only deer ticks in the highly endemic areas of the northeastern and north central U.S. commonly carry these bacteria. Finally, deer ticks need to be attached for at least 24 hours (usually 36 or more, actually) before they can transmit Lyme disease. This is why it's so important to remove them promptly and to check your body daily for ticks if you live in an endemic area.

#### Avoid direct contact with ticks

- Avoid wooded and bushy areas with high grass and leaf litter
- Walk in the center of trails
- Remember that ticks are usually found close to the ground, especially in moist, shaded areas—so tuck your pant legs into your socks or boots for added protection
- Also, wear light-colored clothing. This makes it easier to see and remove ticks

#### Repel ticks with DEET or permethrin

- Use repellents that contain 20% or more DEET (N, N-diethyl-m-toluamide) on the exposed skin for protection that lasts up to several hours. Always follow product instructions. Parents should apply this product to their children, avoiding hands, eyes, and mouth
- For clothing, tents and camping gear, use products that contain permethrin. Treat clothing and gear, such as boots, pants, socks and tents. It remains protective through several washings. Pre-treated clothing is available and remains protective for up to 70 washings

#### Find and remove ticks from your body

- Bathe or shower as soon as possible after coming indoors (preferably within two hours) to wash off and more easily find ticks that may be crawling on you
- Conduct a full-body tick check using a hand-held or full-length mirror to view all parts of your body upon return from tick-infested areas. Parents should check their children for ticks under the arms, in and around the ears, inside the belly button, behind the knees, around the waist, and especially in their hair. Other common tick locations are the scalp and the back of the neck
- Examine your stuff. Ticks can ride into your home on clothing, then attach to a person later, so carefully examine your coats, backpacks, bags and other gear. Tumble clothes in a dryer on high heat for at least ten minutes to

kill remaining ticks (preferably an hour). Pets, if you have them, can also carry ticks into homes; it is harder to both find ticks on pets and treat pets for Lyme disease. However, a number of tick repellents designed for animals are available; choose and use with care as some animals, particularly cats, are sensitive to many chemicals

#### How to remove a tick

There's no need to panic if you find a tick attached to your skin! There are several tick removal devices on the market, but a plain set of fine-tipped tweezers will remove a tick quite effectively. Here's what to do:

1. Use fine-tipped tweezers to grasp the tick as close to the skin's surface as possible
2. Pull upward with steady, even pressure. Don't twist or jerk the tick! This can cause its mouth-parts to break off and remain in the skin. If this happens, remove the mouth-parts with tweezers. If you are unable to remove the mouth-parts easily with clean tweezers, leave them alone and let the skin heal
3. After removing the tick, thoroughly clean the bite area and your hands with rubbing alcohol, an iodine scrub, or soap and water

Avoid folklore remedies such as “painting” or smothering ticks with nail polish or petroleum jelly, or using heat to make the tick detach from the skin. Your goal is to remove the tick as quickly as possible—not waiting for it to detach.

#### Create a landscaped tick-safe zone

You can make your yard less attractive to ticks depending on how you landscape. Here are some simple landscaping techniques that can help reduce tick populations:

- Clear tall grasses and brush around homes and at the edge of lawns
- Place a three-foot-wide barrier of wood chips or gravel between lawns and wooded areas and around patios and play equipment. This will restrict tick migration into recreational areas
- Mow the lawn frequently and keep leaves raked
- Stack wood neatly and in dry areas (discourages rodents that ticks feed on)
- Keep playground equipment, decks and patios away from yard edges and trees, and place them in sunny locations if possible
- Remove any old furniture, mattresses, or trash from the yard that may give ticks a place to hide
- Wear light-colored clothing that covers most of your skin when you go into the woods or an area overgrown with grass and bushes. This makes it easier to see and remove ticks from your clothing.

### Summary

Last year, his office saw only two cases of Lyme disease, Monsey pediatrician Yehuda Seif, M.D. tells the *Gazette*, and has not seen any this year so far.

Despite the hype and the more frightening aspects of Lyme disease, there's good reason not to be alarmed: Most Lyme disease cases are completely cured with antibiotics, most deer tick bites do not transmit the bacteria in question... and, with the proper prevention, you won't get bitten by a deer tick in the first place.

*The Gazette thanks Hamasip of Rockland County IRA Nurse Evie Steinhart, RN for critically reviewing this article.* ■



# Public Health and Policy News

## U.S. TB cases hit record low: CDC

Rates of tuberculosis (TB) fell to an all-time low in the United States in 2011, but the disease continues to infect racial and ethnic minorities and those who are foreign-born, federal officials reported in late March.

In all, 10,521 tuberculosis (TB) cases were reported in the United States in 2011, a 6.4 percent drop from 2010, to 3.4 cases per 100,000 people. Still, infection rates were seven times higher for Hispanics, eight times higher for blacks and 25 times higher for Asians than for whites, the researchers found.

The study, released to coincide with World TB Day, also found that the TB rate was 12 times higher among the foreign-born.

Tuberculosis is caused by germs spread through the air from person to person. It typically affects the lungs, but can also target other organs and body parts, such as the brain, the kidneys or the spine. Left untreated, the disease can be fatal, according to the CDC.

## School opposes walker for disabled girl

After two years using a walker, a Texas school district is ordering a five-year-old girl with cerebral palsy back into her wheelchair. Now, the girl's mother is fighting back.

Kristi Roberts says she was stunned when officials from the New Caney Independent School District said her daughter LaKay could no longer use her walker at school. Instead, educators at the district want the girl to use a wheelchair, something Roberts says would reverse years of progress the girl has made.

The reason: school officials said they became worried about the girl's safety using the walker after she fell in the parking lot while she was with her mother.

Roberts isn't taking the news lying down, however.

"If she can walk now, please let her walk," Roberts told NBC News. "Don't strap her in a wheelchair. We've worked so hard. She has worked so hard."

## Campaign urges accessible homes

Most single-family homes are not accessible to people with physical disabilities. But a publicity campaign wants that to change.

The effort launching this week is encouraging so-called "visitability," the idea that all housing should be accessible to those with disabilities.

At a minimum, this would mean that homes have at least one entrance without any steps, a wheelchair-accessible bathroom on the first floor and doors at least 32 inches wide.

"The majority of families live in single-family homes, which are not federally required to adhere to any accessibility standards," said Kat Taylor, disability rights manager at The Equal Rights Center, a national civil rights group which produced the campaign along

with the Washington, D.C. Office of Human Rights.

"In the long run, these standards would not only guarantee more housing options for people with disabilities, but also assist individuals who acquire disabilities later in life to remain in their homes and age in place," Taylor said.

Taylor and others behind the campaign are urging builders to integrate visitability standards in all new homes, arguing that such modifications are far cheaper to make when a home is built rather than waiting to retrofit it later. What's more, they say the need for accessibility is going to increase exponentially in the coming years with one in three families expected to include an individual with a disability by 2050.

The campaign dubbed "what is WRONG with these pictures?" also includes a series of bus-stop advertisements in Washington, D.C.

## FDA rejects BPA ban call

The metal-coating industrial plastic BPA, used widely in canned foods to keep contents safe from rust and metal poisoning, as well as in baby bottles and other plastic items, has commandeered headlines in recent years.

The chemical, which some studies have linked inconclusively to various illnesses, has been banned from use in Europe for some time now. A U.S. movement to ban it here has been afoot for some time now, too.

However, the U.S. Food and Drug Administration (FDA) recently rejected a petition from environmentalists that would have banned BPA from all food and drink packaging, saying that that petitioners did not present compelling scientific evidence to justify new restrictions.

# Researchers Broaden Criteria for PANDAS

## Diagnosis of bizarre condition without strep connection now possible

No, that title's not a typo—and it's got nothing to do with certain Chinese animals, either.

The Jan. 2012 edition (Issue 92) of the *Hamaspik Gazette* reported on the growing acceptance by mainstream medicine of PANDAS as a legitimate medical diagnosis.

The bizarre and often-frightening condition has been reported for decades now. *Hamaspik Gazette* readers have been reporting it for years.

*Pediatric Autoimmune Neuropsychiatric Disorder Associated with Streptococcus*, or PANDAS for short, is essentially defined as sudden and extreme behavioral and personality changes in children who've just had streptococcus infections, or "strep throat," as it's commonly known.

The link between strep and the sudden onset of obsessive-compulsive disorder (OCD) behavior, reported in virtually every case, was initially dismissed as coincidental.

As early as 20 years ago, however, leading researchers like Susan Swedo, M.D., who heads the National Institute of Mental Health's Pediatric and Developmental Neuroscience Branch, began taking a serious look at the connection.

It was Dr. Swedo who first described the condition now known as PANDAS.

Swedo and colleagues now believe that strep bacteria can mimic the appearance of brain and other body tissue, causing the immune system to attack the bacteria and healthy brain tissue indiscriminately, resulting in PANDAS.

"Such cross-reactive 'anti-brain' antibodies can cause OCD, tics, and the other neuropsychiatric symptoms of PANDAS," explains Dr. Swedo.

Based on her most recent NIH-funded research, however, Swedo is now proposing a broadened related diagnosis called PANS, or *Pediatric Acute-onset Neuropsychiatric Syndrome*.

In plain English, PANS is PANDAS minus the strep cause—or any known cause, for that matter.

"Parents will describe children with PANS [or PANDAS-ed.] as overcome by a 'ferocious' onset of obsessive thoughts, compulsive rituals and overwhelming fears," says Dr. Swedo in an NIH press release. "Clinicians should consider PANS when children or adolescents present with such acute-onset of OCD or eating restrictions in the absence of a clear link to strep."

Since a diagnosis of PANS implies no specific cause, clinicians will have to evaluate and treat each affected youth on a case-by-case basis.

Swedo and colleagues now propose that a patient must meet three diagnostic criteria for a diagnosis of PANS:

1. Abrupt, dramatic onset of OCD or anorexia
2. Concurrent presence of at least two additional neuropsychiatric

symptoms with similarly severe and acute onset. These include: anxiety; mood swings and depression; aggression, irritability and oppositional behaviors; developmental regression; sudden deterioration in school performance or learning abilities; sensory and motor abnormalities; somatic signs and symptoms

3. Symptoms are unexplainable by a known neurologic or medical disorder

Among the wide range of accompanying symptoms, children may:

1. Appear terror-stricken or suffer extreme separation anxiety
2. Shift from laughter to tears for no apparent reason
3. Regress to temper tantrums, baby talk or bedwetting

Children with PANS and PANDAS also sometimes experience sudden loss of fine motor skills.

In a related development—and as reported in *Gazette* #92—a possible treatment is being expanded upon.

Earlier studies on the effectiveness of *intravenous immunoglobulin* (IVIG) against PANDAS showed promise; a large new NIH study led by Dr. Swedo involving IVIG is underway.

A medication derived from normal antibodies, IVIG neutralizes the antibodies attacking the brain tissue and restores normal immune function. It is used to treat other autoimmune illnesses and showed promise in a pilot study with PANDAS patients.

"We predict that IVIG will have striking benefits for OCD and other psychiatric symptoms, and will prove most effective for children who show high levels of anti-brain antibodies when they enter the study," says Swedo.

To find out if your child may qualify for this new NIH study, please contact *Hamaspik Gazette* English Editor Mendy Hecht at 845-503-0213.



# So, What's Happening in Your Health Today...?



## Repeat: Chocolate doesn't shed pounds

A dramatic-sounding study from the University of California at San Diego hit the national and international media this past mid-March, stirring up hundreds of stories all indicating that, according to research, regular consumption of chocolate appears to cause health benefits, including weight loss and health-weight maintenance.

The media, all too keen to hype up an already-sensational headline, quickly followed suit, with hundreds of stories extolling the virtues of frequent consumption of chocolate in the following days.

However, there was just one problem: Little to no hard scientific proof.

As Dr. Yoni Freedhoff put it, "Basically here we have a study with no controls whatsoever rendering conclusions impossible, authors who rather than mention their study's pretty much insurmountable methodological limitations instead made up a 'growing body of literature' on magic calorie neutral or negative foods, a press release that spins it all as fact and as a result... less than 24 hours after publication, there were already 423 chocolate makes you thin stories on the newswire to further misinform an already nutritionally confused world."

## Autistic kids bullied 3X more

In the largest look ever at autism and bullying, new research released in late March showed that children on the spectrum are significantly more likely than other kids to be bullied.

Researchers polled nearly 1,200 parents across the country and found that 63 percent of kids with autism have been bullied. What's more, some 39 percent of parents said their child with autism had been bullied within the last month compared to just 12 percent of typically developing siblings.

While many within the autism community have long believed that bullying is an especially acute problem for those with the developmental condition, the preliminary findings add to a growing body of scientific evidence on the topic.

Certain attributes also appeared to play a role. Specifically, kids with autism who are inflexible, have frequent meltdowns and those who talk obsessively about particular topics are at higher risk, researchers said.

In most cases, parents reported that children who were bullied were teased, picked on or made fun of. In other instances, kids were ignored, left out, called names or subject to pushing, hitting, kicking or slapping.

With concrete findings, the researchers say they hope policymakers and educators can be encouraged to take steps to address the issue.

## Report: Medical implants rarely tested

A new investigation by the highly respected and authoritative Consumer Reports organization shows that artificial hips and some other medical devices are rarely rigorously tested to make sure they're safe before implantation.

Some metal artificial hips from the DePuy company, for example, have a high failure rate, with metals from the implants seeping into recipients' bloodstreams—in turn linked to increased cancer risk, eyesight and hearing problems, and other complications.

## Washington whooping cough rising

The number of pertussis—whooping cough—cases in Washington has risen to more than 500 cases and will likely set a record in 2012, a state Health Department spokeswoman said.

The outbreak is likely to exceed the number of about 950 cases in 2011 and the previous record of about 1,020 in 2005, said Michele Roberts, immunization program health communication manager.

Figures released in late March showed 549 cases of pertussis through March 24.

Nationally the number of cases has been rising since the mid-2000s.

The Centers for Disease Control and Prevention says pertussis is common in the United States, with epidemics every three to five years. There were 27,550 cases of pertussis reported in 2010.

## Stand-tall Turkey tech

Move over, Turkish coffee—a first-of-its-kind robotic device made in Turkey may become that country's signature export, at least to paraplegic people around the world.

The Tek Robotic Mobilization Device, made by Istanbul-based AMS Mekatronik, allows people with paralyzed legs to stand at near-full height and roll about.

It costs \$15,000 apiece and is custom-made for each customer's height.

The device stands to benefit users medically, as prolonged sitting can cause blood clots and bone thinning, as well as psychologically, as standing eye-to-eye with others boosts and maintains paraplegics' morale.

## First-ever U.S. face transplant successful

Mr. Richard Lee Norris, an American man who lived for 15 years as a recluse after a horrific accident grossly disfigured his face, is the happy recipient of the world's most extensive face transplant to date.

In a marathon surgical procedure that holds out hope for other severe facial disfigurement victims, Mr. Norris was given a new set of teeth, as well as new nose, tongue and jaw.

According to the University of Maryland Medical Center, where the 36-hour surgery was performed, Norris is beginning to feel his face, is already brushing his teeth and shaving, and has even regained his sense of smell.

The surgery was funded by the U.S. Navy, which hopes the techniques will help casualties from Iraq and Afghanistan.

The US government estimates that 200 wounded troops might be eligible for face transplants.

The world's first partial face transplant was performed in France in 2005 on a woman who was mauled by her dog.

Surgeons in Spain carried out the world's first full-face transplant in 2010.

## Hospitalization bad for seniors' memory

Seniors' memory and thinking skills decline more rapidly than normal after they've been hospitalized, a new study finds.

The study included nearly 1,900 Chicago residents over age 65 whose memory and thinking skills were tested every three years for up to 12 years. During the study, 71 percent of the participants were hospitalized at least once.

This study found that seniors' overall scores declined twice as fast after a first hospital stay, compared either to their previous rate of decline or to those who had not been admitted to the hospital.

When the researchers looked at specific tests, they found that the rate of decline after a first hospital stay was more than three times faster on a long-term memory test and 1.5 times faster on a complex attention test.

## Altitude sickness? Try ibuprofen

The ubiquitously popular anti-inflammatory and painkiller ibuprofen, available over the counter in endless brand-name packages for decades, now apparently has another application besides headaches and minor pain or discomfort: Altitude sickness.

That condition, marked by symptoms of headache, fatigue, nausea, dizziness, vomiting and poor appetite, affects over 25 percent of Americans who travel to high elevations each year for mostly recreational purposes.

If unrecognized or untreated, altitude sickness can lead to high-altitude cerebral edema, a potentially fatal swelling of the brain.

The Stanford University study, which included 58 men and 28 women, was conducted in California's White Mountains. Participants spent the first night at 4,100 feet altitude. The following morning, they were given either 600 milligrams of ibuprofen or a placebo before hiking up the mountain to a staging area at 11,700 feet. After receiving a second dose at 2 p.m., the participants continued their hike to 12,570 feet, where they received a third dose at 8 p.m. before spending the night on the mountain.

Symptoms of altitude sickness developed in 19 participants who received ibuprofen (43 percent) and 29 of those who received the placebo (69 percent), indicating ibuprofen reduced the incidence of altitude sickness by 26 percent.

## New, better clot-buster

A new blood thinner offers simpler and safer treatment for pulmonary embolism, a deadly condition in which a lung blood vessel becomes blocked by a blood clot.

Venous blood clots have long been treated with warfarin, a drug fraught with food and drug interactions. On top of keeping a strict diet, patients must comply with frequent blood tests and complex dosing schedules.

But a new study suggests the drug *rivaroxaban* performs as well as warfarin in treating existing blood clots in the lung with less monitoring and fewer side effects.

"You don't have to go to the lab to monitor. It's a fixed dose. It is as effective, and it looks safer," said study author Dr. Harry Bueller, professor of vascular medicine at the American Medical Center in Amsterdam.

Patients treated with rivaroxaban had similar rates of clot recurrence as patients treated with warfarin. But they had a lower rate of bleeding, with nearly half as many major bleeds as patients taking warfarin, according to the trial results presented at the most recent American College of Cardiology meeting in Chicago.

Bueller said rivaroxaban may soon replace warfarin in treating venous blood clots because it's easier to manage and appears to be safer.

"In those patients where we use warfarin today, we will gradually see replacement by these new anti-coagulants," he said.

## ADHD diagnoses, psychiatrist visits up in decade

In the past decade, the number

of children receiving a diagnosis of attention-deficit hyperactivity disorder (ADHD) has risen by 66 percent, new research indicates.

In 2000, just 6.2 million physician office visits resulted in a diagnosis of ADHD. By 2010, however, that number had jumped to 10.4 million office visits.

"This study is really like a 10,000 foot aerial view of this issue," said study author Dr. Craig Garfield, an assistant professor of pediatrics and medical social sciences at Northwestern University in Chicago. "We looked at the trends in visits to doctors for ADHD over the last decade, and we were interested in overlaying some of the FDA's public health advisories and the introduction of new medications to see the effect on those trends."

The findings are published in the March/April issue of *Academic Pediatrics*.

The disorder is now a common condition in children and teenagers in the United States, according to background information in the study. The parent-reported incidence of the disorder is about 10 percent, or 5.4 million children. Symptoms of ADHD include an inability to focus, trouble controlling emotions and hyperactive behavior, according to the National Institute of Mental Health (NIMH).

For their study, Garfield and his colleagues reviewed data from a national database from 2000 to 2010. They examined office visits for patients younger than 18.

In addition to finding a 66 percent increase in the number of office visits resulting in an ADHD diagnosis, they also found that more children were being treated for ADHD by child psychiatrists than by pediatricians. At the start of the study, about one in four children saw a psychiatrist for their condition. By the end of the study, more than one in three was visiting a psychiatrist for ADHD.

The authors of the current study don't think there's suddenly been a dramatic rise in the number of children with ADHD, but instead believe that public awareness campaigns, media coverage of ADHD and advertisements for new medications are probably some of the driving factors behind the rise in diagnoses.

Other experts agreed that the incidence of ADHD probably isn't going up that quickly. "I don't think these data reflect true prevalence. I think it's the total frequency of visits related to ADHD is going up," said Dr. Andrew Adelman, chief of developmental and behavioral pediatrics at Steven and Alexandra Cohen Children's Medical Center of New York.

# Professional Home-based Counseling Where and When it's Needed Most

*After 18 months of effort, Hamaspik secures first-ever IBS services*

In early March, yet another point of light was added to Hamaspik's growing constellation of human services, as authorities gave the agency the green light—after months of effort—to provide a single special-needs individual with the comprehensive Intensive Behavioral Services (IBS) program.

The program, as its acronym indicates, was created to stabilize and, if possible, reduce, severe behavioral problems in children and adult with developmental disabilities by educating their caregivers.

Geared for caregivers of individuals residing at home or in Family Care program settings, IBS purveys powerful skills and knowledge needed to prevent costlier out-of-home ongoing counseling and/or group-home placement.

The IBS Program was created two years ago by the New York State OPWDD as a fresh entry in the suite of Medicaid Waiver services provided by various state-level offices.

Waiver services waive standard Medicaid-program eligibility requirements, allowing for Medicaid treatment of conditions not normally covered by the government health insurance program for the poor.

Among these Waiver programs are the OPWDD's

Home/Community Based Services (HCBS) programs, which is currently provided by Hamaspik.

Other Waiver program provided by Hamaspik are the Traumatic Brain Injury (TBI) Waiver program, which provides comprehensive care for individuals who suffer from TBI, and Nursing Home Transition/Diversion (NHTD), which, as its title indicates, supports individuals returning home from nursing homes or hospitals—or desiring to remain at home and not go to nursing homes or hospitals.

Hamaspik is also approved to provide the Care at Home (CAH) Waiver.

And now, the IBS program is approved for delivery by Hamaspik, too.

To qualify for the IBS program, an individual must have specific behavioral challenges severe outbursts of negative behaviors which would warrant placement in a group home or other such controlled environment.

But since remaining in the comfort of home has long been shown to be most beneficial for such individuals, the IBS program strives to resolve such otherwise-unmanageable outbursts in the privacy of home settings, where individuals can

be surrounded by loving parents, family members and other caregivers.

Conditions associated with such serious behavioral outbursts include severe autism, Down syndrome and other intellectual disabilities, with affected individuals displaying wild temper tantrums, dreadful stubbornness or other unmanageable behaviors.

Severe behavioral problems can also develop as complications of complex brain surgery or other physical problems.

Regardless of cause, coping with such outbursts are one of the most trying trials of caring for children or adults with special needs at home.

Hamaspik was originally approved to provide IBS services in the summer of 2010, with *Gazette* #73 (July 2010) featuring an article on the then-new program.

The approval 18 months ago put Hamaspik in the company of a select few agencies statewide whose exceptional track records won them nods to provide IBS.

"The point of IBS is this: There are some consumers who live with families and present with severe behavioral challenges and they can't keep them in the home," Hamaspik agency psychologist Alan Blau,

Ph.D. explained at the time, with the program designed to allow parents or caregivers to "take a situation that's not viable and make it viable."

In the interim, Hamaspik's MSC (Medicaid Service Coordinator) Supervisors from all three county divisions regularly visited their regional DDSO offices for ongoing training on implementing the intricate and highly targeted program in their communities.

Having completed said training, Hamaspik's MSC Supervisors crafted a plan on actually implementing the program for individuals who might qualify for its benefits. That plan was approved by state authorities shortly after submission.

With the state's go-ahead, the MSC Supervisors and their teams began the laborious process of isolating individuals in the community—both those currently served by various Hamaspik programs and those known to be in need—who might qualify for IBS.

Individualized Service Plans (ISPs) were then meticulously drafted for each, outlining in as much detail as necessary what the benefits would be for each individual—why the program is critical for him or her and what it would precisely do to improve the situation.

With ISPs then submitted to the OPWDD, Hamaspik MSC Supervisors and staff waited patiently for Albany's approvals.

At the very beginning of March, all that waiting paid off as Hamaspik of Orange County MSC Rivka Weinberger got word that one individual had been approved for IBS services through their good offices.

Reached by the *Gazette* by phone, Mrs. Weinberger described a little girl with moderate intellectual disability, global developmental delays—and a raft of fearsome behaviors.

Because of her several disabilities, the child has been with several Hamaspik programs for a few years now, including Community Habilitation (Comm Hab), After-School Respite, and Family Support Services (FSS).

Despite her bevy of current services, the soon-to-be-seven child "fell between the cracks" with her difficult-to-pinpoint diagnoses—making her a perfect candidate for IBS, Mrs. Weinberger proceeded to explain.

Living at home with parents and family, the girl regularly exhibits "very aggressive" and sometimes injurious behavior towards siblings, partially due to frustration at her physically small size and resulting inferiority complex.

Disruptive, impulsive and demanding behaviors also mark the child's profile.

In spelling out the child's ISP, "We had to demonstrate that if her behavior gets worse, the parents would consider group-home placement," Weinberger says.

Hudson Valley DDSO official Rich Gordon personally visited the parents at their Kiryas Joel, New York home to finalize the ISP's approval, and with that squared away, services are slated to shortly begin over what is scheduled to be a six-month program.

But asked how IBS candidates are selected from among the many special-needs families serviced by Hamaspik, Mrs. Weinberger underscores that, unlike most other programs, IBS benefits the special-needs individual by directly empowering his or her caregivers.

Revolving around regular visits by a Hamaspik social worker to provide behavior-control lessons to parents or caregivers, IBS is a very rigorous, involved program that puts significant demands on recipients—and is not for everyone, Weinberger continues.

Parents have to be committed to work the program and "do their homework," Weinberger says, which some parents would be unwilling or unable to do.

But "it feels great" having gotten a specialized program for a child in dire need, and parents willing to lovingly shoulder an otherwise imposing burden in caring for her, Mrs. Weinberger concludes. "I hope it's going to be a real help for her." ■ w

Contact your Hamaspik MSC for more information or to inquire about IBS Program applicability for your child. ■

## New Administration for Community Living

*Continued from Page 1*

The new agency is sure to come as a welcome development in New York State, long a leader in the shift away from the institutions of old to community-based housing and integration.

The Individualized Residential Alternatives (IRAs) that rose in the wake of the Willowbrook scandal have long been a jewel in the crown of services provided to New Yorkers with disabilities—including the suite of Hamaspik IRA residences serving dozens in three counties.

Likewise is the ACL expected to be a boon to HamaspikCare, the agency's popular Licensed Home Care Services Agency—which, as its name conveys, shares the ACL's mission.

The single new entity within the HHS will enhance and strengthen the federal agency's efforts to support community-living programs for seniors and people with disabilities, according to official new ACL literature. "The new entity will establish a formal infrastructure to ensure consistency and coordination in community living policy across the federal government," according to an agency FAQ.

Among existing agencies within

the HHS that the ACL will be working with is the Centers for Medicaid and Medicare Services (CMS), which currently provides a significant range of the home-based services for disabled individuals and seniors purveyed by Hamaspik and HamaspikCare.

"The ACL will also work with CMS to promote home and community based services and supports," reads the FAQ, also stating that "The reorganization will strengthen our

efforts to support community living, regardless of age."

The Administrator of the new ACL, Kathy Greenlee, already directly advises Secretary Sebelius in her existing role as Assistant Secretary for Aging—which gives the new entity, and its mission, a direct voice and place at the top of the HHS hierarchy.

At the same time, the HHS reflagged the Administration on Developmental Disabilities the

Administration for Intellectual and Developmental Disabilities, in keeping with terminology sensitivity changes made at all levels of government nationwide in recent years.

The ACL is seen by the Obama Administration as the next development in realizing the mission of President Obama's Community Living Initiative, which was rolled out last year. ■



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