



Hamaspik Gazette

News of Hamaspik
Agencies and
General Health

DECEMBER '17 • ISSUE NO.154



GAZETTE SURVEY

The GAZETTE asks YOU:

**AT WHAT AGE DO YOU LET YOUR KIDS
HANDLE CHANUKAH CANDLES ALONE?**

A: 12/13+; B: 11+; C: 9+; D: UNDER 9

Respond to: survey@hamaspik.org



HEALTH STAT

NUMBER OF U.S. CANCER SURVIVORS:

2016

15.5 MILLION

2026

20.3 MILLION

Source: National Cancer Institute (NCI)



HEALTH QUOTE



**IT BASICALLY TOOK FIVE MINUTES ... TO
WHERE WE COULD HAVE OUR PROVIDERS
AVAILABLE IN THE STATE.**

— Carey Officer of Nemours CareConnect on post-Harvey
Texans' access to telemedicine with Gov. Greg Abbott's emergency
approval, HealthcareDive.com, Nov. 2



HEALTH TIP

Turn up the spice to avoid salt

New Chinese research suggests that salt
sensitivity is raised by spicy foods, lowering
desire for heart-harming salty foods.

INSIDE

HEALTH

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HAMASPIK NEWS

OUT STANDING IN THE FIELD

ACCOMPANIED BY STAFF, A VISIBLY DELIGHTED INDIVIDUAL AND HIS HAMASPIK OF KINGS COUNTY MEN'S DAY HAB FRIENDS ENJOY AN APPLE-PICKING OUTING THIS SUKKOS HOLIDAY. ACROSS ITS DOZENS OF PERSON-CENTERED PROGRAMS AND SUPPORTS IN SEVERAL UPSTATE AND DOWNSTATE, COUNTIES, HAMASPIK CONTINUES TO PUT ITS BEST FOOT FORWARD IN PUTTING INTEGRATION FIRST.



ONE OF NEW YORK
STATE'S BEST-KEPT
SECRETS IS ITS ACRES
OF ORCHARDS OF
APPLES AND OTHER
FRESH PRODUCE—
BUT A SECRET LONG
KNOWN TO HAMASPIK

HAMASPIK NEWS

Tishrei Spirit Across Hamaspik

SEE PAGE E5 >>

PUBLIC HEALTH AND POLICY NEWS

People First Care Coordination Efforts Progressing

*MSCs to become Care Coordinators
/ Health Home*



From Albany and Washington, winds of
positive change have been blowing through

New York State's disability community for
several years now.

One of the more recent positive changes
is a federal push for New York State's existing
Medicaid Service Coordinators (MSCs) to
transition into independent *People First
Care Coordination*—and in response, Tri-
County Care is ready to roll out.

MSCs are passionate advocates for the
individuals whose benefit they work for daily

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OPWDD

COMMUNITY HABILITATION

Providing: A personal worker to work on daily living skill goals

HOME BASED RESPITE

Providing: Relief for parents of special needs individuals

AFTER SCHOOL RESPITE

Providing: A respite program for after school hours and school vacations

DAY HAB PROGRAM

Providing: A day program for adults with special needs

SUPPLEMENTAL DAY HAB PROGRAM

Providing: an extended day program for adults with special needs

CAMP NESHOMAH

Providing: A day program for children with special needs during summer and winter school breaks

INDIVIDUAL RESIDENTIAL ALTERNATIVE (IRA)

Providing: A supervised residence for individuals who need out-of-home placement

INDIVIDUAL SUPPORT SERVICES

Providing: Apartments and supports for individuals who can live independently

ENVIRONMENTAL MODIFICATION

Providing: Home modifications for special needs individuals

SUPPORTED EMPLOYMENT

Providing: Support and job coaching for individuals with disabilities to be employed and to maintain employment

ENHANCED SUPPORTED EMPLOYMENT

Providing: Job developing and coaching for people with any type of disability

MEDICAID SERVICE COORDINATION

Providing: An advocate for the individual to access and coordinate available benefits

HOME FAMILY CARE

Providing: A family to care for an individual with special needs

INTERMEDIATE CARE FACILITY

Providing: A facility for individuals who are medically involved and developmentally delayed

IBS

Providing: Intensive Behavior Services

PLAN OF CARE SUPPORT SERVICES

Providing: Support for families of individuals with special needs

FAMILY SUPPORT SERVICES

Providing: Reimbursement for out of ordinary expenses for items or services not covered by Medicaid

PARENTAL RETREATS

Providing: Getaways and retreats for parents of special needs individuals

SELF DIRECTION

Fiscal Intermediary (FI) — providing: accounting and billing for vendors that support individuals who self-direct their own supports

Broker — providing: one-on-one, independent brokering of all necessary services and supports to individuals who self-direct their own supports

DOH

CARE AT HOME

Providing: Nursing · Personal care aide · Therapy · Respite · Medical supplies · Adaptive technology · Service coordination

EARLY INTERVENTION

Providing: Multidisciplinary and supplemental Evaluations · Home and community based services · Center based services · Parent/ child groups · Ongoing service coordination · Physical therapy · Occupational therapy · Speech therapy · Special education · Nutrition · Social work · Family training · Vision services · Bilingual providers · Play therapy · Family counseling

NURSING HOME TRANSITION AND DIVERSION WAIVER PROGRAM (NHTD)

Providing: Service Coordination · Assistive

technology · Moving assistance · Community transitional services · Home community support services · E-Mods · Independent living skills · Positive behavioral interventions · Structured day program

TRAUMATIC BRAIN INJURY

Providing: Service Coordination · Independent living skills training · Day programs · Rent subsidy · Medical equipment · E-Mods · Transportation · Community transmittal services · Home community support services

CHILD & ADULT CARE FOOD PROGRAM

Providing: Breakfast · Lunch · Supper · Snack

HEALTH HOME SERVING CHILDREN (HHSC)

Providing: Intensive, comprehensive care management and family/community support services for children with chronic condition(s) and/ or mental health issues at greater risk for relapse and/or lack of care

SENIOR DINING/SOCIAL DAY PROGRAM (SHNOIS CHAIM)

Providing: Daily onsite lunches and social/ educational activities for community seniors (Orange County only)

APPLIED BEHAVIOR ANALYSIS (ABA)

Providing: behavior modification for children with autism covered by private insurance

LHCSA - HAMASPIKCARE

PERSONAL CARE & SUPPORT SERVICES

Providing: Home Health Aides · Homemakers · Personal Care Aides · Housekeepers · HCSS aides

COUNSELING SERVICES

Providing: Dietician/Nutrition counselors · Social Workers

REHABILITATION SERVICES

Providing: Physical therapy · Speech therapy · Occupational therapy · individuals

PACE-CDPAS

Providing: Personal care aides for people in need

SOCIAL AND ENVIRONMENTAL SUPPORTS

Providing: Minor maintenance for qualified

SOCIAL MODEL

Providing: A social day program for senior patients

NURSING SERVICES

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

HAMASPIK CHOICE

A Managed Long Term Care Plan (MLTCP) approved by New York State

HCR

ACCESS TO HOME

Providing: Home modifications for people with physical disabilities

RESTORE

Providing: Emergency house repairs for senior citizens

HOME REHABILITATION PROGRAM

Providing: Remodeling dilapidated homes for low income home owners

NYSED

VOCATIONAL REHABILITATION SERVICES

Providing: Employment planning · Job development · Job placement

JOB COACHING

Intensive and ongoing support for individuals with physical, mental and/ or developmental disabilities to become employed and to maintain employment

NYSHA

ARTICLE 16 CLINIC

Providing: Physical therapy · Occupational therapy · Speech therapy · Psychology · Social work · Psychiatry · Nursing · Nutrition

TRAINING

Providing: SCIP · CPR & first aid · Orientation · MSC CORE · AMAP · Annual Updates · Com-Hab/Respite · Family Care training · Supportive Employment

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

OMH

HEALTH AND RECOVERY PLAN (HARP)

Providing: long-term social, emotional, employment, peer-support and other mental-illness recovery supports

● ► PUBLIC HEALTH NEWS

Winged and Dangerous: U.S. Backyard Chicken Trend Brings Salmonella Spike

Birds should be assumed infected unless known otherwise, expert says

All across the country, in big-city and suburban backyards alike, it's the latest hip trend: raising chickens.

But the seemingly harmless farm animals, long the heroes of endless children's books, too often carry salmonella—which can infect backyard chicken raisers with the oft-dangerous bacteria. The trend is bringing with it a still-rising number of illnesses from poultry-related diseases.

According to the CDC, over 1,100 people have contracted salmonella poisoning from chickens and ducks in 48 states since January 2017 alone—a figure four times that of 2015.

The new figures include close to 250 hospitalizations and one fatality.

What's more, "For one salmonella case we know of in an outbreak, there are up to 30 others that we don't know about," CDC veterinarian Megin Nichols recently told the Associated Press.

A "large contributing factor" to the surge, Nichols said, comes from natural food fanciers who have taken up the backyard chicken hobby but don't understand the potential dangers. Some treat and handle their birds like pets, regularly touching them and giving them free indoor rein.

A 2013 report by the U.S. Dept. of Agriculture (USDA) said that Los Angeles, Miami and New York City are the trend's hottest hotspots. According to the AP, the trend has since spread to every major metro area.

The bad news here is that poultry can carry salmonella bacteria in their intestines that can be shed in waste. Bacteria can then attach to feathers and dust and brush off on shoes or clothing.

But the good news is that illnesses can be prevented with proper handling. People raising chickens are recommended to wash their hands thoroughly after handling the birds, eggs or nesting materials, and leave any shoes worn in a chicken coop outside.

According to the CDC's Nichols, the best way chicken raisers can protect themselves is to assume all birds carry salmonella and treat them carefully. "We view this as a preventable public health problem and are really hoping we start to see some change," she told the AP.

Bottom line? If you're going to raise chickens, ducks or other backyard birds, first find out if the seller—and the seller's source hatchery—is salmonella-compliant.

Then, treat all pet poultry as salmonella-guilty until proven innocent. ★

Job Opportunities

Job title: Secretary/Case Manager

Job description: Manage clients who bring their own home attendants, manually record timesheets, assist with patient and employee issues, obtain required documentation to ensure compliance.

Requirements: Strong communication/phone skills, computer proficiency. English/Yiddish fluency a must.

Location: Brooklyn, New York (Borough Park).

Hours: M-T 9-5, F 9-1

Benefits: Health insurance, holiday pay, vacation pay.

To apply: Send resume to EJaroslawicz@HamaspikCare.org or 718-408-7707 (fax).

Job Title: CDPAS Liaison

Job description: Meet with all newly approved clients to complete paperwork and explain CDPAS program, conduct annual random home visits and phone calls to ensure compliance.

Requirements: Strong communication/phone skills, computer proficiency. English/Yiddish fluency, driver's license a must. (Company provides vehicle/fuel/tolls.)

Location: Brooklyn, New York (Borough Park).

Hours: M-T 9-5, F 9-1

Benefits: Health insurance, holiday pay, vacation pay.

To apply: Send resume to EJaroslawicz@HamaspikCare.org or 718-408-7707 (fax).

● ► PUBLIC HEALTH AND POLICY NEWS

People First Care Coordination Efforts Progressing

MSCs to become Care Coordinators / Health Home

CONTINUED FROM COVER

but they will now become *Care Coordinators* through *Care Coordination Organizations* (CCOs). There will be approximately two or three CCOs in each region of New York State.

As of July of 2018, MSCs will be called CareCoordinators. TheCCOs will coordinate healthcare, behavioral health supports and disability supports for individuals with intellectual and/or developmental disabilities. The Care Coordinator will write up a Life Plan which will document all of the individual's services and supports and will advocate for the individuals to receive the best supports and services available in all areas.

Tri-County Care is sponsored by the New York State Hamaspik Association (NYSHA), an inclusive organization consisting of experienced providers who operate in New York City, Long Island and in the Hudson Valley region. They provide OPWDD services, Department of Health (DOH) services, Managed Long Term Care (MLTC), vocational and job coaching services and much more.

Tri-County is ideal to help any organization transition to this conflict-free model. Their partner agencies have an abundance of experience serving individuals with IDD, including service coordination, residential, respite, community habilitation, family supports, Article 16 Clinic therapies and services, self-directed services, day services, environmental modifications and ABA. Affiliates of NYSHA also provide home care, personal care, EI services, social day services, Access to Home, senior services and Managed Long Term Care (MLTC) plans. Partners of NYSHA have a wealth of

10/10/178

CCO / HH Implementation Timeline

✓ June 2017	• Draft Application Published
✓ Summer 2017	• Submitted State Plan Amendment and 1115 Waiver Application
✓ October 6, 2017	• Final Application Published
December 1, 2017	• Applications due
December 2017 – February 2018	• State Review of Applications, Approvals
February 2018 to June 2018	• CCO/HH Readiness Activities
July 1, 2018	• CCO/HHs Provide People First Care Coordination

“Right-to-Try” Legislation Passes Senate

But Questions on Law’s Necessity, Fallout Remain

Washington, D.C. — A “Right to Try” bill, spearheaded by years of emotionally charged effort, was passed by the U.S. Senate in August just before the Congressional recess.

The bill is now awaiting debate by the House, where it has been awaiting any action since its introduction in February.

The bill, dubbed the Trickett Wendler Right to Try Act, would eliminate the FDA from the current process of authorizing usage of experimental drugs on terminally ill patients.

But questions on the bill’s necessity remain—primarily the fact that the FDA is largely not the treatment hindrance that advocates say it is. Going largely unreported are several key facts.

For starters, current usage of any “right-to-try” drugs must first be requested by a doctor.

Usage must then be approved by drug manufacturers.

Both approval processes entail extensive paperwork and several hours of work by doctors presiding over them.

Once those approvals are secured, the FDA’s special “compassionate use” programs approves the drugs’ usage, and within 24 hours in emergency situations. And about 99 percent of such requests to

experience coordinating care across a wide range of programs.

Tri-County is open to serve all individuals, families and providers with care coordination equally, with consideration to their backgrounds and personal and cultural needs. Tri-County will employ care coordinators versed in many languages.

Tri-County will support any organization and ensure continuity and the best quality of service during a most smooth and seamless transition period and beyond. ★

For any questions please feel free to contact Tri-County Care at 877-977-1531 or info@tricountycare.org. For more information, please visit www.tricountycare.org.

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Happening in Health Today

NEW CHILD CANCER SUBTYPES, POSSIBLE BETTER TREATMENTS

Newcastle-upon-Tyne, England — British cancer research recently published in *Lancet Oncology* found seven subtypes of *medulloblastoma*, the most common malignant brain cancer in children. Researchers believe the newly discovered subtypes may lead to more targeted and less debilitating treatments.

WRITING DOWN STRESSORS SLASHES STRESS: STUDY

East Lansing, MI — A new study claims that writing about your feelings can help eliminate stress in your life, or at least help you manage it better.

The Michigan State University study, published recently in *Psychophysiology*, posits that multitasking—doing one thing physically while worrying about several others mentally—generates stress, and that by literally writing out your worries, the brain is freed to focus solely on the task at hand, resulting in lowered stress.

That way you are not only more efficient at what you're doing, but don't feel that stressed, too.

NITRIC OXIDE THERAPY COMBATS SEVERE LUNG INFECTIONS

Harrison, NY — An experimental treatment using inhalation of nitric oxide gas eradicated a treatment-resistant mycobacterium infection in one cystic fibrosis (CF) patient and reduced it in another.

The two CF patients were part of an FDA-

approved experiment by biomedical firm AIT Therapeutics to treat *mycobacterium abscessus complex* (MABSC) infections in the lungs.

The CF patients in question had MABSC infections that failed to respond to any other treatment.

The Phase 2 clinical trial involved the patients inhaling measured regimens of nitric oxide (NO).

Unrelated previous studies show that NO counters many bacteria, is safe and is well tolerated. The natural compound plays a key role in a range of biological functions. When in specific concentrations in airways, NO appears to bolster immune system functioning.

Lab studies also have suggested that NO can eliminate bacteria, fungi, yeast and parasites. Scientists believe it could also help neutralize the multi-drug-resistant strains of bacteria that have become a global public health concern in the past few decades.

In addition to being effective, the study showed that the therapy was safe and that patients tolerated it well.

The study was published in the *Pediatric Infectious Disease Journal*.

STUDY WARNS ON “BREAKTHROUGH” STUDIES

Camperdown, Australia — A slim majority of studies published in medical journals contain “cures,” “breakthroughs” and other such examples of hype and spin, according to research.

A University of Sydney review of 35 previous studies on the subject concluded

that an average of about 56 percent of published clinical trials tend to hype their results.

Within published clinical trials, the review found hype in up to 84 percent of

RAPID ZIKA TEST DEVELOPED

Cambridge, MA — According to a new study, a fast-acting, simple and low-cost “dipstick” test for the Zika and dengue viruses could revolutionize public health response to the dangerous tropical germ.

The test accurately diagnoses Zika and dengue and can tell the two mosquito-borne viruses apart, according to researchers at the MIT Institute for Medical Engineering and Science.

The test consists of a testing strip contains antibodies that react to the presence of Zika or dengue virus. It also contains gold nanoparticles that respond to the antibody reaction.

To use the test, a medical profession-

Drug Development Process



**STEP BY STEP: THE
YEARS-LONG PROCESS OF
DEVELOPING NEW DRUGS**

non-randomized trials, and in about 34 percent of randomized clinical trials, for an average of about 56 percent.

According to the research, examples of science hype include:

- Attributing cause-and-effect relationships that aren't supported by the findings;
- Selectively reporting only the results that support the desired conclusion; and
- Presenting data in an overly favorable or optimistic light.

The spin produced by researchers seems motivated mainly by the desire to get a paper published by a medical journal, according to University of Sydney lead researcher Lisa Bero, Ph.D.—with the resulting attention from other researchers, clinicians, and even the media.

“When reading a scientific paper, focus on the first paragraph of the discussion, which should simply summarize the results,” Bero said.

“The rest of the discussion may make bolder statements,” she said. “Beware of adjectives!”

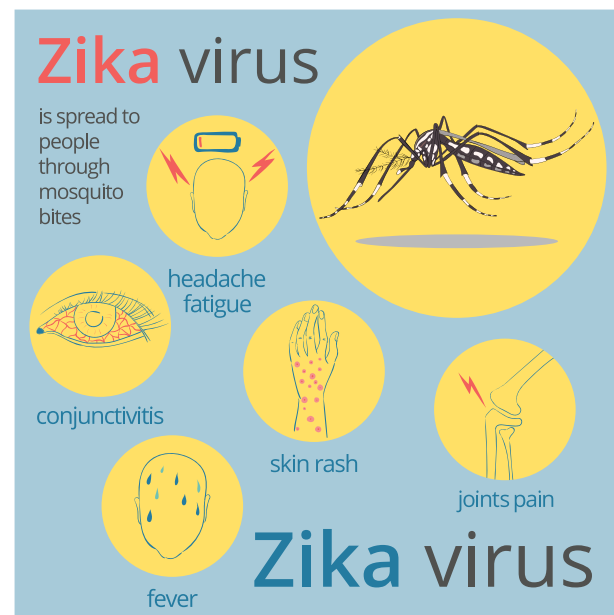
al would dip the strip into a tube of either blood serum or whole blood.

If the strip tests positive, a dot or line appears on it.

The test can tell Zika from dengue, and also can distinguish among four different strains of dengue—all of which viruses belonging to the flavivirus family.

The test strip currently costs \$5 per strip; researchers' goal is to reduce that to under \$1 each.

The new report was published recently in *Science Translational Medicine*. ★



► HAMASPIK NEWS

A Festive Spirit at Hamaspik's Homes Across the Holiday Month

Community-based Residences in Three Counties Celebrate Tishrei

From the 61st St. Briderheim residence for men in the south to the Bakertown residence for women in the north, and at all points between, Hamaspik's group homes marked the Tishrei Jewish holiday month in the usual way—with joy, sensitivity and, above all, person-centered integration.

The dozens of young men and women at the Individualized Residential Alternatives (IRAs) in Kings, Orange and Rockland Counties all enjoyed the five holiday comprising the Jewish-calendar month of

young men over to shul (synagogue) and through Shaar Hashamayim's welcoming—and readily accessible—doors.

Once inside, the young men were treated to several hours of full and complete community integration.

Community members were seen happily dancing with them all, helping them hold the sacred Torah scrolls, partake of the full festivities, and otherwise making them feel that they belonged.

As they truly do.

WANNAMAKER

You've got to hand it to Joel (Feish) Horowitz and crew: The Manager of DSP team of Hamaspik of Rockland County's Wannamaker Briderheim took their gang to the Crayola Experience.

There, the gentlemen quite literally tried their hands at forming colorful wax models of their very own hands.

The delightful activity, in which visitors to the interactive children's crayon museum dip their hands into tolerably hot wax to

with a fresh coat of paint—complimenting the new coats and wardrobes Schnitzer and Crew purchased with the boys.

Like their Arcadian counterparts, Grandview residents went to shul on Simchas Torah.

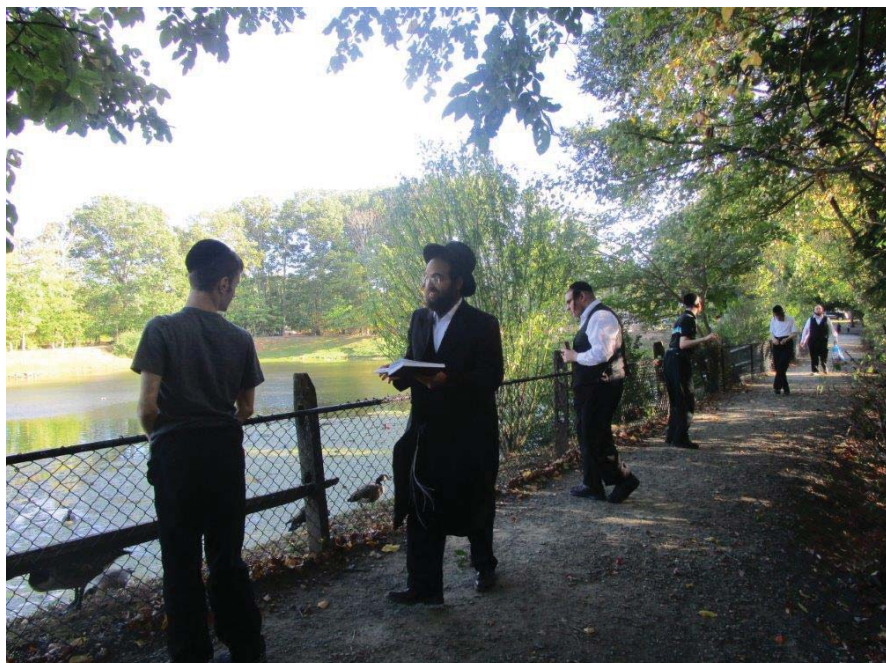
They even joined in the annual "Kol Ha-ne'arim" ceremony in which all boys below Bar Mitzvah (13) age participate in the synagogue Torah reading, a tallis prayer shawl spread canopy-like over all.

For Grandview—thanks to the caring and sensitivity of local shul-going community members—integration truly puts them under one umbrella along with everyone else.

Make that one tallis.

SOUTH 9TH

At Hamaspik of Kings County's South 9th Inzerheim IRA, a Hamaspik Kings mainstay



A MONTH OF HOLIDAYS FOR ALL AGES: (L-R) A FAMILY CARE BENEFICIARY WITH HAMASPIK OF ORANGE COUNTY; HAMASPIK OF ROCKLAND COUNTY'S ARCADIAN BRIDERHEIM IRA RESIDENTS DOING TASHLICH; A HAMASPIK OF KINGS COUNTY RESIDENT AT A LOCAL SUKKOS MALL OUTING WITH HIS NEWLY-BUILT BEST BUDDY

Tishrei in the same way their community compatriots did: attending synagogue, participating in the familiar rites and rituals, and enjoying local and regional outings.

And otherwise feeling right at home.

Here is a review of all things Tishrei across Hamaspik group homes.

ARCADIAN

At Hamaspik of Rockland County's Arcadian Briderheim IRA, run expertly by Manager Shlomo Lebowitz and trained Direct Support Professional (DSP) staff, "community" was the watchword.

Especially on the October 13th Simchas Torah holiday.

That festive occasion of "Rejoicing with the Torah" didn't just see Arcadian residents attending the local Shaar Hashamayim (Heaven's Gate) synagogue.

Going all out for their neighbors, Shaar Hashamayim congregants gladly assisted the residents in attending.

They even volunteered to come over to the house to help staff wheel or walk the

FOSSE

"It was amazing!" simply states tireless Fosse Shvesterhheim Manager Mrs. Landau, asked by the *Gazette* how Tishrei went.

Mrs. Landau paints a portrait of impressive local community integration—and of equally impressive individual preference and choice—throughout the holiday month at Fosse.

Those who wished to attend shul on Rosh Hashanah did so locally. And those who didn't were graciously catered to by a community volunteer, who gladly took up Fosse's invitation to come over to blow it big time.

The shofar, that is.

Customarily sounded in synagogue on Rosh Hashanah day, the shofar may be heard pretty much most other places on the holy day, though—including your living room, if necessary.

In terms of catering to its individual residents' shofar-hearing needs, then, Mrs. Landau and DSP staff at the Hamaspik of Rockland County residence kept it in-house.

form realistic replicas of their hands, was just another bead on the string of Tishrei-long person-centered activities facilitated by Wannamaker's support staff.

Of course, like residents of all other Hamaspik group homes come Tishrei, Wannamaker's residents: Heard the shofar, went to shul on Rosh Hashanah and Yom Kippur, sat in the sukkah, held the "Four Species," enjoyed Chol Hamoed outings, spent time with family...

GRANDVIEW

A new year. A new floor.

Things got underway from the ground up—quite literally—this Tishrei at the Grandview Briderheim IRA, a Hamaspik of Rockland County group home managed wonderfully by the personable Joel Schnitzer and his dedicated DSP corps.

That's because the IRA had its wood floors scraped and otherwise redone in time for Rosh Hashanah, giving the home a shiny new look as the season of renewal rolled in.

Walls in the home were likewise updated

managed by Hamaspik Kings mainstay Mrs. Cziment, the young women who call South 9th home (more on that shortly) "all were accepted in shul," the Manager reports—further reflecting not just the general zeitgeist of disability acceptance and integration in contemporary society at large, but the inroads made by Hamaspik into the communities it continues to wholesomely serve.

But besides going to local synagogues in their Williamsburg, Brooklyn neighborhood, Tishrei at South 9th also involved baking sweet honey cookies and even irresistible apple cakes for Rosh Hashanah.

And, in a "milestone" for South 9th, adds Mrs. Cziment, residents each individually traveled before Rosh Hashanah, accompanied by loving DSPs, to personally visit their parents in locales ranging from the local Staten Island borough to the upstate enclave of Monroe.

But back at their home base, the young ladies wasted no time doing their loving

CONTINUED ON PAGE 9 >>

● ► HAMASPIK NEWS

Quassy Amusement Park, Here We Come, “Weather” or Not!

Defying Gray Clouds, Hamaspik’s Massive Sukkos Community Outing Shines

Takes a lot more than gloomy skies and chilly air to get Hamaspik down!

That fact was the order of the day if you were at Quassy Amusement Park in Middlebury, Connecticut on Sunday, October 8.

In fact, judging by the massive and gleeful Hamaspik crowd alone, you’d never have known the weather was less than perfect.

But the facts on the ground defied the gray in the sky, with hundreds of children

entire spectrum of the community could be seen approaching the main gate in twos, threes and larger family groups.

Besides residents of Hamaspik’s dozen-plus group homes across three counties, also in attendance were individuals benefiting from a number of critical Hamaspik community services, including Family Care, At-Home Respite, After-school Respite (ASR), Community Habilitation (Comm Hab) and others.

Making it a true family outing was the fact

everyone, disabilities notwithstanding.

For the next few hours, guests could also be seen riding Quassy’s kiddie train, “Galleon Pirate Ship” and an assortment of circular rides, having fun just like any typical kid—which is exactly the idea.

New this year—Mrs. Katina always manages to come up with something fresh!—was the Bubble Bus, a mobile bubble-making demonstration that filled the air with the magical spheres.

Also new was the zoo—the traveling

stalwart lieutenants Mr. and Mrs. Mayer Rutner, who returned this year to head up the event’s devoted coordination team.

The Rutners’ work was anything but standard, the Coordinator reports. They stood by all day—fairly literally, mostly on their feet as they were—assisting Mrs. Katina with all things logistics.

Also on hand was a contingent of EMTs with the Hatzolah rescue corps, including Mr. Rutner’s brother Yoel, who came up from Brooklyn’s Williamsburg district to volunteer his time—and who also arranged an onsite Hatzolah ambulance. (Other than opening its doors to allow curious children to explore its main bay, that ambulance fortunately saw no real action.)

A third Rutner, Eliezer, joined volunteers Moshe Babad, Mayer Lax and Yoel Yitzchok Schwartz in providing all-around assistance,



ROUNDS OF FUN: MEMBERS OF THE HAMASPIK COMMUNITY FILL THE AIR WITH HOLIDAY JOY ACROSS QUASSY’S GROUNDS. CLOCKWISE FROM TOP LEFT: SIBLINGS TAKE A SWING; A WANNAMAKER IRA RESIDENT AND DSP ON THE MERRY-GO-GROUND; BUBBLES FROM THE BUBBLE BUS ADD TO THE ATMOSPHERE; PUTTING THEIR FEET TO THE MUSICAL BEAT



and adults of all ages and abilities freely milling about and enjoying Hamaspik’s daylong family outing.

The warm occasion countered any cold precipitation. And by the time the capacity crowd went home at day’s end, it had weathered all the family fun it could handle, “weather” or not.

TURNING GEARS OF FUN

Taking its name from picturesque Lake Quassapaug on whose southern shore it lies, Quassy has been a regional favorite for generations, amusing Tri-State Area residents for decades.

Quassy has been admirably tapping into the sizable Jewish market in recent years, meeting the specialized requirements of a growing number of community groups, including Hamaspik. This year’s visit to the Connecticut park marks Hamaspik’s fourth.

First in private vehicles carrying Hamaspik’s logistics team to set up a welcome table, then in a large number of charter buses, vans and smaller cars, the

that those individuals were accompanied by immediate family members, including parents and siblings.

Strollers mingled with wheelchairs and toddlers toddled alongside Tatties and Zaidies (Yiddish for Dads and Grandpas) as Hamaspik’s community—devoted staff, loving parents and siblings and beloved individuals alike—converged on the entrance.

Once there, tickets were handed over, hands stamped and wrists adorned with admission bands, and last-minute entry glitches smoothly ironed out by Hamaspik Special Events Coordinator Brenda Katina.

And once inside the main gates, the Hamaspik guests had the full run of Quassy’s dozens of attractions. Those included a classic ornate carousel, thrilling bumper cars, a three-story giant slide... and what would an amusement park be without a heart-pounding roller coaster?

From the adorable spinning teacup ride to the Wooden Warrior roller coaster crowd favorite, Quassy had something for

petting zoo, that is. A veritable flock of penned-in sheep and goats was on hand for children of all ages to pet and feed.

All through the day, a professional DJ pumped popular tunes into the air from Quassy’s main stage, blending modern technology and traditional melodies into a mix that filled the atmosphere with an upbeat energy and joy—perfectly capturing and accentuating the happy spirit of Sukkos.

The music did its job, apparently, as groups of Hamaspik guests were seen from time to time taking to the stage to dance and sing along with the infectious beats and catchy songs.

Keeping the crowds well fed and hydrated were stocks of healthy snacks and drinks—along with a sizable sukkah, or leaf-covered hut, in which to eat and drink the sandwiches, apple juice, cookies and more set out for guest consumption.

On hand to ensure smooth and safe operations were a number of volunteers, both Hamaspik employees and otherwise.

Backing Mrs. Katina once again were

along with bus organizer Hershel Elbaum.

FINISHING TOUCHES

With the late-afternoon winding down of the event, the menfolk gathered for a minyan (prayer quorum) for the Mincha afternoon prayer service.

Following that, tired but happy guests slowly made their way to the parking lot just past the main gate, where dozens of charter buses and other vehicles awaited.

Of course, no one could leave without collecting Mrs. Katina’s signature “parting gift” goodie bags filled with sweet treats—and once loaded, those buses, cars and vans headed back to destinations as near as Brooklyn and far as upstate Rockland and Orange Counties.

When it comes to meeting a community’s needs, the social-services agency has always gone the extra mile.

And this time, weather notwithstanding, it collectively went hundreds of extra miles...

...all the way to Connecticut and back. ★

The Autism Update

News and developments from the world of research and advocacy

AUTISM PARENTS JOIN CLASS-ACTION LAWSUIT AGAINST GEORGIA SYSTEM

Atlanta, GA — A class-action lawsuit brought in October against the State of Georgia's special education system includes two parents of boys with autism.

The suit, filed by several advocacy groups on behalf of three parents, accuses state officials of violating federal law and the U.S. Constitution by placing children with disabilities in segregated schools and classrooms operated by the Georgia Network for Educational and Therapeutic Support, or GNETS.

The suit specifically claims that by assigning a disproportionately high number of African-American children to GNETS, the state violates Fourteenth Amendment guarantees of equal protection under the law. It also alleges that GNETS students receive an inferior education and are often denied extracurricular activities and basic amenities like science labs and libraries.

All the students named in the lawsuit allegedly suffered academic and physical injury in GNETS.

"Q.H.," a 9-year-old boy with autism, attention deficit disorder and developmental delays, has been physically restrained numerous times, the suit says. On at least one occasion, he received injuries requiring medical treatment.

And "C.S.," 13, entered a GNETS program five years ago after his home school told his parents it was the boy's only option. In the sixth grade, the suit says, he spent much of the school year lying on a classroom floor, watching videos, and receiving no therapy for his autism.

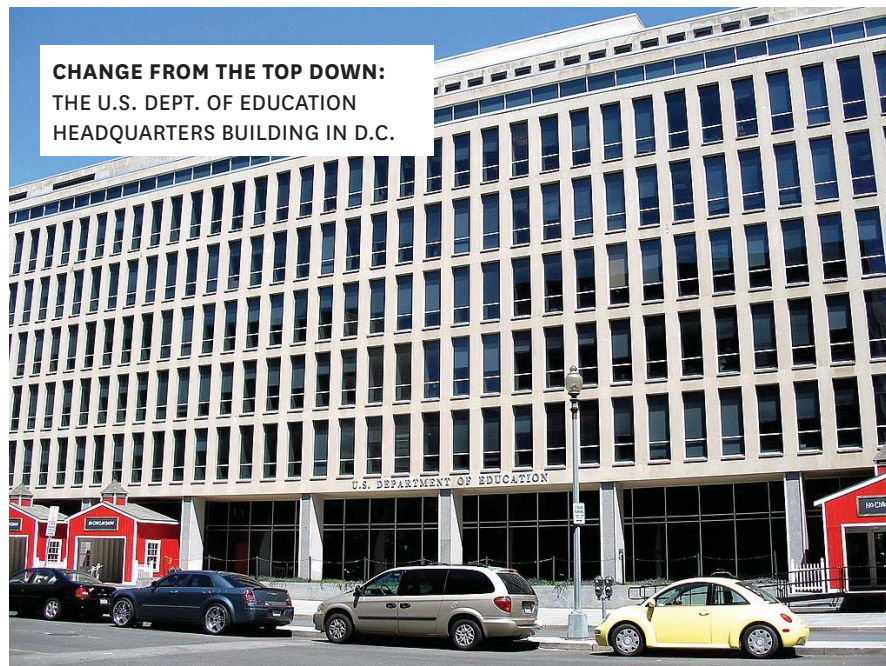
WHITE HOUSE RESCINDS SPECIAL EDUCATION GUIDANCE

Washington, D.C. — The U.S. Department of Education has determined that 72 guidance documents relating to special education are "outdated, unnecessary or ineffective."

In the Oct. 20 announcement, the federal department said that it had rescinded 72 guidance documents, some of which have been on record for decades. Sixty-three of them are from the Office of Special Education Programs and nine are from the Rehabilitation Services Administration.

The move is part of the current administration's agenda item of doing away with what it sees as unnecessary regulation. An executive order signed by President Donald Trump in February requires the federal government to "to alleviate unnecessary regulatory burdens."

Over the summer, the Education Department sought public comment on



CHANGE FROM THE TOP DOWN:
THE U.S. DEPT. OF EDUCATION
HEADQUARTERS BUILDING IN D.C.

"regulations that may be appropriate for repeal, replacement or modification." Now, officials with the agency's Office of Special Education Programs said they are working in phases to comply with the order.

Guidance documents flagged by the review touch on special education funding, least restrictive environment, private placements, employment and more.

Some were issued as recently as 2014 while others have been in official existence since the early-to-mid 1980s.

Policy guidance, often issued in the form of a "Dear Colleague" letter, is typically used by the Education Department to clarify how existing laws or regulations should be implemented in schools.

The rescinding of the guidance documents, however, does not necessarily mean that any public special education programs are in jeopardy.

AUTISM SPEAKS RELEASES AUTISM AND HEALTH REPORT

Washington, D.C. — "We now know, beyond doubt, that for many people, autism is a whole-body disorder," begins a new report from leading advocacy group Autism Speaks. "Its frequent co-morbidities include seizures, gastrointestinal disorders, sleep disturbances, eating and feeding challenges, attention deficit and hyperactivity disorder (ADHD), anxiety, depression..."

The 37-page report outlines in plain English the relationship between autism and a number of health issues—and what parents and professionals alike can do about them.

"Autism... relates to many of the medical and mental health conditions in this report," the report concludes, "most of which are treatable and/or preventable."

TARGET, TOMMY HILFINGER NOW SELLING MORE 'ADAPTIVE CLOTHING'

New York, NY — Two major U.S. brands are significantly expanding their offerings designed to accommodate the unique needs of people with disabilities.

Both big box retailer Target and fashion designer Tommy Hilfiger announced in October that they are bringing to the market new collections of so-called *adaptive clothing*, or apparel specifically designed for people with various disabilities.

Target will roll out adaptive apparel for kids as part of its house brand Cat & Jack. The 40-item collection will include T-shirts, leggings, puffer jackets, sweatshirts and bodysuits with zip-off sleeves, side and back snap-and-zip closures and hidden openings for abdominal access.

The move comes just two months after Cat & Jack began offering sensory-friendly items. These include apparel incorporating flat seams, no bothersome tags, extra room for diapers and other modifications.

Designers for Target said they worked directly with kids who have disabilities to understand their clothing needs.

However, the items will currently only be sold online; Target is still weighing whether to carry them in its brick-and-mortar venues.

At the same time, after an "incredible response" to a children's collection introduced last year, Tommy Hilfiger said it is expanding its adaptive offerings to include clothing for adults.

The eponymous founder of the top-tier clothing company has close family members affected by autism, with Mr. Hilfiger a known autism advocate. ★



NOTICE ANYTHING DIFFERENT ABOUT THESE COATS? EXACTLY THE IDEA: A CARDIGAN FROM TOMMY HILFINGER'S NEW ADAPTIVE CLOTHING COLLECTION FOR ADULTS FEATURES MAGNETIC BUTTONS THAT FACILITATE ONE-HANDED DRESSING, WHILE THE FEARLESS YOUNG MAN TO THE RIGHT MODELS A SENSORY-FRIENDLY VEST FROM TARGET'S "CAT & JACK" COLLECTION. PARENTS AND ADVOCATES ALIKE HAVE BEEN CALLING FOR SUCH DISABILITY-CENTERED, AND FASHIONABLE, APPAREL ITEMS FOR YEARS.

● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK



Lovingly Cared-for Hamaspiik Resident Impresses Hospital Nurse

First the bad news: A resident of Hamaspiik of Orange County's Dinev Inzerheim residence was briefly hospitalized.

But now the good news: Not only has she long since been discharged hale and hearty, but a veteran ICU nurse, whose line of work necessarily heightens sensitivity, expressed astonishment at the overall care seen in her Hamaspiik patient during her stay at the hospital.

While the individual was being visited by her doting mother at the intensive care unit, the veteran nurse took the time to share her feelings.

Having worked at the facility for years, the professional told the visitor,

she had never seen a patient from an assisted living facility presenting with such obvious signs of quality care.

"She expressed her wonder," Mom later told Hamaspiik staff, at what "extraordinary" care the individual was receiving at Dinev, Hamaspiik's only Intermediate Care Facility (ICF).

But for longtime Dinev Program Director Mrs. Etty Brach and staff, the numerous exacting regulations state-required for Dinev and other ICFs are well counterbalanced by the abundance of the deepest and sincerest love with which they regularly shower the home's residents—love that now even impresses an experienced ICU nurse. ★



Cops and Rabbis: "Bus"-ted Hamaspiik Road Trip Brings out Servants' Best

It was just before noon on the gray Sunday morning of October 8 when a police officer found himself on the upstate Interstate 84 heading east.

It was about 12:00 p.m. when Rabbi Zalman Sandhaus of the Fishkill, New York-based Pardess Center for Jewish Life was on the 84 heading west.

And it was only moments earlier when a charter bus-full of Connecticut-bound Hamaspiik event-goers pulled off the highway and ground to a halt. Mechanical trouble.

Leave it to Providence to unite three cops, one Chabad outreach rabbi, and a busload of Chasidic passengers from Kiryas Joel—none of whom had ever met each other. But there they were, lives overlapping for what

Sukkos breakfast event in a community member's backyard, the rabbi knew the age-old social power of good food, and how to put it to good use.

By 12:30, he was back at a very different holiday scene, deploying that irresistible food power for the day's second time.

Living only ten minutes from the scene, he had driven straight home, loaded up his Toyota Sienna with a minor trove of rugelach (mini-danishes), orange juice, seltzer and bottled water and headed right back.

Rabbi Sandhaus originally had other intentions for the foodstuffs. Heaven clearly had other plans, as for the dozens of hungry, thirsty and stranded women and children, they were outright heaven-sent.



otherwise would have been over two hours of one mass kiddie meltdown.

It was a trooper with the New York State Police who first noticed the bus.

The officer pulled over, approached the driver and shortly took command of the situation.

The officer was shortly joined by a second police vehicle and officer, also with the State Police, followed by a third set from the Port Authority Police Dept.

The officers were "unbelievable" in their reassurance and friendliness as they professionally went about their duties, reports Hamaspiik Special Events Coordinator Mrs. Brenda Katina.

But as the three public servants secured the safety of the bus and its passengers on the highway's eastbound side, Rabbi Sandhaus passed by on the westbound side. One look broadcast it all.

Having just completed a successful

Within five minutes, the items were distributed and the rabbi was back behind the wheel, leaving only empty containers and hearts full of gratitude.

"He was so so nice!" says Mrs. Katina.

It was not much longer before a replacement bus showed up—and with the cops presiding, passengers, luggage and all transferred to their new shuttle and got once again underway.

For the officers, who regularly face a wide range of colorful and challenging experiences, it was just another day.

As for Rabbi Sandhaus, who already enjoys a professional relationship with his nearest State Police post, he's just glad his life's shlichus (mission) put him in the right place in the right time.

Still, he has no plans on keeping a stash of emergency food supplies in his car at all times. It would get ruined, he says.

"And," he adds, "I might eat it." ★

● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK

Hamaspik Hosts another Full “Front Door” Disability Services Event

Hamaspik of Rockland County hosted yet another successful “Front Door” community orientation event at its central Monsey headquarters on Wednesday, October 18.

The event is a regular presentation at a community venue by regional leaders of the New York State Office for People with Developmental Disabilities (OPWDD).

It’s geared for parents and family members of children and adults with disabilities, introducing them to the wealth of services and supports available

from the OPWDD through leading community non-profits like Hamaspik and worthy others.

The OPWDD’s Front Door initiative, now a few years old, combines both introduction to and signing up for services in one streamlined process, making it easier for individuals to apply and be approved for them.

A key part of Front Door is bringing the OPWDD’s services and supports right into the heart of the communities it serves—with longtime partners like Hamaspik regularly tapped to host orientation events.

Responding to an advertising campaign in local print media, several dozen community members found themselves seated in the Hamaspik Terrace Hall at 58 Route 59 in Monsey on October 18th.

Front Door Supervisor Beth Imperial-Rogers, DDPS I and Ileana Ruiz, LMSW II of the OPWDD presented another Front Door orientation session to the Hamaspik crowd, walking

attendees through the plethora of available programs and professionally fielding a number of important audience questions.

The audience was treated to an informational and eye-opening video representation, illustrating the services and supports currently available to individuals with developmental disabilities.

The importance of the community outreach event was underscored by the substantial inquiries into services for individuals with autism—reflecting not just the increasing attention OPWDD is giving the developmental disorder, but growing community awareness, too.

As one Hamaspik staffer present correctly put it: “Individuals with autism are emerging: entitlements and supports are available for them.” ★

Festive Spirit

<< CONTINUED FROM PAGE 5

best to make a new resident—who took up South 9th residence this August—feel right at home.

Indeed, amusedly and proudly reports Mrs. Cziment, residents “love being here.”

And not only that, but in a touching example of the true love and care South 9th residents have for one another, a longtime resident was overheard thusly consoling the still-adjusting new arrival:

“You just think this isn’t your home—you’re going to love it!”

ACRES

At Hamaspik of Orange County’s Acres Briderheim IRA, managed with loving devotion since its inception by Mr. and Mr. Lipa Laufer and DSP team, individuals’ needs and preferences throughout Tishrei were constantly on the menu.

Figuratively, and literally.

While Tishrei was an “outstanding month” at Acres, reports Mrs. Laufer, was truly stands out is the painstaking attention the co-Manager pays to each young man’s culinary requirements.

From going out of her way to purchase the smallest-available disposable plastic martini glasses in which to serve perfectly-sized serving of ice cream dessert to toiling over individual portions to render them perfectly soft enough for specific individuals to consume, Mrs. Laufer was the consummate personal chef throughout Yom Tov (the holidays).

Between soaking bite-sized challah bits in sauce to mashing single plates of potatoes and even fish with a fork so as to render them edible for individuals with chewing challenges, it sounds like a lot of work, doesn’t it?

“Yes,” says Mrs. Laufer with a loving smile, “but you get used to it!” ★

JEWISH GENETIC NEWS BULLETIN

There’s something you should know...
GAUCHER DISEASE IS THE MOST COMMON
INHERITED JEWISH GENETIC DISEASE.

Gaucher disease type 1 is the most common form of the disease in the United States and Europe, particularly among Jews of Ashkenazi (Eastern European) descent.

DO YOU HAVE ANY OF THE FOLLOWING?

▶ Bone and joint issues such as:

- Multiple fractures
- Osteoporosis
- Osteoarthritis

▶ Bleeding issues such as:

- Easy or frequent bruising
- Frequent nose bleeds
- Difficulty clotting after injuries

▶ Chronic fatigue

▶ Enlarged abdomen

▶ Chronic aches in joints and muscles

The good news is that Gaucher disease can be diagnosed with a simple blood test. Proactive treatment can prevent or ameliorate signs and symptoms as well as reduce the risk of irreversible tissue and organ damage. Enzyme replacement therapy (ERT) and substrate reduction therapy (SRT) now allow patients to live full and active lives.

KNOW THE FACTS!

There is an unfortunate misconception that individuals with Gaucher disease who have double (homozygous) N370S mutations will never suffer symptoms or complications of Gaucher disease. This is absolutely **NOT TRUE!** Expert physicians know that some N370S homozygous patients can have severe disease that requires treatment to avoid not only blood, spleen and liver complications but also potentially disabling bone disease. In accordance with “*v’nishmartem meod es nafshoseichem*,” every child and adult with Gaucher disease needs to be carefully evaluated and followed by knowledgeable doctors who can advise **if and when** treatment is necessary. **With proper medical supervision and BS”D, all Gaucher patients, regardless of genotype, should be able to live long and healthy lives.**



National
Gaucher
Foundation

5410 Edson Lane
Suite 220
Rockville, MD 20852

1200 51st Street
PO BOX 190781
Brooklyn, NY 11219

To learn more, visit:
gaucherdisease.org/mysymptoms

Questions? Call us at:
718-669-4103

Public Health And Policy News

The new retail clinics are just another example of healthcare's ongoing shift away from hospitals, ERs and primary-care doctor's offices.

GENERIC LIQUID TAMIFLU APPROVED

Washington, D.C. — On September 15, the FDA approved the first generic version of the flu drug Tamiflu. The generic knockoff, made by Nesher Pharmaceuticals, comes in liquid form, making it suitable for patients as young as two weeks old who cannot ingest capsules.

As with the branded version, the generic is indicated for acute treatment within 48 hours of flu-like symptom onset. It can also be used for prevention in patients aged one and older.

The drug should not be used as a substitute for flu vaccination, the FDA stresses.

INDUSTRY STYMIES PRICE-SHOPPING DOCTOR

Boston, MA — Being a physician, a healthcare industry researcher and an informed and involved parent still took Harvard's Dr. Ateev Mehrotra over a month to navigate the system, the health-policy professor wrote in an amusing recent online post.

An ophthalmologist was needed to surgically remove a growth on his daughter's eyelid, and Dr. Merhotra's high-deductible family insurance coverage wouldn't pay. Enter price-shopping.

The good professor describes his price-shopping experience as going "terribly."

First, it was hard to find prices on the insurer's website. The uncommon procedure

wasn't listed. An ophthalmologist's office priced the surgery at \$1,007—which didn't include anesthetics or operating room (OR) prices.

Next calling insurer customer service for a better price estimate, Dr. Mehrotra was asked "to submit a written cost request for the surgeon and the hospital we were considering."

The Mehrotras got an incomplete estimate of \$452 (not including anesthetics or OR prices) 24 days later.

Other ophthalmologists would only quote prices if they could first re-evaluate his daughter for another \$200 per visit.

It cost Dr. Mehrotra \$1,443 in the end: \$556 for the surgery, and \$887 for the anesthetics and OR.

"Sadly, my family's price-shopping experience is the norm in the U.S. Most people can't successfully shop for care," Dr. Mehrotra concluded. "Offering people a price transparency website doesn't help them switch to lower-cost providers and doesn't decrease health care spending."

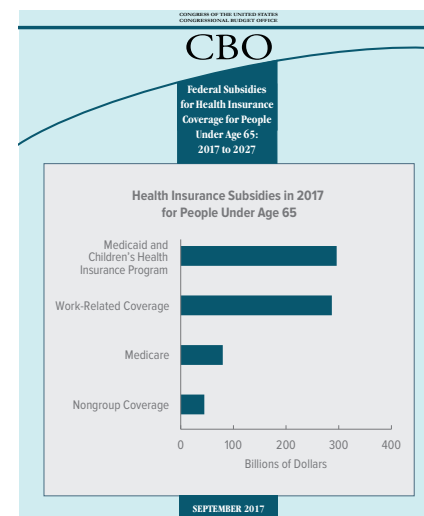
SEND A POSTCARD, SAVE A LIFE

Washington, D.C. — Saving a life may cost nothing more than a postcard.

That's the lead suggestion resulting from a new National Institute of Mental Health (NIMH) study on the best long-term fol-

Care Act (ACA) plans will be about 15 percent higher than this year because of short-term market uncertainty.

The analysis also found that enrollment in these marketplace plans will increase slightly, but will be limited by higher premiums and by funding cuts of up to 98 percent for "Navigator" community groups that help



BUDGETING UNCLE SAM: A KEY PAGE FROM THE ACTUAL REPORT FROM THE CONGRESSIONAL BUDGET OFFICE (CBO). THE CBO IS A FEDERAL AGENCY WITHIN THE LEGISLATIVE BRANCH OF THE U.S. GOVERNMENT THAT PROVIDES BUDGET AND ECONOMIC INFORMATION TO CONGRESS.

KAISER, TARGET TO OPEN MORE IN-STORE CLINICS

Oakland, CA — Leading U.S. healthcare system Kaiser Permanente and major U.S. retailer Target will be opening 31 more Target Clinics in 31 California Target stores over the next three years.

Each "Target Clinic, care provided by Kaiser Permanente" is staffed by nurse practitioners (NPs) and licensed vocational nurses (LVNs). They provide flu shots, pediatric care, women's healthcare, chronic disease management and care for minor illnesses like sore throats and colds.



HEALTH IN STORE: A TARGET CLINIC POWERED BY KAISER

IN THE CARDS: A STUDY SHOWED THAT EVEN SIMPLE MESSAGE MADE BIG DIFFERENCES



low-up for ER patients treated for suicide attempts.

The study examined the effectiveness (and cost) of emergency rooms sending postcards to patients, calling patients, or ordering therapy for patients.

The study found that that sending postcards with caring messages once a month for four months to post-ER patients who were at risk for self-harm reduced the most risk and cost the least.

The study appeared in the September 15 issue of *Psychiatric Services*.

PREMIUMS UP, ENROLLMENT HAMPERED FOR ACA: CBO

Washington, D.C. — A Congressional Budget Office (CBO) report released Sept. 14 says that premiums in next year's Affordable

people enroll in ACA plans. Those organizations got notice of the cuts mid-September.

AMGEN, ALLERGAN WIN FIRST U.S. CANCER BIOSIMILAR APPROVAL

Washington, D.C. — On Sept. 14, the FDA approved Amgen Inc. and Allergan plc's biosimilar version of Roche AG's blockbuster medicine Avastin.

The approval marks the FDA's first nod of a cancer drug copycat biologic.

Amgen's biosimilar, to be marketed under the brand name Mvasi, is cleared for use across five of Avastin's approved indications.

But it was not approved as an interchangeable, notably—meaning pharmacists can't automatically switch patients taking Avastin to Mvasi.



Status Report

Happening In Hospitals Today

SURVEY: MOST U.S. DOCS BEHIND SCHEDULE AT LEAST WEEKLY

New York, NY — In the recently released Medscape Practice Workflow Report 2017: Physicians' Bottlenecks, Challenges, and Time, 36 percent of surveyed doctors reported that they fell behind their appointment schedules several times a week. Over 25 percent said it happens daily.

The good news is that most of those same surveyed doctors also reported that they were a maximum of 30 minutes behind at a time—with 45 percent putting it at 15 to 30 minutes late, and 37 percent reporting tardy appointments at 15 minutes or less late.

But why are doctors behind schedule? More good news there: The reason most cited by the nearly 1,200 docs across 25 specialties is that patients are getting more attention.

In related news, the 2017 Great American Physician Survey found that doctors most consider government regulations and third-

party interference their largest barrier to good patient care.

OVER HALF OF MINORITY DOCS REPORT PATIENT BIAS: SURVEY

Baltimore, MD — Black doctors and nurses smeared with racial insults. Asian medical professionals tagged with cultural stereotypes. And Middle Eastern immigrant physicians all but physically attacked.

These are but some of the negative experiences reported by 822 U.S. physicians responding to a joint survey by WebMD, Medscape and STAT News.

In the survey, conducted this past summer and published this October on STAT, some 60 percent of respondents—six out of ten—recounted patients calling them names, making rude assumptions or comments pertaining to their race, religion, age, appearance or height, or refusing treatment from non-white professionals over the past five years.

African- and Asian-American physicians reported the most offenses, STAT reported.

One surveyed doctor opined that patient attitudes towards minority physicians have probably been there all along, only emerging

are not being reinvested in pay raises for healthcare workers, the report states. It found that hospital worker wages are stagnant, and that outpatient center worker wages have dropped six percent over the past decade.

Healthcare forms one-sixth of the U.S. economy, which means stagnant or declining wages can lead to a drag on overall national wages.

While hospitals remain one of the largest employers in healthcare, outpatient care jobs grew six times the rate of hospitals between 2005 and 2015. Healthcare is still expected to be among the fastest growing industries through 2024.

HOSPITAL SYSTEM USING VR 'GAME' TO TRAIN ER STAFF

Columbia, MD — In the near future, if plans by the Washington, D.C.-region MedStar hospital system go as planned,



VIRTUALLY THE REAL THING: A MEDICAL PROFESSIONAL IN VR GOGGLES PRACTICES AT MEDSTAR'S VIRTUAL-REALITY EMERGENCY-ROOM TRAINING PROGRAM

now in a polarized society.

On the other hand, another pointed out that patients are at their lowest when unwell and thus engage in primitive responses to the stressful situation—including targeting the other when feeling cornered or vulnerable.

The vast majority of surveyed physicians also reported neither formal policies on handling patient bias nor training for said.

According to respondents, patient bias is as subtle as commenting on an immigrant doctor's well-spoken English, or as extreme as refusing treatment by anyone but a white doctor.

REPORT: HOSPITAL INDUSTRY CONSOLIDATION GROWS, WAGES HURT

Washington, DC — According to "Organizational Restructuring in U.S. Healthcare Systems: Implications for Jobs, Wages, and Inequality," a recently released by the Center for Economic and Policy Research, hospital systems' mergers and acquisitions (M&As) do increase industry employment, but do not improve workers' wages.

Savings realized by large-scale M&As

emergency-room doctors will have a training advantage in treating life-threatening situations that is straight out of today's highest-tech computer games.

For the past four years MedStar's Simulation Training & Education Lab (SiTEL) has been working on Trauma Yellow.

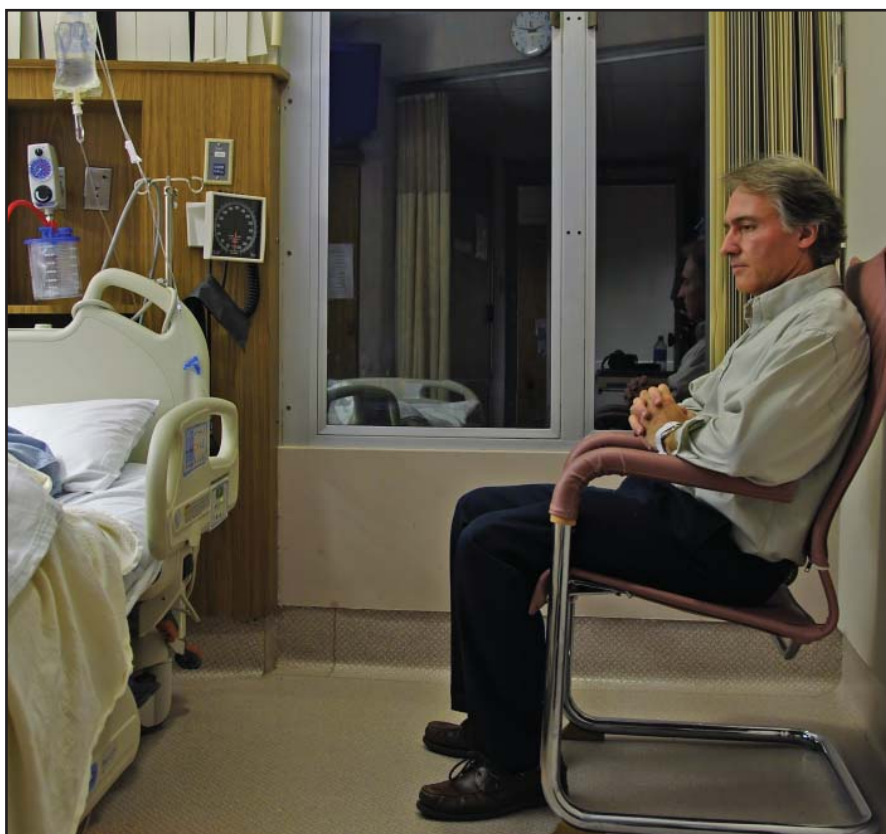
Trauma Yellow is a virtual-reality (VR) medical video game of sorts.

It uses high-tech equipment to make a surgeon wearing VR video goggles in an empty room see and hear the sights and sounds of real-life but computer-generated ER simulation, in actual 3D.

The system uses wall-mounted lasers to "see" where the surgeon is standing and moving relative to the computer-generated surgical table—and ER staff and equipment—on the goggles' screens, adjusting all those images in real-time to surprisingly realistic three-dimensional effect.

SiTEL hopes that Trauma Yellow will one day be honed enough for mainstream usage.

The team's long-term strategic objective is to train new ER doctors and surgeons in the first 30 minutes of trauma treatment—giving them decision-making practice without real lives on the line. ★



PLAYING THE WAITING GAME: IF SOMETHING THAT LOOKED LIKE THIS WAS YOUR RECENT DOCTOR-VISIT EXPERIENCE, YOU'RE NOT ALONE. A NEW SURVEY SHOWS THAT MOST DOCTORS ARE BEHIND IN SEEING PATIENTS AT LEAST ONCE A WEEK

In the Know

ALL ABOUT... FLU

Information sources:
Mayo Clinic, WebMD,
MedlinePlus, U.S. Centers
for Disease Control and
Prevention (CDC)

INTRODUCTION

Is the winter “influenzaing” you? It influenced the medieval Italians, too—giving rise to “influenza da freddo,” or “influence of the winter.”

Before anyone knew that the illness known once as influenza da freddo was caused by a virus, they knew was that the symptoms associated with the flu—primarily, fever and chills for at least a good few days—struck regularly come each winter.

But caused by a virus it is—and several strains of the same virus, for that matter.

As it turns out, there are four types of flu: A, B, C and D. The most common is A, followed by B. Both cause seasonal epidemics. Flu C is relatively rare and relatively invisible, generally causing mild respiratory illness (if any illness). Flu D primarily affects

cattle.

What’s more, most of the flu that goes around infecting people each year is Flu A—and the Flu A virus itself is constantly mutating and presenting new strains. (In other words, when people say, “Better watch out for that flu this season—I hear this year’s bug is rough!” they’re referring to Flu A.)

That’s why you need to get the flu shot every year—because last year’s vaccine won’t necessarily protect you from this year’s projected Flu A strain. (It also won’t protect you from last year’s Flu B strain—the vaccine also protects against this year’s projected Flu B strain.)

Come freddo, catching the influenza is not inevitable. Do read on!

DEFINITION

The influenza virus is a common virus that attaches itself to the inside of your respiratory system (nose, mouth, throat and lungs), usually your nose.

Once there, it multiplies and spreads to the throat and lungs—triggering a strong response by your body’s immune system. This response results in the fever, chills and muscle aches associated with flu.

Influenza is not the same as “stomach flu” viruses that cause diarrhea and vomiting. The “stomach flu” is often just a case of what’s called *gastroenteritis*.

For most people, influenza resolves on its own. If you’re young and healthy, seasonal influenza usually isn’t serious. Although you may feel miserable while you have it, the flu usually goes away in a week or two with no lasting effects.

What’s “Swine Flu”? And what about “Bird Flu”?

There are actually two viruses known as the

Swine Flu.

One is simply just another strain of the Influenza A virus known as H1N1. When it appeared in 2009, it was the first major new strain of Flu A in about 40 years, according to the CDC. But the H1N1 Flu A strain already has a vaccine for it, which is now included in the annual flu shot.

The other Swine Flu is a flu virus that only infects pigs (swine), not humans—so you



have no reason to be afraid of it, despite a plethora of sensationalistic reports about it. Here’s why the other Swine Flu is not a threat: because it does not have the receptors, or arms, that are used to attach to the inside of the nose by regular flu viruses. With no receptors, the Swine Flu virus can’t attach itself to the inside of human noses and thus infect humans. And if this virus does get inhaled by a human, it typically ends up in the digestive system, where it is killed by natural acids.

The same is true for the Bird Flu—a flu virus that continues to be deadly for chickens, ducks and other flocks of commercial birds, but not for humans. It has no receptors.

SYMPTOMS

The flu may start off like a common cold—with ordinary symptoms like runny nose, sneezing and sore throat. But colds usually develop slowly, while the flu tends to come on suddenly. And while colds can be a nuisance, the patient will typically feel much worse with the flu.

The flu’s most common telltale signs are:

- Fever over 100.4
- Chills and sweats
- Aching muscles, especially in the back, arms and legs

- Fatigue and weakness

Other common flu symptoms include:

- Headache
- Dry, persistent cough
- Nasal congestion
- Sore throat

Risk of complications

Influenza and its complications can be deadly. People at higher risk of developing flu complications include:

- Young children under five, and especially

those under two years

- Adults older than 65
- Residents of nursing homes and other long-term care facilities
- Expectant women and women up to two weeks postpartum
- People with weakened immune systems
- People with chronic illnesses like asthma, heart disease, kidney disease or diabetes
- People who are very obese, with a body mass index (BMI) of 40

or higher

Pneumonia is the most serious complication. For older adults and people with a chronic illness, pneumonia can be deadly.

DIAGNOSIS

If you know it’s the flu and you’re not in one of the above at-risk categories, take comfort in the fact that most people with the flu can ride it out at home and

often don’t need a doctor. But anyone at risk for complications should see a doctor immediately. A doctor can diagnose flu quickly and provide antiviral drugs within the first 48 hours after symptoms are first noticed. This is important because flu antivirals like Tamiflu may reduce the length of the flu infection and help prevent more-serious problems.

Tests

A number of flu tests can detect flu viruses. The most common are called “rapid influenza diagnostic tests” and can provide results in 30 minutes or less. Unfortunately, the ability of these tests to detect the flu can vary greatly—you could even test negative and still have the flu. Also, rapid tests appear to be better at detecting flu in children than adults.

There are several other flu tests that are

“**HERE’S WHY THE OTHER SWINE FLU IS NOT A THREAT: BECAUSE IT DOES NOT HAVE THE RECEPTORS, OR ARMS, THAT ARE USED TO ATTACH TO THE INSIDE OF THE NOSE BY REGULAR FLU VIRUSES.**”



**WASHING YOUR HANDS
REGULARLY WITH SOAP AND
HOT WATER DURING THE FLU
SEASON IS A GREAT WAY TO
KILL ANY BUGS THAT MAY
HAVE ENDED UP ON YOUR
HANDS—WHERE THEY CAN
INFECT YOU OR OTHERS.**



much more accurate, but these must be done in specialized laboratories at hospitals or state public health facilities. These tests require the swabbing of the inside of the nose or the back of the throat for a sample which is then tested. They not require a blood sample.

CAUSE

The flu is caused by infection with the flu virus. But how do you get that flu virus? Contaminated droplets, that's how!

When you cough, sneeze or even talk, your mouth and/or nose expels droplets of water or moisture that drift through the air. If you have the flu, your expelled water droplets will have the flu, too—and if someone (without the flu shot) inhales those droplets, they'll get the flu, too.

People can also catch the flu if they touch their hand to a surface—for example, a desk, keyboard or cell phone—with infected droplets on them, and then touch their eyes, nose or mouth.

People with the virus are likely contagious from the day or so before symptoms first appear until about five days after symptoms begin—and can be contagious for up to ten days after symptoms appear. Kids and people with weakened immune systems may be contagious for slightly longer.

TREATMENT

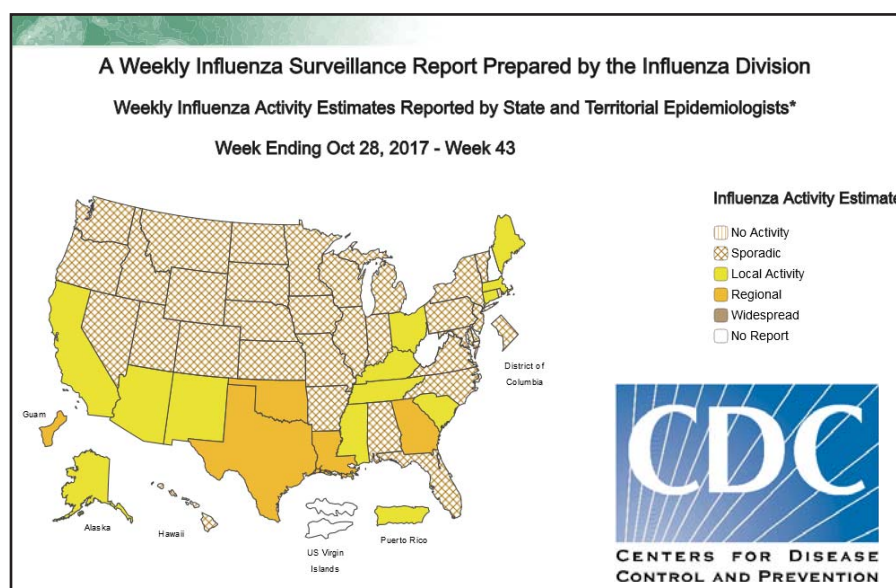
Flu usually needs nothing more than bed rest and plenty of fluids. But in some cases, your doctor may prescribe antiviral drugs like Tamiflu or Relenza.

These may shorten the flu's run by a day or so and help prevent serious complications, but can produce side effects including nausea and vomiting (which may be lessened if taken with food).

Tamiflu has also been associated with delirium and self-harm behaviors in teenagers, so it's not recommended for youths. An additional concern is that some flu strains have become resistant to Tamiflu and the older Flumadine antiviral drug.

Home treatment

- Drink plenty of liquids. Choose water, juice and warm soups to prevent dehydration



- Rest. Get more sleep to help your immune system fight infection
- Take pain relievers like acetaminophen (Tylenol, others) or ibuprofen (Advil, Motrin IB, others) to combat the flu's muscle aches and pains. Don't give aspirin to children or teens because of the risk of Reye's syndrome

PREVENTION

The CDC recommends annual flu vaccination for everyone over the age of six months.

Each year's seasonal flu vaccine contains protection from the three or four influenza

viruses projected to be the most common during in the upcoming season. The CDC no longer recommends nasal spray vaccinations because they have been relatively ineffective in recent seasons.

For seniors, recent studies find that the high-dose flu shot protects better than the standard dose.

Controlling the spread of infection

Here are the critical basics to break the chain of viruses passing from person to person:

- Elbow your face! Flu-rich water droplets will bounce right off your hands into the air to float around and possibly infect people—so sneeze or cough into your elbow, NOT your hands, to keep those water droplets far more contained, especially if they're absorbed by your sleeve.

If your elbow is not "sleeved," cough or sneeze instead into anything absorbent—a tissue, napkin or even towel. Very important: Teach your kids this habit!

- Soap hands regularly. Whether or not you've just sneezed or coughed a handful of bug-laden water droplets onto your hands, washing your hands regularly with soap and hot water during the flu season is a great way to kill any bugs that may have ended up on your hands—where they can infect you or others. Kids should sing the "A-B-C Song" while soaping hands to ensure effectiveness. Use alcohol-based hand sanitizers if soap and water aren't available.

- Avoid close-quarters areas. One of the most common myths is that flu is associated with winter. It's not! It only strikes more during winter because more people are indoors—and in closer proximity to more people—during winter.

So avoid places where people congregate, like child care centers, schools, office buildings, auditoriums and public transportation, because that's where the flu spreads the most.

- Infected? Don't expose others! If you've got the flu, stay home for at least 24 hours after your fever fades out so that you lessen your chance of infecting others.

- Ventilate your house. It can seem counterintuitive—but the fact is that stale and unchanged indoor air can be a veritable virus soup, especially when someone in the house has the flu (or any other viral infection).

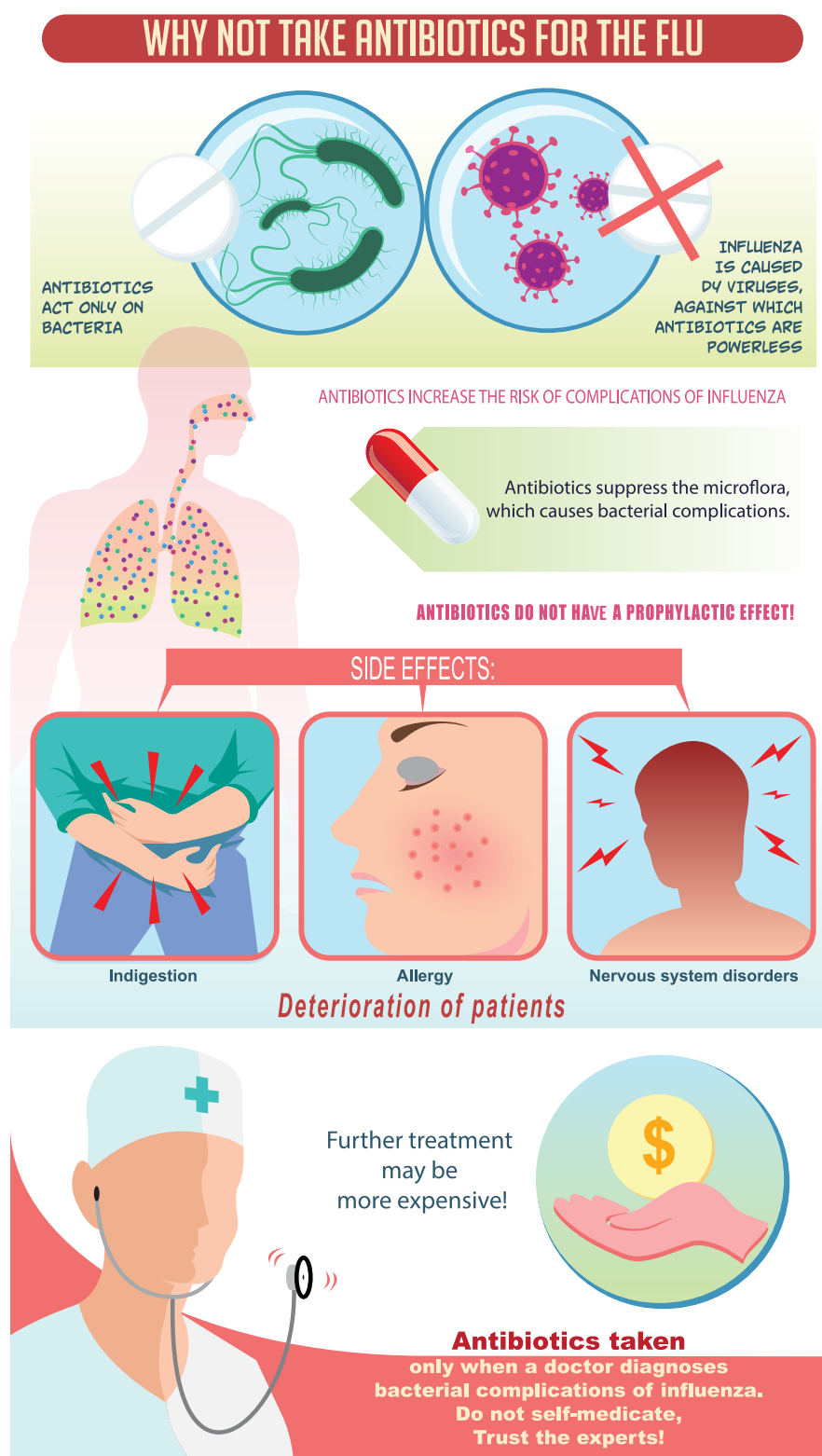
Isolate the infected person in a bedroom for a few hours while leaving open all the other windows and doors in the house—allowing fresh outside air to blow in, flush out and replace stale inside air.

Then, isolate the infected person in a freshly ventilated room for a few hours while you ventilate his/her bedroom, leaving the whole house filled with newly imported fresh air!

PROGNOSIS

The flu virus can leave one feeling rather uncomfortable for a good few days.

But with proper rest and fluid intake should one get it, never mind getting the flu shot and taking other precautions so as to not get the flu in the first place, fall and winter need not be seasons of flu-induced suffering. ★



●► PUBLIC HEALTH NEWS

Uproar Over Secret Doctor Panel Influencing Medicare

Chicago, IL — Imagine this: A secret panel of 31 doctors who meet every year to decide what every major medical procedure, test and treatment should cost. Sounds like a conspiracy, no? But it isn't.

In the shortest and most general of terms, here's how medical costs work: Commercial insurers generally charge what Medicaid charges (although often more, and often a lot more). Medicaid generally charges what Medicare charges. And Medicare generally charges

what the Relative Value Scale Update Committee (RUC for short) recommends that it charge.

The RUC is an internal panel of the American Medical Association (AMA), the largest and most powerful medical professional and lobbying group.

The RUC's 31 members meet each year to review the current associated time/work, overhead expenses, and malpractice costs of every major medical procedure, test and treatment. They then use that current information to slap

a suggested price tag on each.

Those suggestions are then passed on to the federal Centers for Medicare and Medicaid Services (CMS)—which traditionally has adopted just under 70 percent of the annual recommendations.

The news now is that this time around, Medicare is indicating it will agree with close to 100 percent of the RUC's recommendations—in turn triggering industry-wide protest.

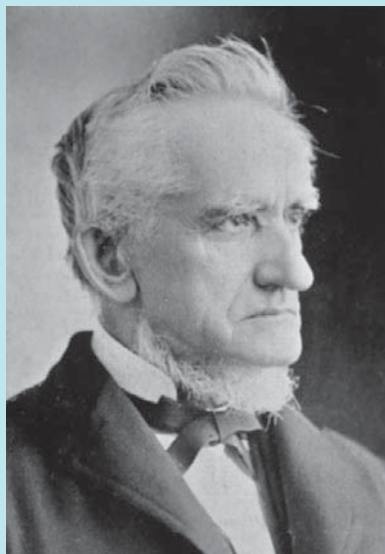
A number of advocacy groups, primary-care doctors and other

critics believe that Medicare's increased deference to the RUC's price recommendations for 2018 is a conflict of interest that steers federal spending toward more expensive procedures and distorts Medicare rates in favor of certain medical specialties.

The RUC's 2018 recommendations—all 3,200 pages of them—are controversial because it means that a secret group of doctors are essentially deciding their own pay

Critics argue that doing so skews it in favor of higher-paid specialists who tend to charge more than primary care.

"There is evidence that certain procedures are overpriced," the independent Medicare Payment Advisory Commission wrote in a letter, "and CMS is missing an opportunity to address this inequity." ★



THE ROOTS OF THE AMA

THE AMERICAN MEDICAL ASSOCIATION (AMA), FOUNDED IN 1847 AND INCORPORATED IN 1897, IS THE LARGEST ASSOCIATION OF PHYSICIANS—BOTH MDS AND DOS—AND MEDICAL STUDENTS IN THE UNITED STATES.

THE AMA'S STATED MISSION IS "TO BRING TOGETHER PHYSICIANS AND COMMUNITIES TO IMPROVE THE NATION'S HEALTH." THE ASSOCIATION ALSO PUBLISHES THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION (JAMA), WHICH HAS THE LARGEST CIRCULATION OF ANY WEEKLY MEDICAL JOURNAL IN THE WORLD.

THE AMA ALSO PUBLISHES A LIST OF PHYSICIAN SPECIALTY CODES WHICH ARE THE STANDARD METHOD IN THE U.S. FOR IDENTIFYING PHYSICIAN AND PRACTICE SPECIALTIES.

IN 1847 AFTER A REPORT BY PHYSICIAN NATHAN SMITH DAVIS, AMERICAN PHYSICIANS MET IN PHILADELPHIA AND FORMED THE AMA AS A NATIONAL PROFESSIONAL MEDICAL



ORGANIZATION, THE FIRST OF ITS KIND IN THE WORLD, GOING ON TO ESTABLISH UNIFORM STANDARDS FOR MEDICAL EDUCATION, TRAINING, AND PRACTICE, THE WORLD'S FIRST NATIONAL CODE FOR ETHICAL MEDICAL PRACTICE. EVER SINCE, THE AMA CODE OF MEDICAL ETHICS DICTATES PROFESSIONAL CONDUCT FOR PRACTICING PHYSICIANS.

ABOUT NATHAN SMITH DAVIS

NATHAN SMITH DAVIS SR., M.D., L.L.D. (JANUARY 9, 1817 - JUNE 16, 1904) WAS A PHYSICIAN WHO WAS INSTRUMENTAL IN THE ESTABLISHMENT OF THE AMERICAN MEDICAL ASSOCIATION AND WAS TWICE ELECTED ITS PRESIDENT. HE BECAME THE FIRST EDITOR OF THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION.

DAVIS WAS BORN NEAR GREENE, CHENANGO COUNTY, NEW YORK. AT 17 HE BEGAN MASTERING MEDICINE UNDER DR. DANIEL CLARK, ATTENDED THREE COURSES OF LECTURES AT THE COLLEGE OF PHYSICIANS AND SURGEONS OF THE WESTERN DISTRICT OF NEW YORK, FAIRFIELD, AND WAS GRADUATED FROM THAT INSTITUTION ON JANUARY 31, 1837. HE FIRST PRACTICED IN VIENNA, NEW YORK, BUT SOON MOVED TO BINGHAMTON, NEW YORK AND SOON AFTER SETTLED IN NEW YORK CITY.

HE BECAME A MEMBER OF THE BROOME COUNTY MEDICAL SOCIETY, AND WAS ONE OF ITS CENSORS IN 1838. IN 1841, 1842 AND 1843 HE WAS SECRETARY AND LIBRARIAN OF THE SOCIETY, AND IN 1843 DELEGATE FROM BROOME COUNTY TO THE MEDICAL SOCIETY OF THE STATE OF NEW YORK. IN 1845 HIS REPORT AS CHAIRMAN OF THE COMMITTEE ON CORRESPONDENCE RELATIVE TO MEDICAL EDUCATION AND EXAMINATION LED TO THE ORGANIZATION OF THE AMERICAN MEDICAL ASSOCIATION.

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The Senior Care Gazette

News from
the World of
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Exercising and Non-exercising Seniors Equally Sedentary: Study

Gainesville, FL — A daily movement tracking study of over 1,300 seniors found that those who exercised daily still had as much “down time” as those who didn’t.

In recent years, a growing number of studies have linked physical exercise and activity for seniors with health, especially in reducing risk and even progression of Alzheimer’s.

But the new study found that even seniors who engaged in daily exercise or physical activity were only active 12 minutes a day more than non-exercising participants.

“Going out and exercising doesn’t necessarily budge the amount of time people are going to be sedentary in the entire day,” explains associate professor Todd Manini of the University of Florida’s Institute on Aging. “You are not necessarily taking away from the sedentary bucket and putting it into the exercise bucket.”

The takeaway is simple: Seniors should subtract from their daily sedentary activities the same amount of time they spend on daily physical activity—ideally by replacing sedentary time with activity time. ★

Alzheimer’s-detecting Headset Wins Top Prize

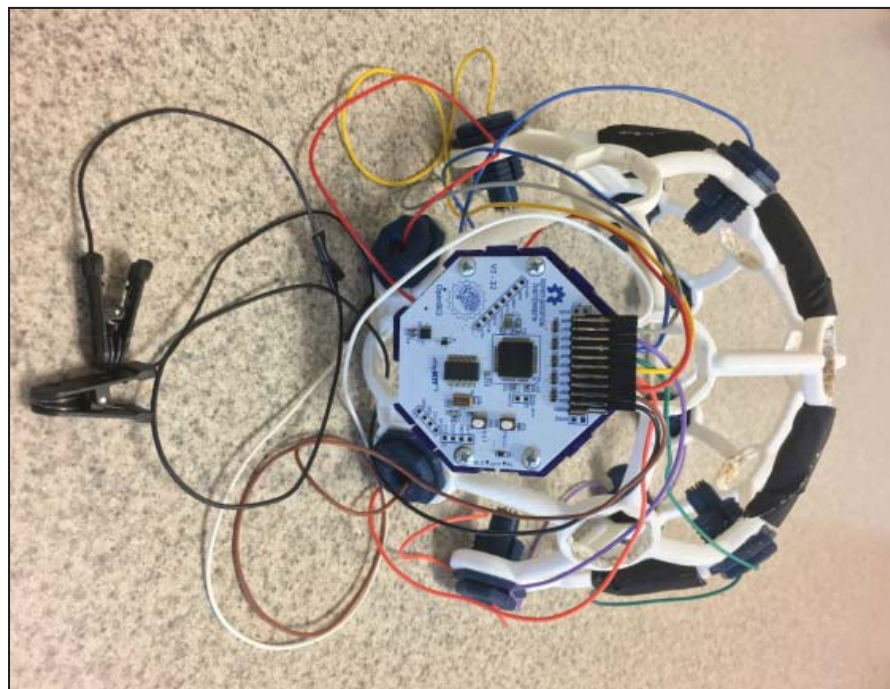
Bethesda, MD — A portable, computerized headset system tests for Alzheimer’s by measuring brainwaves with soundwaves.

It’s also won its inventors the \$20,000 top prize in the 2017 National Institutes of Health (NIH) Design by Biomedical Undergraduate Teams (DEBUT) challenge.

The low-cost system uses existing electroencephalogram (EEG) technology to compare patients’ brainwaves with healthy brainwaves. It was created by a student team at the University of Maryland (UMD), College Park.

The non-invasive tool has “the potential to detect Alzheimer’s disease with a high level of accuracy,” according to the NIH, and “could make dementia diagnosis more quantitative, systematic, and less costly—allowing doctors to use it at regular check-ups.”

Currently, PET scans, MRIs, and spinal taps are the most common ways to diagnose Alzheimer’s. But because they can be costly or invasive, many patients are not diagnosed until symptoms are evident—which can be up to two years after clinical symptoms arise. ★



GOING TO YOUR HEAD: STARTING WITH AN OPENBCI ULTRACORTEXT HEADSET, UNIVERSITY OF MARYLAND BIOMEDICAL UNDERGRADS INVENTED THIS AWARD-WINNING ALZHEIMER’S-DETECTING DEVICE. THE SYSTEM COMPARES BRAIN WAVES TO HEALTHY MODELS TO HELP DIAGNOSE ALZHEIMER’S. (PHOTO COURTESY OF UMD.)

“New” Parkinson’s Drug Approved; Questions Remain

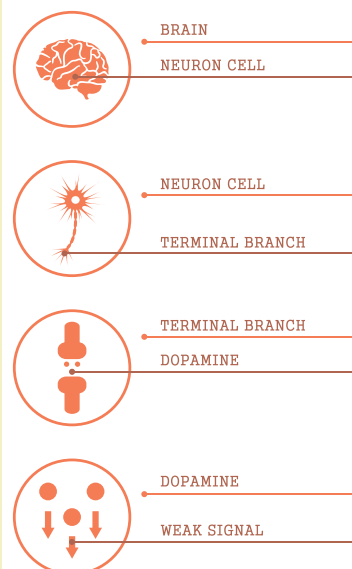
Washington, D.C. — Gocovri, a Parkinson’s drug newly approved by the FDA, is really not “new.” Its basic ingredient is amantadine, an antiviral drug around for decades. Gocovri’s makers say it eases the common Parkinson’s side effect of *dyskinesia*, or uncontrolled trembling.

But doctors have been giving amanta-

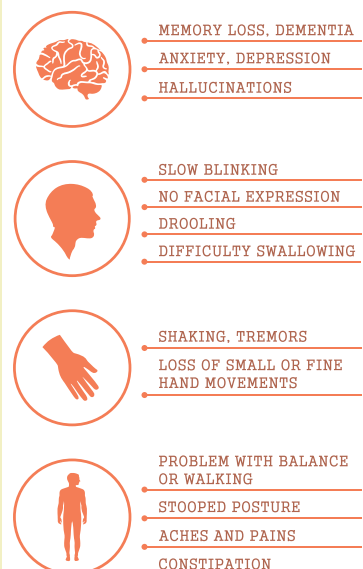
dine to Parkinson’s patients for its “off-label” dyskinesia benefit for years now—raising questions on the difference between Gocovri and amantadine, as well as whether any of amantadine’s known side effects will also be present with Gocovri—and if so, it is worth it for amantadine patients to switch to Gocovri. ★

PARKINSON’S DISEASE

WHAT IS PARKINSON’S DISEASE?



PARKINSON’S DISEASE SYMPTOMS



New York Non-profit gets Alzheimer’s Support Grant

Cohoes, NY — Among the 11 national grantees announced Oct. 16 by the federal Administration for Community Living (ACL) is New York’s very own Capital Region Geriatric Center.

The Albany-area senior support center will be providing the Alzheimer’s Disease

Initiative: Specialized Supportive Services (ADI-SSS) program over the next three years.

The Center’s new program will expand the safety net for those living alone with Alzheimer’s disease, collaborate with services providers for people with developmental disabilities, and work with caregivers. ★

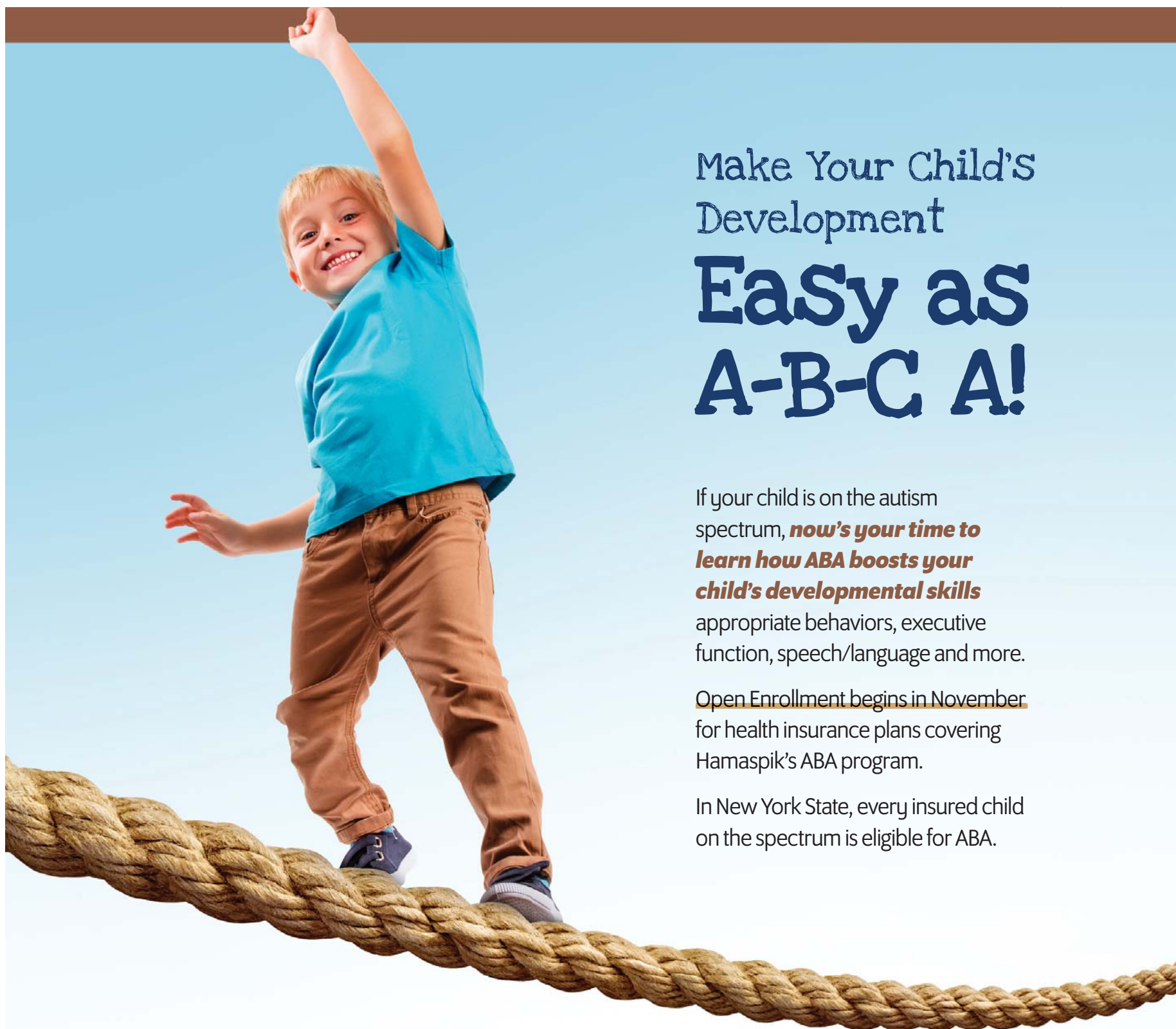
Japanese Restaurant Hires Waiters with Dementia

Tokyo, Japan — In a publicity stunt to raise public dementia awareness and reduce its social stigma, nonprofit organization Maggie’s Tokyo opened the Restaurant of Order Mistakes.

The pop-up eatery, which operated for a total of two days, featured waiters with diagnosed dementia and the resulting

mismatched food deliveries—not to mention viral popularity resulting in hundreds of customers swamping the temporary establishment, according to reports.

According to Maggie’s Tokyo, the awareness event was a huge success—with a September encore for the Restaurant of Order Mistakes following. ★



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