



The Hamaspik Gazette

News of Hamaspik
Agencies and
General Health

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GAZETTE SURVEY

The GAZETTE asks YOU:

HOW MANY HOURS A NIGHT DO YOU SLEEP?

A: 9+; B: 7-8; C: 5-6; D: UNDER 5

Respond to: survey@hamaspik.org



HEALTH STAT

DIRE DIABETES DATA

48.2%

OF TYPE 2 DIABETES-RELATED
DEATHS PREVENTABLE WITH
HEALTHY DIET

5,300

U.S. YOUTHS AGES
10-19 DIAGNOSED WITH
DIABETES EACH YEAR

Source: WebMD



HEALTH QUOTE



**WE CANNOT WAIT TO SEE WHAT THEIR
FUTURE HOLDS!**

—Heather Delaney, mother of formerly-joined-at-the-head
twins Erin and Abby, who finally went home after successful June
surgery; Charlotte Observer, Nov. 20



HEALTH TIP

Maximize pressure-free mornings

Taking your blood pressure daily? Do it first
thing in the morning. You're calmest then.

INSIDE

HEALTH

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discovered in brain

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diseases

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industry growing

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HAMASPIK NEWS

A FULL LINE OF COMMUNITY SERVICE

ELECTED OFFICIALS, PUBLIC SERVANTS AND COMMUNITY ACTIVISTS JOIN HAMASPIK'S TOP BRASS ON MONDAY, NOVEMBER 27 FOR THE CEREMONIAL OPENING OF THE EXPANSIVE NEW WING OF THE AGENCY'S COMPREHENSIVE COMMUNITY CENTER IN THE HEART OF BOROUGH PARK.



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HAMASPIK NEWS

People First Care Coordination Now One Step Away from Launch in July 2018

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HAMASPIK NEWS

Putting Their Own Spin on Chanukah

AS ROCKLAND COUNTY LEGISLATOR AND HAMASPIK PR DIRECTOR ARON WIEDER PAYS A SPIRITED VISIT, HAMASPIK OF KINGS COUNTY DAY HAB STAFF BUILD A GIANT DREIDEL



Services Provided by NYSHA AGENCIES

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

“I am a Man with Down Syndrome and My Life is Worth Living!”

Down Syndrome Advocate Testifies Powerfully on Capitol Hill

“I am a man with Down syndrome and my life is worth living,” began Down syndrome advocate Frank Stephens in late-October testimony before the House Subcommittee on Labor, Health and Human Services.

“Sadly, across the world, a notion is being sold that maybe we don’t need research concerning Down syndrome,” Mr. Stephens continued—pointing to a recent report that essentially said nearly 100 percent of unborn babies with Down syndrome in Iceland are not wanted.

“It is hard for me to sit here and say those words,” Stephens said. “I completely understand that the people pushing this particular ‘final solution’ are saying that people like me should not exist.”

“Seriously, I have a great life,” Stephens continued, saying he has been a guest lecturer at major universities, contributed to a best-selling book, and had roles in a film and television show, and spoken to thousands of kids about inclusion.

“I don’t feel I should have to justify my existence,” he said. Addressing those who “question the value of people with Down syndrome,” he commented that “we are an unusually powerful source of happiness. Surely happiness is worth something.”

“We are giving the world a chance to think

about the ethics of choosing which humans get a chance at life,” he went on. “Is there really no place for us in the world?”

Stephens argued that Congress should increase funds for medical research of Down syndrome, arguing that such research could also lead to discoveries about “cancer, Alzheimer’s, and immune system disorders.”

“Help us make this difference,” he concluded. “Let’s be America, not Iceland or Denmark. Let’s pursue answers, not ‘final solutions.’ Let’s be America. Let’s make our goal to be Alzheimer’s free, not Down syndrome free.” ★



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► HAMASPIK NEWS

People First Care Coordination Now One Step Away from July Launch

After Months and Miles of Prep, Tri-County Care Submits CCO Application



Tri-County Care is the Care Coordination Organization/Health Home (CCO/HH) painstakingly planned for months by the New York State Hamaspik Association (NYSHA), Hamaspik's parent agency.

And with its full application to become a CCO sent in to New York State authorities this past Nov. 21, Tri-County Care is just one step away from its July 2018 launch date.

But what is Care Coordination, you ask? And how will it affect me?

If your loved one with disability has been getting supports and services from non-profit agencies like Hamaspik, New York State-wide change for the better has long been coming.

The New York State Office for People With Developmental Disabilities (OPWDD), Hamaspik's longtime partner, is moving full steam ahead with its People First Care Coordination plan.

But not to worry! The changes coming

with Care Coordination have been carefully thought out to significantly improve, expand and enhance the already-numerous services in existence.

In short, People First Care Coordination will move the Medicaid Service Coordinators (MSCs) out of agencies like Hamaspik (and worthy others) and into independent new ("Conflict Free") non-profits. Once there, MSCs will continue coordinating your loved one's existing disability supports and services—plus a whole bunch of new medical services in conjunction with the New York State Dept. of Health (DOH).

The several new independent organizations that will provide this expanded new care coordination are officially called Care Coordination Organizations/Health Homes (CCO/HHs).

And Tri-County Care is NYSHA's proactive response to that coming wave of positive change.

Tri-County Care is the product of months of work and thousands of collective miles traveled by its in-house professional team.

That team made over 100 local, regional and even out-of-state planning meetings and presentations to dozens of agency executives, boards and MSCs.



SPEAKING THE LANGUAGE:
MR. MIZRAHI (R) TALKING SHOP

That team includes Hamaspik Choice Executive Director Yoel Bernath and top lieutenants Jackie Spring and Pat Schuckle, both retired OPWDD leaders.

A more recent example of that work is the hiring of industry veteran David Mizrahi as Tri-County's Executive Director.

With his wealth of professional OPWDD experience and years of personal advocacy

for a family member affected by disability, the Spanish-fluent Mizrahi is the right man for the job.

David Mizrahi brings to the table deep appreciation of the multiple cultures that will comprise Tri-County's beneficiary body.

More critically, he reflects NYSHA's on-target dedication to building a CCO right. ★

► HEALTH NEWS

Specialized MRI Scans Discover Body's Lymphatic System in Brain

Centuries-old Idea Vindicated; Researchers Eager to Probe for Brain Disease Links

Charlottesville, VA — "You'd think we'd know all there is to know about the brain's basic anatomy," recently blogged National Institutes of Health (NIH) Director Dr. Francis Collins.

But "contrary to what I learned in medical school," and verified by a groundbreaking recent discovery, Dr. Collins wrote, the body's lymphatic system does indeed extend to the brain.

The lymphatic system is a network of tissues and organs that help rid the body of toxins, waste and other unwanted materials. Its primary function is to transport lymph, a fluid containing infection-fighting white blood cells, throughout the body.

Modern medicine knew of no lymphatic system in the brain—although

some had suggested centuries ago that lymphatic vessels surrounded the brain, an idea largely dismissed as wrong.

How could have modern science missed the brain's lymphatic system all these years?

The brain's lymphatic vessels aren't visible on standard MRI scans because they track right alongside much larger and more conspicuous blood vessels, Dr.

Collins explained.

Partnering with pioneering researchers at the Kipnis Lab at the University of Virginia (UVA), NIH brain scientists used specialized brain dyes and "dimmed down" MRI scans to produce images clearly showing a network of previously-unknown lymphatic vessels in the brain.

Because the lymphatic system plays a vital role in immune response, the discovery could be important in understanding, treating, and preventing brain disorders involving immune-related inflammation. Such disorders include multiple sclerosis (MS),

Alzheimer's and Parkinson's.

Previous unrelated research has indeed found significant anecdotal evidence suggesting a link between bacterial or viral infections and Alzheimer's and other dementias.

Researchers at the NIH now plan to compare the function of the brain's newly-discovered lymphatic system in people with or without MS.

Likewise, according to Dr. Collins, "neuroscientists all around the world can now begin to explore similar questions in the groups of patients they study."

Only time will tell if the ancient belief in a brain-immune system link is real. ★

Hamaspik Gazette

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Happening in Health Today

SCHIZOPHRENIA INCREASINGLY SEEN AS ‘SPECTRUM DISORDER’

Dublin, Ireland — Writing for online forum The Conversation, neuropsychology professor Dr. Simon McCarthy-Jones outlines the mental-health profession’s ongoing change in understanding schizophrenia.

The psychiatric condition, typically characterized by distressing audio/visual hallucinations, delusions, and confused thoughts, is now seen far less as a distinct brain disease and far more as “the severe end of a spectrum or continuum of experiences,” according to Dr. McCarthy-Jones—not unlike the replacement of “autism” with “autism spectrum disorder.”

Dr. Jones makes the case that with a spectrum-based understanding of psychiatric disorder, both in cause and in treatment, many more “schizophrenia” patients may actually recover.

FIRST-EVER IN-BODY GENE EDITING DONE ON U.S. MAN WITH RARE CONDITION

Oakland, CA — Editing the very genes of an individual patient or those of donors in a lab and then injecting them into the patient has already been repeatedly done. But for the first time in medical history now, scientists have tried editing a gene while it is inside the patient’s body.

The bold experiment to permanently change a person’s DNA to cure a disease was done mid-November on 44-year-old Brian Madeux.

Mr. Madeux has suffered his entire life with a debilitating rare metabolic disease called Hunter syndrome. Via intravenous (IV) line, he got billions of copies of a corrective gene and a genetic tool to cut his DNA in a precise spot.

According to doctors, the first clues of whether it worked will show up as a month out; the “verdict” will be in within 90 days. And if successful, it could give a major boost to the fledgling field of gene therapy.

EXPERIMENTAL TECHNOLOGY DETECTS 17 DISEASES IN BREATH

Boston, MA — Early tests on the still-developing Na-Nose technology show that the inexpensive system can accurately detect the presence of 17 different diseases, including multiple sclerosis (MS), Parkin-

son’s and several types of cancer to a fairly high level of accuracy.

Na-Nose analyzes the individual’s breath for volatile organic compounds (VOCs), or the body’s natural chemicals. The working theory, so far borne out by science, is that VOCs are modified by



GET A WHIFF OF THIS!: TWO PARTS OF THE PORTABLE HIGH-TECH EXPERIMENTAL EQUIPMENT INVOLVED IN DETECTING ILLNESS BY SIMPLY ANALYZING BREATH

various diseases enough to be detected by “electronic nose” technology.

Scent detection of disease was used in ancient Greek and other civilizations’ medicine; today, unrelated studies have found that dogs and even fruit flies can smell the presence of various cancers and other diseases—even looming epileptic seizures—well before existing biomedical technology can detect them.

STUDY SAYS STENTS DON’T RELIEVE CHEST PAIN

London, England — Countering centuries of U.S. cardiologists’ combined experience, a comparison study in *The Lancet* recently made waves by finding that stents

are ineffective in treating chest pain.

Stents are tiny wire tubes that are surgically implanted to widen heart arteries to treat or prevent heart disease.

The British study first treated all 200 participating high-risk heart patients with six weeks of standard heart medications.

Researchers then split the group in two. One group had real stents inserted. For comparison, the other had the insertion

procedure done but no stent inserted.

The study was double-blind—meaning that neither patients nor researchers knew which patients had or had not gotten stents.

After the real and comparison group procedures, all participating patients were given six weeks of powerful drugs to prevent blood clots.

After six weeks, both groups were tested—with researchers finding no real difference between the actual and comparison groups. Both equally reported less chest pain and better results on treadmill tests.

MAJOR MEDICAL GROUPS REDEFINE HIGH BLOOD PRESSURE

Dallas, TX/Chicago, IL — If your blood pressure is regularly over 130/80, you have high blood pressure.

That’s the latest word from the American Heart Association (AHA), American Stroke Association (ASA), and American Medical Association (AMA), which jointly issued new guidelines mid-November on how they officially define “high blood pressure.”

“While this now means that nearly half of all American adults have high blood pressure, treatment still begins with lifestyle changes,” read a joint statement.

According to the groups, the change is a preventive measure.

It is designed to prompt people who do not yet have dangerously high blood pressure to control and manage their blood pressure before it becomes a serious medical problem.

“Of all the things we can do right now to reduce heart disease, strokes, and other debilitating disease,” says AMA Chief Medical Officer for Prevention Dr. Eduardo Sanchez, “controlling blood pressure is one thing that has tremendous potential to save lives and improve well-being.” ★

Blood Pressure Categories



BLOOD PRESSURE CATEGORY	SYSTOLIC mm Hg (upper number)		DIASTOLIC mm Hg (lower number)
NORMAL	LESS THAN 120	and	LESS THAN 80
ELEVATED	120 – 129	and	LESS THAN 80
HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 1	130 – 139	or	80 – 89
HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 2	140 OR HIGHER	or	90 OR HIGHER
HYPERTENSIVE CRISIS (consult your doctor immediately)	HIGHER THAN 180	and/or	HIGHER THAN 120

THE NEW HIGH BLOOD PRESSURE: WHAT WAS YESTERDAY’S HEALTHY BLOOD PRESSURE IS TODAY’S WARNING AREA, ACCORDING TO THE LATEST AMERICAN HEART ASSOCIATION GUIDELINES. IT’S PERHAPS MORE COMPLICATED, BUT IT MIGHT ALSO SAVE YOUR LIFE.

● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK



Hamaspiik After-School Respite Comes to Williamsburg!

Williamsburg, rejoice! Hamaspiik's ever-popular After-School Respite (ASR) program has now come to Brooklyn! Newly launched under the auspices of the popular community resource Hamaspiik, the school-day afternoon program caters to local kids in public school special-ed programs who

qualify for the OPWDD-funded service.

A full article on the new program will follow in the coming Gazette. ★

For more information, contact Hamaspiik of Kings County ASR Director Ms. Weiss, 718-302-3333, ext. 120.



Working Towards a Mainstream Future, with a Hand from Hamaspiik

Agency's ACCES-VR, SEMP Programs Continue to Integrate People

On Thursday, Nov. 2, Hamaspiik of Rockland County SEMP Coordinator Nissan Sporn and Employment Director Yaakov "Yanki" Grunwald meet with an agency beneficiary and his mother in a small on-site conference room.

It may have been around 7:00 p.m. But for the two hardworking employees, the meeting at a time most convenient for their beneficiaries was just another typical day at Hamaspiik.

The meeting was a semi-annual review of the beneficiary's *Individualized Service Plan* (ISP). Such reviews are regularly mandated by the New York State Office for People With Developmental Disabilities (OPWDD), Hamaspiik's longtime public-sector partner.

Anyone getting any disability-related support from Hamaspiik gets an ISP—a document detailing the individual's personal goals, and how the program in question will get him or her there.

In this case, that support would be Supported Employment (SEMP).

At the meeting, the Hamaspiik contingent—joined by the gentleman's Medicaid Service Coordinator (MSC) from Camp Venture, a respected Rockland County non-profit—reviewed all progress made



ON THE JOB, GETTING OTHERS JOBS: HAMASPIK'S YANKI GRUNWALD AT WORK

in recent months towards the gentleman's goals, and discussed concerns that both the young man and his mother had about the future.

The gentleman has been at a Hamaspiik-arranged job with an ecommerce business for close to two years now—where "he has worked himself up to be a great worker,"

according to Mr. Sporn. "He does a phenomenal job," Sporn reports.

But New York State's disability employment programs—including the OPWDD's Supported Employment (SEMP) program, which Hamaspiik also provides, targeting a more involved demographic—are part of a bigger national picture.

That picture is to bring as many individuals as possible, including all but those with the most limited abilities, into the mainstream.

Towards that end, the federal Medicaid program has been spearheading a nationwide shift away from the sheltered workshops of old, steering an increasing number of people into mainstream jobs—and more importantly, into mainstream acclimation and acceptance.

New York State, like other states, has been moving to close sheltered workshops, and an OPWDD plan has been underway for some time now to transition individuals employed by the workshops into more-integrated mainstream jobs.

And as more individuals with special needs transition into the mainstream, programs like Hamaspiik's SEMP, and others like it, will be there to help them every step of the way. ★

● ► HAMASPIK NEWS

Shnois Chaim Social Day Helps Monsey Seniors

Program Lends an Invigorating Hand from a Guy Named Life

Seniors have always been at the heart of the Jewish community.

Perhaps that's why the Shnois Chaim Social Day/Dining Program, on the premises of Hamaspiik's Monsey office, is located in the heart of the community. And that's perhaps also why the program's point man, Chaim Hirschler, is a guy with heart.

Always with a witty word on his lips, the London native is both affable and professional, ever the picture of decorum and good cheer.

That aristocratic blend comes in most handy when catering to a most discerning clientele.

Under his direction, the Shnois Chaim program, a free-of-charge initiative covered by most senior insurance plans, quite literally serves a growing number of Monsey-area seniors who benefit from its vivifying suite of services.

From morning to mid-afternoon Monday through Thursday, Mr. Hirschler is on the scene and on the job, shuttling about as he tends to the venerable gentlemen—a smile and a good word here, a bowl of fresh hot soup there, and all while respectfully responding to each participant's every question.

The program he runs, Shnois Chaim, translates roughly to "Years of Life."

It reflects the traditional veneration granted seniors in the Jewish community primarily serviced by Hamaspiik. But considering Mr. Hirschler's sense of humor, it's veritably no surprise that a program named Shnois Chaim is run by a right proper British gentleman named Chaim.

LIVING EACH DAY

Arriving shortly after 11:00 a.m. each weekday but Friday, a congregate of community patriarchs—proud grandfathers and even great-grandfathers all—convene in the Hamaspiik Terrace social hall for their morning warm-up.

Presided over by professional trainer Leiby Strauss or yoga/martial arts trainer Mordechai Genuth, the group of older gentlemen engages in gentle stretching and movement exercises that loosen muscle and ligament alike, facilitating the movement and life comfort so critical to that stage of life.

Following the light exercise session—which couples spiritual meditation and movement exercises, relaxing soundtrack and all—attendees relax and socialize over cups of hot coffee, tea and fresh pastries (all of which are dietetic and/or sugar-free, too).

The gentlemen then enjoy their daily Torah study session.

To outsiders, it might be compared to a group of medical students hitting the books together—huddling around that giant library table to dissect a common text, with oral recitations and even robust friendly argument ricocheting around the room.

But to Jewish community insiders, the *shiur*—the age-old "lesson" led by one participant and consumed by the rest—is not just a class on any selected text. It's an age-old community custom linking the generations with a rich and sacred common literary heritage.

The Torah (Bible), the Mishnah (Torah interpretation), the Talmud (Mishnah interpretation), and Halachah (Talmud interpretation and Jewish law)—and their hundreds of printed commentaries—are all typical subjects at your average local synagogue shiur. In that spirit, the shiur held every day at Shnois Chaim—often by a young man named Chaim—makes its participants feel right at home.

With the shiur over at 1:30 p.m., the gentlemen join the Minchah afternoon daily prayer service—like its preceding shiur, provided on site just for them and their faith-based communal acclimation. Several employees from Hamaspiik's offices, all of whom share the gentlemen's religion, join in the services—further underscoring that valued living generational link.

But it is after Minchah that the program's anchor comes to the fore. Steaming vegetable soups, fresh baked fish, and nutritious servings of vegetables, rice or other side dishes are served, with Mr. Hirschler, in gloved hands, personally preparing and setting down each serving.

The gentlemen make their way to seats around bedecked round tables, and the scene could easily be any workplace lunchroom but for the preponderance of patriarchs—a cafeteria of wisdom.

Some thirty minutes later, Shnois Chaim's attendees have left, having been respectfully ushered to a waiting accessibility van and transported back home. Mr. Hirschler can be seen buzzing about the social hall, cleaning up the day's proceedings and preparing the next.

He'll be back at it the following morning.

Under his watch, the program has slowly grown, both in quantity of attendees and quality of programming.

But like so many things in life itself, there's one thing that hasn't changed about Shnois Chaim—the deep and sincere respect exhibited to each program beneficiary by every community member.

And that includes one whose very name means life. ★



CHAIM HIRSCHLER
EXPLAINS A TEXT



TRAINER STRAUSS AND
STUDENT IN ACTION



STUDYING TORAH,
SENIORS FEEL AT HOME



REFRESHMENTS
SPIRITUAL AND PHYSICAL

The Autism Update

News and developments from the world of research and advocacy

TAX BILL THREATENS DISABILITY SERVICES: GROUPS

Washington, D.C. — In recent weeks, over one dozen disability advocacy groups lobbied the U.S. Senate against the now-passed tax bill that may bring up to \$1.5 trillion in tax cuts, *Disability Scoop* reported.

The groups said that slashing such a huge chunk of federal revenue would spell trouble for programs relied on by Americans with disabilities.

“It is a significant threat to people with disabilities and would likely have a lasting impact on funding for critical services on which people with disabilities rely, including Medicaid,” said Alison Barkoff, director of advocacy for the Center for Public Representation.

Other groups opposing the bill include the American Association of People with Disabilities, the National Disability Rights Network and the National Council on Independent Living.

AT DENVER BEER BAR, AUTISM WORKFORCE INTEGRATION BREWING

Denver, CO — Brewability Lab looks like any other artisanal beer brewery and bar—until you meet some of its employees.

An article in the *Denver Post* recently highlighted this lovely example of progressive mainstreaming and integration of individuals with disabilities, particularly those with autism.

Its founder, perhaps not surprisingly, comes from a disability background, knowing from first-hand professional experience the lives people with autism lead—and what would (and wouldn't) work for a workplace setting.

That's why Tiffany Fixter color-coded her brewery's three in-house beers; to allow

workers with autism who can't read to take customers' orders.

The former director of a developmental disabilities day program, Fixter created Brewability to both create jobs for people with autism—and, equally significantly, to give them a social setting in which to begin coming out of their shells. People with autism frequently have difficulty making eye contact, speaking, or otherwise socially connecting with other people.

According to the *Post*'s report, though, one employee grew from only “a few words at a time when he started working at Brewability, and his shifts often ended after ten minutes” to now working ten hours a week as a “beertender,” during which he talks with co-workers and customers.

“I wanted a community space. I wanted [Brewability Lab's employees] to be social in their active community, and it's working,” Fixter told the *Post*. “Every single one of them is significantly better than the day they started.”

It's not the first time beer and disabilities have mixed, though. In June 2016, a new California craft brewery dropped its original name of “Special Ed's” after fierce online backlash.

COUNTRY'S FIRST LIVE ONLINE ABA PROVIDER LAUNCHED

Houston, TX — Applied behavior analysis (ABA) is a cutting-edge therapy for children with autism. It is provided by Hamaspiik and many other agencies across New York and the country.

But you have to bring your child to an ABA provider, or a provider to your child, to get it.

Now, however, Texas start-up CSERV is bringing live ABA services into private homes in underserved areas via Internet connection—the first U.S. company to



provide telehealth services exclusively for autism.

Applied behavioral analysis focuses on changing behaviors and may require many hours of specialized therapy. Time and distance can be obstacles. But with CSERV, therapists and parents schedule regular appointments over a computer. During appointments, therapists watch interactions and provide feedback.

SOCIAL STATUS MAY INFLUENCE AUTISM DIAGNOSIS: STUDY

Madison, WI — New research at the University of Wisconsin-Madison finds that the likelihood of getting diagnosed with autism remains largely tied to socioeconomic status, even as autism prevalence has increased.

According to findings published recently in the *American Journal of Public Health*, kids from lower income neighborhoods are less likely than those from wealthier backgrounds to be diagnosed with autism.

The study reviewed data on 1.3 million 8-year-olds in 11 states that was collected between 2002 and 2010 through the CDC's Autism and Developmental Disabilities Monitoring Network.

Researchers cross-referenced this information with data from the U.S. Census Bureau on poverty, median household income and educational attainment, among other factors.

The findings indicated that lower socioeconomic status was consistently tied to reduced odds for autism, no matter what metric was used. That finding true even as prevalence of the developmental disorder more than doubled during the eight-year

period studied.

Researchers also noted that similar studies in Sweden and France, which both have universal health care, found no association between the odds of autism and socioeconomic background.

ARTICLE CALLS FOR UNIVERSAL TWO-YEAR-OLD AUTISM SCREENINGS

New York, NY — Writing for *Slate*, journalist Zoë Kirsch makes the case for universally screening all children for autism at age two.

The sooner autism is identified, the sooner a child can start receiving services that might significantly shrink developmental gaps later in life, Kirsch points out.

Under the federal Individuals with Disabilities Education Act (IDEA) of 1990, states are required to locate and evaluate all kids with disabilities, including those as young as infants.

In 2007, the American Academy of Pediatrics (AAP) recommended that doctors screen all toddlers for autism at their 18- and 24-month visits, when indicators start to stabilize.

Since then, the average age of diagnosis in some communities has dropped by roughly a year and a half, according to a 2016 study by researchers at Albert Einstein College of Medicine.

“We know that age two serves as a critical year for children's intellectual and social development. We can't rely on all parents to be strong and knowledgeable advocates for their children,” Kirsch concludes. “We need to fix the system.” ★



INTEGRATION ON TAP: A 'BEERTENDER' SERVES UP BEER AT BREWABILITY. THE COLORADO BREWERY ACCOMMODATES EMPLOYEES WITH AUTISM

● ► HAMASPIK NEWS

Giving to the Care Givers

Inspiring Shabbos Retreat for Hundreds of Family Care Providers Hosted by NYSHA

Tastefully blending spiritual and recreational into

Even the most superhuman parents need the occasional break.

Providing them with that break—and then some—was the idea behind the spectacularly successful recent Shabbos Retreat for Family Care providers hosted by the New York State Hamaspiik Association (NYSHA), Hamaspiik's parent organization and agency support body.

With approximately 150 individuals supported throughout the Hudson Valley and New York metro region, the longtime Family Care program sponsored by NYSHA member agencies is the largest of its kind in the state.

For over two decades now, Hamaspiik's Family Care providers have been ordinary parents making the extraordinary commitment to take in children with intellectual or other disabilities.

Under the auspices of the New York State Office for People With Developmental Disabilities (OPWDD), Hamaspiik Family Care providers have opened their homes and hearts.

But even the hardest heart needs to rest and recharge from time to time—and from 1:00 p.m. Nov. 3 through Nov. 5 noon, Family Care parents recharged like on no other Shabbos weekend.

"This past week, every provider I

visited couldn't stop raving and thanking Hamaspiik for the outstanding Shabbos they just had!" reports Hamaspiik of Rockland County Family Care Nurse Mrs. Lolly Hutman, R.N.

Indeed, says the veteran nurse, one such guest summed it up for all of them: "This Shabbos gave us chizuk [inspiration—ed.] to go on."

RELAXATION AND REINVIGORATION

Tastefully blending spiritual and recreational into one seamless continuum, the retreat was replete with relaxation and reinvigoration.

Guests checking in at the Crowne Plaza Hotel Friday afternoon were instantly transported to another world—a universe that for the next 48 hours was free of any angst or pressure.

The Shabbos was perfectly therapeutic for the devoted mothers taking that rare weekend away from their precious bundles—giving themselves some much-needed self-care.

By the time guests were in their Shabbos finery and candles lit at 5:29 p.m., the hotel's main lobby wasn't the only thing daubed with a special glow.

With the restful Sabbath atmosphere now filling the air, retreat chairman Rabbi Hershel Friedman introduced the retreat's

first featured speaker, Rabbi Yaakov Shlomo Meisels.

Rabbi Meisels, a world-renowned speaker in the Chasidic world, formally opened the weekend with a few well-chosen words of inspiration.

More inspiration for hardworking Family Care mothers followed with a 6:15 p.m. "seminar" speech by Mrs. Rivkah Feferkorn, a popular inspirational speaker.

Both sessions left listeners uplifted, their supportive messages internalized.

At 7:30 p.m., husbands and wives sat down on either side of the customary mechtza partition for a fully catered Friday-night Shabbos dinner.

Mealtimes are perhaps the best example of other-centered service and care, many parents of kids with disabilities will tell you—what with picky preferences and limited diets often the norm.

For Hamaspiik's guests, then, it was all the more a feast of relief to be quite literally catered to—for once not doing the catering.

Wine, challah, fish, salad, soup, poultry and dessert were laid out before the Family Care providers, making them feel like the royalty that they are.

Presiding over the meal was the first of several guests, Rabbi Yechezkel Weiss, a noted community teen educator and academic authority, shared a rousing message.

Further words of inspiration were later heard at two informal post-dinner events. Menfolk assembled in the hotel's outdoor gazebo for a free-flowing farbrengen exchange with personality Yosef Chaim Rotensteich, who had the gentlemen laughing throughout with his wisdom-laced witticisms.

The womenfolk simultaneously and separately took in a delightful and inspirational Oneg Shabbos session in the International East ballroom, led by Mrs. Devora Kuperman.

Guests went to bed brimming with food for body and mind, heart and soul alike.

AN UPLIFTING DAY

From beginning to end, Shabbos day was filled with inspiration and reinvigoration.

Morning tea and coffee was followed with uplifting Shachris and Musaf prayer services led by Cantor Chaim Dov Ungar and accompanying choir.

A major retreat highlight came next, with the mothers and fathers separately gathering for heartfelt and honest discussions over "Kiddush" refreshments on all things special-needs parenting.

Those candid group conversations have long been a staple of Hamaspiik Shabbos retreats—indeed, their most popular draw for many guests.

Guests Israel Fuchs and Levi Appel



GIVING VOICE TO THE HEART: BACKED BY KEYBOARDIST AND MEN'S CHOIR, A CHILD SOLOIST ENTERTAINS AND UPLIFTS THE CROWD



LIGHT REFRESHMENTS: RESPECTIVELY FOOD FOR SOUL AND BODY, THE PRE-SHABBOS CANDLES AND PASTRIES SET THE ATMOSPHERE



► HAMASPIK NEWS

shared what was in their hearts with their fellow fathers, while Mrs. Fuchs and Mrs. Appel did the same for their soul sisters.

Both groups spent a good amount of time together sharing the collective heartbreak and hope of caring for children with intellectual or developmental disability

It was those experiences that formed the crux of the weekend event, as the guests identifiws with one another, laughed together and yes, even wept together.

All came away with a year's worth of wisdom and wit.

And as if that wasn't enough, guests shortly reconvened in the dining room for lunch—during which special guest Rabbi Yechiel Michel Feferkorn, regaled them with a soaring message of faith.

Guests then had a full afternoon to rest, relax and otherwise digest everything they'd taken in so far.

THE SKY'S THE LIMIT

Another Oneg Shabbos for the womenfolk was held, this one towards evening.

After the 5:30 p.m. Mincha prayers, the crowd gathered for a wonderful "Shalosh Seudos" third Shabbos meal—at which Rabbi Meisels spoke again, and well after Shabbos ended.

Rabbi Meisels' message was not lost on the crowd, with its climactic words uplifting enough to repeatedly bring the crowd to its feet.

But as a high a note as Shabbos ended on, it still only went higher from there. Following the 7:15 p.m. Havdalah Shabbos-closing ceremony with Rabbi Meisels, a live band took the stage in the hotel's airy indoor courtyard.

Any guests not already in the clouds

were quickly rocketed sky-high by the electrifying music, the men joining hands and hearts to dance with abandon for the joy of a life's mission renewed.

At the same time, over the traditional Melaveh Malka post-Shabbos meal, womenfolk enjoyed an equally therapeutic seminar on chiropractic and general health. The session was presided over by chiropractor Dr. Howard I. Werfel.

Additional presentations were made by Rabbi Aaron Eisenberg and Mr. Rotenstein.

A refreshing low-key contrast was simultaneously led by artist Hitzel, who put on an interactive and most hands-on painting workshop for artistically-inclined guests.

By the time guests retired for the night, some in the wee hours of the morning, the Sabbath "Day of Rest" had taken on an entirely new meaning.

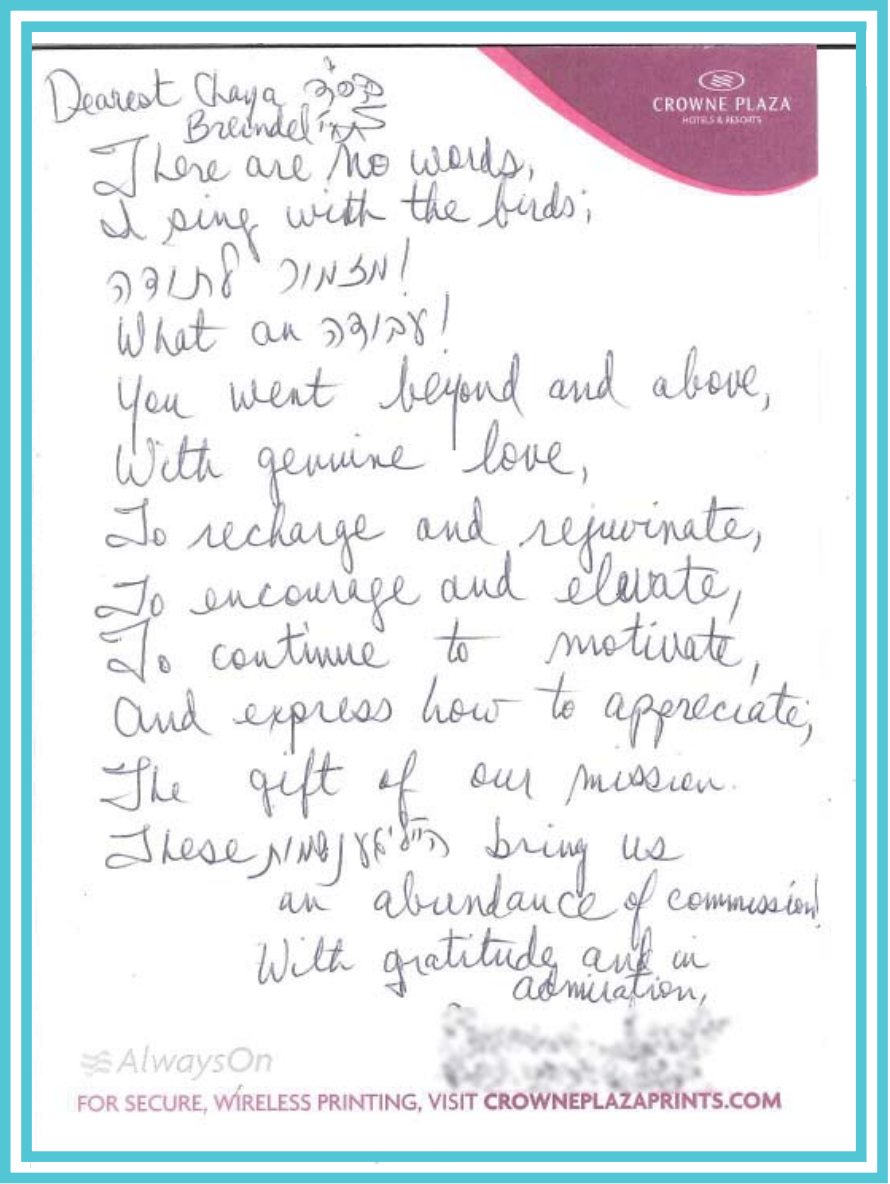
BRINGING CHANGE HOME

The Shachris morning services began at 8:30 a.m. Breakfast was served from 9:00 a.m. to 12:00 p.m. to accommodate late risers. Checkout commenced at noon, followed by buses back home.

But the people boarding those buses were not the same who had boarded 48 hours earlier.

One such guest, a Family Care father, was attending his first Hamaspiik retreat. The gentleman and his wife have been providing Family Care for well over a decade-and-a-half—lending them a good bit of authority on the field.

But the game-changing inspiration and message of the retreat changed his perspective on everything he already knew. Said he: "After 16 years, only now am I becoming a Family Care provider." ★



WORDS FROM THE HEART: A FORMAL ARTICLE DESCRIBING HAMASPIK'S FAMILY CARE WEEKEND SUPPORT EVENT IS ONE THING. GUESTS' HEARTFELT THANK-YOU NOTES ON WHAT IT MEANT TO THEM ARE QUITE ANOTHER. THIS ONE TO HAMASPIK SPECIAL EVENTS COORDINATOR MRS. CHAYA BREINDEL (BRENDA) KATINA, PENNED FROM THE HEART IMMEDIATELY AFTER THE CLOSE OF SHABBOS—AND, INDICATING ITS GENUINE SPONTANEITY, ON HOTEL STATIONARY, TO BOOT—SPEAKS FOR EVERY APPRECIATIVE PARENT.



SHARING MESSAGES: DR. WERFEL CONVEYS A MESSAGE OF PHYSICAL HEALTH, WHILE GUEST AARON EISENBERG SPEAKS ON SPIRITUAL HEALTH



BEARERS OF LIGHT: SURROUNDED BY A PROFESSIONAL CHORAL GROUP, RABBI MEISELS CONDUCTS THE POST-SHABBOS HAVDALAH CEREMONY

Public Health And Policy News

Eight states have already asked for permission to link Medicaid eligibility with employment or community service for people who have no disability. Policy experts worry about work requirements, though, as most people on Medicaid already work and others are caring for relatives.

Verma also said that state Medicaid programs under so-called 1115 and 1915 Waivers would be streamlined by reducing the paperwork involved. Several current and planned New York State Medicaid programs involve either waiver.

REPORT: ONLY TWO STATES DON'T COVER LIVE VIDEO MEDICAID VISITS

Washington, D.C. — According to a November report from the Center for Connected Health Policy (CCHP), Medicaid programs in 48 states and the District of Columbia reimburse for some form of live video encounters between patients and medical professionals. The two states that don't have written reimbursement policies for telehealth are Massachusetts and Rhode Island.

FEDERAL MEDICAID CHIEF: MORE FLEXIBILITY FOR STATES

Washington, D.C. — The federal Centers for Medicare and Medicaid Services (CMS) will be granting state Medicaid and Medicare programs considerably more flexibility in coming years, according to CMS Administrator Seema Verma.

Speaking Nov. 7 at the fall conference of the National Association of Medicaid Directors (NAMd), Verma announced her vision for Medicaid. It includes new policies to encourage states to innovate for improved patient outcomes, something that New York's Medicaid Redesign Team (MRT) has been doing for several years now.

Significantly, Verma said the CMS may approve work requirements for Medicaid.

FDA WIDENS GENERIC DRUG COMPETITION EFFORTS

Washington, D.C. — On Nov. 9, the FDA announced plans to speed the availability of generic drugs after first-to-file rights expire.

According to FDA Commissioner Scott Gottlieb, the initiative seeks to clear the backlog of applications awaiting review and approval.

"Soon after the 180-day exclusivity period lapses, consumers can have the benefit of brisk competition from multiple other generic entrants," Gottlieb said in a statement. "This can improve affordability and access to important drugs."

The statement comes on the heels of other business-friendly federal announcements.



FIRST LINK IN THE CHAIN: THE WORLD'S FIRST IKEA STORE (PICTURED HERE) IS LOCATED IN ÄLMHULT, SWEDEN. IN JUNE 2016, IT BECAME THE IKEA MUSEUM.

SHARPLESS SWORN IN AS NCI DIRECTOR

Washington, D.C. — Norman E. "Ned" Sharpless, M.D., took the oath of office in late October, becoming the 15th director of the National Cancer Institute (NCI), a prominent division of the National Institutes of Health (NIH). He succeeds cancer treatment pioneer Harold E. Varmus, M.D., who stepped down as director in March 2015. Douglas R. Lowy, M.D., had been NCI's acting director since April 2015.

HHS NOMINEE ALEX AZAR SLAMS HIGH DRUG PRICES IN 1ST TESTIMONY

Washington, D.C. — Former pharmaceutical executive Alex Azar, recently nominated by the White House for U.S. Secretary of Health and Human Services (HHS), came out swinging against too-high drug prices in his first Congressional testimony Nov. 28.

"The president has made this clear, so have I," Azar said.

The first two questions at Azar's confirmation hearing before the Senate's Health, Education, Labor, and Pensions (HELP) Committee centered on his tenure at pharma giant Eli Lilly and his plans to bring down prices. Azar defended his time at Lilly, saying it would give him needed insight to

address the high prices.

"With my extensive knowledge of how insurance, manufacturers, pharmacy, and government programs work together, I believe I can bring the skills and the experiences to the table that can help us address these issues while still encouraging discovery so Americans have access to high-quality care," he said.

"I believe I can hit the ground running to work with you and others to identify solutions here," he added.

Upon the Nov. 14 official announcement of his nomination, most industry trade groups expressed pleasure at Azar's public- and private sector experience, plus his understanding of the inner workings of the federal agency. Azar had been an HHS Deputy Secretary under George W. Bush.

IKEA RELAUNCHES DRESSER RECALL AFTER 8TH INCIDENT

Stockholm, Sweden — International home furniture giant Ikea relaunched a global recall of 29 million chests and dressers after an 8th serious incident involving a child was reported.

The recall campaign for several types of chests and dressers was first announced in June 2016 after several of them tipped over after not being properly anchored to walls.

In cooperation with Ikea North America, the U.S. Consumer Product Safety Commission (CPSC) has announced a repair program that includes a free wall anchoring kit for Ikea's Malm 3- and 4-drawer chests and two styles of Malm 6-drawer chests, and other chests and dressers.

FDA APPROVALS

● Nov. 15: Drug Mepsevii, by UltraGenyx, for the treatment of Sly syndrome, a rare pediatric condition with only 150 known patients worldwide.

● Nov. 16: Drug Hemlibra, by Genentech, to prevent bleeding in hemophilia A patients who also have Factor VIII inhibitors. ★



WINDS OF CHANGE FROM THE TOP DOWN: THE BALTIMORE, MARYLAND-BASED HEADQUARTERS COMPLEX OF THE U.S. CENTERS FOR MEDICARE & MEDICAID SERVICES (CMS)

Status Report

Happening In Hospitals Today



TRIAGE PILOT PROGRAM SLASHES OVER TWO HOURS FROM ER WAITS

Chicago, IL — Wait times for critically ill patients at a Chicago hospital emergency room were cut by over two hours in an experimental new program called “Dr. Admit.”

The new approach to triage, or categorizing and prioritizing patients and their treatment, simultaneously coordinated care with multiple departments. Partnering and coordinating multiple service lines was found to lead to the reduction of patient admission decision times. It also got the hospital’s most ill patient population to the care they needed faster.

Patients in the pilot program were admitted within 192 minutes after arrival to the ER compared to the other patients who were admitted 329 minutes after arrival.

Results of the pilot program were outlined in a recent study in the *Annals of Emergency Medicine*.

FDA CHIEF, INDUSTRY GROUP WARN ON HOSPITAL IV SOLUTION SHORTAGES

Close to ten percent of all pharmaceuticals consumed by Americans are manufactured in Puerto Rico—where the pharma-

ceutical industry constitutes over 30 percent of the territory’s gross domestic product.

But in the aftermath of October’s devastating Hurricane Maria, Puerto Rico is still struggling to recover—and with its infrastructure still not fully back, hospitals across the U.S. may soon be facing a shortage of intravenous (IV) solution.

IVs are quite literally lifelines for the thousands of patients given them daily, and with one of the world’s largest manufacturers of bags of IV solutions—Baxter—having a damaged major plant in Puerto Rico, both FDA Commissioner Scott Gottlieb and the American Hospital Association (AHA) have expressed concerns about a looming possible shortage and even rationing.

Commissioner Gottlieb testified as much before the House Energy & Commerce Oversight and Investigations Subcommittee in late October. On Nov. 9, for its part, the AHA warned in a letter to that same committee that patient care may be disrupted if IV solution shortages caused by Hurricane Maria’s impact on Puerto Rico are not resolved.

Despite federal actions to address the shortages (the FDA has allowed Baxter to import IV bags from plants in several other countries), only ten to 15 percent of hospital demand might be met, the group said.



POSSIBLE SHORTAGE LOOMING: INTRAVENOUS (IV) DRIP BAG SOLUTION, A CRITICAL PART OF MODERN HOSPITAL-BASED MEDICINE, MAY BE FACING LOW AVAILABILITY. MUCH OF THAT SHORTAGE IS DUE TO HURRICANE DEVASTATION IN PUERTO RICO.



DECEIVING LOOKS: PLENTY OF PEOPLE WOULD LOVE TO WORK IN SUCH SETTINGS, BUT WEST VIRGINIA UNIVERSITY (CAMPUS SHOWN HERE), LIKE SEVERAL HOSPITAL SYSTEMS ACROSS THE COUNTRY, HAS BEEN RESORTING TO EVER-UNUSUAL PERKS AND FREEBIES TO ENTICE NURSES TO COME WORK FOR THEM AMIDST A SHORTAGE

ANTHEM JOINS INDUSTRY SHIFT TO NON-HOSPITAL SCANS

Indianapolis, IN — Major health insurer Anthem recently announced that it will no longer pay for MRIs and CT scans performed at a hospital on an outpatient basis.

The decision reflects an industry movement that’s gaining speed, with commercial and government payers increasingly limiting reimbursements for services that can be performed outside a hospital.

As a result, with payers—now including Anthem, which insures customers in over a dozen states—looking to force more services to lower-cost settings, hospitals have to react to losing some of their main profit sources. Policies restricting the services hospitals count on for steady cash flow could be a major disruption.

HOSPITALS FIGHT U.S. NURSE SHORTAGE WITH FREE DEGREES, FREE RENT, OTHER INCENTIVES

Morgantown, WV — To come work at West Virginia University (WVU) Medicine

in late 2015 in this picturesque Appalachian town, out-of-town RNs were offered no-cost digs at the health system’s 44-bed staff residence.

That’s increasingly the picture across the country, as hospitals come up with ever-creative incentives to combat the growing national dearth of nurses—and the resulting staffing shortage.

For example, signing bonuses—long four-figure ones—are now sometimes upwards of five.

A Texas health system offers free nursing degrees to existing staff and volunteers (as long as they sign on for at least two years). A Missouri health system offers a loan forgiveness program. A Kentucky hospital even gave newly-hired nurses a chance

to win a new luxury car.

The crunch isn’t just due to a shortage of registered nurses (RNs), but also due to turnover. Traditional hospital nurses are flocking to outpatient work because of industry changes—at the same time leaving those hospitals with an acute and sometimes desperate need for RNs.

As a result, some hospitals have cut back on available beds or even closed full units. But others, resorting to unconventional but effective incentives, overcame their staffing crunches.

Memo to tomorrow’s workforce: Now’s the best time to get into nursing.

The American Nursing Association (ANA) predicts that by 2022, the U.S. may need over one million new nurses to both care for a growing number of older Americans, and to replace a generation of career nurses slated to retire in coming years.

What’s more, nursing schools reject tens of thousands of qualified applicants each year from baccalaureate and graduate nursing programs—nursing as they are shortage of teachers of their own. ★

In the Know

ALL ABOUT... PNEUMONIA

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

INTRODUCTION

Pneumonia is an infection that inflames the air sacs in one or both lungs. The air sacs may fill with fluid or pus (purulent material), causing cough with phlegm or pus, fever, chills, and difficulty breathing. A variety of organisms, including bacteria, viruses and fungi, can cause pneumonia.

Pneumonia can range in seriousness from mild to life-threatening. It is most serious for infants and young children, people older than age 65, and people with health problems or weakened immune systems.

SYMPTOMS

The signs and symptoms of pneumonia vary from mild to severe, depending on factors such as the type of germ causing the infection, and your age and overall health. Mild signs and symptoms often are similar to those of a cold or flu, but they last longer.

Signs and symptoms of pneumonia may include:

- Chest pain when you breathe or cough
- Confusion or changes in mental awareness (in adults age 65 and older)
- Cough, which may produce phlegm
- Fatigue
- Fever, sweating and shaking chills
- Lower than normal body temperature (in adults older than age 65 and people with weak immune systems)
- Nausea, vomiting or diarrhea
- Shortness of breath

When to see a doctor

See your doctor if you have difficulty breathing, chest pain, persistent fever of 102°F or higher, or persistent cough, especially if you're coughing up pus. It's especially important that people in these high-risk groups see a doctor:

- Adults older than age 65
- Children younger than age two with signs and symptoms
- People with an underlying health condition or weakened immune system
- People receiving chemotherapy or taking medication that suppresses the immune system

For some older adults and people with heart failure or chronic lung problems, pneumonia can quickly become a life-threatening condition.

If you or a loved one suspects pneumonia, by all means, err on the side of caution. It's far better to be safe than sorry.

CAUSES

Many germs can cause pneumonia. The most common are bacteria and viruses in the air we breathe. Your body usually prevents these germs from infecting your lungs. But sometimes these germs can overpower your immune system, even if your health is generally good.

Pneumonia is classified according to the types of germs that cause it and where you got the infection.

Community-acquired pneumonia

Community-acquired pneumonia is the most common type of pneumonia. It occurs outside of hospitals or other health care facilities. It may be caused by:

Bacteria. The most common cause of bacterial pneumonia in the U.S. is *Streptococcus*



pneumoniae. This type of pneumonia can occur on its own or after you've had a cold or the flu. It may affect one part (lobe) of the lung, a condition called lobar pneumonia. Bacteria-like organisms. *Mycoplasma pneumoniae* also can cause pneumonia. It typically produces milder symptoms than do other types of pneumonia. Walking pneumonia is an informal name given to this type of pneumonia, which typically isn't severe enough to require bed rest.

Fungi. This type of pneumonia is most common in people with chronic health problems or weakened immune systems, and in people who have inhaled large doses of the organisms. The fungi that cause it can be found in soil or bird droppings and vary depending upon geographic location.

Viruses. Some of the viruses that cause colds and the flu can cause pneumonia. Viruses are the most common cause of pneumonia in children younger than five years. Viral pneumonia is usually mild. But in some cases it can become very serious.

Hospital-acquired pneumonia

Some people catch pneumonia during a hospital stay for another illness. Hospital-acquired pneumonia can be serious because the bacteria causing it may be more resistant to antibiotics and because the people who get it are already sick. People who are on breathing machines (ventilators), often used

in intensive care units, are at higher risk of this type of pneumonia.

Health care-acquired pneumonia

Health care-acquired pneumonia is a bacterial infection that occurs in people who live in long-term care facilities or who receive care in outpatient clinics, including kidney dialysis centers. Like hospital-acquired pneumonia, health care-acquired pneumonia can be caused by bacteria that are more resistant to antibiotics.

Aspiration pneumonia

Aspiration pneumonia occurs when you inhale food, drink, vomit or saliva into your lungs. Aspiration is more likely if something disturbs your normal gag reflex, such as a brain injury or swallowing problem, or excessive use of alcohol or drugs.

Risk factors

Pneumonia can affect anyone. But the two age groups at highest risk are:

- Children who are 2 years old or younger
- People who are age 65 or older

Other risk factors include:

- Being hospitalized. You're at greater risk of pneumonia if

you're in a hospital intensive care unit, especially if you're on a machine that helps you breathe (a ventilator).

- Chronic disease. You're more likely to get pneumonia if you have asthma, chronic obstructive pulmonary disease (COPD) or heart disease.

- Smoking. Smoking damages your body's natural defenses against the bacteria and viruses that cause pneumonia.

“MANY GERMS CAN CAUSE PNEUMONIA. BUT SOMETIMES THESE GERMS CAN OVERPOWER YOUR IMMUNE SYSTEM, EVEN IF YOUR HEALTH IS GENERALLY GOOD.”

- Weakened or suppressed immune system. People who have had an organ transplant, or who receive chemotherapy or long-term steroids are at risk.

“ TO PROTECT YOURSELF AGAINST RESPIRATORY INFECTIONS THAT SOMETIMES LEAD TO PNEUMONIA, WASH YOUR HANDS REGULARLY OR USE HAND SANITIZER.”



Complications

Even with treatment, some people with pneumonia, especially those in high-risk groups, may experience complications, including:

- Bacteria in the bloodstream (bacteremia). Bacteria that enter the bloodstream from your lungs can spread the infection to other organs, potentially causing organ failure.
- Difficulty breathing. If your pneumonia is severe or you have chronic underlying lung diseases, you may have trouble breathing in enough oxygen. You may need to be hospitalized and use a breathing machine (ventilator) while your lung heals.
- Fluid accumulation around the lungs (pleural effusion). Pneumonia may cause fluid to build up in the thin space between layers of tissue that line the lungs and chest cavity (pleura). If the fluid becomes infected, you may need to have it drained through a chest tube or removed with surgery.
- Lung abscess. An abscess occurs if pus forms in a cavity in the lung. An abscess is usually treated with antibiotics. Sometimes, surgery or drainage with a long needle or tube placed into the abscess is needed to remove the pus.

DIAGNOSIS

Your doctor will start by asking about your medical history and doing a physical exam, including listening to your lungs with a stethoscope to check for abnormal bubbling or crackling sounds that suggest pneumonia. If pneumonia is suspected, your doctor may recommend the following tests:

- Blood tests. Blood tests are used to confirm an infection and to try to identify the type of organism causing the infection. However, precise identification isn't always possible.
- Chest X-ray. This helps your doctor diagnose pneumonia and determine the extent and location of the infection. However, it can't tell your doctor what kind of germ is causing the pneumonia.
- Pulse oximetry. This measures the oxygen level in your blood. Pneumonia can prevent your lungs from moving enough oxygen into your bloodstream.
- Sputum test. A sample of fluid from your lungs (sputum) is taken after a deep cough and analyzed to help pinpoint the cause of

the infection.

Your doctor might order additional tests if you're older than age 65, are in the hospital, or have serious symptoms or health conditions. These may include:

- CT scan. If your pneumonia isn't clearing as quickly as expected, your doctor may recommend a chest CT scan to obtain a more detailed image of your lungs.
- Pleural fluid culture. A fluid sample is taken by putting a needle between your ribs from the pleural area and analyzed to help determine the type of infection.

TREATMENT

Treatment for pneumonia involves curing the infection and preventing complications. People who have community-acquired pneumonia usually can be treated at home with medication. Although most symptoms ease in a few days or weeks, the feeling of tiredness can persist for a month or more. Specific treatments depend on the type and

helps you rest.

- Fever reducers/pain relievers. You may take these as needed for fever and discomfort. These include drugs such as aspirin, ibuprofen (Advil, Motrin IB, others) and acetaminophen (Tylenol, others).

Hospitalization

You may need to be hospitalized if:

- You are older than age 65
- You are confused about time, people or places
- Your kidney function has declined
- Your systolic blood pressure is below 90 millimeters of mercury (mm Hg) or your diastolic blood pressure is 60 mm Hg or above
- Your breathing is rapid (30 breaths or more a minute)
- You need breathing assistance
- Your temperature is below normal
- Your heart rate is below 50 or above 100

You may be admitted to the intensive care unit if you need to be placed on a breathing

your doctor if you're not sure.

Stay hydrated. Drink plenty of fluids, especially water, to help loosen mucus in your lungs.

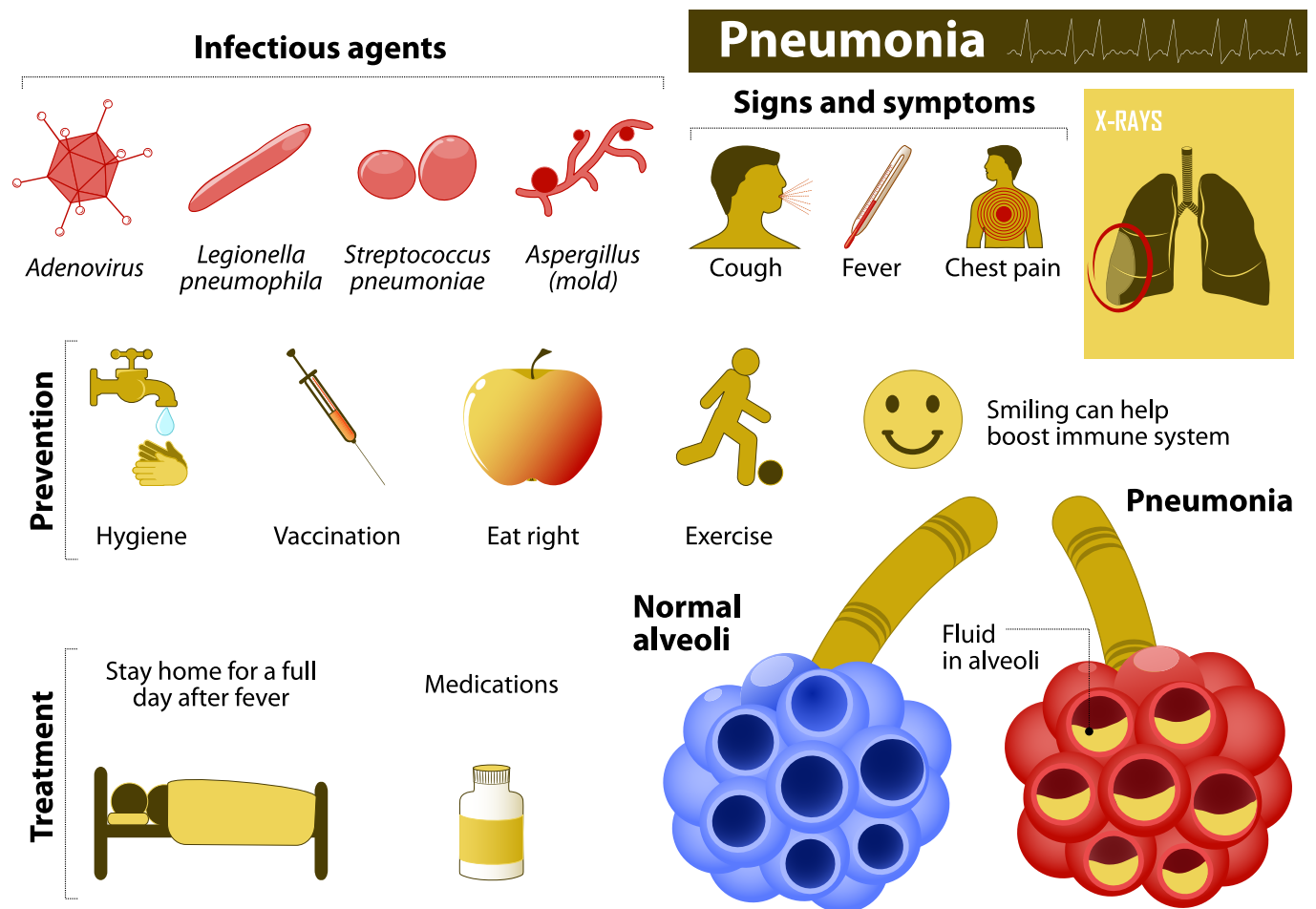
Take your medicine as prescribed. Take the entire course of any medications your doctor prescribed for you. If you stop taking medication too soon, your lungs may continue to harbor bacteria that can multiply and cause your pneumonia to recur.

PREVENTION

To help prevent pneumonia:

Get vaccinated. Vaccines are available to prevent some types of pneumonia and the flu. Talk with your doctor about getting these shots. The vaccination guidelines have changed over time so make sure to review your vaccination status with your doctor even if you recall previously receiving a pneumonia vaccine.

Make sure children get vaccinated. Doctors recommend a different pneumonia vaccine



severity of your pneumonia, your age and your overall health. The options include:

- Antibiotics. These medicines are used to treat bacterial pneumonia. It may take time to identify the type of bacteria causing your pneumonia and to choose the best antibiotic to treat it. If your symptoms don't improve, your doctor may recommend a different antibiotic.
- Cough medicine. This medicine may be used to calm your cough so that you can rest. Because coughing helps loosen and move fluid from your lungs, it's a good idea not to eliminate your cough completely. In addition, you should know that very few studies have looked at whether over-the-counter cough medicines lessen coughing caused by pneumonia. If you want to try a cough suppressant, use the lowest dose that

machine (ventilator) or if your symptoms are severe.

Children may be hospitalized if:

- They are younger than age two months
- They are lethargic or excessively sleepy
- They have trouble breathing
- They have low blood oxygen levels
- They appear dehydrated

Lifestyle and home remedies

These tips can help you recover more quickly and decrease your risk of complications: Get plenty of rest. Don't go back to school or work until after your temperature returns to normal and you stop coughing up mucus. Even when you start to feel better, be careful not to overdo it. Because pneumonia can recur, it's better not to jump back into your routine until you are fully recovered. Ask

for children younger than age two and for children ages two to five years who are at particular risk of pneumococcal disease. Children who attend a group child care center should also get the vaccine. Doctors also recommend flu shots for children older than six months.

Practice good hygiene. To protect yourself against respiratory infections that sometimes lead to pneumonia, wash your hands regularly or use an alcohol-based hand sanitizer.

Don't smoke. Smoking damages your lungs' natural defenses against respiratory infections.

Keep your immune system strong. Get enough sleep, exercise regularly and eat a healthy diet.

Dry off well if exposed to water.



PUBLIC HEALTH NEWS

Hamaspik Inaugurates Expansion of Borough Park Headquarters

Public Servants, Community Members Attend Gala Ribbon Cutting of New Wing

On Monday, March 27, the first sledgehammer met its target as construction began.

On Monday, November 27, blades of a ceremonial oversized shears met their ribbon target as the first day of operations officially began.

It was the gala grand opening ceremony for Hamaspik's newly-expanded community complex in the heart of Borough Park. Attended by leading politicians and friends of Hamaspik, the event marked the inauguration of some 6,000 new square feet of space.

The event began at 12:00 p.m. with a light but elegant lunch. An informative, exciting video about all things Hamaspik was shown while guests dined.

Hamaspik Director of Public Relations Aron Wieder, serving as emcee, then formally ushered in the event by inviting the attending VIP guests to participate in its primary highlight: the ribbon-cutting ceremony.

Wielding a giant pair of scissors that Hamaspik keeps for just such occasions (and it has fortunately had many!), the group of elected officials joined hands to cut a ribbon strung across the entrance to the brand-new interior section.

Hamaspik leaders from across the

agency were then honored with the placing of individual mezuzos on the new offices' many doorways.

Hamaspik founder and New York State Hamaspik Association (NYSHA) Executive Director Meyer Wertheimer was then introduced by Mr. Wieder to share a few words.

In his brief comments, Mr. Wertheimer thanked by name the public servants present for their involvement.

He also singled out Hamaspik's joint driving force in quite literally raising the roof: Hamaspik of Kings County Executive Director Joel Freund, Director of Development Naftali Tessler and Maintenance Manager Chaim Klein.

Hamaspik of Kings County's leadership then presented Mr. Wertheimer with a token of appreciation—a plaque bearing a large photo of the expanded new building.

Mr. Wieder then successively introduced New York City Public Advocate Letitia "Tish" James, State Senator Simcha Felder, New York City Councilmember Brad Lander, and New York City Councilmember-elect Kalman Yeger. Each of those public servants, instrumental advocates of Hamaspik's mission all, shared words of support and encouragement.

Director of Development Tessler

presented a plaque to Yehudah ("Yiddi") Nussenzweig, CEO and owner of New York Major Construction, for being on time and on budget.

An emotionally powerful speech was next delivered by Yonah, a self-described "client of HamaspikCare" (and "avid reader of the Gazette")—driving home the very real caring at the heart of everything that Hamaspik does.

The crowd next heard from our very Mordechai Wolhendler, HamaspikCare's New York City Regional Director, who shared a few words of thanks to agency leadership and vision for HamaspikCare's enhanced mission across Brooklyn and beyond in its new and improved workspaces.

A brief speech by Hamaspik of Kings County leader Joel Freund followed.

Deftly added to the roof and rear of the existing glass-and-steel edifice, the expansion makes room for the agency's hardworking and growing corps of professionals.

But given Hamaspik's track record of constantly adding new supports and services to meet an ever-growing array of communal needs, it's only a matter of time before Hamaspik of Kings County just may need to add yet another floor.

Or another building. ★



HAMASPIK AND FRIENDS: HAMASPIK FOUNDER MEYER WERTHEIMER WITH AGENCY LEADERS; (BOTTOM, L-R) NYC COUNCILMEMBER BRAD LANDER; STATE SEN. SIMCHA FELDER; NYC COUNCILMEMBER-ELECT KALMAN YEGER





The Senior Care Gazette

News from
the World of
HamaspikCare
and Senior
Health

Judge Denies 84-year-old Doc's License Restoration

London, NH — Anna Konopka, M.D., 84, has been practicing the old-fashioned way for decades in this New Hampshire town of 4,000—without a computer, with paperwork in filing cabinets allowing her to deftly keep track of every patient.

After four complaints earlier this year, Dr. Konopka agreed to surrender her license this October, but since asked Merrimack Superior Court Judge John Kissinger for permission to resume seeing patients.

The case against her, brought by the State of New Hampshire, had challenged her record keeping, prescribing practices and

medical decision making. It said her limited computer skills prevent her from using the state's mandatory electronic drug monitoring program, which requires prescribers of opioids to register in an effort reduce overdoses.

On Nov. 15, though, the judge denied the reinstatement of her license, ruling that that she failed to show she was forced to give up her license as alleged.

Meanwhile, 30 patients of the beloved village doctor have written letters of support to Judge Kissinger, hoping to convince him to reconsider his ruling. ★

New Shingles Vaccine Approved

Washington, D.C. — An FDA expert panel recently unanimously approved GSK's shingles vaccine Shingrix. The shot, slated to be a blockbuster, won final approval in late October.

With approval, GSK hopes to vaccinate people ages 50 and up against shingles—and compete with Big Pharma rival Merck, whose Zostavax shingles vaccine is already in use.

Shingles is caused by varicella zoster, the same virus behind childhood chicken-

pox. It can linger dormant in seniors for decades and then erupt in later years (usually above 50) in the sometimes-serious symptoms of painful skin blisters.

Health experts are excited about the vaccine, which has a high effectiveness rate, and have recommended that seniors make the effort to get it. However, it is administered in two shots two months apart, each of which cost \$140. The good news is that it is covered by Part D of Medicare, the federal health plan for seniors. ★

Health-oriented Interior Design Industry Growing

Las Vegas, NV — University of Nevada, Las Vegas (UNLV) associate professor Dak Kopec regularly has students in his interior design classes don blurry goggles before playing badminton.

Playing the tennis-like outdoor game while seeing poorly helps them see the world occupied by seniors and others with visual disabilities like diabetic retinopathy and wet macular degeneration—and design new homes with windows, furniture, and guardrails placed to make it easier for people with vision and other disabilities to move around.

The UNLV masters program is designed

to train interior designers to use lighting, acoustics, and fabric to try to make day-to-day living easier for people with an array of medical conditions, and is just one of several popping up all over the country, *STAT News* recently reported.

The new programs complement an already thriving niche of interior designers who specialize in hospitals, rehab facilities, and nursing homes.

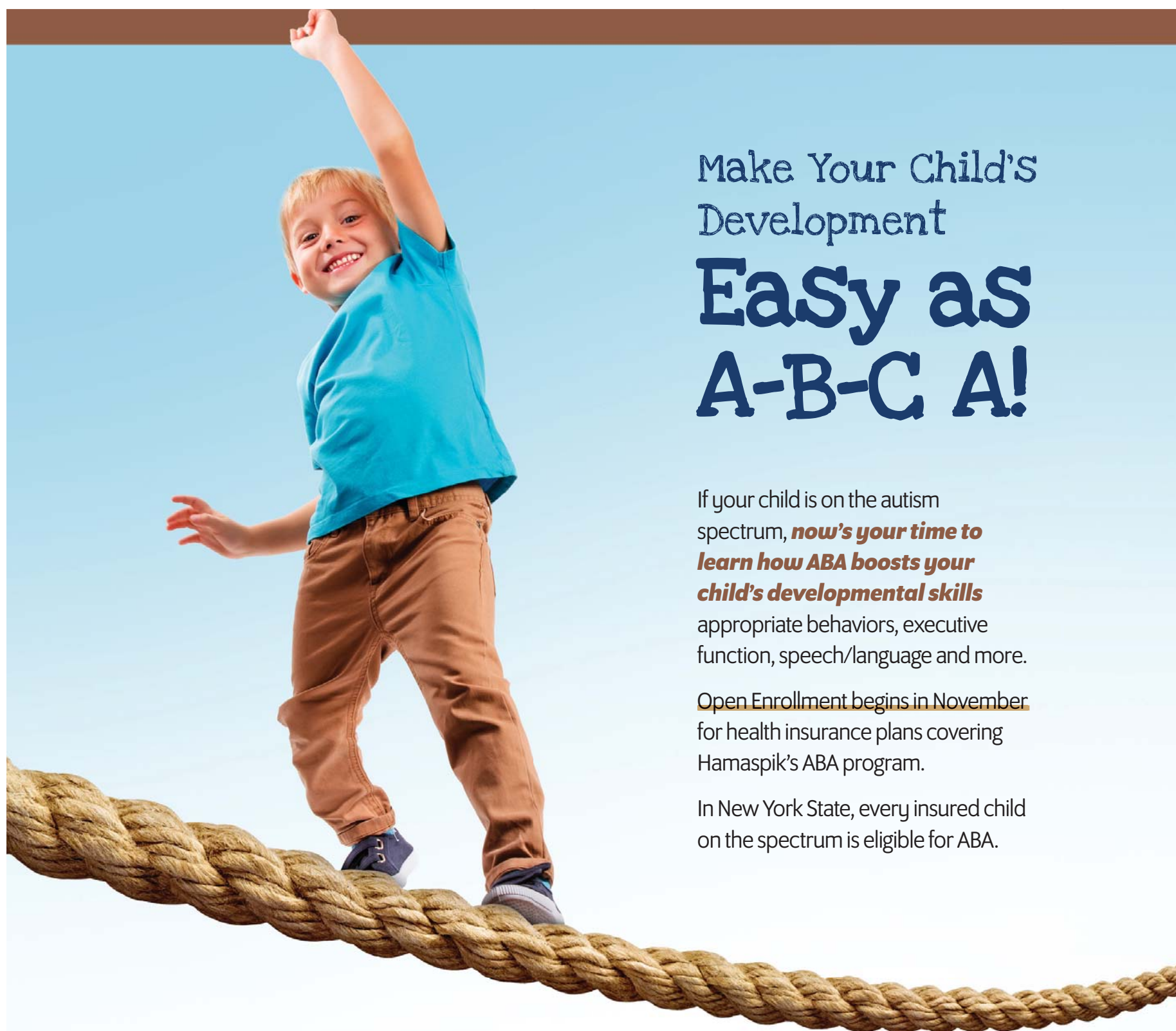
Indeed, as reported by *STAT*, over 2,000 professionals in the field met in Orlando, Florida this past November for the non-profit Center for Health Design's annual conference. ★



SEEING LIFE AS MANY SENIORS DO: NEW INTERIOR DESIGN COLLEGE DEGREES AROUND THE COUNTRY FOCUS ON CREATING DISABILITY-FRIENDLY LIVING SPACES FROM SCRATCH



TOWER OF INNOVATION: GLAXOSMITHKLINE (GSK)'S HEADQUARTERS BUILDING IN THE BRENTFORD DISTRICT OF LONDON, ENGLAND. CREATED IN 2000 OUT OF THE MERGER OF GLAXO WELLCOME AND SMITHKLINE BEECHAM, GSK WAS THE WORLD'S SIXTH LARGEST PHARMACEUTICAL COMPANY AS OF 2015 (AFTER PFIZER, NOVARTIS, MERCK, HOFFMANN-LA ROCHE AND SANOFI). THE PHARMACEUTICAL GIANT'S DRUGS AND VACCINES EARNED IT £21.3 BILLION IN 2013 ALONE, A YEAR IN WHICH ITS TOP-SELLING PRODUCTS WERE ADVAIR, AVODART, FLOVENT, AUGMENTIN, LOVAZA AND LAMICTAL. THE COMPANY'S CONSUMER PRODUCTS INCLUDE SENSODYNE AND AQUAFRESH TOOTHPASTE, BREATHE RIGHT NASAL STRIPS, AND NICODERM AND NICORETTE NICOTINE REPLACEMENTS. THE COMPANY ALSO DEVELOPED THE FIRST MALARIA VACCINE, WHICH IT SAID IT WOULD MAKE AVAILABLE FOR FIVE PERCENT ABOVE COST. LEGACY PRODUCTS DEVELOPED AT GSK INCLUDE AMOXICILLIN.



Make Your Child's Development Easy as A-B-C A!

If your child is on the autism spectrum, **now's your time to learn how ABA boosts your child's developmental skills** appropriate behaviors, executive function, speech/language and more.

Open Enrollment begins in November for health insurance plans covering Hamaspik's ABA program.

In New York State, every insured child on the spectrum is eligible for ABA.

**You believe your child
deserves a bright future.
We agree.**

By building your child's social and emotional skills and redirecting your child's behavior, our ABA program gets your child there.

Call us now!

We'll walk you through from A to Z making ABA for your child as easy as ABC.



HAMASPIK
CENTER FOR HUMAN SERVICES
המספיק
מרכז עזרה לצרכי הציבור

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