



The Hamaspik Gazette

News of Hamaspik
Agencies and
General Health

SEPTEMBER '18 • ISSUE NO.162



GAZETTE SURVEY

The GAZETTE asks YOU:

HOW DO YOU SWEETEN YOUR TEA?

A. SUGAR; B. SUGAR SUBSTITUTE; C. HONEY

Respond to: survey@nyshainc.org



HEALTH STAT

**"DO YOU SUPPORT OR OPPOSE A MEDICARE-FOR-ALL
HEALTH CARE SYSTEM, WHERE ALL AMERICANS WOULD
GET THEIR HEALTH INSURANCE FROM THE GOVERNMENT?"**

63% | Support 26% | Oppose
Source: Morning Consult/Politico poll



HEALTH TIP

DON'T GET BURNED BY YOUR MICROWAVE!

Before heating liquids, remove or at least loosen covers on bowls or cups containing them—sealed hot liquids can explode when "dis-covered."

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HEALTH

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SUMMERTIME TRAINING SEASON

WHEN IT COMES TO CHOOSING THEIR OWN DESTINATIONS IN LIFE, TWO RESIDENTS OF HAMASPIK OF ROCKLAND COUNTY'S WANNAMAKER BRIDERHEIM RESIDENCE FOR MEN, SEEN HERE VISITING RURAL NEW HAMPSHIRE ON A FOUR-DAY TRIP THIS JUNE, ARE SQUARELY ON THE RIGHT TRACK.



COME THE WARM SUMMER MONTHS, HAMASPIK'S GROUP HOME RESIDENTS IN THREE COUNTIES HAVE BEEN IN THE THICK OF THE MAINSTREAM, GOING PLACES JUST LIKE EVERYONE ELSE.

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Top N.Y. Court Rules: Flu Vaccine Mandatory for City's Pre-K Kids

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**For Desperate
Families, New
Doors of Hope**

**Hamaspik of
Kings County's
Newest Group
Home Underway**

SEE PAGE E5 >>

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Published and Copyrighted August, '18
1 Hamaspik Way
Monroe, NY 10950

Services Provided by NYSHA AGENCIES

OPWDD

COMMUNITY HABILITATION (COM HAB)

Providing: One-on-one personal aides to help individuals achieve valued outcomes by means of helping them improve their activities of daily living (ADL) skills and long-term life goals

HOME-BASED RESPITE

Providing: Relief for parents of individuals with special needs

AFTER-SCHOOL RESPITE

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

DAY HAB PROGRAM

Providing: A day program for adults with disability

SUPPLEMENTAL DAY HAB PROGRAM

Providing: An extended day program for adults with disability

CAMP NESHOMAH

Providing: A day program for children with disability over summer and winter school breaks

INDIVIDUALIZED 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 MODIFICATIONS

Providing: Home accessibility additions

SUPPORTED EMPLOYMENT (SEMP)

Providing: Coaching and support for people with disabilities to get and keep suitable jobs

ENHANCED SUPPORTED EMPLOYMENT

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

COMMUNITY PRE-VOC PROGRAM

Providing: One-on-one employment preparation day program for high-functioning individuals

PATHWAY TO EMPLOYMENT

Providing: One-on-one employment discovery program for high-functioning individuals

MEDICAID SERVICE COORDINATION

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

FAMILY CARE PROGRAM

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

INTERMEDIATE CARE FACILITY (ICF)

Providing: A facility for medically involved individuals who have developmental disability

INTENSIVE BEHAVIOR SERVICES (IBS)

Providing: Interventional services for people with behavioral issues and their family members

PLAN OF CARE SUPPORT SERVICES

Providing: Support for families of individuals with special needs

FAMILY SUPPORT SERVICES

Providing: Reimbursement for qualifying items or services not covered by Medicaid

PARENTAL RETREATS

Providing: Getaways and retreats for parents of individuals with disabilities

SELF DIRECTION

Fiscal Intermediary (FI) — providing: Accounting and billing for vendors supporting 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 aides · therapy · respite · medical supplies · adaptive technology · service coordination

EARLY INTERVENTION (EI)

Providing: Full evaluations · home-based, community-based and center-based services · parent/child groups · ongoing service coordination · therapy (PT, OT, SLP, vision, nutrition, play, etc.) · special ed · social work · family training/counseling · bilingual providers

NURSING HOME TRANSITION AND DIVERSION (NHTD) PROGRAM

Providing: Service Coordination · assistive technology · moving assistance · community transitional services · home/community support services · E-meds · independent living skills · positive behavioral interventions · structured day program

TRAUMATIC BRAIN INJURY PROGRAM

Providing: Service Coordination · independent living skills training · day programs · rent subsidies · medical equipment · E-meds · transportation · community transitional services · home/community support services

CHILD AND 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 and Rockland Counties only)

APPLIED BEHAVIOR ANALYSIS (ABA)

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

LHCSA - HAMASPIKCARE

PERSONAL CARE AND SUPPORT SERVICES

Providing: Home health aides · personal care aides · housekeepers · HCSS aides

COUNSELING SERVICES

Providing: Diet/nutrition counselors · social workers

REHABILITATION SERVICES

Providing: Physical therapy · speech therapy · occupational therapy

PACE-CDPAS

Providing: Personal care aides for people in need

SOCIAL AND ENVIRONMENTAL SUPPORTS

Providing: Minor maintenance for those qualifying

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

Providing: A managed long-term care plan (MLTCP) approved by New York State

HCR

ACCESS TO HOME

Providing: Home modifications for people with physical disabilities

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 SESSIONS

Providing: SCIP · CPR and first aid · orientation · MSC CORE · AMAP · annual updates · Com Hab/ Respite · Family Care · Supported employment

CENTRAL INTAKE

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

THE HAMASPIK GAZETTE

Providing: A bilingual monthly newspaper keeping the community up-to-date on all major news in medicine, public health, disability, hospitals, senior care, and general Hamaspik news

OMH

HEALTH AND RECOVERY PLAN (HARP)

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

● ► PUBLIC HEALTH AND POLICY NEWS

Feds About to Approve a Drug for a (Hopefully) Eradicated Disease

Washington, D.C. —

Do we really need a new drug to treat patients with smallpox? After all, it was in 1980 when the last-known patient was cured of smallpox.

Variola, the virus that causes the smallpox disease that killed some 30 percent of its victims, was obliterated thanks to a decades-long concerted global effort that promoted mass vaccination.

The eradication of smallpox remains one of the greatest victories of modern medicine (and modern diplomacy).

For a number of reasons, live specimens of variola are preserved at two known high-security locations worldwide, one somewhere on U.S. soil and the other a deep underground facility in Siberia. The chances of variola reemerging are very low.

But now, a new drug called tecovirimat is on its way to FDA review and approval.

While it hasn't been tested on humans with variola, it has been successfully tested on monkeys and rabbits with monkeypox and rabbitpox,



TEMPEST IN A TEST TUBE? SMALLPOX IS VERY UNLIKELY

smallpox's close cousins.

In a clinical trial, it's also been tested on 417 humans without variola to check for side effects, of which none serious emerged.

Could smallpox be repurposed as a biological weapon? Technically, yes—variola's entire genetic code is known, and forces nefarious enough, and educated and equipped enough, could potentially recreate it in a lab.

So, does the government know something we don't?

Probably not. But, as medical blogger F. Perry Wilson, M.D. recently quipped, "If anyone ever has to prescribe this drug, we are in deep, deep trouble." ★

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► NYSHA NEWS

New Era of Person-centered Support and Care with Launch of Tri-County Care



“People don’t want to read about technicalities,” says Yoel Bernath. “They want to know if their loved ones are getting their services.”

And at Tri-County Care, the new entity Mr. Bernath directs, they certainly are.

Tri-County Care is the Care Coordination Organization/Health Home (CCO/HH) that now provides all special-needs beneficiaries with what used to be called Medicaid Service Coordination (MSC). It went live this July 1.

The Medicaid Service Coordi-

nators (MSCs) across 25 counties, formerly with 45 disability non-profits now work for Tri-County Care. Their new official title? Care Coordinator—which says it all.

All the services and supports that people with special needs were getting are still there. They’re just getting them in a better way with the advent of CCO/HHs like Tri-County.

And they’re getting more of them.

Under Medicaid Service Coordination, individuals with disabilities only had their disability services—residential housing or community habilitation, for example—coordinated by MSCs. But with Tri-County, they also get medical and mental-health services coordinated, too. (That’s the “Health Home” side of the new organization.)

Also with the advent of Care Coordination, an even greater

emphasis is being placed on *person-centered* services and supports. The concept stresses the individual’s choices in selecting and fine-tuning the services and supports provided.

What that means, explains one veteran former MSC, is that there are more questions to ask each individual—because there are more services and supports for them to make choices about.

Additionally, gone is the old way of doing things by rote, routine and repetitive paperwork. In its place is a system so high-tech, it’s in literally in the cloud—the offsite memory bank that constantly saves, backs up and updates all local data, and all in real-time. All across Tri-County Care, Care Coordinators are using brand-new laptops with custom software to do their newly-expanded jobs.

Where disability-supporting MSCs

once filled out forms by hand and had to juggle binders of documents, newly-independent Care Managers now literally have everything at their fingertips.

Using the cloud-based MediSked system, Albany-based Tri-County Care Regional Director Jason Mazzuca, Care Manager Supervisor Jessica Liburdi and their experienced team can update each supported individual’s information on the go. For the former staffers of Living Resources, a leading disability Albany-region non-profit, the upgrade eliminates the lag between field visits and office work.

At the same time, individuals with special needs remain at the forefront of Tri-County’s support—despite all the new technology, the Care Coordinators still give their work that same heart. ★

► HEALTH NEWS

Scientists Produce World’s First Color 3D X-Rays

Canterbury, New Zealand — Father-and-son scientists Profs. Phil and Anthony Butler, respectively of New Zealand’s Canterbury and Otago Universities, recently released what is being touted as the world’s first-ever color three-dimensional x-rays of a live human being.

The college professors spent a decade building and refining their system, according to reports.

The system couples standard black-and-white X-ray technology with new so-called Medipix technology developed by the CERN physics lab in Europe.

Medipix allows the system to essentially assign colors to body layers based on density, hence rendering the bones of an x-rayed hand white while muscle appears red. It remains unclear from reports if the system detects and displays those layers’ actual colors.

“This color X-ray imaging technique could produce clearer and more accurate pictures and help doctors give their patients more accurate diagnoses,” said a CERN statement.

The system’s “small pixels and accurate energy resolution meant that this new imaging tool is able to get images that no other imaging tool

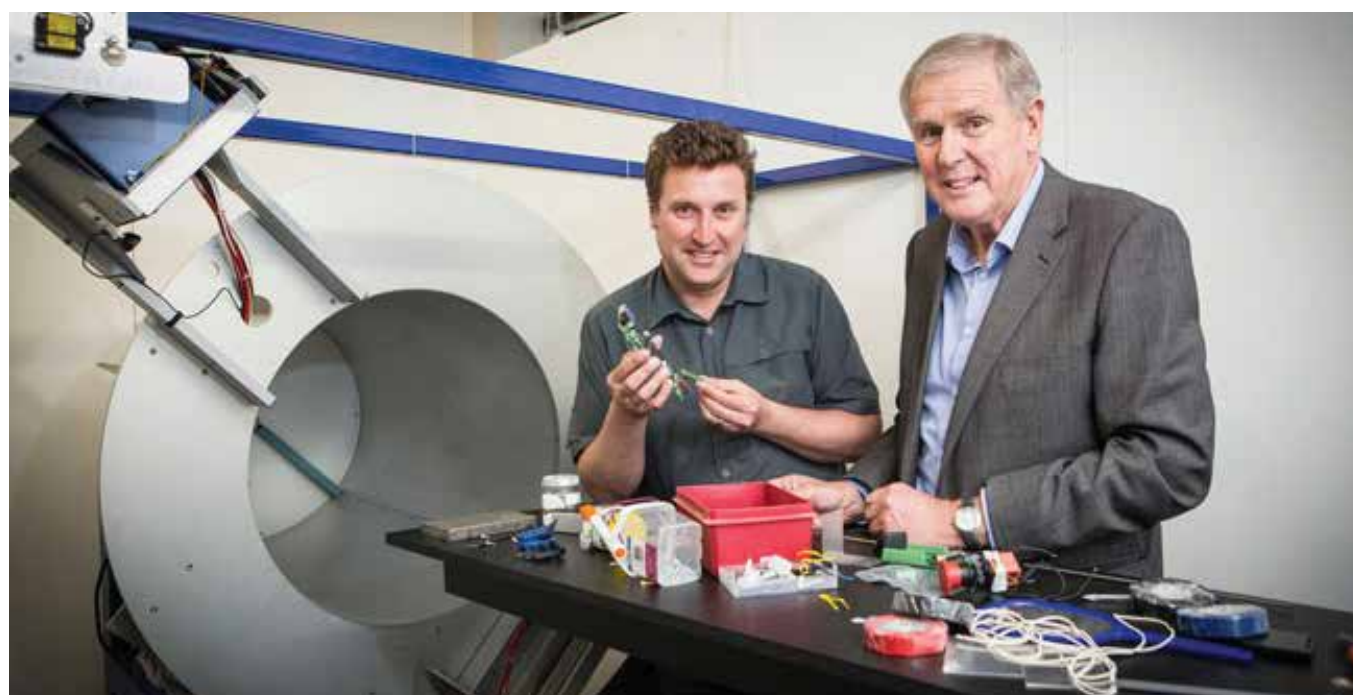
can achieve,” said Prof. Phil Butler of the University of Canterbury.

According to CERN, the images very clearly show the difference

between bone, muscle and cartilage, but also show the position and size of cancer tumors.

The technology is now being

commercialized by New Zealand company MARS Bioimaging, linked to the universities of Otago and Canterbury which helped develop it. ★



IN LIVING COLOR: FATHER-AND-SON RESEARCH TEAM PROF. PHIL (R) AND SON PROF. ANTHONY BUTLER WITH THEIR MACHINE

Hamaspik Gazette

Published and Copyrighted Sep. '18 by:
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Mail Postmaster: Return service requested
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Happening in Health Today

MODIFIED POLIO VIRUS EXTENDS LIVES OF BRAIN- CANCER PATIENTS

Durham, NC / Solstrand, Norway — A handful of patients with recurring cases of *glioblastoma*, a brain cancer, showed significantly prolonged survival after treatment with a genetically modified version of the polio virus.

Researchers at Duke University Medical Center directly injected the brain tumors of 61 glioblastoma patients with the PVSRIPO modified virus.

At follow-up points two and three years later, patients injected with the PVSRIPO virus were found to have an overall survival rate of 21 percent, while a non-injected control group showed only 14 percent at two years and four percent at three years.

Two patients remained alive at over five years following brain injection.

The new research was presented recently at the International Conference on Brain Tumor Research and Therapy in Solstrand, Norway

and also published in the *New England Journal of Medicine*.

CANNABIDIOL, FIRST CANNABIS-DERIVED DRUG, APPROVED BY FDA TO TREAT FORMS OF EPILEPSY

New York, NY — In what was hailed as “a landmark in American medicine” by its lead researcher, clinical trials resulted this June in an FDA green light for a new epilepsy drug derived from cannabis—a first for mainstream medicine.

Under the FDA approval, issued June 28, doctors can now prescribe cannabidiol (CBD) to treat seizures for the rare and severe forms of epilepsy known as Lennox-Gastaut syndrome (LGS) and Dravet syndrome.

The studies leading to cannabidiol’s eventual FDA approval were headed by NYU Langone Health’s Orrin Devinsky, M.D., who heads that hospital’s comprehensive epilepsy center.

“This is the first time the government has approved a compound derived from the cannabis plant to treat any disorder,” noted Dr. Devinsky. It’s

also the first FDA-approved drug of any kind that treats patients with Dravet.

Despite its derivation, cannabidiol causes none of the negative mental effects associated with cannabis.

FLIGHT ATTENDANTS MAY HAVE HIGHER CANCER RATES

Boston, MA — A Harvard comparison survey of over 5,000 flight attendants with over 2,700 adults of similar socio-economic backgrounds finds that flight attendants were twice as likely to be diagnosed with melanoma and over four times likelier to be diagnosed with other forms of skin cancer.

Non-melanoma skin cancer among women [working as flight attendants] increased with more years on the job, suggesting a work-related association, according to lead researcher Eileen McNeely.

While the results confirm other research linking work as a flight attendant to increased risk of certain cancers, the study didn’t probe whether or how the job might directly cause tumors.

What’s more, other research has noted that flight attendants actually have a lower overall rate of death by cancer despite their apparently-higher diagnosis rate—because they tend to be more health-conscious, resulting in a higher rate of screening and in turn a higher rate of earlier detection and successful treatment.

Scientists have long suspected that flight attendants’ cancer risk might be affected by their exposure to naturally occurring radiation at high altitudes, along with shift work, time zone changes that disrupt sleep cycles, or poor cabin air quality, the researchers noted in *Environmental Health*.

THREE-YEAR-OLD CANCER VICTOR ATTENDS BONE- MARROW DONOR’S WEDDING

Hartford, AL — Here’s a health news story of a different sort—one to warm your heart and perhaps bring a tear of joy to your eye.

Over two years ago, Hayden Hatfield Ryals of Alabama signed up for Be the Match, a bone marrow donor non-profit. Over two years later, the *Atlanta Journal-Constitution* reported, the unexpected recipient of matching bone marrow returned the lifesaving favor in the most meaningful way she could—by attending her donor’s wedding.

Ms. Ryals and her new husband, Adrian, were all too happy to greet their precious special guest from Georgia, the healthy and leukemia-free Skye Savren-McCormick, as she walked down the aisle tossing flowers. ★

EXPERIMENTAL DRUG DELIVERS FAST MIGRAINE RELIEF: TRIAL

S. Francisco, CA — Two recent placebo trials of experimental drug *lasmiditan* found that about 20 percent of migraine patients treated with its highest dosages reported no headache pain within one hour, and nearly 40 percent reported no pain by two hours.

Participants in the two trials, which totaled over 4,400 volunteers with chronic migraine, reported a rough average of 62.5 percent headache pain relief at two hours after the first dose of lasmiditan (at either 100 mg or 200 mg). Placebo recipients reported about 40 percent pain relief in both studies.

The results were presented at the recent American Headache Society annual meeting. ★



● ► HAMASPIK NEWS

Filling the Void: Hamaspik's New Brooklyn Residence to Help Meet Dire Housing Need

Hamaspik front-line staff is long familiar with the anguished calls for help.

They typically come from middle-aged adults right in their communities. And the picture they paint is all too common, and all too desperate: their own parents are grappling with advancing age and frailty, becoming minimally capable of caring for themselves (and too-often not at all), never mind a youngest child who also has significant disability.

Such children, typically young adults (but sometimes teens or even tweens) still living at home with Ta and Ma, can no longer be cared for by their own parents. No one in the family has the resources to provide a precious brother or sister with the involved and customized care so vitally needed. What to do?

Long synonymous as the community resource of choice, Hamaspik has been answering that call for years. Its constellation of group homes remains heaven-sent for the families of people with special needs that they support.

But with the Baby Boomer population aging and demand for out-of-home placement growing, so is the desperation. But now, that burden is about to get the best possible relief—at least for 12 grateful families: Hamaspik of Kings County is opening a brand-new group home.

The new *Individualized Residential Alternative* (IRA), Albany's official term for group homes for people with intellectual disabilities, will join Hamaspik's IRAs come January 2019, according to Hamaspik of Kings County Executive Director Hershel Wertheimer.

Bidding for the interior contracting project is underway, reports Mr. Wertheimer. At the same time, the agency is working hard to seamlessly dovetail all the complex parts of a functional IRA.

That effort primarily revolves around finding the perfect candidate for Home Manager: motherly, warm, loving and kind; the personality that can blend individuals of varying diagnoses into one family and strike the perfect balance between steady leadership and person-centered individual independence.

A Home Manager is a calling, not a career—at least if you ask Managers Mrs. Cziment, Mr. Indig and Mr. Moskovits, respectively of Hamaspik's South 9th, 38th St. and 61st St. residences.

The level of kindness, devotion, dedication and personal caring shown by the Managers—indeed, by all Hamaspik Home Managers—to their



HOME IS WHERE HAMASPIK IS: THE NEWLY-PURCHASED RESIDENTIAL PROPERTY IN THE HEART OF BROOKLYN'S BOROUGH PARK

charges is what turns each facility into the truest-possible home.

At Hamaspik group homes from upstate Monroe to downstate Brooklyn, Managers become beloved parental figures, and DSPs become cherished sibling figures, together forging an atmosphere that is far more family home than group residence—a fact that has long been documented over the years in the *Gazette's* pages.

A full complement of staff, including team of trained Direct Support Professionals (DSPs), is also in the process of being hired, according to Hamaspik of Kings County Director of Residential Services Chezkel Fisher.

And as interior work proceeds on site, paperwork continues at Mr. Fisher's office, where everything is proceeding as planned.

LOCATION, LOCATION, LOCATION

Hamaspik's newest IRA will be

located at 1471 49th St., between 14th and 15th Avenues in the center of Brooklyn's Borough Park district—a neighborhood heavily serviced by Hamaspik.

The placement couldn't be better.

Situated as it is at the very heart of Borough Park, a stone's throw away from the vital artery of 13th Ave., the newly-dubbed 49th St. Shvesterheim will give its future residents unfettered and unrivaled access to their familiar community of choice.

Thirteenth Avenue is legendary for its storefronts of every stripe and shade. Concentrated primarily along ten busy blocks, you'll find anything and everything here; if you want to find the mainstream community, look no further than 13th's retail shops and business establishments.

And now, with the 49th St. Shvesterheim to open practically around the corner, 13th Ave. will be up close and personal for 12 young women

who'll shortly be taking up residence—making them rightly feel that they have fingers on their community's pulse and their rightful place in the mainstream.

As such, the emphasis in recent years on person-centered choice will be particularly pronounced at the 49th St. Shvesterheim, what with residents to have remarkable proximity to stores of their choice.

For the parents of the individuals to reside at the new Shvesterheim, potential months, years and even decades of increasing care difficulties ahead will be proactively eliminated. In their place will be the 24/7 support, compassion and person-centered care, complete with all the trappings of a cozy home, that are the hallmark of a Hamaspik IRA.

Mostly importantly, a dozen sets of aging thankful parents in the sunsets of their lives, will finally be breathing more easily.



● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK



Happenings around Hamaspik

Room to Grow



THE SPACE TO PROGRESS: A NEWLY-CARPETED THERAPY ROOM AWAITS EQUIPMENT

Raising Proficiency



UPLIFTING: STAFF AND INDIVIDUALS ALIKE LOOK ON AS A TRAINING VIDEO PLAYS

What a Way to End a Week!

As if Ahavas Golda and the Aleph Beis Center, Hamaspik of Kings County's dual powerhouses of after-school respite (ASR) programs, weren't enough on weekdays, both recently hosted their first-ever joint weekend, too!

A group of children supported by the energetic staff of both programs was transported to Green Hills Estates bungalow colony in upstate Swan Lake, New York, where their genuinely altruistic and devoted support staff spent the entire Shabbos weekend with them.

Guests were treated to a well-planned and full schedule of stimulating activities throughout—

from Friday-afternoon arts and crafts activities through a post-Shabbos group singing session Saturday night, and quite a few stimulating sensory-activity sessions between.

Nutritious (and delicious!) meals, Story Time, and plenty of interactive indoor and outdoor games interspersed the more-cerebral activities, with no shortage of food for body and mind.

Children went home nourished and relaxed, having had a weekend away from home as fun as it had been educational.

And best of all, their beloved parents got a much-needed respite break from special-needs parenting, too. ★

Opening Rooms, Opening Vistas of Growth

It's just another room on the premises of Hamaspik of Orange County's towering Admin Building at the gateway to Kiryas Joel, New York.

But for the tiny tots who stand to benefit, it's a whole new world of opportunities to grow.

It's the new one-on-one therapy room for the onsite Early Intervention (EI) program hosted for years now by Hamaspik.

In tandem with its Orange County Dept. of Health (DOH) partner, the Hamaspik EI program has seen hundreds of little boys and girls come

through its doors with developmental delays come—and leave a year or so later significantly caught up to their age-appropriate developmental level.

Working with occupational therapy, physical therapy, speech-language pathology, and several other niche therapeutic disciplines (including music and art), Hamaspik's EI team has made positive permanent changes in the lives of its students.

And now, those professional therapists have another state-of-the-art room in which to work one-on-one with students who need it most. ★

Keeping Up with Accessibility Vehicle Ramp Training

It may not seem like a big deal. But, as it turns out, operating the expensive and delicate pieces of specialized equipment known as wheelchair lifts are indeed quite the big deal.

That's why, on a Friday morning in June, Hamaspik of Rockland County's very own Joseph Fried, Maintenance Manager, held a training for existing and newly-hired Direct Support Professional (DSP) staff on the operation and usage of the lifts installed on seven Hamaspik transportation vehicles.

Besides how to properly extend,

retract, raise or lower the accessibility devices, staff were also trained on how to properly and safely secure passengers who use wheelchairs.

The 45-minute session featured several professional training videos, followed by real-life practice on the mechanical devices out in the parking lot.

Mr. Fried isn't just adept at keeping our equipment in tip-top shape, it turns out—he's also quite good at keeping the people who use that equipment professionally trained, too. ★

► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK

Hamaspik Founder, NYSHA President Meyer Wertheimer Elected to IAC Board

In an unspoken compliment to decades of Hamaspik achievement both personal and company-wide, Hamaspik founder and current NYSHA (New York State Hamaspik Association) executive director Meyer Wertheimer was elected June 7 to the Board of Directors of the Inter-agency Council on Developmental Disabilities (IAC).

The IAC, founded in 1977, is an association of major disability non-profits servicing the greater New York City region. Its mission includes coordinating voluntary agency services, promoting better disability policy and better services, and providing professional training

to member-agency employees.

Consisting of over 40 members, its Board meets regularly discuss all issues of current importance to New York's disability community and industry, and to vote on official IAC policy.

The IAC continues to wield critical clout in Albany, authoritatively advising and influencing key decision-makers to the disability community's maximum benefit.

And with the unanimous vote to induct Mr. Wertheimer, the IAC can now boast having the voice of a sizable and important segment of the New York State disability population at the table. ★

Tripping All Over the Place Come Summertime

The week after July 4th, Hamaspik of Kings County's South 9th Shvesterheim voted for a patriotic trip to no less than Washington, D.C.—complete with tri-colored apparel worn while in the capital. Its sister Shvesterheim on Borough Park's 38th St. took an end-of-summer excursion to the Sesame Place amusement park.

And those were just Hamaspik group homes down in Brooklyn.

But the story was the same wherever you found Hamaspik this summer: Residents of the agency's dozen-plus residences making their own group choices of trips they wanted during the sunny season—and then, supported by staff, hitting the road.

Upstate, for example, Hamaspik of Orange County's Seven Springs Shvesterheim visited the Bowcraft amusement park in Scotch Plains, New Jersey.

And in the lower Hudson Valley, Hamaspik of Rockland County's several group homes all found themselves all but literally all over the place this summer.

Three residents of the Grandview Briderheim also trekked to Washington, D.C., while those of the Forshay Briderheim enjoyed an overnight stay in the Catskills.

Likewise, residents of the Fosse Shvesterheim paid individualized visits to personally-chosen destinations all about the Tri-State region, while those of the Wannamaker Briderheim enjoyed a spectacular four-day summer getaway at the five-star Arlington Hotel in Bethlehem, New Hampshire.

Summer's the best time to get out and about. And this summer, Hamaspik's neighbors were left doubtless that our residents were well aware of that fact. ★

Getting on Board



VETERAN VOICE: MR. WERTHEIMER (LEFT-CENTER) AND STAFF WITH IAC PRESIDENT THOMAS MCALVANAH AT HIS MAY 25, 2017 VISIT TO HAMASPIK

Summer Day Hab Days



HANDS-ON: FROM HAND-COLORED DECORATIONS (TOP L-R) TO A ROLLICKING BOARD GAME, HAMASPIK OF KINGS COUNTY'S DAY HAB HAS GOT IT RIGHT ON THE MONEY

The Autism Update

News and developments from the world of research and advocacy

CAN AUTISM BE DIAGNOSED BY BRAIN SCAN? EXPERTS ARE CAUTIOUSLY OPTIMISTIC

Chapel Hill, NC — In a lengthy article on SpectrumNews.com, author Jeremy Hsu explores the burgeoning intersection of computer technology and autism diagnosis—in plain English, having a child diagnosed with autism by brain scan, not testing by humans.

According to interviewed experts on the front lines of the young field, so-called *deep learning*—programming supercomputers to finely comb through mountains of data to spot patterns—has the potential to spot autism-indicating behavior patterns.

But all that data—and whether each entry constitutes an autism behavior or not—must be tagged and entered by fallible humans. Additionally, computer analyses of behaviors can raise the specter of false positives by flagging non-autism behavior out of context—for example, a child tagged by a computer in one study as having autism was actually just tired before bedtime.

With ever-larger sets of autism data becoming available to deep-learning software, diagnosis by brain scan could be possible in the near future—allowing doctors to diagnose the often-difficult-to-diagnose condition at earlier ages than today's average of 4.

In the meantime, autism remains primarily diagnosed by human tests such as the Autism Diagnostic Observation Schedule (ADOS).

SPECIAL-ED RULE DELAYED BY WHITE HOUSE

Washington, D.C. — On July 3, the U.S. Dept. of Education officially postponed implementation of a rule designed to prevent kids from certain backgrounds from being wrongly placed in special education.

The *significant disproportionality* rule, which was supposed to take effect in July, is now scheduled for summer of 2020.

According to the federal body, “This delay will give the department, the states and the public additional time to evaluate the questions involved and determine how best to serve children with disabilities without increasing the risk that children with disabilities are denied (a free appropriate public education).”

JUDGE ALLOWS LIMITED-USE CORRECTIVE SHOCK DEVICES AT EMBATTLED SCHOOL

Canton, MA — A late-June ruling by



THE LAST STRAW: IN THEIR NEWEST CAUSE, ENVIRONMENTALISTS ARE AT LOGGERHEADS WITH THE DISABILITY COMMUNITY

DISABILITY ADVOCATES OPPOSE STRAW BANS PROPOSED BY ENVIRONMENTALISTS

Washington, D.C. — States and cities nationwide are now being pressed by environmentalists to eliminate plastic straws. But objections aren't just coming from the plastics industry and restaurants—some disability advocates have derailed or delayed some proposed straw bans, too.

While California, Hawaii and New York have considered plastic straw legislation in 2018, and New York City is also

considering a ban, many disability advocates oppose the bans.

Straws have long been an accessibility device of choice among individuals and caregivers alike, allowing people with poor oral-motor musculature to consume drinks and pureed foods. They are also a common speech- and oral-motor therapy tool. ★

Judge Katherine Field of Bristol County Probate and Family Court found that the Canton-based Judge Rotenberg Educational Center may continue with its limited-use corrective shock devices on students with extreme behavioral issues.

The Judge Rotenberg Center is the only facility in the U.S. making any use of electric shock devices to deter violently harmful physical behaviors in a handful of students with issues severe enough to warrant their usage where all else failed.

The case, brought by the State of Massachusetts in 2013, sought to end a court order that has limited the state's regulatory authority of the center since the 1980s.

According to court documents, officials argued unsuccessfully that the advent of newer medications could be used to treat harmful behaviors instead. In her decision, Field wrote that

state officials failed to demonstrate a professional consensus that the so-called aversive treatment “does not conform to the accepted standard of care for treating individuals with intellectual and developmental disabilities.”

In related news, a Yale School of Medicine study found that controlled shocks called *transcranial direct current stimulation* (tDCS) cut violent impulses and aggressive tendencies in a group of 81 adult study participants. That study was published recently in the *Journal of Neuroscience*.

BRAINS OF CHILDREN WITH AUTISM SHOW UNUSUAL FOLDING PATTERNS

San Diego, CA — Two new studies suggest that the brains of children with autism fold differently than those of their typical peers. But whether they

are unusually smooth or convoluted depends on location and age.

According to one of the studies, certain regions of the brain's outer layer, the *cerebral cortex*, are more intricately folded in school-age children and adolescents with autism than they are in controls.

In young people, this folding difference may be the most obvious structural feature of the autism brain, according to San Diego State University psychology professor Ralph-Axel Müller, who led that study. By contrast, according to a second study, preschoolers with autism do not show exaggerated folding unless they have enlarged brains.

Together, the studies add to evidence that folding follows a different developmental path in autism brains than in controls. ★

● ► HAMASPIK NEWS

At Hamaspik of Kings County Day Services, a Summer Busy as Bees

Yehudah Spangelet is a busy guy.

That's probably why the department he heads is equally busy.

As the leader's energy goes, says conventional wisdom, so goes the entire department.

That's certainly the case with Mr. Spangelet, Hamaspik of Kings County's Director of Day Services, whose infectious energy and offbeat sense of humor charms, disarms and inspires all at once.

The people all around him tend to move, think and execute like him—with a kind word, an extra mile, astounding attention to detail, and that constant smile.

The man commands a small army—an elite cadre of program managers and the Direct Support Professionals (DSPs) who serve as frontline foot soldiers before them.

In Williamsburg, the men's division of Hamaspik's Day Habilitation (Day Hab) program is captained by Manager Shia Teichman and manned by Messrs. Dominitz, Frankl, Gross, and Klein. The women's division is helmed by Manager Mrs. Taub and staff Mrs. Etengoff, Mrs. Fried, Ms. Moshel, Mrs. Neuwirth and Mrs. Witriol.

Hamaspik's men's and women's Day Hab programs in Borough Park, in turn, are managed by Mr. Simcha Einhorn. Men's-division staffers Halevy, Klar, Kreindler and Schwartz, and women's-division DSPs Guttman, Lang and Weingarten, respectively work hard and well with them.

All four programs are supported by Day Services secretary Mrs. Schwartz.

But that's not all.

Under Mr. Spangelet, Hamaspik of Kings' relatively new and remarkably successful Ahavas Golda initiative absorbed an existing popular community resource for girls and young women with special needs. The merger turned Ahavas Golda leaders Ms. Gruenwald and Ms. Weinstock into Hamaspik lieutenants—and gave the Ahavas Golda girls the daily After-School Respite (ASR) program they need.

But even that's not all.

The Director of Day Services recently presided over yet another Hamaspik first—the launch this summer of Hamaspik's first-ever full-summer ASR program!

Dubbed Camp B'Simcha (which means "happy"), the fledgling program did for its dozens of "campers"



JUST ANOTHER (BIRTH)DAY: DIRECTOR SPANGELET (2ND FROM RIGHT) AND CARING STAFF FACILITATE A MOST HAPPY HAPPENING



FOR THE COMMUNITY: AT HAMASPIK'S STREET FAIR, THIS BOY'S GRIN SAYS IT ALL

with disabilities what Hamaspik's long-running Camp Neshoma ASR programs in the Hudson Valley have doing for years.

For two straight months beginning July 4, B'Simcha director Ms. Weiss (who is also Director of Hamaspik of Kings County's Aleph Beis Center After-School Respite program) saw to it that Mr. Spangelet's vision of an educational, therapeutic and fun day-

camp-like ASR program provided parents of kids with special needs the summertime parenting respite they need while school was out.

For his part, Day Hab Manager Einhorn brought the Hamaspik summer spirit to the street on June 21, with his "boys" hosting a street carnival for neighborhood kids out of school and in need of something fun to do. Manning several tables laden

with classic carnival activities right in front of their 14th avenue building, the "Day Habbers" felt "welcome" in the mainstream community of which they are very much a part, said Mr. Spangelet. "Hamaspik gave to the community, and the community gave to Hamaspik."

That same day also saw the entire Ahavas Golda body enjoy a full-day trip up to upstate Monsey, where they were busy as bees at the Palisades Shopping Center's Billy Beez children's attraction, followed by a private visit to the giant pool of a local swim center.

A balloon art demonstration by Mr. Moshe Finer, a.k.a. "the Ballooner Rebbe," on June 24 marked a "Goodbye Party" at the Ahavas Golda ASR program—closing the program's school-year session and ushering in "summer mode." (At the same time, the Day Hab women's division marked the year's end with a "graduation" performance.)

Several weeks later, the Day Hab program—and not just the women's division—was looking back at a season chock-full thus far of fun, games, education and inspiration. The year preceding the season, vocational activities and all, had boasted a "very successful program," Spangelet says—with staff reporting "a lot of positive feedback" from parents.

So was Ahavas Golda: a Project of Hamaspik, as well as B'Simcha, the latest Day Services project of Kings County's Hamaspik.

But for busy-bee Director Spangelet, it was all in a day's work. ★

Public Health and Policy News

MANDATED FLU VACCINES IN NYC EARLY-CHILDHOOD SCHOOLS UPHeld BY COURT

Albany, NY — In a landmark verdict, New York State's highest court ruled in early July that New York City's Board of Health and Health Department can mandate annual flu vaccines for children in city-regulated day cares and preschools.

The verdict overturns lower court rulings that found in favor of five families who filed a 2015 lawsuit against the city's mandatory flu-vaccination rule, citing various dubious concerns.

First adopted in Dec. 2013 by the New York City Board of Health, the rule requires that all children ages six months old to five years old in city-regulated early-childhood programs must get a flu shot by Dec. 31 of each year, and families must show proof their children have received it. The verdict clears the way for the Health Department to now enforce that rule.

City Health Commissioner Dr. Mary Bassett hailed the decision as improving safety for the 150,000 children who would be affected. Five city children died of the flu last year. The city said the mandate would be effective immediately.

"Vaccines save lives and are

an effective public health tool to prevent the spread of disease," said Commissioner Bassett in a statement. "The severity of this past influenza season reminds us of how deadly influenza can be."

TO RETAIN STAFF, HOSPITAL OFFERS NURSES SUMMERS OFF

St. Louis, MO — Thanks to a still-looming shortage of registered nurses (RNs), hospitals all across the country—as reported in the *Gazette* in recent months—have been resorting to an ever-enticing array of employee perks so as to hire and retain quality nursing staff.

But now it would seem that it's approaching "desperate" out there, as local media outlet KMOV recently reported that the pediatric unit at St. Louis' Mercy Children's Hospital will be giving its nurses summers off in an effort to retain its nursing staff.

Nurses opting for seasonal staffing would still be full-time employees during the unit's September-May busy season—but will now be granted vacations June through August. While they won't be paid over those three months, they will retain full-time benefits—and will be able to work extra hospital shifts as needed.

The hospital is recruiting pediatric nurses for the positions. The contract

year would begin in September, meaning the nurses' first summer off would be next year.

TRACKING POLL: 1/4 OF VOTERS CALL HEALTHCARE "MOST IMPORTANT" 2018 ISSUE

New York, NY — Results of the June 2018 monthly health tracking poll of U.S. voters by the influential Kaiser Family Foundation say that nearly 25 percent of U.S. voters—regardless of party affiliation or non-affiliation—say that healthcare is the "most important issue" for 2018 candidates to discuss during their campaigns.

The tracking poll also found that three-fourths say it is "very important" that the Affordable Care Act provision prohibiting insurance companies from denying coverage due to someone's medical history remains. What's more, seven in ten say the same about the ACA provision barring insurance companies from charging sick people more.

SYMJEPI SET TO THREATEN EPIPEN 'MONOPOLY'

San Diego, CA — Like "Frigidaire" and "Thermos," the brand-name EpiPen device—the first of its kind on the market—has become synonymous with what it does.

In EpiPen's case, that would be delivering a shot of the life-saving drug epinephrine to people suffering life-threatening allergic reactions.

EpiPen is manufactured by Mylan, which has been accused of creating a competition-free industry monopoly for the devices and then jacking up the prices sky-high.

But after striking a deal with Sandoz, a subsidiary of Novartis, Adamis Pharmaceuticals will compete with the



COMPETITION INJECTION: ADAMIS HAS HIGH HOPES FOR THE SYMJEPI DEVICE

EpiPen franchise by offering the public its Symjepi alternative device.

A 0.3 mg. Symjepi injection device was approved this past June by the FDA, and other devices are also on the market.

PUBLIC-HEALTH EXPERT: LOWER HIGH DRUG PRICES BY SPREADING COSTS EVENLY

Chicago, IL — In a July 7 editorial, *Modern Healthcare* editor emeritus Merrill Goozner proposes that super-high drug costs be lowered by simply having everyone pay a bit of it.

Drug companies blame their new products' "astronomical" price tags on their value, according to Goozner, introducing to the market as they do new treatments—and hope—for cancer, autoimmune diseases, and rare genetic and other disorders.

With spending on specialty drugs (already 40 percent of the \$450 billion pharmaceutical market in 2016) expected to grow at double-digit rates, "there has to be a better way to finance innovation," Goozner opines. "Adding financial insecurity to the travails of families already struggling with a devastating disease makes no sense."

Goozner's solution is to "spread the cost across the entire insured population"—essentially the very concept of health insurance itself, in which membership fees are pooled and then used to pay medical costs for sick members.

Goozner calls for a small per-capita fee charged to the members of every existing insurance plan, public and private, to create a pool within a pool specifically for high-cost drugs. "We don't have to force small patient populations and their insurers to pay the entire bill for costly new treatments."



INJECTION EXCEPTIONS NIXED: WITH A RECENT STATE COURT RULING, KIDS IN NEW YORK CITY-REGULATED DAY CARE CENTERS AND PRESCHOOLS MUST BE VACCINATED

DISABILITY NEWS

New Yorker is Nation’s First Lobbyist with Down Syndrome

Syracuse, NY — Chalk up another one for the Empire State’s long and proud history of firsts—Washington, D.C.’s first-ever registered Capitol Hill lobbyist with Down syndrome hails from nowhere else but New York!

Syracuse resident Kayla McKeon, 30, is a part-time employee of the National Down Syndrome Society, where she has worked since October of 2017, recently reported *Disability Scoop*.

Several times a month, Ms. McKeon flies from upstate to New York City or Washington, D.C.,

where she has already has met with elected officials ranging from U.S. House Speaker Paul Ryan, R-Wis., to Sen. Tammy Duckworth, D-Ill.— and where she speaks with powerful credibility when working for better laws for people with disabilities.

“I like being able to share my story and my experience to members of the Senate and congressmen and women,” McKeon told *Disability Scoop*. “I like telling them about my abilities and how they can help us and pass these laws. It’s hard for them to say no to a self-advocate.” ★



SPEAKING (DISABILITY) TRUTH TO POWER: MS. KAYLA MCKEON’S NEW WORKPLACE

HEALTHY EATING

Carrots

EASY

YIELDS: 6 SERVINGS

PREP TIME: 0:10

READY IN: 0:10

Carrot Salad

CARROT SALAD LIKE GRANDMA USED TO MAKE!

INGREDIENTS:

- 6 carrots, shredded
- 1/2 cup raisins
- 1/2 cup orange juice
- 1 tablespoon honey
- 1 tablespoon lemon juice

DIRECTIONS:

- In a large bowl stir all ingredients together to form a great salad!

CHEF’S TIP:

When frying, place a piece of carrot in the oil; the oil will stay nice and clear.

BENEFITS:

Carrots are considered one of the healthiest root vegetables. They are crunchy, tasty and highly nutritious. Carrots are a particularly good source of beta-carotene, fiber, vitamin K, potassium and antioxidants.

EASY

YIELDS: 6-8 SERVINGS

PREP TIME: 0:05

READY IN: 1:30

Easy Sweet Carrots

EXTREMELY EASY SWEET CARROTS!

INGREDIENTS:

- 1 bag frozen sliced carrots
- 3/4 cup sugar
- 1/4 cup oil
- 1/4 cup water
- Dash cinnamon
- 1 tablespoon vanilla sugar
- Dash salt
- Dash black pepper (optional)

DIRECTIONS:

- Pour the frozen carrots into a small 9x7 (5lb) baking pan
- Mix in all the ingredients
- Cover well
- Bake in the oven at 425° for 1.5 hours

INTERMEDIATE

YIELDS: 12 MUFFINS

PREP TIME: 0:15

READY IN: 0:40

Healthy Carrot Muffins

INGREDIENTS:

- 1 1/2 cups whole wheat flour
- 1 teaspoon baking soda
- 1 teaspoon cinnamon
- 1/4 teaspoon ground nutmeg
- 1/2 teaspoon salt
- 2 tablespoons butter, melted
- 1/2 cup honey
- 1 egg, lightly beaten
- 1 teaspoon pure vanilla extract
- 1 cup unsweetened applesauce
- 3/4 cup finely shredded carrots (about 2-3 medium carrots)

DIRECTIONS:

- Preheat the oven to 350°
- Line a 12-cup muffin tin with paper liners
- Whisk together dry ingredients in lg. bowl
- In a small bowl mix together the butter, honey, egg, vanilla, and applesauce
- Stir ingredients together until just combined
- Fold in the shredded carrots just until combined (don’t overmix or the muffins will be dense)
- Distribute the batter evenly among the muffin liners. Bake for 18-20 minutes until a toothpick inserted in the center of a muffin comes out clean
- Remove to a wire rack to cool completely. These muffins freeze great!

In the Know

ALL ABOUT... ACNE

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

Acne (ACK-nee) is a skin condition in which hair *follicles*—glands at the root of each hair below the skin's surface—become plugged with oil and dead skin cells.

Acne usually appears on the face, neck, chest, back and shoulders. It's most common in teenagers (reported prevalence of 70-85 percent), although younger children can get acne, too.

Despite its persistence, effective treatments are available for acne. With treatment, acne's pimples and bumps can heal slowly, despite others seemingly cropping up when others fade.

Depending on severity, acne can cause emotional distress and physical scars. But the sooner it's treated, the lower its risk of permanent damage—physically or emotionally.

SYMPTOMS

Symptoms vary depending on severity. They can include:

- Whiteheads (closed plugged pores)
- Blackheads (open plugged pores—skin oil turns dark brown when exposed to air)
- Small red, tender bumps (papules)
- Pimples (pustules), which are papules with pus at their tips
- Large, solid, painful lumps beneath surface of skin (nodules)
- Painful, pus-filled lumps beneath surface of skin (cystic lesions)

CAUSE

Acne has four primary causes: oil production, dead skin cells, clogged pores and bacteria.

Acne strikes when hair follicles become plugged with oil and dead skin cells. That's why acne typically appears on the face, neck, chest, back and shoulders—because the skin there has the most oil glands.

Normally, the oil glands of each follicle secrete an oily substance called *sebum*. Sebum lubricates hair and skin. It normally travels along the outside of each hair and through the pore (opening) of the hair follicle onto the surface of the skin.

But when the body produces too much sebum and dead skin cells, they pile up in the follicles—plugging the pore and allowing bacteria to thrive inside the follicle. Next, if a plugged pore gets infected with bacteria, inflammation results.

A plugged pore may then cause the follicle wall to bulge and produce a whitehead. The plug can also be open to the surface and then darken, causing a blackhead. (A blackhead may look like dirt stuck in the pore, but is actually just bacteria and oil which turn brown when exposed to air.)

Pimples are raised red spots with a white center which develop when blocked hair follicles become inflamed or infected. Blockages and inflammation deep inside hair follicles produce lumps below the skin's surface.

Factors that may worsen acne

- Androgens are natural chemicals in the body that increase as young people become full adults. When androgen levels change, oil glands in the hair follicles can enlarge and produce more sebum.
- Medications. Certain drugs containing corticosteroids, androgens or lithium can worsen acne.

- Diet. Some studies indicate that certain dietary factors, like dairy products and carb-heavy foods like bread, may trigger acne. Chocolate has also long been suspected of worsening acne, but more research is needed.
- Stress is also known to worsen acne.

Acne myths

Dirty skin. Contrary to the popular myth, acne is *not* caused by dirt or otherwise not regularly washing and soaping the skin.

Eating greasy foods. Putting items that contain oil or grease on the *inside* of your body has little to no effect on developing acne on the *outside*.

Cosmetics. Cosmetics don't necessarily worsen acne, especially if they are regularly removed—and all the more so if they are oil-free and therefore do not clog the pores.

DIAGNOSIS AND TREATMENT

First stage

With a little information readily available from reliable public sources like medical websites, one can make a reliable self-diagnosis without seeing a doctor. (Of course, if you're unsure, make that appointment!)

According to the FDA, some popular over-the-counter (OTC) acne skin products can cause serious reactions. Such reactions are quite rare, though, so don't confuse them with the redness, irritation or itchiness where you've applied medications or products.

Get emergency medical help immediately if any nonprescription



skin product causes faintness; difficulty breathing; swelling of the eyes, face, lips or tongue; or tightness of the throat.

Second stage

If OTC products don't work, see a dermatologist (skin doctor) for prescription medications.

With most prescription acne drugs, you may not see results for up to eight weeks; skin may worsen before it improving. It can take months or even years for acne to clear up completely.

Acne medications work by reducing oil production, speeding up skin cell turnover, fighting bacterial infection or reducing inflammation (which helps prevent scarring).

Which drug the dermatologist recommends depends on type and severity of acne. It might be applied to the skin (topical) or taken by mouth (oral). Acne patients are commonly given both.

Topical medications

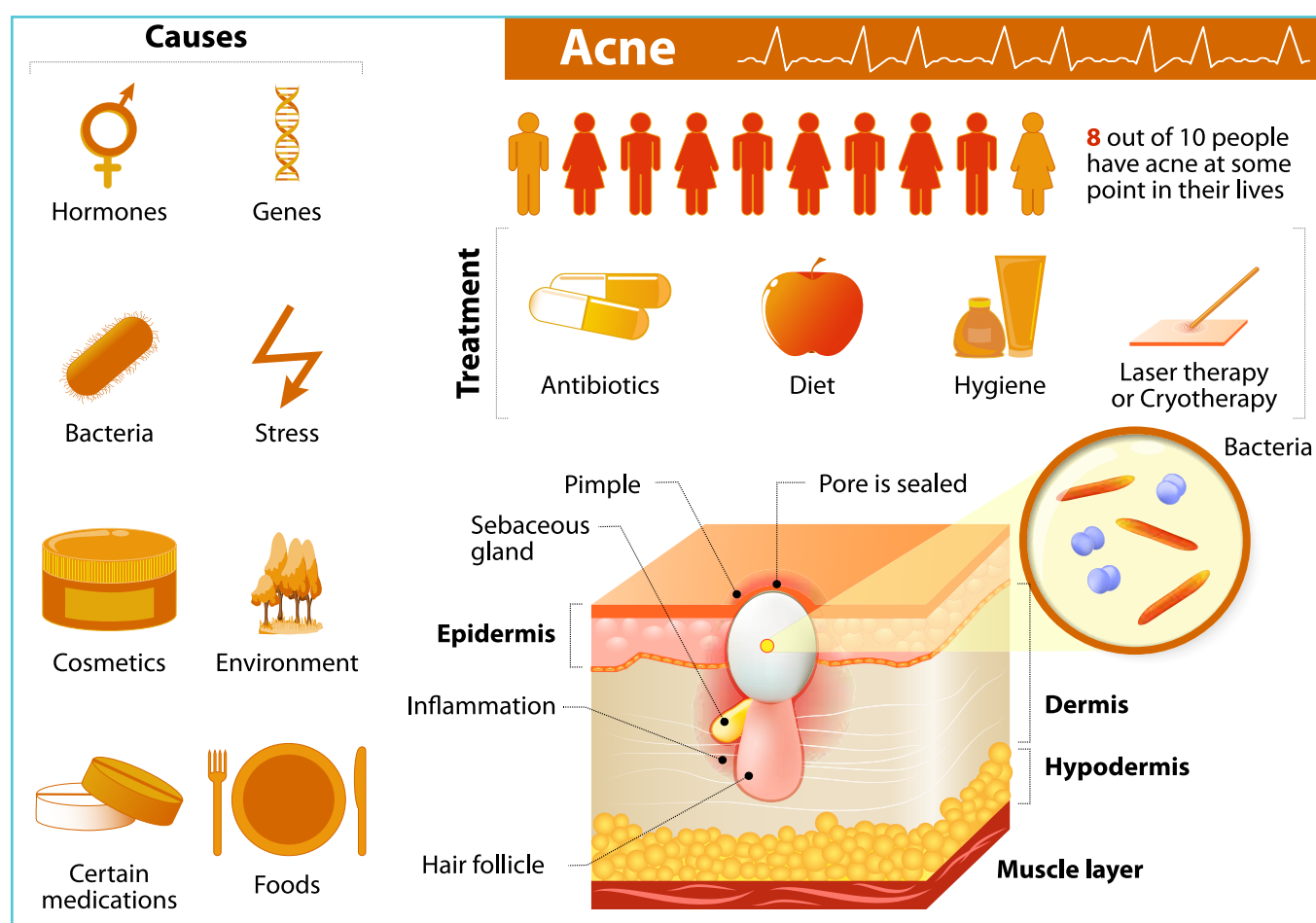
These products work best when applied to clean, dry skin about 15 minutes after washing—but benefits may not appear for the first few weeks, and at first, skin irritation may also occur. The dermatologist may recommend steps to minimize side effects like a gradually increasing dose, washing off creams after short applications, or switching to other medications.

Commonly prescribed medications include:

- Retinoid drugs, which prevent hair follicle plugging. They come in cream, gel or lotion form and are generally applied each evening three times a week, then daily as the skin adjusts. Common retinoids include Avage, Avita, Differin, Retin-A and Tazorac.
- Antibiotics, which work by killing excess skin bacteria and reducing redness. For the first few months of treatment, patients may use both retinoids and antibiotics. Examples of acne antibiotics are Acanya, Benzacilin, Benzamycin, and Duac.
- Aczone, an acne gel most effective when combined with retinoids. Side effects include redness and dryness.

Oral medications

Antibiotics. For moderate to severe acne, oral antibiotics may reduce bacteria and fight inflammation. But these antibiotics may cause side effects like upset stomach, dizziness, increased sun sensitivity, and even discoloration of developing permanent teeth. Antibiotics called *tetracyclines* are not recommended for expectant mothers.



Isotretinoin. This powerful drug (brand names Amnesteem, Claravis and Sotret) is for people with acne not responding to other treatments. It's very effective—but doctors need to closely monitor anyone on this drug due to its strong potential side effects. Ask your doctor for more information.

Other treatments

The following other treatments may be suggested, either alone or in combination with medications.

Light therapy. Light therapy targets the bacteria that cause acne inflammation. Some types of light therapy can be performed right in a doctor's office. However, while a variety of light-based therapies have been shown to be successful, further study is needed to determine the ideal method, light source and dose.

Chemical peel. This procedure uses repeated applications of various chemical solutions such as salicylic acid; it's most effective when combined with other acne treatments (except oral retinoids). Chemical peels may cause temporary severe redness or blistering or even long-term discoloration.

Extraction of whiteheads and blackheads. Using special precision tools, a dermatologist here will gently *extract*, or remove, whiteheads and blackheads that haven't cleared up with topical medications.

Steroid injection. Lesions (cystic and nodular) can be treated by injecting various steroid drug directly into them. This improves their appearance without having to resort to extraction.

Treating acne scars

Injecting *soft tissue fillers* like collagen or fat under the skin and into indented scars can fill out or stretch the skin, making scars less noticeable. However, results of such treatments are temporary, rendering patients needing to repeat the injections periodically.

Applying the high-potency acid of *chemical peels* to the skin removes the top layer and minimizes deeper scars.

Dermabrasion, or "sanding" the surface layer of skin with a rotating brush, is a procedure usually reserved for more severe scarring and helps blend acne scars into the surrounding skin.

Laser resurfacing is a skin appearance improvement procedure.

Punch excision is a minor surgical procedure in which the doctor cuts out individual acne scars and repairs holes at scar sites with stitches or skin grafts.

Treating children

When children have acne, it's best to consult a pediatric dermatologist. Ask about which drugs to avoid, appropriate doses, drug interactions, side effects, and how treatment may affect growth and development.

Mild acne in children can be avoided or controlled with non-prescription products.

Good basic skin care and other self-care techniques are also key to acne treatment, including: regularly soaping and shampooing problem areas at least once every day; avoiding certain products like facial scrubs and skin creams that tend to irritate the

skin; and not excessively washing and scrubbing the skin.

PREVENTION

- Wash acne-prone areas only twice a day. Regular skin washing removes excess oil and dead skin cells. But too much washing can irritate the skin.
- Avoid irritants. You may want to avoid oily or greasy cosmetics, sunscreens, hairstyling products or acne concealers. Use products labeled water-based or noncomedogenic.
- Use an oil-free moisturizer with sunscreen. The sun worsens acne for some individuals, and some acne medications increase sun sensitivity.
- Watch what touches the skin. Keep hair clean and off the face. Avoid resting your hands or objects (like phones) on your face. Tight clothing or hats also can pose a problem. Sweat and oils can worsen acne.
- Finally, don't pick or squeeze skin blemishes. Doing so can cause infection or scarring.

PROGNOSIS

Once acne improves, you may need to continue your acne medication or other treatment to prevent new breakouts. You might need to use a topical medication on acne-prone areas or attend ongoing light therapy sessions. Talk to your doctor about how you can keep your skin clear. ★

Status Report

Happening In Hospitals Today

'HOSPITAL-AT-HOME' PILOT PROGRAM CUTS ADMISSIONS, COSTS: STUDY

New York, NY — If hospital inpatients are stable and out of danger, why keep them in hospital beds when they can recover at home in their own beds?

It may be years before patients who've been hospitalized for acute conditions are simply stabilized and then sent home for hospital-level care by visiting doctors and nurses.

But if an innovative 2014 program piloted at New York City's very own Mount Sinai ultimately goes national, Medicare patients could get hospital-quality treatment in their own bedrooms—resulting in lower hospitalizations, lower Medicare costs, and better long-term health results.

The Hospital-at-Home (HaH) Alternative Payment Model (APM) was created by Mount Sinai's Icahn School of Medicine. It's essentially built on replacing non-critical inpatient care with home-based daily visits for medical and nursing care.

In 2014, the HaH program was awarded a Health Care Innovation Award by the Centers for Medicare & Medicaid Services (CMS).

And now, in a study published in *JAMA Internal Medicine*, Mount Sinai researchers have found that home-based Medicare patients in its HaH program did better than hospital-based patients in several key measures.

The study found that, over a 30-day period, home-based patients had fewer hospital and ER readmissions, fewer admissions to skilled nursing facilities, and also rated their hospital care higher.

Most importantly, the HaH model cost less than Medicare's traditional fee-for-service payment model.

In the fall of 2017, the Physician-Focused Payment Model Technical Advisory Committee—an independent group that evaluates new payment models and reports findings to the U.S. Department of Health and Human

Services (HHS)—recommended implementation of HaH-Plus, an expanded version of HaH.

"Creation of an APM for such a model of HaH care would establish Medicare billing codes, allowing clinicians to bill directly for HaH services and paving the way for broad-scale adoption of the HaH program in the United States," Mount Sinai researchers wrote.

HEALTH EXPERT TO CONGRESS: SURPRISE BILLING SHOULD BE 'ILLEGAL'

Washington, D.C. — In recent testimony before the U.S. Senate's Health, Education, Labor & Pensions (HELP) Committee, Harvard health researcher Ashish Jha, M.D. said that surprise medical bills for out-of-network providers should be banned outright.

So-called *surprise billing* refers to hospital patients getting charged for hospital medical services provided by subcontracted medical professionals. Such professionals, like

anesthesiologists, are typically not covered by insurance plans.

According to Dr. Jha, the best estimates indicate that one out of seven times someone goes to the ER, they are going to be stuck with a surprise bill. "I think this is an outrage," he testified. "It's unethical, if not illegal. Obviously it's not illegal, but it ought to be."

AMERICA'S TEN TOP-PAYING CITIES FOR NURSES

Portland, OR — If you're a registered nurse (RN) looking for a top-paying job, head out to Portland.

That's what a new joint report by online companies SpareFoot and ZipRecruiter found—along with the nine other U.S. cities where jobs in nursing pay the most.

By real adjusted salary, this trendy Pacific Northwest city—with a figure of \$67,207—is America's top-paying town for RNs, according to the research.

The top three are rounded out by Providence, Rhode Island and San Francisco, California—while Buffalo



NURSES PAID MOST HERE: STUDY

and Albany, New York respectively take the No.9 and No. 10 places.

NUMBER OF HOSPITAL-EMPLOYED DOCS RISES NEARLY 12 PERCENT FROM 2001 TO 2015

Chicago, IL — In 2001, 52.4 percent of doctors were employed by hospitals and health systems—but by 2015, according to a new survey of physicians published in the *Journal of the American Medical Association (JAMA)*, that number had risen to 64.2 percent.

At the same time, the survey found that the number of self-employed doctors decreased between 2001 and 2015 from 35.2 to 24.7 percent.

The figures reflect the increasing complexity of today's healthcare economy—and the ability of ever-larger healthcare systems to navigate those changes to their overall financial advantage, according to researchers. ★



BOTTOM-LINE BOMBHELLS NO MORE? PUBLIC-HEALTH EXPERT ASHISH JHA, M.D. TELLS CONGRESS TO BAN SURPRISE BILLS



The Senior Care Gazette

News from
the World of
HamaspikCare
and Senior
Health

Maine Proposes Controversial Universal Home Health Care

Portland, ME — In late June, the State of Maine officially released the text of Question One, a statewide proposal to face the popular vote on November 6.

The proposal, the first of its kind nationwide, would create the “Universal Home Care Program,” which would “provide home-based assistance to people with disabilities and senior citizens, regardless of income.”

According to the text, the Program would be funded by a new 3.8-percent tax on people with annual incomes over \$128,400, or the amount subject to Social Security taxes.

Proponents say that payroll taxes will be lower than if those same people had to keep paying Social Security tax on their higher incomes. Opponents say it will hurt Maine business and entrepreneurship. According to former Westbrook, Maine mayor Colleen Hilton, the initiative would allow “millionaires” to receive free home health care services, paid by other people’s taxes. ★

Robust Community Demand Drives Robust Hiring at HamaspikCare

Initially launched as a solution to the community’s special-needs care and residential housing problem, Hamaspik responded some two decades later to the home-care needs of one specific individual—ultimately giving rise to what became HamaspikCare: a full-fledged home-care services agency that brings the agency’s trademark excellence to the community’s still-growing need for home care across several regions across greater New York.

Currently, reports Chief Operating

Officer (COO) Mordechai Wolhendler, HamaspikCare’s authoritative community reputation is driving dozens of active new patients a month. “Legendary support and extraordinary care!” he quips, quoting HamaspikCare’s slogan.

In turn, that community demand has been driving a most-necessary hiring boom all across HamaspikCare.

No less than five new Scheduling Coordinators—the critical “air traffic controllers” at the nerve center of HamaspikCare’s daily (and often late-

night) operations—have been taken on in the past two months, along with a home health aide (HHA) recruiter exclusively for upstate Orange County.

Two registered nurses (RNs) are also being sought, Wolhendler adds, as well as new staff for the agency’s offices in Brooklyn and Monsey.

At the end of the day, where there’s a community need, there’s Hamaspik.

And where there’s a community home-care need for its honored seniors, there’s HamaspikCare. ★

Former ER Doc, Two Nurses Convicted For \$13M Home Health Fraud

Dallas, TX — Former ER physician Kelly Robinett, DO and two home-care nurses were found guilty by a Texas jury in late June for their roles in a \$13 million fraud scheme.

Prosecutors claim Dr. Robinett signed bogus documents for eight years that allowed Dallas-based Timely

Home Health Services to bill Medicare for services patients didn’t need.

Vocational nurse Kingsley Nwanguma and director of nursing Joy Ogwuegbu, both of Timely Health, were also convicted for their roles in the scheme.

The sentencing hearings for all

three individuals are scheduled for a later date.

“The significance of this case highlights the responsibility health-care workers, especially physicians and nurses, have to protect not only their patients, but prevent fraud against any federal health insurance program during the performance of their duties,” Eric Jackson, head of the FBI’s Dallas office, told *The Dallas Morning News*. ★

Most Wealthy Older Adults Want Independent Home Living First, Assisted Living Second: Bank Survey

Cleveland, OH — A Key Private Bank survey of 150 high-end financial advisers finds that older adults’ first choice for living arrangements as they age is to stay at home and remain completely independent.

But according to the same survey, moving to an assisted living community was a “close second.” It far outstripped the option of being cared for by family or professional caregivers at home or moving to a nursing home.

The surveyed polled advisers who work with high-net-worth individuals on long-term care planning. Some 96 percent reported that being independent at home was their clients’ top choice, with 93 percent saying that assisted living came in second.

At a respective 11 and one percent, home care and nursing home living were the options least appealing to clients, according to the advisers. ★



NO PLACE LIKE IT: A RECENT SURVEY OF WELL-TO-DO SENIORS BY KEY PRIVATE BANK, A CONCIERGE BANKING SERVICE FOR HIGH-END CLIENTS, FINDS THAT MOST WANT TO REMAIN HEALTHILY INDEPENDENT IN THEIR OWN HOMES FOR THE REST OF THEIR LIVES



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