

Gazette Cazette

News of Hamaspik Agencies and General Health

OCTOBER '18 • ISSUE NO. 163

0

GAZETTE SURVEY

The GAZETTE asks YOU:

WHEN YOU GET A SERIOUS COLD, WHAT'S YOUR PRIMARY RESPONSE?

A. HOT TEA; **B.** MEDICATION; **D.** DOCTOR VISIT Respond to: survey@nyshainc.org

R

HEALTH STAT

VIRTUAL MEDICINE VIRTUALLY EXPLODING

Teladoc online doc-visit membership:

15 MILLION | AUG. 2017 22 MILLION | AUG. 2018

.0.

HEALTH TIP

RETHINK YOUR DRINK!

About 36% of unhealthy added sugars come from sugary drinks—so go low-calorie or no-calorie! Drink water, diet soda or unsweetened iced tea instead.

Source: New York State Office of Temporary and Disability Assistance (OTDA)

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● ► HAMASPIK NEWS

FACING LINES OF QUESTIONING

ON OPPOSING TEAMS BUT NOT OPPONENTS, THE GENTLEMEN OF HAMASPIK OF ROCKLAND COUNTY'S DAY HAB PROGRAM ENJOY A GROUP GUESSING GAME. THE COMPETITIVE ACTIVITY WAS PART OF DAY-CAMP-THEMED ACTIVITIES ALL SUMMER LONG, COLOR-CODED T-SHIRTS AND ALL.



● ► HEALTH NEWS

Prototype "Smart Bandage" Monitors Wounds, Gives Meds

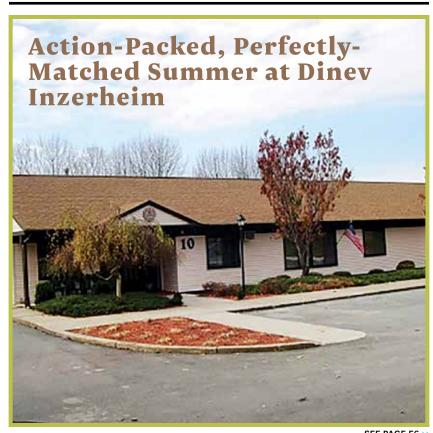
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Monroe, NY 10950

Monroe, NY 10950

Prex Group

● ► HAMASPIK NEWS



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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 daily living (ADL) skills and long-term life goals

HOME-BASED RESPITE

Providing: Relief for parents of individuals with

AFTER-SCHOOL RESPITE

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

DAY HAB PROGRAM

Providing: A day program for adults with

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 involve

individuals who have developmental disabilty

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 \cdot parent/child groups \cdot ongoing service coordination · therapy (PT, OT, SLP, vision, nutrition, play, etc.) · special ed · social work · $family\ training/counse ling\cdot bilingual\ providers$

NURSING HOME TRANSITION AND DIVERSION (NHTD) PROGRAM

Providing: Service Coordination · assistive $technology \cdot moving \ assistance \cdot community$ transitional services · home/community support services · E-mods · 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-mods · transportation · community transitional services · home/community support services

CHILD AND ADULT CARE FOOD PROGRAM

Providing: Breakfast \cdot lunch \cdot supper \cdot 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 \cdot speech therapy \cdot occupational therapy

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 · $care\ planning \cdot paraprofessional\ supervision \cdot$ 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 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 \cdot speech therapy \cdot psychology social work \cdot psychiatry \cdot nursing \cdot nutrition

TRAINING SESSIONS

Providing: SCIP · CPR and first aid · orientation · $MSC\ CORE\cdot AMAP\cdot annual\ updates\cdot Com\ Hab/$ 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

HEALTH AND RECOVERY PLAN (HARP)

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

◆ HEALTH NEWS

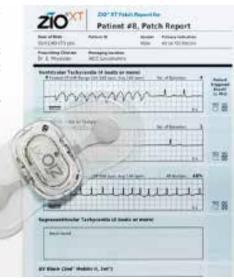
Wearable heart patch detects abnormal rhythms earlier

La Jolla, CA — In a new study by the Scripps Translational Science Institute, the Zio wireless heart patch was shown to accurately detect atrial fibrillation (AFib), or abnormal heartbeats, significantly than standard detection methods. The study involved over 2,600 participants over a period of several months.

As many as six million Americans have AFib, which can greatly increase risk of stroke and heart Compounding that failure. problem is that AFib can initially be subtle enough to not be noticed.

The Zio is a two-by-five-inch wireless electrocardiogram (EKG) patch worn directly on the skin that can be used to monitor a person's heart rate at home. It continuously monitors heart rhythms, storing up to two weeks of EKG data for later analysis.

The study found that those wearing the Zio were likelier to start taking anticoagulant medications earlier and



GETTING THE RIGHT RHYTHM EARLIER: THE ZIO DEVICE WITH SAMPLE READOUT

visit their primary care doctors and/ or cardiologists.

It likewise shows promise for the growing field of "wearable" biomedical technologies that cover a wide range of health concerns, including diagnosing illnesses earlier, keeping tabs on air quality, or even tracking brain activity while a person is in motion.



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● ► NYSHA NEWS

Tri-County Care Member Agencies Share, Strategize at 1st Advisory Committee Meeting

Late-July Event Underscores Corporate Culture of Responsiveness, Proactivity



When you're on the Tri-County Care (TCC) team, you can be sure that your voice will be heard.

That was the primary takeaway from Tri-County's first-ever Advisory Committee meeting, according to Executive Director Yoel Bernath.

Indeed, says Bernath, Tri-County's pledge to broker a big-tent Advisory Committee was one of the very reasons many member agencies joined Tri-County in the first place.

At the corporate event held this past July, the vast majority of Tri-County's 45-plus member agencies found themselves at a conference table—where they were free to put their contributions on the table.

Shortly after 11:00 a.m. on July 24, close to 60 attendees, comprised of member-agency representatives and Tri-County top brass, joined forces for a half-day conference in a large onsite hall on the premises of TCC's headquarters.

Topics included reimbursements and billing, case assignments and referrals, and the cultural nuances of the range of communities serviced by Tri-County Care across greater New York. The latter subject is particularly important considering the roughly

10,000 diverse community members supported across Tri-County's member agencies.

Every major issue was addressed—from frontline interactions with supported individuals to backroom tech support for the agency's new software system.

Perhaps most tellingly, the meeting was not required by any state regulation.

As a "conflict-free" Care Coordination Organization (CCO), Tri-County Care is governed by a long list of rules. These were drafted, and are enforced, by the CCOs' creators—the New York State Office for People With Developmental Disabilities (OPWDD) and the New York State Dept. of Health (DOH).

Forging combined centuries of industry know-how into a strategic agency consensus is not one of them. Tri-County Care called for that member consensus anyway.

With all that pooled workforce, talent and experience under one roof, the Advisor Committee handsomely met its purpose as its member providers came away fully engaged and looking forward to working with Tri-County Care.

"We wanted to make sure they have input and impact" on Tri-County's ongoing mission, Mr. Bernath tells the *Gazette*.

And the resulting huddle was "a good and open dialogue" that "showcased our entire leadership team"

PUBLIC HEALTH AND POLICY NEWS

Delay for Caregiver Electronic-Monitoring Requirement Signed into Law

Washington, D.C. — Under the 21st Century Cures Act, the final piece of legislation signed by Barack Obama as President, attendants providing personal care under Medicaid-funded programs would have to electronically check in and out when on site to help people with special needs.

That requirement was slated to take effect nationwide in January 2019. But under newly-signed bipartisan legislation, electronic visit verification (EVV) will be delayed until 2020.

The one-year delay of EVV was sought by a number of disability rights groups largely because of concerns about privacy and the timeline for states to comply, reported *Disability Scoop*. The intent of EVV was to curb Medicaid fraud by verifying when services were provided.

The new law signed this week also requires CMS to hold at least one public meeting by the end of the year to solicit feedback on EVV from patients, caregivers and state health officials.

While praising the new law, some advocates said they want to see more legislation passed to narrow the reach of EVV. "We were grateful to see that

the EVV delay legislation became law," said Nicole Jorwic, director of rights

policy for The Arc. "It's a good first step of fixing the underlying issues that we

have seen around implementation at the state level around the country." \star



SWIPING IN IS OUT: RESPONDING TO INDUSTRY, ELECTRONIC VISIT VERIFICATION (EVV) WON'T START UNTIL AT LEAST 2020

Hamaspik Gazette

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Happening in Health Today

INTERVENTION FOR FIRST-TIME MOMS IMPROVES BABY WEIGHT: STUDY

Athens, GA — An intervention designed to help first-time mothers effectively respond to their infant's cues for hunger, sleep, feeding, and other infant behaviors significantly improved the body mass index (BMI) scores of the child through age three compared with a control group.

Results of the study, called Intervention Nurses Start Infants Growing on Health Trajectories (INSIGHT), were published August 7 in the Journal of the American Medical Association (JAMA).

The INSIGHT study randomly assigned first-time mothers and their infants into two groups to determine if an intervention in "responsive parenting" delivered during infancy and early childhood promoted healthy weight gain leading to improved body mass index (BMI) scores through age three compared to a control group not getting that same intervention.

The study found that kids in the responsive parenting group had significantly lower overweight or obesity rates compared to the control group at age two.

FDA APPROVES FREEZE-DRIED PLASMA FOR U.S. ARMY

Washington, D.C. — A dependable, portable emergency blood supply is key to ensuring the military's ability to treat battlefield injuries immediately. With that in mind, the U.S. Food and Drug Administration (FDA) recently broadened military access to freezedried plasma (FDP).

Last month, the FDA granted an emergency use authorization to the Department of Defense (DoD) while the agency works toward approval for the new type of plasma.

Currently, the Army uses a substance officially known as Pathogen-Reduced Leukocyte-Depleted Freeze-Dried Plasma. That current freeze-dried plasma product is stored in glass bottles. Physicians and medical personnel reconstitute the plasma with

a vacuum pressure system.

But, as an article on the Army website notes, the bottles are heavy and damage-prone if not handled correctly. The vacuum system also requires a spiking process that, if not performed precisely, can cause problems.

The new U.S. version will use lighter, state-of-the-art plastic bags that use a standard fluid transfer set to

IS SOY "MILK" REALLY MILK? FDA MAY SOON DECIDE

Washington, D.C. — The decidedly non-dairy but definitely milk-colored health beverage comes neither from a cow nor any lactating animal, but it's still known as "milk"—"soy milk," "almond milk," "coconut milk" and the like, that is.

That fact has some in the food industry pushing the FDA to enforce "standards of identity" for such products and to regulate the ability of non-dairy beverages to call themselves "milk."

The variety of plant-based or dairy alternatives on the market like soy, almond, coconut and other non-dairy products have long irked dairy industry establishments like the National Milk Producers Federation (NMPF).

"The marketing of non-dairy imitators must comply with federal standards of identity, and consumers should not be misled that these products have the same nutrition as real milk, yogurt, cheese and other actual dairy products," said NMPF CEO Jim Mulhern in a recent statement.

Most recently, the FDA announced that it would be implementing new standards to possibly require beverages that are not actual milk to use words other than "milk." According to FDA Commissioner Scott Gottlieb, the agency will open a docket "very soon" and solicit public comment to help develop a guidance document that would enforce the new standards.

mix the product with sterile water for injection.

PROTOTYPE "SMART BANDAGE" MONITORS WOUNDS, DELIVERS MEDS

Medford, MA — A three-university research team has developed a prototype "smart bandage" that can sense when to release drugs directly into the skin and wirelessly transmit messages directly to patients and doctors via smartphone.

The prototype is equipped with temperature and pH sensors that are printed directly onto the surface of a thin, flexible medical tape—and a microprocessor. Prompted by sensors, the microprocessor heats up a hydrogel heating element in the bandage, releasing drugs and/or other healing substances as needed.

While the smart bandage might help mend everyday cuts and scrapes, it was designed with the intent of helping people with hard-to-heal chronic wounds, such as leg and foot ulcers.

The team consists of Tufts University of Medford, MA; UCLA of Los Angeles, CA; and Purdue University of West Lafayette, IN.

23ANDME, GSK JOIN FORCES FOR GENETIC-BASED DRUG RESEARCH

Atlanta, GA — Drugmaker GlaxoSmithKline (GSK) recently entered into a four-year collaboration with 23andMe to use human genetics to guide drug development, investing \$300 million in the direct-to-consumer genetic testing company to fund the effort.

Under the agreement, the pharmaceutical giant would have exclusive access to 23andMe's statistical analysis tools and massive DNA database.

The genetics startup boasts over five million customers, 80 percent of whom have consented to research. For its part, GSK will use the information to discover novel drug targets and, based on those discoveries, develop therapies for unmet medical needs.

"This collaboration will enable us to deliver on what many customers have been asking for—cures or treatments for diseases," 23andMe CEO and co-founder Anne Wojcicki said in a statement. "By leveraging the genetic and phenotypic information provided by consenting 23andMe customers and combining it with GSK's incredible expertise and resources in drug discovery, we believe we can more quickly make treating and curing diseases a reality."

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► HAMASPIK NEWS

For Gentlemen Supported by Hamaspik of Orange County, Great Summer Closer is New Year's Opener

Joint Program Project Produces Person-centered Upstate Group Vacation



GOAT GOT HIM: FOOD FOR FARM FUN

FLEISCHMANINS

PESTAURANTS

SINV

SOLUTION

PERTAURANTS

A WELCOMING SIGN: THE VACATIONERS POSE AT THE GATEWAY TO THEIR GETAWAY



A MAN ABOUT TOWN: GOING SHOPPING

There's no better way to gear up for a new year than with a great closing to the old year.

That was the idea behind a joint effort by two of Hamaspik of Orange County's great programs that support young men in the community with various disabilities.

The Community Habilitation (Com Hab) program supports people's wideranging community-acclimation goals. It focuses on one-one-one, individualized attention and mainstream venues outside private residences, such as retail stores and houses of worship.

Day Habilitation (Day Hab) focuses on group-oriented activities that enhance and fortify individuals' quality of life and activities of daily living skills.

Both have been offered to the disability public by the New York State OPWDD for years now through such nonprofits like Hamaspik and worthy others.

And this past June 26 through July 12, a group of young men regularly benefiting from both Hamaspik offerings enjoyed community and day habilitation in a venue of their choice—a vacation at the popular community destination of upstate Fleischmanns, New York.

The gentlemen's getaway was their third consecutive summer in Fleischmanns, reports Hamaspik of Orange County Men's Day Hab Manager Solomon Rabi.

For their two-week upstate jaunt, the four gentlemen took up residence at Schwartz's, a well-visited bungalow colony. They were accompanied by Mr. Rabi himself and Direct Support Professional (DSP) Mr. Dov Ber



THE HEIGHTS OF RECREATION: ENJOYING THE VIEWS ATOP AN OFF-SEASON SKI PEAK



AN UPLIFTING EXPERIENCE: THE GENTLEMEN AND STAFF HEAD FOR THE HILLS

Jakobowitz—himself accompanied by Mrs. Jakobowitz, his better half and a great cook whose culinary work was on the table thrice daily.

From their vacation home, they set forth on daily forays to venues near and even a bit far.

Such day trips included riding

an off-season ski lift to a beautifully breathtaking mountaintop, touring a regional distillery, or getting their feet wet in the good-old-fashioned fun of wading through a nearby brook.

The gentlemen also took in a small regional zoo.

Mornings consisted of established routines in keeping with their faith communities of origin, including joining other vacationers at morning services at a nearby motel—where they also remained on site for post-prayer Torahstudy sessions.

Back at Schwartz's, the gentlemen enjoyedfresh and healthy daily breakfasts before embarking on their daily outings.

Afternoons were spent swimming at the colony's large private pool, or even learning how to weave specially-made strings into the precisely knotted tzitzis worn on the fringes of traditional wool jerseys (themselves also known as tzitzis).

They even did their own laundry on a near-daily basis, using money as part of their financial-skills goals to activate the coin-operated washers and dryers on site to ensure a fresh wardrobe always on hand.

There was still quite a bit of summer left when the gentlemen returned to their own homes in the Hudson Valley.

But with a rejuvenating summer vacation behind them, a spirit of renewal could perhaps be discerned moving within them—that spirit of starting all over again, that all-important sense of hope and optimism so much a part and parcel of the approaching Jewish New Year

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● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK



Coming Out of Their Shells



NO RECREATIONAL TORTOISES HERE: HAMASPIK OF KINGS COUNTY ENJOYING A PARK

My Word!



HEAR YE! AN AMUSED HAMASPIK BENEFICIARY TAKES IN AN EVENT EMCEE'S RECITAL

Action-Packed, Perfectly-Matched Summer at Dinev Inzerheim: Report

In an informal report recently e-mailed to the *Gazette*, Dinev Inzerheim ICF Program Director Mrs. Brach describes a season chock-full of personcentered busy-ness.

"We are all enjoying a very lovely summer. The individuals are going on day trips on an ongoing basis," writes the capable leader of Hamaspik's only Intermediate Care Facility (ICF).

Those trips have included Rye Playland, the beach, a petting zoo, and enjoying the bumper cars and water rides at area family fun parks.

Among those summer activities have also been cycling and Roller Blading, the Program Director adds. "They're having a blast!" Amidst all that activity, an audit by the New York State OPWDD yielded positive impressions of: preparedness and documentation, staff professionalism and devotion, attentiveness to residents' needs, person-centered meal planning, population-appropriate staffing, and regular one-on-one interaction.

Residents have also been enjoying an emphasis of late on crafting their own accessories, like necklaces, bracelets and earrings—for which they also shop regularly, Mrs. Brach reports.

The result of that has been a group of residents regularly well-dressed—and, as the Program Director describes it, with accessories that couldn't be more perfectly matched.

Banking on Real-life Skills Training at Day Hab? Check!

At the Women's Division of Hamaspik of Rockland County's Day Habilitation (Day Hab) program, basic personal finance is one item on the life-skills practice list that you can check.

And fairly literally, too.

In a textbook example of personcentered programming, the young women regularly attending Day Hab also regularly visit their local bank, where they deposit or cash their Social Security benefits checks.

Then, with Hamaspik's trained Day Hab Direct Support Professionals (DSPs) lovingly and patiently by their sides, they choose how to spend it (if at all), making their own decisions on prudent and cost-conscious shopping.

"They look for specials," notes Manager Mrs. Schonfeld. "And they learn how to write checks." But producing paper instruments of cash transfer is hardly all that's going on skills-practice-wise at Day Hab. There's also reading clothes tags for proper washing, drying, ironing and dry cleaning care; cooking and baking ("there's a lot of that," says Mrs. Schonfeld); "Circle Time" and other social-skills sessions; and a monthly hygiene lesson from the regular Hamaspik registered nurse

"That's besides all the courses," the Manager by-the-way adds—like personal computing, various disciplines of sewing, and even dancing.

Above all, attendees are also encouraged to ease into mainstream jobs—backed by the job coordination, coaching and transportation provided by Hamaspik staff.

And given all that support, a number of attendees regularly do.

On the Table: Cooking Up 'Major Accomplishments' at 38th St. Home

"It's a major accomplishment," says Manager Mr. Israel Indig. And he's right.

Never mind the fact that many of us aren't particularly good at food (except at eating it); leave it to a Hamaspik group home to empower residents to make their own meals, and totally cook-free.

That breakthrough is now firmly in place on a weekly basis, reports the longtime leader of Hamaspik of Kings County's youngest Individualized Residential Alternative (IRA).

Thanks to prolonged long-term practice with, and support by, the

group home's cook and Direct Support Professionals (DSPs), the residents of 38th St. are now making their own dinner once a week.

They've learned the basics of home cooking, from perusing cookbooks for personal favorites to buying and assembling ingredients, and from safely slicing, dicing and otherwise preparing to safe and proper usage of oven, stovetops and other appliances.

The results? Well, they're right on the table—and they're so good, you can taste them.

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HAMASPIK GAZETTE E7

● **HAMASPIK NEWS** | HAPPENINGS AROUND HAMASPIK

As Shabbbosawareness project plows ahead, Men's Day Hab picks winners

It was another exciting day at the Men's Division of the Hamaspik of Orange County Day Hab.

Their Shabbos awareness project was plowing ahead. As previously covered in the *Gazette*, the gentlemen had mastered the basics of planting and plowing—the first of the 39 no-no's that comprise official Shabbos observance.

Next up had been harvesting and winnowing—the next two actions in the chronology of turning seeds into bread. They now faced a choice.

Make that, "choosing."

Separating desirable from undesirable (or, legalistically speaking, the reverse) on Shabbos turns out to be a category of activity all its own once all is said and sown.

And so, to really put the concept of separating the good from the bad (or vice-versa) on the table, the gentlemen were quite literally faced with a hill of beans.

Fortunately, not a particularly big one, though.

The small mounds of legumes placed before each "Day Habber" seated at an activity table were comprised of naturally color-coded items of several distinct variety. The gentlemen's task was to separate those beans into piles by variety.

By the time they finished, the young men had internalized yet another basic concept of what constitutes work on the Sabbath day.

And in doing so, they hadn't just picked out piles of perfect beans for their Shabbos cholent (the bean stew that is the ultimate Shabbos food, as everyone knows). In the Day Hab's project to increase Shabbos awareness, they had all picked winners, too: themselves.

With Com Hab, Respite Programs, Hamaspik Growing New Community Roots in Long Island, Queens

As part of the OPWDD's Community Habilitation (Com Hab) and After-School Respite (ASR) programs, Hamaspik of Kings County's Long Island/Queens satellite office in Far Rockaway has been matching up a growing number of qualified direct-support staff with children with disabilities who come in the door qualifying for either program.

The well-established and growing Hamaspik location in Far Rockaway is the hub for a growing number of participating kids from the Queens neighborhood of Jamaica, as well as the "Five Towns" of nearby Cedarhurst, Hewlett, Inwood, Lawrence and Woodmere.

But of equal importance to beneficiaries are the providers—the soon-to-be Direct Support Professionals (DSPs) who step forward to lend a helping hand to these special children.

Separately interviewing providers and beneficiaries, and then making the right match, is a painstaking, personalized and compassionate process, explains longtime staffer Mrs. Chavi Laufer.

When a right candidate seems to have been found, Mrs. Laufer has provider and young beneficiary meet—and if they hit it off, the provider undergoes a series of rigorous mandatory background checks to ensure client safety, and then gets right to work! "This way, we get individuals who are capable and worthy," she explains.

According to Mrs. Laufer, the post-summer/pre-school bridge is a particularly busy time for Respite requests, with kids needing that extra attention—and with Hamaspik only too happy to deliver.

Distinguishing Gentlemen



SORTING THROUGH DIFFERENCES: THE YOUNG MEN OF DAY HAB HARD AT WORK







BEAN THERE, DONE THAT: ENJOYING THE LEGUMES OF THEIR LABORS

Line-Skipping Encouraged



GETTING A JUMP ON THINGS: ENJOYING A ROUND OF HEART-HEALTHY JUMPROPE

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The Autism Update

News and developments from the world of research and advocacy

STUDY: 80 PERCENT OF KIDS WITH AUTISM IMPROVE WITH CANNIBIDIOL

New York, NY — Recently, researchers led by NYU's Dr. Orrin Devinsky showed that a natural extract called cannibidiol (CBD) is effective in treating two rare and hard-to-treat forms of epilepsy. Now, a new study recently published in *Neurology* finds compelling evidence that CBD is an effective therapy for children with certain cases of autism.

In the new study, 60 children were treated for at least seven months with a high-CBD natural oil. After the treatment period, parents answered assessment questionnaires about their children's behavioral changes, anxiety levels and ability to communicate.

Eighty percent of parents noted a decrease in problematic behaviors, with 62 percent reporting significant improvements. Half of the children were reported as having improved communication, and 40 percent were said to now have significant decreases in anxiety

SIGNS OF ANXIETY IN INFANCY MAY FORESHADOW AUTISM: STUDY

London, England — Fearfulness and shyness in babies and toddlers predict features of autism at age seven, according to a new study. But early problems with impulse control and hyperactivity do not augur autism features.

The findings suggest that autism and anxiety have similar roots in the brain, but autism and attention deficit hyperactivity disorder (ADHD) do not, according to researchers at King's College London.

Autism often coincides with anxiety

and ADHD: Up to about 80 percent of people with autism also meet the criteria for ADHD or anxiety. And the three conditions tend to run together in families, suggesting they share genetic roots.

Previous studies have explored behavioral predictors of each of these conditions, but few have examined all three simultaneously.

NEW GOOGLE GLASS FACE-READING GAME IMPROVES KIDS' SOCIAL SKILLS

Stanford, CA — Widely seen as too futuristic and impractical, the Google Glass "smart" eyewear product largely disappeared a few years ago.

But now, a small group of kids with mild-to-moderate diagnoses of autism apparently have better social skills thanks to experimental new software that uses Google Glass's tiny built-in camera, screen and speaker to cue them to what emotions they're seeing in people around them.

In the Superpower Glass pilot program, developed and led by Stanford researchers, 14 kids with autism ages three to 17 tested the experimental system at home. They wore the smartphone-driven Google eyewear for at least 20 minutes, three times a week, for an average of ten weeks.

Superpower Glass is based on applied behavior analysis (ABA), an autism treatment using structured exercises.

It revolves around three children's games that provide real-time cues about other people's facial expressions. The game is viewed on the Google Glass screen. At the same time, the software uses the Google Glass camera and speaker to identify and name others' facial expressions.

Trained with hundreds of thousands of photos, the software recognizes seven core expressions: happiness, sadness, an ger, disgust, surprise, fear, and contempt. It also recognizes a "neutral" face.

Six of the 14 participants had large enough declines in their SRS-2 autism test scores to move down one step in the severity of their autism classification: four from "severe" to "moderate," one from "moderate" to "mild" and one from "mild" to "normal." What's more, 12 of the 14 families report their children are now making more eye contact.

The pilot program was described Aug. 2 in *npj Digital Medicine*.

TRISTRAM SMITH, AUTISM PIONEER, 1961-2018

Rochester, NY — Dr. Tristram Smith, whose research changed treatment for children with autism, died on Aug. 6 of a heart attack. He was 57.

Dr. Smith, who joined the University of Rochester Medical Center in 2000, was instrumental in the autism treatment shift from psychotherapy to behavior-based interventions, reported the Rochester Democrat and Chronicle. His work led the way for schools and pediatricians to screen children for autism.

A clinical psychologist by education, Dr. Smith's work in the autism field began in the 1980s. Over his decades of work, Dr. Smith saw patients at the Levine Autism Clinic, a part of Golisano Children's Hospital, and had a hand in over 80 articles and 30 books on autism.



GO, FIGURES! CHILDREN ON THE AUTISM SPECTRUM, LIKE THIS LITTLE BRAINIAC, TEND TO BOAST CALCULATING MINDS

NEW STUDY HELPS EXPLAIN AUTISM MATH TALENT

Padova, Italy — In a study published recently in *Scientific Reports*, evidence may link systematic thinking with mathematical ability—helping explain why people with autism also tend to have a head for numbers.

University of Padova psychologist Paola Bressan surveyed over 200 university students on their math skills. Students of math-heavy subjects like engineering or physics tended to think more systematically, not empathetically—underscoring the notion that more rigid, calculated thinking, like that commonly exhibited by people with autism, is more conducive to mathematics.

However, interestingly, while many people with autism have above-average math skills, they often struggle with math in real-world settings like word problems.

Breaking down the applications of mathematics in terms of empathic and systematic thinking could lead to strategies for teachers to help students, Dr. Bressan believes. "These findings endorse the notion that we may be able to help children learn, and perhaps even like, math" if their enjoyment of numbers is encouraged through games and specific activities.

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HAMASPIK NEWS

Camp B'Simcha Alight with Fire Safety Activities, Exciting Firehouse Visit!

Which little boy doesn't want to be a firefighter? Or at least visit a real firehouse and sit in a real fire truck, fire helmet and all?

For the kids who attend Hamaspik of Kings County's Camp B'Simcha program, that childhood desire became a reality this past July, as the handful of children with disabilities paid a visit in person to Engine 282/ Ladder 148, the FDNY firehouse in the heart of Borough Park.

Located at 4210 12th Avenue, the classically designed old-time fire station was the site of 30 excited minutes of hands-on experience this past July 12.

Guided and supported by their trained Hamaspik Direct Support Professionals (DSPs), the children got to try on helmets, sit in the trucks, and even handle a real firehose!

But that burning fire of firehouse excitement had been kindled a good few days earlier.

Camp B'Simcha is Hamaspik's summertime iteration of its yearround After-School Respite (ASR) Program, which runs parallel to local school districts' school calendars.

Whenever school is out, be it school-day afternoons or summertime vacations, the OPWDD-provided state program provides children with disabilities with a wholesome, therapeutic site-based activities program, all while granting their parents that much-needed respite.

Hamaspik of Rockland and Orange Counties have operated successful and burgeoning ASR programs for years. Hamaspik of Kings County opened its own earlier this year.

And just as those Hamaspik divisions dub their summertime programs Camp Neshoma, Kings took a similar cue and dubbed theirs Camp B'Simcha.

And happy indeed were the "campers" at B'Simcha (which means "happy") during the July 8-13 week, during which they engaged in a plethora of activities each Respite day involving all things fire safety.

On one day, they gathered around worktables to forge fire-shaped artsand-crafts, cutting out flame-shaped licks of paper and daubing them orange and yellow with hand paints.

Another day had the tiny tots hit the floor to practice fire escapingcrawling along on all fours to duck beneath imaginary smoke, something that visiting kids also do at the FDNY Fire Zone children's museum in Manhattan.

And a third day—besides all their other regular camp-themed activities—had the "campers" scuttling about the floor on scooters, rushing pell-mell here and there with imaginary water buckets to extinguish fantastic fire.

With such flames of exhilaration building, you can only imagine how positively thrilled each little boy and girl was to finally visit a real firehouse and meet their friends in public service, the real-life heroes of the Fire Department of New York.

Said firefighters, of course, were only too glad to play their long-lionized roles of community champions—and with their Hamaspik visitors being as adorable as ever, their tiny guests' joy was reciprocated.



WATER WORKS! NEW YORK'S BRAVEST HELP THIS BOY FEEL LIKE A REAL FIREFIGHTER



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out the risk pool.

Insurers could start selling shortterm plans as soon as a few months from now. While the rule goes into effect 60 days after posting, state regulators would still need to approve new plans.

According to officials, about 600,000 additional people are expected to enroll in short-term plans in 2019, with that figure reaching 1.6 million people by 2021 or 2022.



HHS ALLOWS SHORT-TERM, LIMITED-COVERAGE HEALTHCARE PLANS

Washington, D.C. — On Aug. 1, the U.S. Dept. of Health and Human Services (HHS) announced that short-term, limited-duration healthcare plans would now be allowed. The plans last up to 12 months and can be renewed for a maximum of 36 months. Insurers can also deny short-term coverage to people with pre-existing conditions.

The plans are not subject to Affordable Care Act (ACA) rules that require benefits like free preventive care or mental health coverage.

Officials tout the change as a way to make healthcare more affordable to people priced out of the individual market, by expanding access to short-term insurance coverage. The plans had previously been limited to three months and were non-renewable. "This action will help increase choices for Americans faced with escalating premiums and dwindling options in the individual insurance market," said HHS senior adviser Jim Parker.

But critics say the plans could harm consumers who don't realize they are limited. Critics also say that premiums in the individual market would rise even higher if abandoned by young, healthy people needed to help balance TICK FOUND IN WESTCHESTER COUNTY

Albany, NY If you're already taking all necessary and reasonable precautions against deer ticks to prevent Lyme disease, then you'll be safe against the newest insect to be bugging New Yorkers: the longhorned tick. This July, the state Health Department announced that

the new type of tick had been found in several locations across Westchester County.

According to the department, longhorned ticks have transmitted disease to humans in other parts of the world, but are currently not known to do so in the U.S.

"Regardless, New Yorkers should



THE NEWEST BUG IN THE (ECO)SYSTEM: A CLOSEUP OF A LONGHORNED TICK

continue to take steps to protect themselves, their children and their pets against ticks and tickborne diseases that are present in New York state," read an official statement.

Basic protection tips include wearing long pants and long-sleeved shirts to protect against ticks other biting insects; checking for ticks often while outdoors and brush off any ticks before they attach; and performing a full body check multiple times during the day.

The longhorned tick is not native to the U.S. and is commonly found in Australia, New Zealand and eastern Asia—but has recently been found in New Jersey, Virginia, West Virginia, North Carolina and Arkansas.

NIH TO ESTABLISH AI, MACHINE LEARNING COMMITTEE

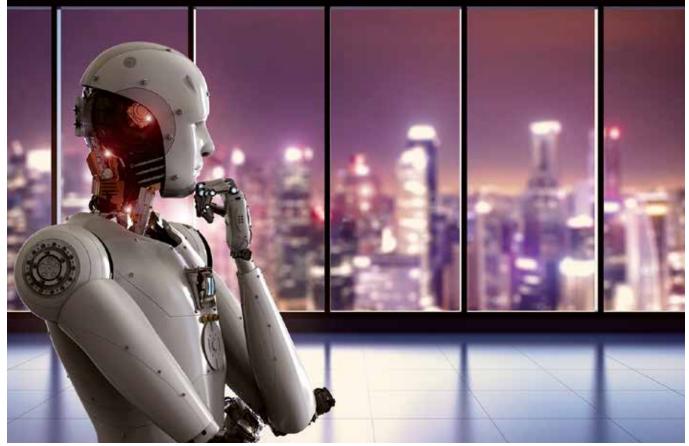
Bethesda, MD — At a July 23 conference, National Institutes of

Health (NIH) Director Dr. Francis Collins said his agency plans to expand its work with artificial intelligence (AI).

According to Dr. Collins, the NIH will consider new ways to incorporate AI and machine learning into biomedical research, the *Politico Morning eHealth* newsletter reported. Dr. Collins plans to appoint a "high-level committee" to advise the effort.

According to *Politico*, Dr. Collins also said he hopes to bring more Silicon Valley talent to the NIH, potentially to fill the open position for an associate director for data science.

The forthcoming AI committee represents another step in the NIH's move to embrace emerging technology. The agency also recently added Google Cloud as a partner on its Science and Technology Research Infrastructure for Discovery, Experimentation and Sustainability Initiative to bring certain databases to a secure environment for biomedical research.



THE ROBOT WILL SEE YOU NOW? CURRENT MEDICAL APPLICATIONS OF AI ARE LARGELY LIMITED TO DEEP DATA CRUNCHING

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► HEALTH NEWS

Fluoride vs. Brushing: For Cavity Prevention, Study Confirms Conventional Wisdom

Seattle, WA — So, it is the fluoride in the toothpaste that prevents cavities? Or is it the cleaning of the teeth by brushing?

The answer to that decadesold running question is squarely "fluoride"—if you ask most members of today's dental establishment.

A recent study on the subject by the University of Washington (UW)'s dentistry school had researchers comb through 70 years of scientific dentistry studies on the specific issue—finding only three studies on whether fluoride actually prevents cavities.

When UW researchers evaluated those studies statistically as a whole, they found no significant cavity reduction from simply brushing or flossing without fluoride.

Still, there are several licensed professionals who subscribe to the minority opinion. Dentist and fluoride-free Revitin creator Dr. Gerald Curatola, for example, believes that the latest science suggests a healthy mix of oral bacteria as being



FLUORIDE IT IS: STUDY CONFIRMS

the key to dental health.

The market share for fluoride-free toothpaste is estimated at no more than five percent of all toothpaste sold, but with projected growth of over five percent annually.

That's not to say that brushing alone has no value, though, reducing the amount of organic debris in the mouth as it does.

And besides, according to enough dentists, there remains a third way to effectively prevent cavities: simply reducing consumption of sugar.

HEALTHY EATING

Green Beans



PREP TIME: 0:10 READY IN: 0:30

Green Beans with Almonds

THIS MAKES AN ELEGANT SIDE DISH

INGREDIENTS:

- 1 bag frozen French cut green beans
- 1 onion diced
- 3 tablespoon oil for sautéing
- Salt to taste
- 1 cup slivered almonds
- 1/4 cup sesame seeds

DIRECTIONS:

- On a baking sheet, lay out the almonds and sesame seeds, roast in oven at 420° for 5-10 minutes, stirring every few minutes to prevent burning
- Meanwhile, in a medium-sized sauce pan, sauté the onion for 5 minutes or until translucent
- Add green beans to the onions; season with salt
- Cook for 10-15 minutes or until preferred tenderness
- Mix in the sesame seeds and almonds



Green Beans with Red Pepper

PERFECTLY EASY SIDE DISH

INGREDIENTS:

- 1 bag frozen green beans
- 1 onion diced
- 2 cloves garlic crushed
- 3 tablespoon oil for sautéing
- 1/4 cup water
- 1 red pepper- diced
- 1/2 teaspoon salt
- 1/4 teaspoon black pepper

DIRECTIONS:

- Sauté onion and garlic till golden
- Add diced red pepper
- Mix in green beans
- Season with salt and pepper, add water
- Cover well and bake for 10-15 minutes

PREP TIME: 0:05 READY IN: 0:10

Green Beans with Bread Crumbs

PERFECT SIDE DISH FOR ALL OCCASIONS

INGREDIENTS:

- 1 bag frozen green beans
- 2 tablespoon oil
- 1/2 cup bread crumbs
- 1 teaspoon garlic powder
- Salt to taste
- Black pepper

DIRECTIONS:

- In a pot, steam the green beans until tender-crisp. Set aside and keep warm
- Heat oil, stir in the bread crumbs, garlic powder, salt and pepper, until it's crispy
- Stir in the green beans and toss to coat

CHEF'S TIP:

When buying fresh green beans, make sure they are bright green, and store in the fridge right away.

BENEFITS

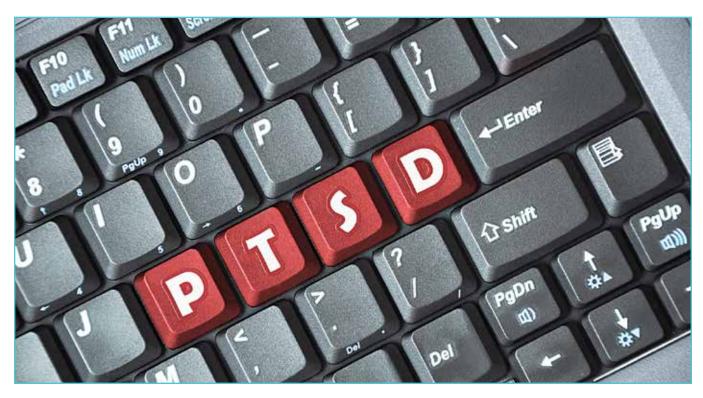
The fiber content of green beans is very high, and it also provides some of your daily protein requirements. Green beans are also an easy source of vitamins A, C, K, B6, and folic acid. In terms of minerals, green beans are also a good source of calcium, silicon, iron, manganese, potassium, and copper.

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In the Know

ALL ABOUT... POSTTRAUMATIC STRESS DISORDER (PTSD)

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



In the immediate aftermath of World War II, it was known as "shell shock"—soldiers returning home would suffer wildly irrational reactions to ordinary and harmless loud noises, viscerally reacting to glass breaking or car mufflers failing as if military shells were exploding.

Today, medical science has more precisely (or, some would argue, more complicatedly) labeled this mental health condition *post-traumatic stress disorder* (PTSD).

Post-traumatic stress disorder is defined as the flashbacks, nightmares, severe anxiety and/or uncontrollable thoughts that result from experiencing or witnessing a terrifying event.

Most people who go through traumatic events may have temporary difficulty adjusting and coping, but with time and good self-care, they usually get better. If the symptoms get worse, last for months or even years, and interfere with your day-to-day functioning, you may have PTSD.

Getting effective treatment after PTSD symptoms develop is critical for the reduction of symptoms and improvement of function.

SYMPTOMS

Post-traumatic stress disorder symptoms may start within one month of a traumatic event, but sometimes symptoms may not appear until years after the event. These symptoms cause significant problems in social or work situations and in relationships. They can also interfere with your ability to go about your normal daily tasks.

Symptoms of PTSD are generally grouped into four types: intrusive memories, avoidance, negative changes in thinking and mood, and changes in physical and emotional reactions. Symptoms can vary over time or vary from person to person.

Intrusive memories

Symptoms of intrusive memories may include:

- Recurrent, unwanted distressing memories of the traumatic event
- Reliving the traumatic event as if it were happening again (flashbacks)
- Upsetting dreams or nightmares about the traumatic event
- Severe emotional distress or physical reactions to something that reminds you of the traumatic event

Avoidance

Symptoms of avoidance may include:

- Trying to avoid thinking or talking about the traumatic event
- Avoiding places, activities or people that remind you of the traumatic event

Negative changes in thinking and mood

Symptoms of negative changes in thinking and mood may include:

- Negative thoughts about yourself, other people or the world
- Hopelessness about the future
- Memory problems, including not remembering important aspects of the traumatic event
- Difficulty maintaining close relationships
- Feeling detached from family and friends
- Lack of interest in activities you once enjoyed
- Difficulty experiencing positive emotions
- Feeling emotionally numb

<u>Changes in physical and emotional reactions</u>

Symptoms of changes in physical and emotional reactions may include:

- Being easily startled or frightened
- Always being on guard for danger
- Self-destructive behavior, such as drinking too much or driving too fast
- Trouble sleeping

- Trouble concentrating
- Irritability, angry outbursts or aggressive behavior
- Overwhelming guilt or shame
 For children six years old and younger,
 signs and symptoms may also include:
- Re-enacting the traumatic event or aspects of the traumatic event through play
- Frightening dreams that may or may not include aspects of the traumatic event

Intensity of symptoms

Symptoms of PTSD can vary in intensity over time. You may have more PTSD symptoms when you're stressed in general, or when you come across reminders of what you went through. For example, you may hear a car backfire and relive combat experiences. Or you may see a report on the news about a violent assault and feel overcome by memories of your own assault.

When to see a doctor

If you have disturbing thoughts and feelings about a traumatic event for more than a month, if they're severe, or if you feel you're having trouble getting your life back under control, talk to your doctor or a mental health professional. Getting treatment as soon as possible can help prevent PTSD symptoms from getting

Responding to harmful thoughts

- Reach out to close friends or loved ones
- Contact a spiritual leader
- Make an appointment with your doctor or a mental health professional
- Go to your nearest emergency room

CAUSES

You can develop post-traumatic stress disorder when you go through, see or learn about an event involving actual OCTOBER '18 • ISSUE NO. 163

or threatened death, serious injury or violation of personal space.

Doctors aren't sure why some people get PTSD. As with most mental health problems, PTSD is probably caused by a complex mix of:

- Stressful experiences, including the amount and severity of trauma you're gone through in your life
- Inherited mental health risks, such as a family history of anxiety and depression
- Inherited features of your personality—often called your temperament
- The way your brain regulates the chemicals and hormones your body releases in response to stress

Risk factors

People of all ages can have posttraumatic stress disorder. However, some factors may make you more likely to develop PTSD after a traumatic event, such as:

- Experiencing intense or long-lasting trauma
- Having experienced other trauma earlier in life, such as childhood abuse
- Having a job that increases your risk of being exposed to traumatic events, such as military personnel and first responders
- Having other mental health problems, such as anxiety or depression
- Having problems with substance misuse, such as excess drinking or drug use
- Lacking a good support system of family and friends
- Having blood relatives with mental health problems, including anxiety or depression

Kinds of traumatic events

The most common events leading to the development of PTSD include:

- Combat exposure
- Childhood physical and/or emotional abuse
- Physical assault
- Being threatened with a weapon
- Automobile accidents

Many other traumatic events also can lead to PTSD, such as fire, natural disaster, mugging, robbery, plane crash, torture, kidnapping, life-threatening medical diagnosis, terrorist attack, and other extreme or life-threatening events.

Complications

Post-traumatic stress disorder can disrupt your whole life—your job, your relationships, your health and your enjoyment of everyday activities.

Having PTSD may also increase your risk of other mental health problems, such as:

- Depression and anxiety
- Issues with drugs or alcohol use
- Eating disorders
- Harmful thoughts and actions

DIAGNOSIS

By definition, diagnosis of PTSD requires exposure to an event that involved the actual or possible threat of death, violence or serious injury. This can include:

- Directly experiencing or witnessing the traumatic event, involving yourself or others
- Learning that someone close to you experienced or was threatened by the traumatic event
- Being repeatedly exposed to graphic details of traumatic events (such as first responders)

To diagnose post-traumatic stress disorder, your doctor will likely:

- Perform a physical exam to check for medical problems that may be causing your symptoms
- Do a psychological evaluation that includes a discussion of your signs and symptoms and the event or events that led up to them
- Use the criteria in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), published by the American Psychiatric Association

You may have PTSD if the problems you experience after this exposure continue for more than a month and cause significant problems in your ability to function in social and work settings and negatively impact relationships.

TREATMENT

Post-traumatic stress disorder treatment can help you regain a sense of control over your life. The primary treatment is psychotherapy, but can

also include medication. Combining these treatments can help improve your symptoms by:

- Teaching you skills to address your symptoms
- Helping you think better about yourself, others and the world
- Learning ways to cope if any symptoms arise again
- Treating other problems often related to traumatic experiences, such as depression, anxiety, or misuse of alcohol or drugs

You don't have to try to handle the burden of PTSD on your own.

Psychotherapy

Several types of psychotherapy, also called talk therapy, may be used to treat children and adults with PTSD. Some types of psychotherapy used in PTSD treatment include:

- Cognitive therapy. This type of talk therapy helps you recognize the ways of thinking (cognitive patterns) that are keeping you stuck—for example, negative beliefs about yourself and the risk of traumatic things happening again. For PTSD, cognitive therapy often is used along with exposure therapy.
- Exposure therapy. This behavioral therapy helps you safely face both situations and memories that you find frightening so that you can learn to cope with them effectively. Exposure therapy can be particularly helpful for flashbacks and nightmares. One approach uses virtual reality programs that allow you to re-enter the setting in which you experienced trauma.
- Eye movement desensitization and

reprocessing (EMDR). This relatively new discipline combines exposure therapy with a series of guided eye movements that help you process traumatic memories and change how you react to them.

Your therapist can help you develop stress management skills to help you better handle stressful situations and cope with stress in your life.

All these approaches can help you gain control of lasting fear after a traumatic event. You and your mental health professional can discuss what type of therapy or combination of therapies may best meet your needs.

You may try individual therapy, group therapy or both. Group therapy can offer a way to connect with others going through similar experiences.

Coping and support

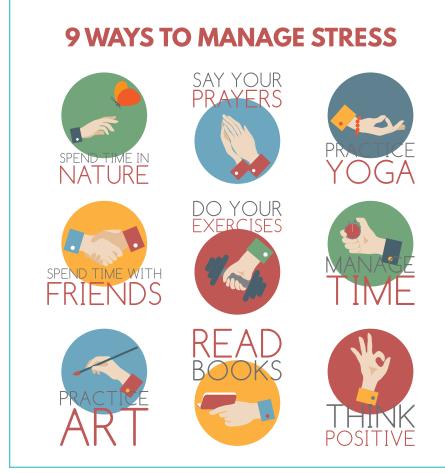
If stress and other problems caused by a traumatic event affect your life, see your doctor or mental health professional. You can also take these actions as you continue with treatment for post-traumatic stress disorder:

- Follow your treatment plan.
 Although it may take a while to feel benefits from therapy, treatment can be effective, and most people do recover. Remind yourself that it takes time.
- Learn about PTSD. This knowledge can help you understand what you're feeling, and then you can develop coping strategies to help you respond effectively.
- Take care of yourself. Get enough rest, eat a healthy diet, exercise and take time to relax. Don't selfmedicate. Turning to drugs or alcohol to numb your feelings isn't healthy.
- Break the cycle. When you feel anxious, take a brisk walk or jump into a hobby to re-focus.
- Stay connected. Spend time with supportive and caring people.
- Consider a support group. Ask your mental health professional for help finding a support group.

PREVENTION

After surviving a traumatic event, many people have PTSD-like symptoms at first, such as being unable to stop thinking about what's happened. Fear, anxiety, anger, depression and guilt are all are common reactions to trauma. But the majority of people exposed to trauma do not develop long-term PTSD.

At the end of the day, the best way to prevent yourself from turning to unhealthy coping methods, like misuse of alcohol or drugs, is support from others, can prevent normal stress reactions from getting worse and developing into PTSD.



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HALF OF HEALTHCARE ORGS. READY FOR 'VALUE-BASED CARE'

Brentwood, TN — In the freshly-released 2018 HealthLeaders Media Value-Based Readiness Survey, 54 percent of healthcare organizations said they're prepared to change to value-based care.

Value-based care is a relatively new but growing approach to healthcare costs. Traditionally, medicine is based on *fee-for-service*, or a set price for each established medical procedure or treatment.

Value-based care, by contrast, pays professionals not for what they do, but for how well the patient does—the healthier the patient emerges, the more the doctor is paid.

The survey also found that nearly 25 percent said they are already in value-based programs and nearly half expect to switch over in the next three years.

BURNOUT PRIMARY DRIVER OF MEDICAL ERROR: STUDY

Stanford, CA — In a new study, Stanford University School of Medicine

researchers found that medical errors may stem more from burned-out doctors than from lax checklists and other safety procedures.

According to the July 9 study in *Mayo Clinic Proceedings*, physicians with burnout had over twice the odds of self-reported medical error.

The researchers compiled data from a survey completed by nearly 6,700 active U.S. doctors—finding that some 55 percent reported symptoms of burnout. Ten percent also reported that they had made at least one major medical error during the prior three months.

Medical errors are common in the United States. Previous studies estimate these errors are responsible for 100,000 to 200,000 deaths each year. At the same time, physician burnout has become a national epidemic, with multiple studies indicating that about half of all doctors experience symptoms of emotional exhaustion, cynicism and feelings of reduced effectiveness.

But the good news is that a growing number of hospitals, like New York's Mount Sinai, have fulltime "wellness officers" to counteract physician burnout.

Many blame burnout on the still-growing usage of electronic health records (EHRs) and other technology, which create an overwhelming atmosphere of variables for doctors and reducing old-fashioned direct patient time.

And not only is less technologytime and more patient-time healthier for doctors, seeing healthy patients for follow-ups and well-visits is even healthier for doctors, wrote University of Pennsylvania cancer specialist Ravi Parikh in the Aug. 5 Washington Post.

"When I saw that my patient who had survived lung cancer was on the schedule, I felt relieved. With patients like him, doctors can afford to spend 15 minutes discussing a child's graduation or a recent vacation. These interactions remind doctors that treatment can let someone lead a normal life," he wrote. "These are the patients who prevent me from burning out."

FORMER CLEVELAND CLINIC CEO ADVISING GOOGLE'S HEALTHCARE TEAM

San Jose, CA — Former Cleveland Clinic CEO Toby Cosgrove, MD is joining the Google Cloud team as an executive adviser to its healthcare and life sciences divisions, the tech giant confirmed July 23. Dr. Cosgrove will assist Google's "quadruple aim" of lowering costs, improving the patient experience, advancing population health and reducing administrative burdens for providers and staff.

"Dr. Cosgrove is a widely respected thought leader in the healthcare space. Over the course of his career, he has seen firsthand how digitization has improved—and hampered—healthcare," said Gregory Moore, MD, PhD and vice president of healthcare at Google Cloud, in announcing Dr. Cosgrove's new role. "We're thrilled to have Dr. Cosgrove on board to help us tackle the quadruple aim, drawing on his several decades of experience at the forefront of American medicine."

EBOLA SCARE PROMPTS DENVER HOSPITAL LOCKDOWN

Denver, CO — A patient who had recently been in Ebola-stricken Africa triggered a lockdown at Denver Health Medical Center in late July.

The patient, who presented with worrisome symptoms, had been rushed into a quarantine unit the morning of Sunday, July 29.

The temporary lockdown prompted isolation protocols and emergency crews in hazmat suits to respond to the scene before tests indicated the patient was negative for the contagious virus.

Denver Health Medical Center is one of ten national facilities carrying CDC designation for Ebola.

FEDS HIKING 2019 MEDICARE INPATIENT PAYMENTS TO ACUTE CARE HOSPITALS USING EHRS

Washington, D.C. — On Aug. 2, the federal Centers for Medicare and Medicaid Services (CMS) released its annual Inpatient Prospective Payment System (IPPS) rule—which in plain English means how much those healthcare programs will reimburse hospitals for patients who have to stay in hospitals.

Among the key takeaways from the 2,593-page final IPPS rule is this: acute care hospitals that report quality data and are "meaningful" users of electronic health records (EHRs) will receive a 1.85 percent increase in Medicare operating rates for fiscal-year 2019.

The new IPPS rule also increases uncompensated care payments by \$1.5 billion, bringing the total available uncompensated care funding to \$8.3 billion for fiscal-year 2019.



BETTER SAFE THAN SORRY: A SUSPECTED CASE OF EBOLA INFECTION PROMPTED A FEDERAL HEALTH-EMERGENCY RESPONSE HERE

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The Senior Care C

News from the World of HamaspikCare and Senior Health

Study: Lowering blood pressure helps prevent mental decline

Chicago, IL — A major study finds that lowering blood pressure more than usually recommended not only helps prevent heart problems, but also cuts risk of mental decline that often leads to Alzheimer's.

The study, by Wake Forest Baptist Medical Center in North Carolina, found that people treated to a top blood pressure reading of 120 instead of 140 were 19 percent less likely to develop mild cognitive impairment. They also had fewer signs of damage on brain scans, and there was a possible trend toward fewer cases of dementia.

Roughly half of U.S. adults have high blood pressure under guidelines adopted last year that define it as a top number of 130 or more, rather than 140. Normal is under 120.

The preliminary, unpublished results were presented at the Alzheimer's Association International Conference.

Alzheimer's researchers use ultrasound to open brain barrier

Toronto, Ontario — The bloodbrain barrier consists of cells lining the insides of the brain's blood vessels. They function as a filter, keeping germs and other harmful substances from getting into the brain.

But this natural barrier also blocks drugs from entering the brain from the bloodstream—a fact that has stymied many possible treatments for diseases like Alzheimer's, Parkinson's, ALS or brain tumors.

But recently, researchers at Sunnybrook Health Sciences Centre in Toronto used targeted sound waves on a handful of Alzheimer's patients to temporarily open their bloodbrain barriers. Their findings were recently presented at the Alzheimer's Association International Conference in Chicago and published in *Nature*

HamaspikCare to Open New Offices in Bronx, Monticello

With that much growth, and licensed today in 13 counties, HamaspikCare must be doing something right.

In the years since its inception, Hamaspik's popular home care agency wedded the Hamaspik trademark reputation of five-star, uncompromising excellence with outstanding and attentive home care.

First reaching out to its core constituent communities in Brooklyn's Borough Park and Williamsburg neighborhoods, as well as the upstate enclaves of Monsey and Kiryas Joel, HamaspikCare initially established

an outstanding reputation in those neighborhoods.

But HamaspikCare today is hardly limited to those communities.

Just ask Waking Goubath, Milagros Santiago or any other of the growing number of Haitian or Latino employees (and beneficiaries) of HamaspikCare.

HamaspikCare's multilingual, multicultural teams are perfectly suited for the communities they serve and from which those that serve them hail.

Furthering that mission is the fact that HamaspikCare is in the early stages of opening a satellite office in the Bronx. To be staffed by Spanishspeaking professionals, that office will cater to the borough's strong Latino community.

It's the same thing with upstate Monticello, where HamaspikCare's planned new regional hub, also in its embryonic stage, will eventually draw its staff from the same population to be served.

At the end of the day, wherever HamaspikCare is found, beneficiaries find the same thing—outstanding care right at home, from caring people who speak their language.

With Joint Venture, Humana to Become Largest U.S. Hospice Provider

Louisville, KY — Insurance giant Humana is about to become the nation's largest hospice provider.

Specifically, Humana is acquiring a stake in the home health and hospice business of Kindred Healthcare as part of a joint venture with two private equity firms.

Besides Kindred, Humana is also buying hospice provider Curo for \$1.4 billion, also with private equity firms. The company's purchase underscores the booming business of hospice care—though the move from insurer to provider also highlights big grabs by insurance companies into lucrative and somewhat controversial businesses.

According to a recent *New York Times* report, Humana's decision to bet on hospice, rather than on primary care, proves it wants to own health care in the home and take on end-of-life care. At the same time, the deal places Humana "squarely in the middle of the



GRIM GROWTH: HUMANA'S ENTRY INTO HOSPICE IS A RESPONSE TO DEMAND

debate" of emerging hospice issues.

But hospice's growth over the last several years has also given rise to worries about increasing fraud, neglect and malfeasance across the space. "Companies have been accused of signing up people who are not terminally ill, denying visits from a nurse or even refusing a needed trip to the hospital," the *Times* reported.

Communications.

The technique is called *focused ultrasound*. First, microscopic bubbles are injected into the bloodstream. An MRI scan targets a specific brain area. A helmet-like device then beams ultrasound waves at that area. The ultrasound make the bubbles vibrate,

which briefly loosens the cells of the blood-brain barrier and allows a medical dye to enter the brain.

Researchers immediately saw the dye on patients' brain scans—but the dye didn't show up in scans the next day, proving that the blood-brain barrier had been temporarily opened.

While the exciting experimental technology opens the door for a host of promising new treatments for various brain diseases that currently have no cure, it's not new. Canadian Parkinson's researchers used focused ultrasound several years ago to demonstrate the concept.

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