



The Hamaspik Gazette

News of Hamaspik
Agencies and
General Health

APRIL '21 • ISSUE NO. 189



GAZETTE SURVEY

The GAZETTE asks YOU:

**DO YOU OR AN IMMEDIATE FAMILY MEMBER
SUFFER FROM ANXIETY?**

A: YES; B: NO

Respond to: survey@nyshainc.org • 845-655-0667



HEALTH STAT

UNITED STATES OF ANXIETY

U.S. adults with anxiety disorder	40 million (19.1%)
U.S. kids 3-17 with anxiety issues each year	4.3 million (7%)

Source: National Alliance on Mental Illness (NAMI)



HEALTH TIP

REDUCE ANXIETY? NATURALLY!

What does chamomile have in common with aromatherapy? The former's a natural tea, the latter is the discipline of therapeutic scents—and both are associated by studies with reduced anxiety. Other holistic anxiety reducers are eliminating caffeine and nicotine, or meditation and deep breathing (which are often one and the same).

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WITH COMMUNITY EVENTS, SUPPORTED EMPLOYMENT AND NOW, A DISABILITY-FRIENDLY RETAIL STORE, PUTTING PEOPLE WITH DISABILITIES SOCIETALLY UP-FRONT-AND-CENTER IS A LONGSTANDING HAMASPIK TRADITION

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Services Provided by NYSHA AGENCIES

OPWDD SERVICES

INDIVIDUALIZED RESIDENTIAL ALTERNATIVE (IRA)

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

INDIVIDUALIZED SUPPORT SERVICES (ISS)

Paid housing expenses and support for individuals who can live independently.

HOME FAMILY CARE (HFC)

Places individuals with developmental disabilities into private homes to care and support the individual.

DAY HABILITATION (DH)

A day program for adults with disabilities designed to develop skills, greater independence, community inclusion etc.

Site Based: Day Habilitation Service delivered in an OPWDD certified facility.

Without Walls: Day Habilitation Service delivered in a community-based setting.

Stars Day Program: Day Habilitation Service delivered in an OPWDD certified facility for higher-functioning individuals.

COMMUNITY HABILITATION (CH)

Working one-on-one with individuals in their home or in the community to achieve valued outcomes by helping them develop daily living skills and achieve long-term goals.

COMMUNITY PRE VOCATIONAL

Working with individual to prepare them for paid community employment- Teaching individuals job skills and other related social skills to enhance their ability to obtain employment in the future.

SUPPORTED EMPLOYMENT (SEMP)

Working with individual to support and provide them with necessary coaching so they can successfully engage in paid competitive employment.

FAMILY SUPPORT SERVICES (FSS)

Support for the individual's family by reimbursing them for certain qualifying items or services, otherwise not available to them.

INTENSIVE BEHAVIORAL SERVICES (IBS)

Short-term interventional services for people with behavioral issues and their family members.

RESPITE:

Home and Community-based respite services to provide a relief for the individual's caregiver and family.

At-Home: Respite services delivered in the home of the individual.

After School: Respite program provided every day after school hours.

Sundays: Respite program provided every Sunday.

Legal Holidays: Respite program provided on all legal holidays when school is not in session.

Summer Break/Camp Neshomah: Full day respite program during the summer break weeks.

Stars Night Program: Respite services delivered in the evening hours to high-functioning individuals by taking them out in the community and doing recreational and stimulating activities with them.

Weekend Getaway: A weekend retreat for individuals receiving respite services.

Hamasmid: After-School program for mainstreamed individuals engaging in recreational activities.

SELF-DIRECTION

The Individual or their advocate takes direct responsibility to manage their services and self-direct their budget.

Fiscal Intermediary (FI): Assists individual or their advocate in implementing their Individual Support Agreement and to manage financial accountability and employer responsibilities.

Brokerage: Assisting individuals or their advocate in creating and managing their budget.

PARENTAL RETREATS

Providing: Getaways and retreats for parents of individuals with disabilities

DOH

EARLY INTERVENTION (EI)

Providing a range of services to help young children (ages birth-3) who have a specific delay in their development.

Group Development Model (GDM): Providing Early Intervention services in a group-setting.

Therapy: Providing OT, PT, SLP, Vision, Nutrition, Play, Special Education, Family Training etc. to help the child develop appropriately.

Evaluations: Providing full evaluations to assess child's skills and development.

NURSING HOME TRANSITION AND DIVERSION (NHTD)

Waiver services to help individuals who need nursing-home level of care safely remain home and avoid nursing home placement.

Service Coordination (SC): Provides coordination to the individual in gaining access to needed waiver and Medicaid State Plan services, as well as other local, state, and federally funded educational, vocational, social, and medical services.

Community Transitional Services (CTS) / Moving Assistance (MA): Provides moving assistance with packing and transporting individual's possessions and furnishings when he/she must be moved from an inadequate or unsafe housing situation to a viable environment.

Environmental Modifications (EMODS): Provides Internal and external physical adaptations to the individual's home, that are necessary to assure the health, welfare and safety of the individual and avoid institutionalization.

Vehicle Modification (VMODS): Modifications to a vehicle that is used to improve the individual's independence and access to services and supports in the community.

Assistive Technology : Provides durable medical equipment and supplies for the individual to increase their level of independence, safety, and functional limitations.

TRAUMATIC BRAIN INJURY (TBI)

Waiver services to help individuals who had a traumatic brain injury.

Service Coordination (SC): Provides coordination to the individual in gaining access to needed waiver and Medicaid State Plan services, as well as other local, state, and federally funded educational, vocational, social, and medical services.

Community Transitional Services (CTS) / Moving Assistance (MA): Provides moving assistance with packing and transporting individual's possessions and furnishings when he/she must be moved from an inadequate or unsafe housing situation to a viable environment.

Environmental Modifications (EMODS): Provides Internal and external physical adaptations to the individual's home, that are necessary to assure the health, welfare and safety of the individual and avoid institutionalization

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Assistive Technology : Provides durable medical equipment and supplies for the individual to increase their level of independence, safety, and functional limitations.

SENIOR DINING/SOCIAL DAY PROGRAM (SHNOIS CHAIM)

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

HAMASPIK CHOICE

MLTCP:

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

HMO/INSURANCE

ABA

Behavior modification services for children with autism.

Social Group: ABA service delivered in a group setting.

One on One: ABA service delivered on a one-on-one basis in the child's home or community.

HAMASPIK HOMECARE

LHCSA

Licensed HomeCare Services Agency .

Personal Care Services

Our PCA/HHA assist individuals with personal care needs, activities of daily living, and light housekeeping. They are extensively trained, and screened, and are supervised by RN.

Support Services

Our HCSS Certified Aides assist those enrolled in the NHTD or TBI Medicaid Waiver Programs with oversight and supervision, in addition to personal care services.

Nursing Services

Providing: skilled observation and assessment - care planning - paraprofessional supervision - clinical monitoring and coordination - medication management - physician - ordered nursing interventions and skilled treatments.

Training

Providing: free PCA training and competency testing for those interested in a home care career.

CDPAS/CDPAP

As an alternative to traditional homecare, this program empowers the client to hire, train, and set the schedule of their personal assistants (PA). The PA's may be family members and can even live in the same home.

NYC HCR

ACCESS TO HOME

Providing home modifications for people with physical disability.

NYSED SERVICES

ACCESS VR

Assist individuals to achieve and maintain employment and to support independent living through training, education, rehabilitation, and career development.

PATHWAY TO EMPLOYMENT

Employment planning and support services that provide assistance for individuals to obtain, maintain or advance in competitive employment or self-employment.

NYSHA

ARTICLE 16 CLINIC

Providing: Physical therapy · occupational therapy · speech therapy · psychology · social work · psychiatry · 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

ADULT HEALTH HOME CARE MANAGEMENT SERVICES

Intensive, comprehensive care management for Adults with chronic condition(s) and/or mental health issues at greater risk for relapse and/or lack of care.

CHILDREN HEALTH HOME CARE MANAGEMENT SERVICES

Intensive, comprehensive care management for children with chronic condition(s) and/or mental health issues at greater risk for relapse and/or lack of care.

ADULT HCBS SERVICES

Behavioral Health Home and Community-Based Services for eligible adults over the age of twenty one.

Community Psychiatric Support and Treatment: Support and treatment to achieve functional improvement and stability, while working to attain the personal goals in a community setting.

Family Support and Training: Family training and support to engage the family in the treatment planning process and provide them with emotional and informational support to enhance their skills to assist in the recovery.

Psychosocial Rehabilitation: Assists with rehabilitating functional deficits and interpersonal or environmental hardships associated with the behavioral health condition.

Empowerment Services-Peer Support: Peer-delivered services designed to promote skills for coping with and managing behavioral health symptoms, while utilizing recovery-oriented principles.

Habilitation: Assist to acquire and improve skills such as: communication, self-care, socialization, mobility, etc. to successfully reside in home and community-based setting.

Intensive Supported Employment: Assists to obtain and keep competitive employment.

Prevocational Services: Prepares for employment, developing strengths and soft skills that contribute to employability.

Transitional Employment: Strengthens the work record and skills toward the goal of achieving assisted or unassisted competitive employment.

Ongoing Supported Employment: Ongoing follow-along support when holding down a job.

CHILDREN HCBS SERVICES

Behavioral Health Home and Community-Based Services for eligible children from birth to twenty one.

Prevocational Services: Designed to prepare a youth (age 14 or older) to engage in paid work, volunteer work, or career exploration. Prevocational Services are not job-specific, but rather are geared toward facilitating success in any work environment.

Caregiver Family Support and Services : Teaches skills to caregiver/family's that will enhance their ability to care for the child/youth in the home and/or community.

Community Self Advocacy Training and Support: Provides family and caregivers with techniques and information not generally available so that they can better respond to the needs of the Individual related to their disabilities.

Community Habilitation: Provides assistance with learning social skills, daily living and health related duties by working with the individual on goal-oriented tasks.

Supported Employment: Designed to prepare youth with disabilities (age 14 or older) to engage in paid work.

Planned Respite: Provides short-term relief for the individual's family/caregiver while supporting the individual's mental health, substance use and/or health care goals.

Day Habilitation: Provides assistance with learning social and daily living skills in a certified agency setting.

● ▶ TRI-COUNTY CARE NEWS

Giving Them Their Best Shot

With Flu Season Here, TCC Care Managers Are Reaching out Statewide to Get Everyone Vaccinated

“Our Care Managers have one thing in mind,” declares Yoel Bernath—“provide a seamless health and safety net.”

But the Tri-County Care CEO’s statement is far more than PR rhetoric, the *Gazette* soon learns.

By the latest CDC stats, New York State’s vaccination rate is a solid 52.9 percent. That stat is comfortably above the HEDIS benchmark for people 18 to 64. The Healthcare Effectiveness Data and Information Set (HEDIS), one of modern healthcare’s most widely used performance improvement tools, wants that demographic at a minimum of 41.8 percent.

At Tri-County Care, as of early February, the 18-to-64 member vaccination rate was at 118 percent of the HEDIS benchmark.

Given seniors’ heightened flu risk, HEDIS pegs its 65-plus vaccine benchmark at 74.2 percent. Among Tri-County’s beneficiaries, that age

group also clocks in at 118 percent of their HEDIS benchmark.

In recent weeks, Tri-County’s teams of Care Managers—dedicated disability advocates working toward the overall health of their caseloads—have been including the flu shot in that work.

To ensure that that particularly-vulnerable population is vaccinated, Care Managers have been calling all the individuals on their lists, encouraging them to get jabbed.

“If they don’t know where to get it, the Care Manager will find out where and help them get an appointment,” notes Tri-County Hudson Valley Regional Director Perry Zelik. “Really, it’s providing information.”

As one of just a handful of state-approved Care Coordination Organizations (CCOs), Tri-County—in the form of those front-line Care Managers—is responsible for getting beneficiaries the objectively best

disability services and supports.

But to what extent are Care Managers responsible for the overall health and wellbeing of beneficiaries in general. And does that include getting them protected against seasonal flu?

That’s where the other half of Tri-County—its status as a Health Home (HH)—comes in.

One of the key differences between the Medicaid Service Coordinators (MSCs) once offered by Hamaspik and other such non-profits and CCOs’ Care Managers is that very Health Home angle.

Whereas the MSC once simply coordinated ongoing disability services and supports, the CH will also regularly schedule medical appointments and generally assist with preserving and protecting each individual’s health, Mrs. Zelik adds.

Researching where a TCC beneficiary’s nearest vaccine-providing venue may be, whether it’s a doctor’s office,

walk-in clinic, retail pharmacy or even local health department, takes a bit of effort—especially in the underserved and/or rural regions that Tri-County covers.

In all those locales, Tri-County Care Managers are diligently working the phones, calling, encouraging and otherwise promoting the virtues of the vaccine. Many people had intended to get the shot but needed that friendly reminder, Mrs. Zelik recounts, and are grateful for the nudge. And all that work seems to have paid off: As mentioned, Tri-County Care has reached New York State’s flu vaccination benchmark.

While Tri-County staff will not personally drive beneficiaries to appointments, they will do the next best thing: arrange transportation, a benefit to which they are entitled as TCC members.

So, in getting everyone the flu shot, how much can a Care Manager do? At Tri-County, as it turns out, quite a bit. ★

● ▶ HEALTH NEWS

Experimental Treatment for Severe Osteoarthritis Pain Produces Dramatic Results

Shoulder Patients Reported 85-Percent Pain Reduction; Hip Patients, 70 Percent

Atlanta, Georgia — *Rotor ablation*, or the procedure of burning off troublesome heart tissue so as to reduce or even eliminate heartbeat problems, has been around for several years now.

But now, ablation in a totally different area of the body, involving a totally different problem, has shown promise in a minimal study involving a handful of patients.

The problem at hand is arthritis: specifically, osteoarthritis (OA) of the hip or shoulder that’s gotten so bad that standard pain medications—even powerful prescription drugs—don’t reduce any pain.

Osteoarthritis, the most common form of arthritis, involves the wearing away of the protective tissue on the ends of bones that touch each other inside the joints. It occurs gradually and worsens over time. While symptoms can usually be managed, the damage to joints can’t currently be reversed; treatment typically consists of physical therapy and pain management.

According to the U.S. Centers for



SHOULDERING THE BURDEN: AN EMORY EXPERIMENT GREATLY REDUCED ARTHRITIS PAIN

Disease Control (CDC), osteoarthritis is exceedingly common, affecting over 32.5

million Americans.

But now, doctors at the Emory

University School of Medicine in Atlanta have tried something called *radiofrequency ablation* on a group of 23 OA patients whose hip or shoulder pain had become so bad that anti-inflammatory painkillers and cortisone injections—two standard treatments—were no longer helping.

Emory researchers found that patients with shoulder arthritis reported an average 85-percent drop in reported pain, and 70 percent for hip arthritis.

In radiofrequency ablation, doctors use needles to send a low-grade electrical current to nerves that are transmitting pain signals from the arthritic joint to the brain. The current heats and damages the nerve fibers, rendering them unable to deliver those pain messages. ★

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Happening in Health Today

suggests tea also reduces low-density lipoprotein, or LDL, known as “bad” cholesterol. Studies also show tea may reduce blood sugar levels and help prevent type 2 diabetes.

IN POOR WORLD AREAS, KIDS OF FARMING FAMILIES HEALTHIER THAN NON- FARMING KIDS

Norwich, England — Never mind that kids growing up on farms in developed countries like the U.S. tend to be healthier than other U.S. kids growing up in typical cities or suburbs.

Now a study finds that kids growing up in poor rural regions of undeveloped countries are on average taller and otherwise healthier when their mothers grow their own produce or even raise poultry.

According to research by the Norwich, England-based University of East Anglia (UEA), growing their own food helped mothers to prevent stunting, wasting and underweight in their children. What’s more, their children’s food was more varied, meaning they had access to different classes of food nutrients.

Families were studied in Nigeria, Ghana, India, Cambodia, Mozambique, Uganda, Kenya and Burkina Faso, where global nutrition programs had introduced them to home farming.

BIO-PRINTED 3D “HEART” PROVIDES NEW TOOL FOR SURGEONS

Pittsburgh, Pennsylvania — Surgeons have long practiced complex and groundbreaking surgeries, such as those separating twins conjoined at the head, using exquisitely-detailed dummy replicas of the organ(s) involved, *before* actually doing the surgery.

But now, a team of biomedical engineers at Pittsburgh’s Carnegie Mellon University have manufactured the first full-sized 3D bio-printed model of the human heart.

The fake heart, made of soft polymers and printed in a 3D printer, will ideally give surgeons a powerful new tool for the planning and practice of complex heart surgeries.

The team used their original Freeform Reversible Embedding of Suspended Hydrogels (FRESH)

technique to turn MRI scans of a real heart into an ultra-realistic dummy heart—which not only

looks like the real thing but has the solidity and elasticity of a real heart, too. ★



HAVE A HEART! A 3D PRINTER CREATED THIS REPLICA FOR SURGERY PRACTICE

TECHNOLOGY LETS CLINICIANS OBJECTIVELY DETECT TINNITUS FOR FIRST TIME

Melbourne, Australia — Tinnitus, the perception of a high-pitched ringing or buzzing in the ears, affects up to 20 percent of adults and, when severe, is associated with depression, cognitive dysfunction and stress. Despite its wide prevalence, there has been no clinically-used, objective way to determine the presence or severity of tinnitus.

But now, a technology called *functional near-infrared spectroscopy* (fNIRS) can be used to objectively measure tinnitus, according to a new study.

The research by the Bionics Institute, Australia, published recently in *PLOS ONE*, used fNIRS to reveal a statistically significant difference in the connectivity between two specific areas of the brain in people with and without tinnitus.

Moreover, the brain’s response to both visual and auditory stimuli was dampened among patients with tinnitus.

RESEARCHERS DEVELOP DNA-BASED ‘NANOGE’ FOR TARGETED CHEMOTHERAPY

Singapore — For decades now, cancers today have been treated with chemotherapy, or powerful drugs (in intravenous, injection, pill or liquid form) that kill cancer cells throughout the body—but these drugs affect both healthy and cancerous cells.

Now, researchers at Singapore’s Nanyang Technological University (NTU) came with something more targeted: a so-called nanogel.

The substance has the consistency of a gel and is laced with DNA that has been genetically engineered to attract to a certain enzyme called FEN1. This enzyme normally repairs damaged cells.

Cancer cells are known to have more FEN1 enzymes than healthy cells. The idea of the nanogel, then, was to get the FEN1 enzymes in cancer cells to basically kill their host cells—and thus the cancer.

Researchers found that when chemotherapy drugs doxorubicin

and vinorelbine were incorporated into the nanogel, human cancer cells died at higher rates than healthy cells healthy because the healthy cells did not have enough FEN1 to break them down, but cancer cells did.

TEATIME CAN BE GOOD FOR YOUR HEALTH

Denver, Colorado — Next to water, tea is one of the most popular beverages in the world. At just a couple of calories per serving, it’s loaded with flavonoids that make it one of the world’s healthiest beverages as well.

Studies show that consumption of tea, along with a heart-healthy diet, may improve some brain function, ward off some cancers, defend against heart disease by boosting “good” cholesterol and help with weight control. It may even reduce bad breath.

A study in the *Journal of the American Heart Association* found that tea appears to slow the natural decrease in heart-helping HDL cholesterol as a person ages. Those findings pair well with previous research that

MINDFULNESS MAY MITIGATE MIGRAINE HEADACHES

Seattle, Washington — A small clinical trial found that a mind-body practice that combines meditation and yoga might help people better manage migraine pain.

The trial, which tested the effects of mindfulness-based stress reduction (MBSR), found that the approach helped relieve migraine sufferers’ depression and disability. It also boosted how they rated their quality of life.

The standardized, eight-week program of MBSR was developed in the 1970s. It combines meditation and gentle yoga postures, with the goal of shifting people’s responses to stress, including body pain—helping people first become aware of their habitual reactions to their pain.

Previous research has found that MBSR can help people deal with chronic lower back pain.

Worldwide, an estimated one billion people have migraine headaches. Along with intense head pain, migraines often cause nausea, visual disturbances, and sensitivity to light and sound. ★

HAKTANIM, A GIANT LEAP FOR SMALL MANKIND!



BOYS AND GIRLS: AGES 2-6

CALL US
718.387.8400 X 5250
for information and
enrollment

A Project by Hamaspik Kings

Hamaspik Twilights™ is a full suite of after school and weekend programs, each distinctly designed for various age groups and life stages within the OPWDD community.

HAKTANIM is dedicated to giving supportive care and entertainment to children (aged 2-6) with special needs.

With trained, Yiddish speaking, staff members for each child, a variety of enriching activities, and carefully planned group trips, Haktanim is sure to become each child's home away from home.



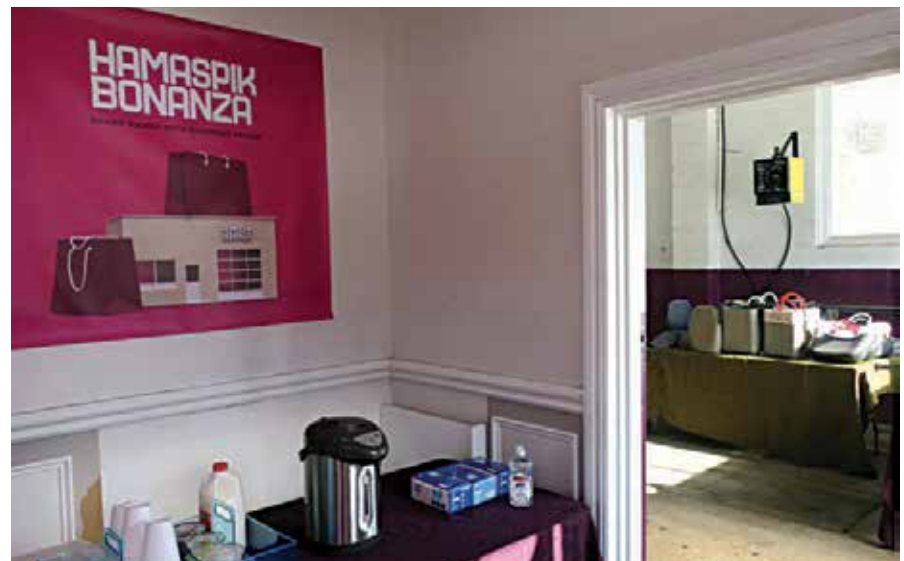
● ► HAMASPIK NEWS

Community Economic Revival and Disability Mainstreaming in Store

Hamaspik Rockland's New "Bonanza" Pop-up Shop Puts Post-COVID Recovery, Personal Growth on the Market



HANG IT UP: PROFESSIONAL APRONS, PERSONALIZED NAME TAGS AND ALL, AT THE READY



GRAND ENTRANCE: FRESH HOT COFFEE, TEA AND SNACKS AWAIT ARRIVING SHOPPERS



WE'VE GOT THE GOODS: AT BONANZA'S WEEKLY EVENT, TABLES ARE LADEN WITH BARGAINS—AND MANNED BY MAINSTREAMED PEOPLE

Everything about Hamaspik Bonanza is typical for your closeout-sale pop-up shop—you know, the retail event where every item is drastically reduced in price for just one or two days.

Except for three facts.

One, the pop-up shop is emerging from the economic ashes of a receding pandemic. Two, entry to, and operation of, its location hews strictly to all CDC guidelines. And three, its smiling staffers all also happen to be young women with high capabilities.

Best of all, Hamaspik Bonanza also fuses the finest values of Hamaspik, its community's leading disability supports agency, and the finest values

of that community itself.

A win-win bonanza

At the nadir of last year's pandemic, the New York retail scene was the very landscape of devastation.

With businesses shuttered by a national lockdown and cities and suburbs alike rendered shelter-in-place ghost towns, commerce—at least traditional brick-and-mortar commerce—virtually vanished.

The resulting economic wasteland left thousands of local businesses paralyzed. Tragically, too many perished. Others, like the Estacelli accessories boutique, scrambled to adapt.

That Monsey retailer has several

things going for it. Firstly, phone and online orders maintained its pulse in the pandemic's darkest days, followed by those cautious first days, then weeks, of socially-distanced reopening. Secondly, it's part of a community where a symbiotic, synergistic social (and social-justice) ecosystem, is the norm—in plain English, where everyone helps everyone with everything.

Some three months ago, a young woman, who prefers obscurity, approached supervisor Mrs. Schonfeld, Women's Division Director, asking if her parents' store could field a sale on site.

After consulting with her own supervisor, Director of Day Services

Joel Moskowitz, the two elected to do her one better. Hamaspik would indeed host Estacelli for a day. But not on the premises of the Day Hab building. Not just one day. And not just one retailer.

The planned project, which would bring together several local retailers struggling to shed excess unsold inventory at drastically slashed prices but still turn a profit, would also deploy the Day Hab's individuals to meet its logistical needs.

Some individuals would participate in such staples of retail operations as transporting, unpacking, sorting, re-sorting and shelving merchandise. But others

CONTINUED ON PAGE 9 >>

We've got you. Covered.

The days of making dozens of calls are over. Tri-County Care will help you apply for Medicaid during the enrollment process.

We double down to get you enrolled, no matter what.



Tri-County Care

Coordinating care for
individuals with special needs.

Boro Park
3611 14th Ave

Williamsburg
295 Division Ave

Five Towns
700 Rockaway Tpke

Monsey
58 Route 59

Kiryas Joel
1 Hamaspik Way

Staten Island
260 Christopher Ln

Tri-County Care is a New York State Hamaspik Association (NYSHA) product.

TriCountyCare.org • 844.504.8400 Ext. 2

● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK



Addressing a Vital Need *Hamaspiik of Kings County Connects Clients to Resources*

The clients were desperate. The employees were at a loss.

“We constantly came across one core problem,” says Hershel Wertheimer, Executive Director at Hamaspiik of Kings County, when asked about their new division, Lekasher. “We were helping our clients with so many resources and programs, yet we saw that they weren’t completing the healing process properly. They were struggling to find the right doctors and therapists.”

Hamaspiik of Kings County had witnessed so many tragedies and seen first-hand the hardships their clients go through. No, they hadn’t stood at the sidelines. They had reached out to mental health askanim and doctors, but there was only so much they were able to do.

And so, Lekasher—Connect Resources, was founded.

Lekasher is a separate department that focuses on connecting patients in

need of mental-health services with the appropriate referrals. Whether it’s hospitals, doctors, therapists or treatment centers, they help people find the care they need.

Lekasher is run by a team of talented, experienced and well-connected professionals. The renowned Avi Mendlowitz, who has been the go-to person for everything mental health for years, has joined Lekasher as Director.

“I’m pleased to be offering this vital service to our clients,” Hershel says. “We help them find the right therapists, facilities, and resources, so they’ll never have to go through the endless maze of mental illness alone.”

Indeed, Lekasher has already helped many clients and the amazing feedback they’ve received demonstrates the vital need they’re filling.

To reach Lekasher please call: 1-718-400-9411



Facing It



UNMASKING CREATIVITY: CUSTOM-MADE FACE COVERINGS, AND EVEN EDIBLE ONES, WERE THE ORDER OF THE DAY LATELY AT HAMASPIK OF ROCKLAND COUNTY’S DAY HAB PROGRAM

Revealing the Fun Side of Hygienic Face Coverings *Rockland Women’s Day Hab Melds Masks Into Regular Programming*

“Cleanliness, for sure!” begins Mrs. Schonfeld, longtime Director of the Women’s Division at Hamaspiik of Rockland County’s Day Hab. “We wipe down all common areas and surfaces two-three times a day now.”

The *Gazette’s* just asked what positive things the Day Hab program gained from the coronavirus rules now part of our new normal. Judging from her response, it looks like a bleak winter for the bugs normally thriving on proliferation-friendly doorknobs and countertops.

But then you’ve got the masks.

The universal face-erasers concealing countenances beneath an ever-exploding riot of variety (have you seen the “I Heart NY” masks?), are now seen and worn everywhere.

So why not make them fun?

Mrs. Schonfeld and crew got to work.

For participants in programs supporting higher-functioning young

women, the mask task at hand was to custom-design your own face covering. And that the “girls” did on Day Hab’s design software-boasting computers. Those personalized works were then printed and proudly worn.

A group of high-functioning “Day Habbers” manufactured their own masks at their bi-weekly sewing-instruction sessions. (Masks at Day Hab are worn religiously by all staff, notes Director Schonfeld. As for attendees, the OPWDD currently dictates that masks be offered, but not enforced in keeping with that state agency’s person-centered mission.)

Finally, putting the public-hygiene message of masks quite literally in their faces were masked cookies—homemade smiley-face baked goods decorated with icing “masks,” that is.

Apparently, they don’t just practice Covid hygiene at Day Hab.

They eat it, too.



● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK

Sailing on a Modern-Day Noah's Ark

Hamaspik Orange Men's Day Hab Visits Local Hudson Valley Zoo

It's not quite a massive handcrafted wooden vessel.

But the miniature menagerie at Rockland County's Trailside Museums & Zoo—while not exactly the fabled Noah's Ark—does have a collection of creatures of somewhat Biblical proportion.

It's a sight you can certainly bear, without throwing caution to the wolves.

Predatory puns notwithstanding, the gentlemen of Hamaspik of Orange County's Men's Day Hab program took to the walkable footpaths and trails of Trailside's zoo.

They cautiously followed socially-distancing guidelines while taking in the enclosures of black bears and coyotes (no wolves, actually) and birds like the black vulture, the wild turkey, and even a specimen of the great American bald eagle.

Indoor exhibits, constructed largely out of stone, display the area's indigenous fish, salamanders and other reptiles and amphibians—including

snakes, turtles and frogs.

Trailside's exhibits, both indoor and out, are linked by a series of self-guided nature trails wending their way through the rustic woods on Bear Mountain's storied slopes. The gentlemen certainly got a good workout making their way about the grounds.

A sign along one of the Zoo's walkways, which are actually a part of the fabled Georgia-to-Maine Appalachian Trail, even invokes Noah's Ark in explaining that animals are preferred in pairs.

Still, due to various circumstances, the creatures living at Trailside sometimes live alone.

Besides discovering the Hudson's Valley's rich regional ecosystem of native wildlife up close, the gentlemen also came away with an appreciation for God's handiwork—the wonderful world of beasts and birds cared for long ago by one legendary voyager and his legendary voyage. ★

Walking the Wild Side



A KINGDOM OF THEIR OWN: A NATIVE BOBCAT (L) AND BEAR (R) LIVE AT TRAILSIDE'S ZOO



IMPLICATIONS OF BIBLICAL PROPORTIONS: TWO "DAY HABBERS" POINT TO A SIGN AT THE TRAILSIDE ZOO INVOKING THE FABLED TWO-BY-TWO CONFIGURATION OF NOAH'S ARK

Community Economic Revival and Disability Mainstreaming in Store

Hamaspik Rockland's New "Bonanza" Pop-up Shop Puts Post-COVID Recovery, Personal Growth on the Market

<< CONTINUED FROM PAGE 6

would form the project's friendly front-line face; uniforms, name tags and all, they'd man counters, answer questions, and ring up purchases. It would be a veritable bonanza of benefit to all parties involved—a win-win situation if there ever was one.

Thus was Hamaspik Bonanza born.

Recovery, integration in store

The property dominates the corner of Yatto Lane, a tiny slip of a street, and the critical artery of Route 59 in Spring Valley. It harbors the paradox of central and out-of-the-way in one.

The premier feature of Hamaspik Bonanza, are the uniformed individuals brimming with pride as they greet and assist shoppers. Not only are they

helping customers adhere to Covid-19 guidelines (masks, entry temperature checks, et al) and select and pay for items, they're beaming as said shoppers gladly fill out the "How did I do?" surveys they proffer.

"It's a beautiful concept, and it's probably going to do a lot of good for people in terms of mainstream acclimation," says Mrs. Schonfeld, "not to mention the self-esteem of the individuals themselves. Times have changed—they will now feel that 'We are in control and in charge!'"

Thanks to that initial idea, six other local retailers have also since gotten in on the action—joining the bonanza of mainstreaming integration while making a desperately-needed buck or two, too. ★

The Craft of Art



SPECTRUMS IN SIGHT AND SOUND: INDIVIDUALS AT HAMASPIK OF KINGS COUNTY'S DAY HAB PROGRAM DISPLAY THEIR MANUAL ABILITIES IN PRODUCING ART IN SEVERAL FORMS

The Autism Update

News and developments from the world of research and advocacy

BREAKTHROUGH DISCOVERY IN GENE BEHIND RARE NERVE CONDITIONS

Melbourne, Australia — The Melbourne, Australia-based Murdoch Children's Research Institute (MCRI) has made a breakthrough genetic discovery into the cause of a spectrum of severe neurological conditions.

Genetics researchers at MCRI were studying KIF1A-Associated Neurological Disorders (KAND), a group of conditions caused by mutations in a gene called KIF1A. The rare disorders affect about 300 children worldwide.

Upon genetically testing a girl with Rett syndrome, an unrelated and severe neurodevelopmental disorder, the researchers found that she had a mutation in her KIF1A gene.

The researchers now believe that several Rett symptoms are due to previously-undiagnosed mutations in the KIF1A gene—and that genetic testing for KIF1A gene mutation should become standard in the diagnosis and treatment of all patients with Rett syndrome.

PEOPLE WITH AUTISM DO NOT SHIFT ATTENTION BASED ON SOCIAL CUES

New Brunswick, New Jersey — A new eye-tracking study yet again confirms that people with autism do not follow other people's eye movements to focus their attention the same way that people without autism do.

The research, by the New Jersey-based Janssen Research and Development, collected eye-tracking data from 122 people with autism and 40 typical controls.

Each participant watched four 20-second videos: two in which actors looked at each other, and two in which actors looked at an activity.

Researchers found that people without autism spent most of their time looking at the activity when the actors fixated on the activity and at the actors' heads when the actors looked at each other.

Participating children and adults with autism, however, did not shift their focus based on the actors' gazes.

The pattern suggests that by age six, people without autism notice what others pay attention to and react accordingly.

MICHIGAN TEENS WITH AUTISM TO LEARN JOB SKILLS FROM VIRTUAL TRAINING TOOL

East Lansing, Michigan — A team of researchers from Michigan State University, University of Michigan and tech-training company SIMmersion received a \$3 million grant from the federal National Institute of Mental Health (NIMH) to develop a virtual reality training tool for youth with autism spectrum disorder (ASD).

The training tool, called Social Cognitive and Affective Learning for Work, or SOCIAL-Work, will teach young adults with ASD to communicate effectively with customers and colleagues in the workplace. The goal is to improve their social skills as they transition from high school to the workforce.

The program trains students to better read and understand tone of voice, facial expression, body language and context to evaluate interactions and decide how to act. It also includes practice conversations about appropriately responding to customers, coworkers and supervisors.

FEDERAL GRANT TO HELP MEDICAL SCHOOLS BETTER TEACH TREATMENT OF PATIENTS WITH DISABILITY

Washington, D.C. — Under a new \$1.75 million grant to five universities nationwide, a curriculum will be developed for medical schools to start teaching students on caring for patients with intellectual/developmental disabilities (I/DD).

The grant was distributed by the Administration for Community Living (ACL), a division of the federal Dept. of Health and Human Services (HHS).

Under the five-year program, participating colleges will both review existing curricula and develop new ones in an effort to better prepare future doctors and other health care professionals to treat people with disabilities.

Upon completion, the curriculum will be provided to 30 other schools—with a goal of training over 15,000 students.

The project is called the Partnering to Transform Health Outcomes with Persons with Intellectual Dis-

NEW JERSEY CONSIDERING SECURITY CAMERAS IN GROUP HOMES



PROTECTION OR OVERREACH? WHILE PUBLIC DEBATE GOES ON, A NEW JERSEY STATE ASSEMBLY COMMITTEE PASSED A BILL THAT WOULD PUT CAMERAS IN GROUP HOMES

Trenton, New Jersey — After an emotionally-charged three-hour hearing, the Human Services Committee of New Jersey's State Assembly voted 6-0 to pass Billy Cray's Law.

According to the legislation's text, the bill "Requires certain group homes to install electronic monitoring devices in common areas, upon request and with uniform resident consent, and to permit consensual use of such devices in private rooms."

The bill, which was amended before the vote, makes clear

the cameras would be installed in common areas—including backyards and doorways—and only if all of the residents agree they want them. Cameras in personal bedrooms would only be installed upon request of families, who would also have to pay for them.

The bill, which is still in the Legislature, is named for William "Billy" Cray, a resident of a group home in Somers Point, New Jersey who died on the premises three years ago under still-unexplained circumstances. ★

abilities and Developmental Disabilities (PATH-PWIDD).

ONLINE SHOE RETAILER'S DISABILITY SHOE PROGRAM STILL EXPLODING

Las Vegas, Nevada — In what it presents as the most compelling evidence of success, the Zappos online shoe seller says that its disability shoe sales program has grown by a staggering 86 percent since it launched in the summer of 2020.

The program allows shoppers to buy just one shoe, or to buy a pair of shoes consisting of two different sizes.

People with disabilities sometimes only need one shoe, or require two sizes.

Zappos' effort is part of its greater Zappos Adaptive program, which launched in 2017 to offer a collection of clothing and footwear to meet the needs of people with various disabilities.

Currently, the single-shoe program offers footwear in sizes toddler through adult, and includes most major brands, including Nike, Converse, New Balance, Vans and UGG.

Seems that in putting its best foot forward, Zappos has taken one big step in the right direction. ★



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● ► HAMASPIK NEWS

This Connection Called Life

For Kiryas Joel's Pandemic-Bound Seniors, Hamaspik's Shnois Chaim Program Brings it All Home

Mommy.
Where would you even begin?
Caregiver. Cheerleader. Consoler.
Mother.

What wouldn't she do for you?
Time troops on. Children become adults. Singles become spouses. Daughters become mothers. Mothers become grandmothers. Families flourish. Dynasties rise. And little eyes wide soon look up at eyes wise with years.

Modeler of role. Keeper of generations. Matriarch. Mother.

What wouldn't you do for her?
What was once her furious morning routine, and her child's, is now yours. And where never-ending housekeeping, shopping, cooking, boo-boo-kissing, squabble-squelching, listening, talking, hugging and tear-wiping was decades ago king, a rich and peaceful silence now reigns. Birds long flown the nest, her home is a palace of memories.

Now it's you building your nest. Now it's you forging memories.

Now it's you cultivating your own dynasty, buoyed by your mother who once did as you now do, and backed by your grandmother, or even great-



A DO-IT-YOURSELF KIT OF A DIFFERENT SORT: AN APPLE-AND-HONEY DISPLAY FOR SHNOIS CHAIM'S REVERED SENIORS, AS PREPARED TO BE SENT TO EACH OF THEIR HOMES

grandmother, noble queen mother of the clan discerningly presiding over it all.

At Shnois Chaim, every participant is one such matriarch.

Each stalwart *Bubby* (Yiddish for "Grandma"), wise to every nook and cranny of the human heart, is a font of intuition, an axis of kin, a pillar of inspiration.

Bring them all together, as does your weekday Senior Congregate Dining Program at Shnois Chaim, with meals funded by the Orange County Office for the Aging (OFA), and you've got your community's brain trust of life wisdom under one roof.

The Spanish Flu couldn't thwart New York. A century later, Covid-19 hasn't arrested Hamaspik from bringing Shnois Chaim to its seniors.

Coordinator Mrs. Landau and staff, all mothers and even grandmothers themselves, have shown up for their community's matriarchs every workday morning. Social distancing, PPE and lockdowns notwithstanding, they've been salubriously ushering Shnois Chaim into the homes of Kiryas Joel's beloved seniors.

With nutrition its central tent pole, Shnois Chaim begins each morning with its staff cook whipping up the day's hot fresh lunch, deliberately-measured nutritional values and all. Packaged in pathogen-free wrapping and prepared with love, each ready-to-eat plastic platter will be delivered to each senior's door at noon.

Shnois Chaim, Coronavirus Edition is anything but just a daily meal.

A conference call is its highlight for so many of the young-at-heart elders. The hour-long daily hotline event, at a clockwork 3:30 p.m., is a veritable lifeline for the seniors who too-often barely get out of the house.

The call-in session kicks off with an informal reception, with callers socializing and otherwise catching up with peers. A guest speaker will next deliver an inspirational class interwoven with current events and stories with motivational messages. An entertainer will follow.



THE GIFTS OF LIFE: PACKAGED PRESENTS PREPARED BY HAMASPIK FOR THE SENIORS

At times, the guest presentation will also consist of a nutritional talk led by the OFA Senior Dining Program's very own Sue Nichols, Registered Dietitian/Nutritionist.

At least twice a week, though, Landau and Company dispatch perfectly-planned "home activity kits."

Consisting of painting (complete with supplies at the ready), baking (with ingredients provided and measured out), or other activities, the packages reinject life into routines too-often monotonous. It's no surprise the seniors actively look forward to receiving them.

Further cementing the participants' foundational place in their community, in terms of living descendants loving maintaining their continued good health, is Shnois Chaim's weekly guided-relaxation phone session, and in fluent native Yiddish by a trained professional. In fact, one such living descendant reports that her elderly mother initially feared the hocus-pocus—until she tried it.

For the duration of the pandemic, seniors have been querying when their beloved congregated site will reopen, looking forward to seeing their friends as they are. Similarly, adult children report that their parents derive that life-affirming vitality from gathering in a group—a daily meeting that, in ordinary circumstances, works wonders for their morale and which, currently, is replicated by Shnois Chaim to the extent possible.

But it is that circle of life, of mothers helping daughters and daughters (and theirs) reciprocating a generation or three later, of seniors still enthused to stay in the loop, and of Shnois Chaim's loyal staff, that captures everything that Shnois Chaim truly is. ★

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● ► HEALTH NEWS

First List of Guidelines Published for Medical Care of Adults with Down Syndrome

Recommendations by American Medical Association Stem from Years of Stakeholder Advocacy and Research

Denver, Colorado — After considerable advocacy and effort by the Global Down Syndrome Foundation, or GLOBAL, the influential and authoritative American Medical Association (AMA) published its first-ever guidelines on how medical care for adults with Down syndrome differs from typical peers.

The guidelines are the culmination of four years of research and advocacy spearheaded by GLOBAL, which brought together experts from eight of the nation’s largest adult Down syndrome medical centers and other stakeholders.

Together, they combed through existing research on medical care for adults with Down syndrome to establish the first-of-its-kind evidence-based clinical guidelines.

The resulting paper, published in the *Journal of the American Medical*



GOOD MEDICINE FOR DOWN SYNDROME: THE AMA RELEASES ITS FIRST-EVER GUIDELINES

Association, contains no less than 14 recommendations for clinicians treating those with Down syndrome. The paper also includes four statements

of good practice.

According to the new guidelines, the strongest recommendation is for all people with Down syndrome to

be screened for Alzheimer’s disease starting at age 40.

Adult patients with the chromosomal disorder are also now recommended to be screened for diabetes earlier and more frequently; the AMA recommends that typical adults be screened at age 45.

Four other recommendations involving cardiovascular disease, stroke prevention, obesity screenings and osteoporosis evaluations, are equivalent to mainstream recommendations.

According to the AMA, the average life expectancy of an adult with Down syndrome rose from 25 years in 1983 to 60 years in 2020—making the need for clinical guidelines all the more imperative. Current estimates show that about 206,000 Americans have Down syndrome—and that they are living longer than ever before. ★



SWEET POTATOES (YAMS)

INTERMEDIATE

YIELDS: 12-15 MUFFINS

READY IN: 1:30



Sweet Potato Muffins

INGREDIENTS:

- 3 large sweet potatoes
- 1 onion, diced
- 2 tsps. oils
- 2 eggs, beaten
- 1/2 cup flour
- 1/2 tsp baking soda
- 1/2 tsp salt

DIRECTIONS:

- Bake sweet potatoes in oven until soft; peel and mash
- Sauté onions in oil
- Mix all ingredients together
- Spoon mixture into muffin cups; bake until golden brown

CHEF’S TIP:

Never refrigerate sweet potatoes, because cold temperatures will convert the potatoes’ starch into sugar, and will affect the flavor.

BENEFITS:

Sweet potatoes are high in many important nutrients. They contain a good amount of fiber as well as vitamin A, vitamin C, manganese and several other vitamins and minerals. In addition to the nutrients above, sweet potato nutrition also contains riboflavin, phosphorus, vitamin E, vitamin K, calcium and iron.

EASY

YIELDS: 6 SERVINGS

READY IN: 0:20



Sweet Potato Patties

INGREDIENTS:

- 5 sweet potatoes
- 3 eggs
- 1 tsp salt
- 1/2 tsp black pepper
- 1/4 cup oil for frying

DIRECTIONS:

- With shredding blade, shred sweet potatoes in food processor
- Mix eggs, salt and pepper into shredded sweet potatoes
- Heat oil; fry for few minutes on each side

NOTE: For a healthier version, bake patties at 420° for 30 minutes

EASY

YIELDS: 6 SERVINGS

READY IN: 1:30



Sweet Potato Pie

INGREDIENTS:

- 6-8 sweet potatoes, peeled
- 1/2 tsp cinnamon
- 1/2 cup oil
- 1/2 tsp salt
- 1 cup orange juice
- 2 tsps. lemon juice
- 4 eggs, beaten
- 3/4 cup potato starch

DIRECTIONS:

- Boil sweet potatoes in water until soft; drain
- Mash boiled potatoes in pot; mix in all remaining ingredients
- Pour mixture into 9-inch round pan
- Bake at 350° for one hour or until done

Public Health and Policy News

PROPOSED 'PRIOR AUTHORIZATION' RULES WOULD HELP STREAMLINE MEDICAID/CHIP CARE

Baltimore, Maryland — Under a new proposal, doctors treating Medicaid and Children's Health Insurance Program (CHIP) patients will soon get certain treatments more easily approved.

Currently, official policy of the federal Centers for Medicare and Medicaid Services (CMS) is that caregivers must get what's called *prior authorization* for certain treatments before giving them to patients.

But under a new proposed rule, CMS will require payers to use new software called *application programming interfaces*, or APIs. The computer programs are intended to allow data to be easily shared and exchanged between payer, providers and third parties.

According to CMS, the proposal would save up to \$5 billion over the next ten years—and also cut down on repeated and unnecessary prior authorizations.

If approved, the new policies will go into effect in 2023.

SOME COVERAGE OF TELEHEALTH NOW MADE PERMANENT BY CMS

Bethesda, Maryland — A lot of changes hastily ushered in due to the pandemic won't be going away for a while—if at all, that is.

Not all of them are bad, though. In fact, many of them are arguably good.

One such case in point might be Medicare now making expanded coverage of telehealth permanent.

Telehealth, or remotely visiting your doctor via live audio/video, was a small part of modern health-care before the pandemic—but is now skyrocketing.

The White House initially allowed Medicare to reimburse for telehealth in March of 2020—but now has locked in a number of permanent expansions to which telehealth services Medicare covers.

Tellingly, before the pandemic, a rough 15,000 Medicare members regularly used telehealth. But between March and Oct. 2020, over 24.5 million members used virtual care, according to CMS.

IRHYTHM WEARABLE LINKED TO MORE AFIB DIAGNOSES IN AETNA-BACKED STUDY

San Francisco, California — Can wearing a heart-tracking patch improve your health? Judging from the data in a recent tracking study, it seems so.

iRhythm Technologies, a California-based device maker, says that its Zio device—a heart-tracking patch worn directly on the skin—picked up heartbeat problems in users before those problems

became medical emergencies.

Specifically, according to the study, the Zio device detected *atrial fibrillation*, or irregular heartbeat, in people who otherwise had no major heart health symptoms.

The results were presented at the American Heart Association (AHA)'s recent annual scientific meeting.

The clinical trial is part of iRhythm's effort to expand use of its patch to the asymptomatic population, thereby doubling its existing market. Linking Zio to more diagnoses and fewer deaths supports the effort.

DOCTOR CONSULTANT MAKES HIGH-TECH CASE FOR RESTORING POST-PANDEMIC INDUSTRY

Denver, Colorado — One major thing still happening in public health and policy news is that way fewer people are seeing doctors in person—due, of course, to the lingering effect of the coronavirus shutdown and the phrase we've all gotten used to: social distancing.

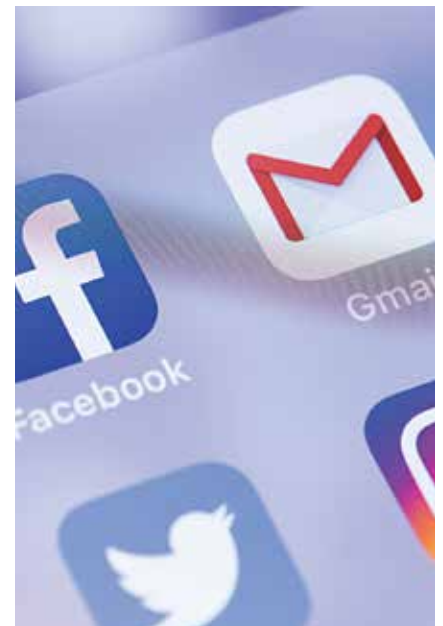
However, in a recent editorial, medical-marketing consultant Ron Harman King argues that the very thing that has dramatically spiked in usage in recent months—online usage—could very well be the one thing that helps reverse the still-ongoing drastic drop in physician visits.

According to Mr. King, making appointments online from hand-held devices—and, more importantly, speaking to your doctor directly over your phone—is the way to go in the future.

That future is more imperative now than ever, he argues—noting that a staggering 55 percent of doctors have lost over 25 percent of their income due to the pandemic.

STUDY LINKS RISK OF DEPRESSION EXCESSIVE SOCIAL-MEDIA USAGE

Fayetteville, Arkansas — “Everyone is on a smartphone today,” you'll hear people say. You'll also hear people say



BAD: SOCIAL MEDIA SADDENS, SAYS STUDY

that “People spend too much time on smartphones.”

Anyways, and not that you need a study to prove it, but now there's a study that lends ammo to another notion you'll hear from people nowadays: “It's really not healthy to spend that much time on smartphones.”

Specifically, the University of Arkansas (Fayetteville) found that young adults who spend hours daily on social media are at heightened risk of shortly developing depression. Their six-month study of 1,000 non-depressed young adults ages 18-30 found that some ten percent fit criteria for depression.

What's more, the study also found that the more hours of daily usage (the most being five or more), the greater the risk of depression.

HOSPITAL-LEVEL HOME-CARE TO BE REIMBURSED BY CMS AT REGULAR HOSPITAL LEVELS

Bethesda, Maryland — If you provide hospital-level care to the patient at home, why should you not be paid at hospital levels, even if the patient is not in the hospital but at home?

That's the question many hospitals have been asking for some time. But now, under rules from the Centers for Medicare and Medicaid Services (CMS), hospital-based providers will finally be able to care for hospital-level patients at home—and bill Medicaid appropriately, too.

Under recent policy updates, CMS will reimburse hospitals to provide in-home, hospital-level telehealth care for patients at home with acute conditions.

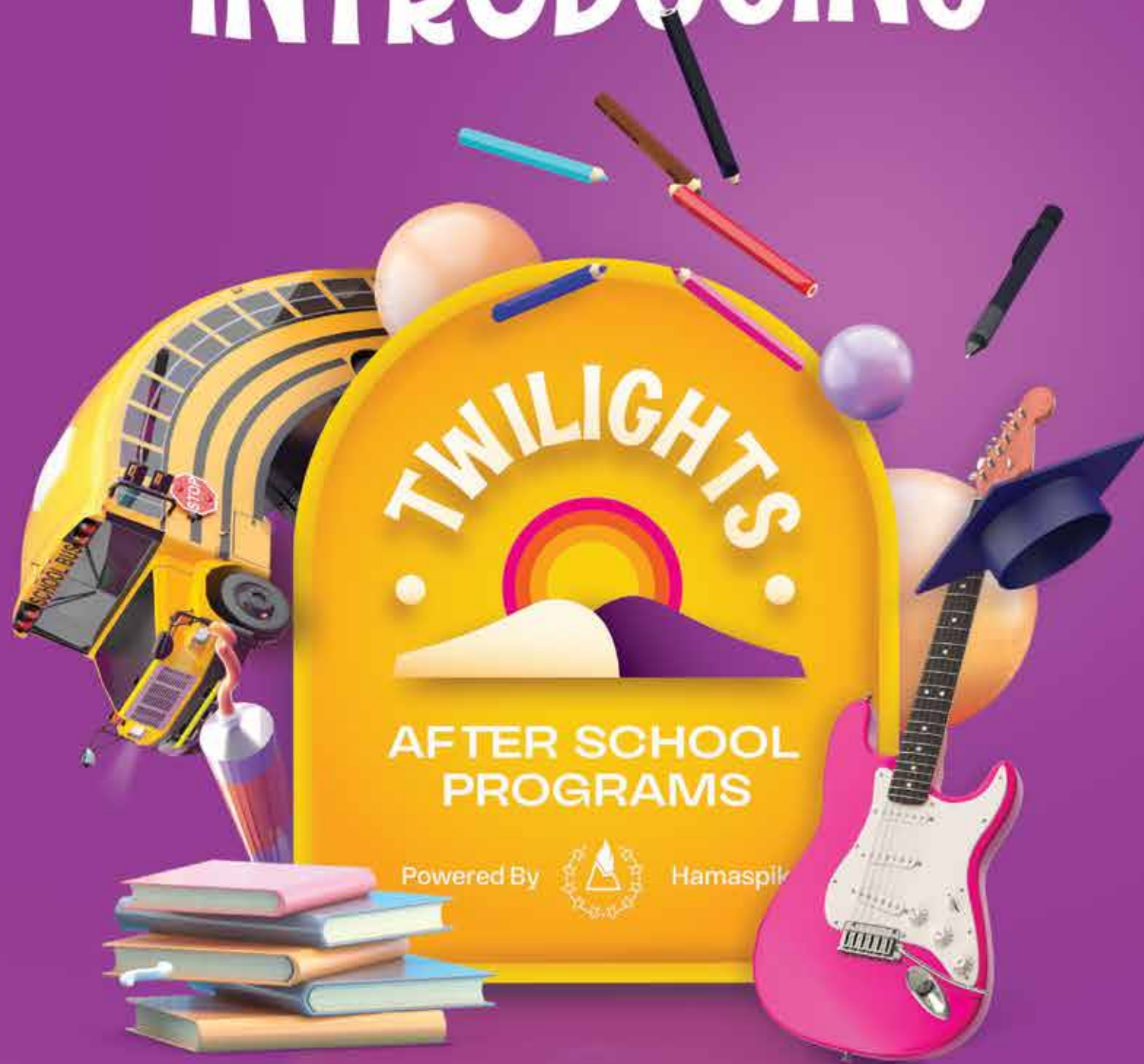
The Acute Hospital Care At Home program targets patients with any of more than 60 acute conditions and who would otherwise require inpatient admission.

The new program also conserves critical bed space for COVID-19 patients who need immediate treatment. ★



WATCHING YOUR HEART: THE HIGH-TECH IRHYTHM HEART-TRACKING PATCH HAS NOW BEEN LINKED BY A ROLLING STUDY WITH MORE EARLY DETECTION OF HEARTBEAT PROBLEMS

INTRODUCING



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In the Know

ALL ABOUT... FIBROMY- ALGIA

Sources: U.S. Centers for Disease Control (CDC), Healthline, Johns Hopkins Medicine, National Library of Medicine (NLM)

Fibromyalgia (FI-broh-my-AL-gee-uh) is defined by the Merriam-Webster Dictionary as “a chronic disorder characterized by widespread pain, tenderness, and stiffness of muscles and associated connective tissue structures that is typically accompanied by fatigue, headache, and sleep disturbances.”

Despite its defining symptoms, fibromyalgia can be hard to understand, even for healthcare providers, according to medical information resource Healthline.

Not only do its symptoms mimic those of other conditions, there aren’t any real tests to confirm the diagnosis, either. As a result, fibromyalgia is often misdiagnosed.

In fact, because of its elusive nature, fibromyalgia is a relatively new medical condition—and one that some healthcare providers even questioned was real, creating quite a bit of stigma.

According to a brief history by the National Library of Medicine (NLM), the phrase first came into usage in 1976—thanks largely, we might add, to the pioneering research of Dr. Hugh A. Smythe (1927-2012), the Canadian rheumatologist who, together with colleague Dr. Harvey Moldofsky, spearheaded the definition and acceptance of fibromyalgia as a genuine condition.

Regardless, for those who have it, fibromyalgia is very real. Here’s what you need to know.

DEFINITION

Fibromyalgia is a chronic (long-term) condition. Its cause is not known, but it can be effectively treated and managed.

The U.S. Centers for Disease Control (CDC) defines fibromyalgia as a condition that causes pain all over the body (the medical term used is “widespread pain”), sleep problems, fatigue, and often emotional and mental distress.

More specifically, Dr. Smythe emphasized that fibromyalgia (which until his arrival was known since 1904 as *fibrositis*) was defined by *specific points of tenderness* all over the body, along with *referred pain*. Today, however, those areas or points are seen more as larger overlapping regions, not smaller specific locations.

According to the CDC, people with fibromyalgia may be more sensitive to pain, a phenomenon called *abnormal pain perception processing*. The condition affects about four million U.S. adults, or about two percent of the adult population. It may affect up to one out of every 25 people in the U.S., and is most common in middle-aged women.

SYMPTOMS

The CDC lists the following as fibromyalgia’s most common symptoms:

- Pain and stiffness all over the body
- Fatigue and tiredness
- Depression and anxiety
- Sleep problems
- Headaches, including migraines

Still, pain remains the hallmark symptom of fibromyalgia. The pain may get worse with activity, cold or damp weather, anxiety and stress. Patients will feel it in various muscles and other soft tissues around the body. This pain ranges from a mild achiness to an intense and almost unbearable discomfort. Its severity could dictate how well the person copes day to day.

Chest pain

Within the category of pain is chest pain—a symptom all its own. When fibromyalgia pain is in the chest, it can feel frighteningly similar to that of a heart attack. However, with fibromyalgia, that chest pain is actually centered in the cartilage that connects the ribs to the breastbone, and which may radiate to the shoulders and arms. Fibromyalgia chest pain may feel sharp, stabbing, or like a burning sensation—and, similar to a heart attack, it can make a person struggle to catch her or his breath.

Fibromyalgia fog

Another group of symptoms deserving specific attention is informally called “fibro fog” or “brain fog,” a term some people use to describe the “fuzzy” sensation they get. This is comprised of: difficulty thinking clearly or remaining alert; lapses in memory; and trouble concentrating.

According to a 2015 study published in *Rheumatology International*, some people find mental foggy from fibromyalgia more upsetting than pain.

Fibromyalgia and autoimmunity

In autoimmune diseases like rheumatoid arthritis (RA) or multiple sclerosis (MS), the body mistakenly

targets its own tissues with proteins called *autoantibodies*. Just like it would normally attack viruses or bacteria, the immune system instead attacks the joints or other healthy tissues.

Fibromyalgia symptoms look very similar to those of autoimmune disorders. These symptom overlaps have led to the theory that fibromyalgia could be an autoimmune condition.

This claim has been hard to prove, in part because fibromyalgia doesn’t cause inflammation, and to date reproducing autoantibodies haven’t been found. Yet it’s possible to have an autoimmune disease and fibromyalgia simultaneously.

Other symptoms may include:

- Tingling or numbness in the hands and feet
- Pain in the face or jaw, including temporomandibular joint syndrome (TMJ)
- Digestive problems including abdominal pain, bloating, constipation, and even irritable bowel syndrome (IBS)
- Dry eyes

Healthline specifies *pain in the muscles and bones* (musculoskeletal pain), and *areas of tenderness*, in its list of symptoms.

The pain in those regions is commonly described as “a consistent dull ache.”

Risk factors

According to the CDC, known risk factors include:

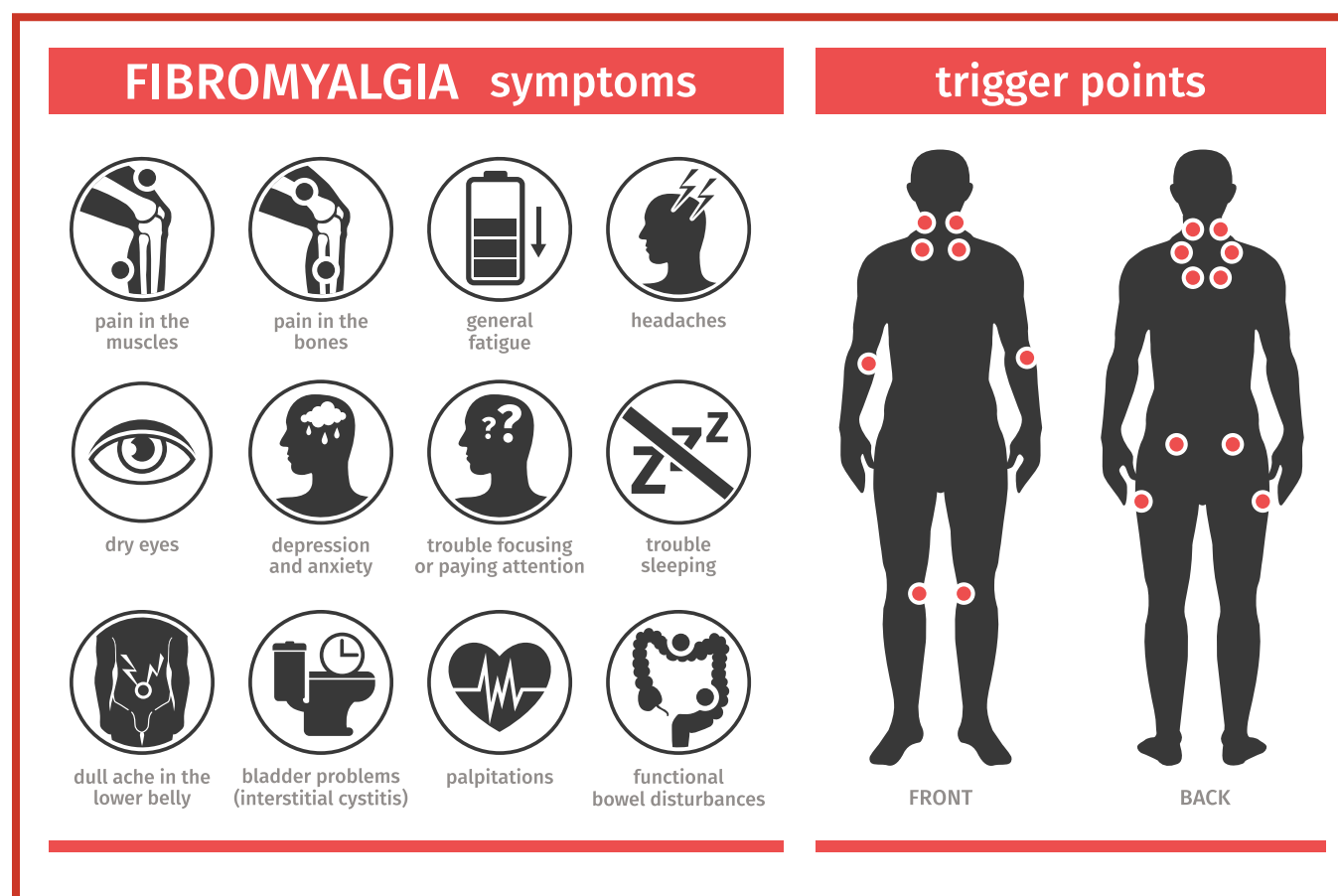
Age. Fibromyalgia can affect people of all ages, including children. However, most people are diagnosed during middle age; the condition is likelier as one ages

Lupus or rheumatoid arthritis (RA). People with lupus or rheumatoid arthritis are more likely to develop fibromyalgia

Some other factors have been weakly associated with onset of fibromyalgia, but more research is needed to see if they are real. These possible risk factors include:

- Gender. Women are twice as likely to have fibromyalgia as men





- Stressful or traumatic events, like car accidents or post-traumatic stress disorder (PTSD)
- Repetitive injuries, which typically result from repetitive stress on a joint like frequent knee bending
- Illness (such as viral infections)
- Family history
- Obesity

CAUSE

As mentioned, the precise cause of fibromyalgia remains unknown, largely because fibromyalgia by definition is a vague and amorphous condition that spans several symptoms. Research continues to evolve in better understanding this condition and its origin.

However, in people with fibromyalgia, the brain and nerves may misinterpret or overreact to normal pain signals.

In other words, it appears to stem from an abnormal nervous system response—meaning, the body overreacts to things that shouldn't normally be painful. This may be due to a chemical imbalance in the brain, or an abnormality in a part of the brain called the *dorsal root ganglion*, that affects central pain (brain) sensitization.

Additionally, researchers also currently believe that fibromyalgia may be a “perfect storm” of several converging factors, including: a history of infections like flu, pneumonia or other bugs; genetic heredity as well as genetic mutations; severe physical or emotional trauma, even years ago; and stress or post-traumatic stress disorder (PTSD).

Complications

Fibromyalgia can cause pain, disability, and lesser quality of life. American adults with fibromyalgia may have complications like:

- More hospitalizations. People with fibromyalgia are twice likelier to be hospitalized as someone without fibromyalgia
- Higher rates of major depression. Adults with fibromyalgia are more than three times likelier to have major depression than adults without fibromyalgia. Screening and treatment for depression is extremely important
- Higher rates of other rheumatic conditions. Fibromyalgia often co-occurs with other types of arthritis, like osteoarthritis, rheumatoid arthritis, systemic lupus erythematosus, and ankylosing spondylitis

DIAGNOSIS

How fibromyalgia is diagnosed has changed over the years.

In the past, people were diagnosed with fibromyalgia if they had widespread pain and tenderness in at least 11 out of 18 specific trigger points around their body. Healthcare providers would check to see how many of these points were painful by pressing firmly on them. Common trigger points included the:

- Back of the head
- Tops of the shoulders
- Upper chest
- Hips
- Knees
- Outer elbows

For the most part, trigger points are no longer a part of the diagnostic

trigger points

process. Instead, the patient may be diagnosed with fibromyalgia if she or he (far more women get fibromyalgia than men) has pain in four out of five defined areas of pain.

Currently, according to Healthline, a doctor will consider a diagnosis of fibromyalgia if the patient has experienced musculoskeletal pain in the majority of specifically defined locations. This diagnostic protocol is sometimes referred to as “multisite pain.”

Another change in method of diagnosis is a shift away from *duration* of pain to *location* of pain.

TREATMENT

Fibromyalgia can be effectively treated and managed with medication and self-management strategies.

Fibromyalgia should be treated by a healthcare professional who specializes in the treatment of fibromyalgia and other types of arthritis, called rheumatologists. Doctors usually treat fibromyalgia with a combination of treatments, which may include:

- Antidepressants like Cymbalta and Savella, which are sometimes used to treat the pain and fatigue of fibromyalgia
- Neurontin and Lyrica, both epilepsy drugs, which may also help reduce symptoms in people with fibromyalgia
- Over-the-counter (OTC) pain relievers like ibuprofen (Advil) or acetaminophen (Tylenol)
- Aerobic exercise and muscle strengthening exercise
- Patient education classes, in primary care or community settings
- Stress management techniques such

as meditation, yoga, and massage

- Good sleep habits to improve the quality of sleep
- Cognitive behavioral therapy (CBT) to treat underlying depression; this is a type of talk therapy meant to change the way people act or think

Self-management

In addition to medical treatment, the CDC says that people can manage their fibromyalgia with the following proven pain- and disability-reducing self-management strategies:

Get physically active. Experts recommend that adults be moderately physically active for 150 minutes per week. Walk, swim, or bike 30 minutes a day for five days a week. These 30 minutes can be broken into three separate ten-minute sessions during the day. Regular physical activity can also reduce the risk of developing other chronic diseases such as heart disease and diabetes.

Go to recommended physical activity programs. Those concerned about how to safely exercise can participate in physical activity programs that are proven effective for reducing pain and disability related to arthritis and improving mood and the ability to move. Classes, which are commonly offered at local community centers and public parks, can help you feel better. Learn more about CDC-recommended physical activity programs

Join a self-management education class, which helps people with arthritis or other conditions—including fibromyalgia—be more confident in how to control their symptoms, how to live well and understand how the condition affects their lives

Natural remedies and alternative medicine options include physical therapy, acupuncture, meditation, tai chi and massage therapy

PROGNOSIS

While there isn't a cure for fibromyalgia, reduction of symptoms and improvements of quality of life can make all the difference.

Lean on people who understand what you're going through—join a support group, whether a formally-organized one or just a friend or two who also has fibromyalgia. And do be gentle on yourself—try not to overdo it! Most importantly, have faith that you can learn to cope with and manage your condition.

With a long-term plan consisting of medications, self-care strategies, lifestyle changes, and above all, emotional support from others who also have fibromyalgia and know exactly what it's like, you can feel significantly better—both physically and, most importantly, mentally. ★



Status Report

Happening In Hospitals Today

FEDERAL DEPT. OF AGRICULTURE GIVES OVER HALF-MILLION TO GEORGIA CANCER CENTER

Augusta, Georgia — Augusta University's Georgia Cancer Center recently received a grant of well over \$500,000 from a rather unlikely source: the federal U.S. Dept. of Agriculture (USDA).

Under the USDA's little-known Distance Learning and Telemedicine Grants program, qualifying medical centers and hospitals—now including the Center—can get funding for high-tech patient-care programs.

The program in question is designed to bring the still-exploding field of telemedicine to patients across Georgia needing skin cancer care—particularly in the area of melanoma.

With its new funding, the Center will develop a telemedicine program in partnership with medical centers across the state, distribute dermatoscopes to satellite clinics and organize seminars focused on skin cancer health and awareness.

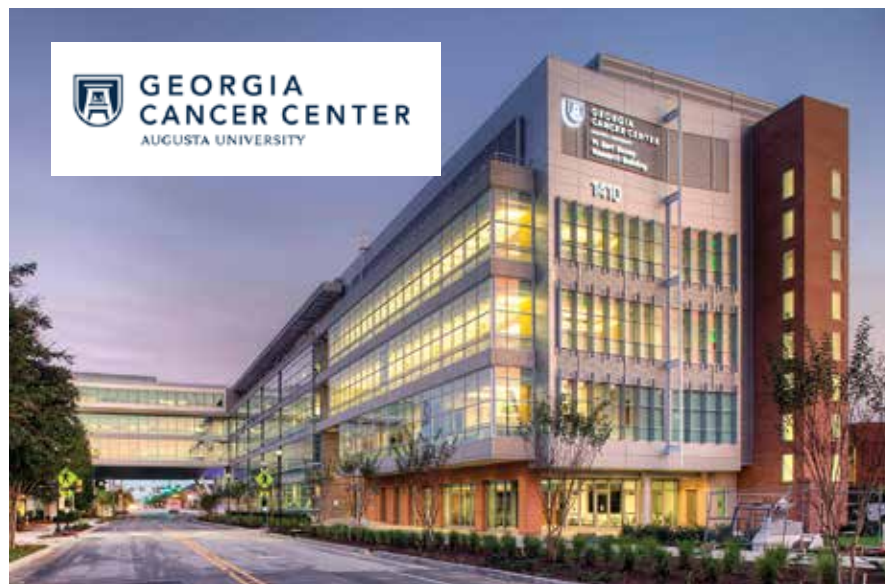
The American Cancer Society projects nearly 3,200 people will be diagnosed with melanoma this year.

HOSPITALS FIGHTING ECONOMIC, SOCIAL DISPARITIES WITH \$700 MILLION PROJECT

Washington, D.C. — The 45-member Healthcare Anchor Network, a group of U.S. hospitals and health systems founded in 2017, has pledged some \$700 million toward community-based efforts to address the economic and environmental drivers behind healthcare disparities.

In plain English, that means: donating lots of money to figure out why poorer people have less healthcare, and then fixing those problems.

The funding over the next five years will be spent on local programs nationwide that provide housing, food and local jobs.



GROWING THE FIELD OF TELEMEDICINE: THE GEORGIA CANCER CENTER WAS THE RECIPIENT OF A GRANT FROM THE USDA TO FURTHER ITS DISTANCE-TREATMENT PROGRAMS

Participants include Kaiser Permanente, RWJBarnabas Health, UMass Memorial Health Care Intermountain Healthcare, and Advocate Aurora Health.

KAISER BREAKS GROUND ON CAL. HOSPITAL TO OPEN IN THREE YEARS

San Marcos, California — Despite constantly-changing economic realities, East Coast hospitals—perhaps best exemplified by explosive hospital growth in Manhattan—are constantly building new buildings.

Now it seems that the West Coast is getting in a bit on the action.

Among the newest hospital facilities going up in the Golden State is now the seven-story San Marcos Medical Center, to be owned and operated by the Oakland, California-based Kaiser Permanente health system.

The state-of-the-art, brand-new medical center will house 206 single-patient rooms, 51 emergency department bays, 10 labor and delivery suites and eight operating rooms, according to Kaiser. It is slated to open in the fall of 2023.

"This is the culmination of six years of work by many, many people," Max Villalobos, COO of Kaiser Permanente

San Diego North County division, said at the groundbreaking ceremony, according to *The Times of San Diego*.

HENRY FORD BUILDING MENTAL-HEALTH HOSPITAL IN DETROIT

Detroit, Michigan — Acadia Healthcare is the nation's largest stand-alone company specializing in the treatment of behavior-health diagnoses. Henry Ford Health is the healthcare non-profit division of the iconic Ford auto company.

Together, the two organizations are building a new 192-bed behavioral health hospital in metro Detroit.

Under the plan, the two organizations would partner to create the inpatient treatment facility for behavioral health needs on a parcel of land already owned by Henry Ford Health.

Construction will begin once all regulatory approvals are met with a goal to open the facility in 2022, officials said.

Henry Ford Health is a non-profit, integrated health system with six hospitals in Michigan, more than 250 outpatient facilities, Henry Ford Pharmacy, Henry Ford OptiEyes, and the non-profit Health Alliance Plan which provides coverage for more than 540,000 people.

U.S. HOSPITALS OVERSPEND \$25 BILLION A YEAR ON SUPPLIES, SAYS STUDY

Chicago, Illinois — Talk about poor spending habits!

Chicago-based Navigant Consulting finds in an analysis of over 2,100 U.S. hospitals that the healthcare facilities overspend a staggering \$25.7 billion a year on supply chain expenses.

Navigant compared the 25 most efficient healthcare supply chain operators to other hospitals, finding that unnecessary spending was over \$25 billion in 2019, despite efforts by health systems to rein in supply expenses.

Navigant also found that by using the right data and reducing supply variation, individual facilities could save about \$12.1 million a year on supply chain products, processes and procedures—and that lower supply chain spending does not translate to lower quality of care.

U.S. HOUSE BILL ADDRESSES SURPRISE MEDICAL BILLS

Washington, D.C. — In what might be a bit of a surprise, the U.S. House of Representatives is now finally moving forward on the No Surprises Act.

The bipartisan legislation, as its name suggests, addresses the perennial problem of surprise medical bills (SMBs). While introduced years ago, it finally got breakthrough movement this past December, when lawmakers announced an agreement on its language and text.

The No Surprises Act addresses the most crucial objective of lawmakers: protecting patients from unexpected, out-of-network medical bills.

On the three previous major points of dispute between lawmakers, the legislation moves toward the positions favored by provider groups. Those three points are: whether to require an interim payment prior to entering an independent dispute resolution process (IDRP); the criteria for deciding payment as part of IDRP; and whether to include a dollar threshold for claims to be eligible for IDRP. ★



THE BILL'S IN THE HOUSE: THE U.S. HOUSE IS TAKING ON SURPRISE MEDICAL BILLS



The Senior Care Gazette

News from
the World of
Hamaspik
HomeCare and
Senior Health

Round-the-Clock Care and Safety Supervision for Seniors via NHTD

The Nursing Home Transition and Diversion (NHTD) Program, Long Offered by Hamaspik, Provides Aides for Those Qualifying

If your loved one needs ‘round-the-clock care and supervision for safety, the NHTD program may be just the thing for him or her—with a little help from Hamaspik HomeCare.

But let’s start at the beginning—with a couple of questions:

1. Is your loved one getting a standard aide through Hamaspik HomeCare, such as a home health aide (HHA), personal care aide (PCA) or aide from the Consumer Directed Personal Aide Program (CDPAP)—but not getting enough aide hours a day?
2. Do you (and/or your family members) find yourself up at night caring for or supervising your loved one so that he or she stays safe?

3. Does your loved one have any memory loss or physical disabilities that require constant care, oversight and supervision for safety reasons?
4. Do you feel that you cannot safely leave your loved one alone?

If you answered “yes!” to these questions, the NHTD program can help you, your family—and your loved one.

The NHTD Program’s specialized services are geared for seniors and others who medically require assistance at the nursing-home level—meaning, that this is the care they’d be getting if they were in a nursing home.

As its name indicates, the program is designed for nursing-

home-level patients who are making the *transition* from nursing homes or hospitals back home, to stay healthily at home once they get there—or to *divert* them from going to nursing homes or hospitals from home in the first place. The idea is simply to avoid the typically costly placement in nursing homes.

Other programs may only provide aides for the hours required for actual “hands-on” assistance with personal and household needs. However, NHTD not only allows for aide hours for assistance with activities of daily living (ADL) and household help, it also provides for those critical additional hours for safety oversight and supervision, too.

That ‘oversight-and-supervision’ aspect of NHTD enables your loved one to get care ‘round-the-clock care.

What’s more, if there is already an aide that you’re satisfied with who is currently working with your loved one, Hamaspik HomeCare is available to offer Personal Care Assistance and NHTD certification. If they meet the program’s criteria, your favored aide(s) may continue working with their patient—your loved one.

Another NHTD service is Service Coordination, in which an assigned Service Coordinator helps procure all eligible resources, support, supplies and services.

So what are you waiting for? ★

For further information and how to apply for NHTD benefits, please contact 888-503-8777 or NHTD@hamaspikcare.org.

Personal Freedom—and All That Stuff Decluttering is Good at Any Age, and Especially for Seniors

You’re not alone if you feel suffocated by stuff.

You’re not the only one if you open a drawer and experience that anxious feeling you can’t quite explain, or come across a “hole”-y sweater and wonder, “Why do I still have this?” As the Sages said (*Ethics of the Fathers* 2:7), “More property, more worry.”

In fact, studies have found that Americans are drowning in possessions.

The U.S. Department of Energy reports that 25 percent of people with two-car garages don’t have space to park a car (!). And a report by the National Association of Professional Organizers found that we spend an average of *one year* of our lives looking for lost possessions due to clutter.

While cluttering is a problem at any age, it’s especially problematic for seniors—for whom clutter can not only be just a storage and space problem but also one of tripping hazards, stress and exacerbated memory-loss.

So whether you’re planning to move, want to downsize, or are thinking

about the future and don’t want to put your family through the added grief of poring through your possessions “after 120,” there’s no better time to declutter than now. You’ll also find yourself feeling free, cleansed and in a safer environment.

Decluttering has become highly popular over the last few years. Here are some methods on decluttering for good:

- Joy-Sparkers: The core of this method is to only keep items that “spark joy” when you hold them. Part with the rest!
- Categorically Decluttered: Declutter by category—clothes, books, papers, miscellaneous and mementos—rather than by room.
- Gradualism in 40 Days: If you don’t have the energy level to declutter over one large chunk of time, you can do something more gradual: the “40 Bags in 40 Days” approach. Set aside some time each day to rid yourself of one garbage bag of trash, clutter, and/or clothes you haven’t worn in years. This may sound daunting, but

the average household is so full that you may be surprised how easily you can fill a single trash bag. In forty days you will be closer to Pesach than you think!

- Let Them Have It: You may be surprised that your items can help another. Kupas Ezra at 4 N. Main Street in Spring Valley will sell your donated items for drastically reduced

prices to those in the community in need. (Please only donate items in good condition.)

So if you’re feeling “stuff”-y, get rid of it. (The stuff, not the feeling.)

But get rid of unneeded stuff, and a breezy feeling is sure to follow! ★

Please call Hamaspik HomeCare at 845-503-0700 to see if you or a loved one is eligible for a home health aide (HHA) or personal care aide (PCA). An aide may help with the decluttering process, making the job more manageable for seniors.

**WHY STRUGGLE ALONE
WITH CARING FOR YOUR
ELDERLY LOVED ONES?**

Call today to see if they qualify
for home care!

Call Hamaspik HomeCare’s
Intake Dept. directly at

845-503-0700





AT ARM'S REACH, AROUND THE CLOCK

Hamaspik gets your loved one the compassionate support they need, 24 hours a day. Our Nursing Home Transition and Diversion (NHTD) program's specialized services ensure personal supervision and comprehensive care, every day of the week.

**24/7 Home &
Community Care**

**Professionally
Trained Aides**

**Dedicated Care
Coordinators**

**Daily Living
Assistance**



Hamaspik HomeCare
Legendary Support, Extraordinary Care

Call us: 888.503.0777 | nhtd@hamaspikcare.org