



# The Hamaspik Gazette

News of Hamaspik  
Agencies and  
General Health

JULY '22 • ISSUE NO. 202



## GAZETTE SURVEY

The GAZETTE asks YOU:

**DO YOU MAKE SURE YOU EAT PROTEIN EVERY DAY?**

**A: YES; B: NO**

Respond to: [survey@nysshainc.org](mailto:survey@nysshainc.org) • 845-655-0667



## HEALTH STAT

### TOP GLOBAL SOURCES OF PROTEIN

Source	Percentage
Animals raised for food (meat and poultry)	33%
Wheat, maize and rice	60%
Other	7%

Source: United Nations Food and Agriculture Organization (FAO)



## HEALTH TIP

### PACK IN THAT PROTEIN PUNCH!

As with many vitamins and nutrients, the best source of protein is natural, not supplemental. So if you want to boost your protein intake, the following foods are the best health-wise for you: 1. Fresh fish (esp. salmon); 2. Beans (esp. lentils and chickpeas); and 3. Lean meats (esp. chicken).

Source: EatingWell.com

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THIS YEAR'S GETAWAY MARKS THE 20TH ANNIVERSARY OF THE HIGHLY-ANTICIPATED EVENT, REKNOWN FOR ITS MORALE-BOOSTING POWER THAT RECHARGES SPECIAL-NEEDS PARENTS... FOR A GOOD YEAR.

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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.

### 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:** Full day respite program during the summer break weeks.

**Respite 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 Getaways:** A weekend retreat for individuals receiving respite services.

### 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.

### ARTICLE 16 CLINIC

Provides medical, diagnostic, and therapeutic services for persons with developmental disabilities. Such as: Physical therapy · occupational therapy · speech therapy · psychology · social work · psychiatry · nutrition

### PARENTAL RETREATS

Providing: Getaways and retreats for parents of individuals with disabilities

### EMOD, VMOD AND ASSISTIVE TECHNOLOGY

Individuals who are eligible and approved for OPWDD services who reside in non-certified home and community-based settings may qualify for AT, E-Mod, and V-Mod services funded through the OPWDD HCBS Waiver.

**Assistive Technology :** Any device, item, equipment, product, or system that is used to increase, maintain, or to improve an individual's functional capabilities and/or independence in performing activities of daily living (ADL).

**E-Mods:** Physical adaptations to an individual's home, like ramps, lifts and grab bars, needed to ensure his or her health, welfare and safety and to maximize independence and reduce need for institutionalization and/or more restrictive, costly living arrangements.

**V-Mods:** Physical adaptations to the individual's vehicle that are necessary to ensure the health, welfare, and safety of the individual or that enable the individual to function with greater independence.

## DOH

### EARLY INTERVENTION (EI)

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

**Group Development Model (GDM):** Provides Early Intervention services in a group-setting

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

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

**Ongoing Service Coordination (OSC):** Provides ongoing support for families of children enrolled in the Early Intervention Program.

### 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.

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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.

### SOCIAL DAY PROGRAM

A comprehensive structured program providing functionally-impaired adults an array of services in a protective daytime setting. Each individual participant receives services in accordance with an Individualized Service Plan (ISP) based on a personalized assessment.

### SENIOR DINING PROGRAM

Serves balanced nutritious meals to older New Yorkers up to five days a week in a variety of settings. Eligible to seniors age 60 and up, as well as to spouses younger than 60 and individuals with disabilities residing in eligible seniors' homes..

## 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.

**Home Health and Personal Care Services (HHA/PCA):** Our PCA/HHA assist individuals with personal care needs, activities of daily living, and light housekeeping. They are extensively trained, screened and supervised by a RN.

**NHTD/TBI Home & Community Support Services (HCSS):** 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 (RN):** Providing skilled observation and assessment - care planning - paraprofessional supervision - clinical monitoring and coordination - medication management - physician - ordered nursing interventions and skilled treatments.

**HHA/PCA Training:** Free PCA/HHA training and competency testing offered for those interested in a home care career.

### CDPAS/CDPAP: CONSUMER DIRECTED PERSONAL AIDE SERVICES/PROGRAM

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.

## NYS HCR

### ACCESS TO HOME

Providing home modifications for people with physical disability.

### RESTORE

Providing emergency repairs for low incomes homeowners over the age of 60.

## US AND NYS AGRICULTURE

### CHILD AND ADULT CARE FOOD PROGRAM (CACFP)

Provides federal reimbursements for the costs of nutritious meals and snacks which are served to eligible children and adults at participating daycare centers, after-school programs, or shelters.

## 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

### 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 Hamaspiik news.

### MAMTAKIM

A summer camp for individuals approved for OPWDD services.

## BOE

### THE HAMASPIK SCHOOL

Private chartered school for kids age 5 - 10 with developmental disabilities, taking education to heart and teaching them in a way they can learn thru an individualized plan, Including ABA, OT, PT, SPL and Multi-sensory hands-on learning.

### KINDERVILLE

A summer camp for individuals approved for OPWDD services.

## OMH

### SIPUK, ARTICLE 31 CLINIC

Mental Health-licensed behavioral health, Article 31 Clinic, servicing all ages.

## OMH/DOH

### 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 ages 0-21 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

# “Not Taking No For an Answer!”

*Tri-County's Brooklyn Team Secures Culturally-Sensitive Post-Hospital Placement for Client Needing Rehab*

About the best thing rehab-wise that could happen to you, is to be placed at a rehabilitation center that gets where you're coming from.

To be sure, the licensed professionals employed at other facilities will be professional. Sympathetic. Compassionate. Attentive. Else why would they work there?

But even the sincerest professional, unless thoroughly trained and familiar with your highly nuanced culture of origin, will unintentionally commit blunders of commission, or omission, that will innocently seem trivial to her but which carry profound import to you. (It's far more than just the need for kosher food!)

When a Tri-County Care client was slated for discharge from Manhattan's prestigious Memorial Sloan-Kettering Cancer Center (MSKCC), a hospital social worker opted for a rehabilitation center located in the farthest reaches of Brooklyn's storied Coney Island district.

That Orthodox Jewish religious client, however, hailed from the community of Borough Park, a borough enclave synonymous not just for its sprawling, pulsating Orthodox Jewish community



but for its aforementioned culture, too. Small wonder Tri-County Care boasts a sprawling office in the neighborhood's heart, sensitively tending to scores of clients in all their gray-scaled glory. Not only do a good number of Orthodox Care Managers advocate for their fellow co-religionists at Tri-County, but the rich kaleidoscope of ethnicities and races of today's New York is well represented by peer Care Managers, too.

So upon learning of the young woman's ostensible destination, Care Manager Mrs. Rivky Schwartz swung into action.

Conferring with Supervisor Mrs.

Chava Silberman, the two agreed that the location was unacceptable. Besides the question of faith-based supports (or lack thereof), the location was also notably far from Borough Park, making critical morale-boosting daily visits logistically difficult if not impossible.

Other locations were extensively researched but ruled out for various reasons until Mrs. Silberman thought of something: veteran disability advocate and fellow Tri-County employee Mrs. Chedva Freund. Specifically, a local rehab center in Borough Park—and a family connection there to Mrs. Freund. An initial call to the gentleman was placed.

Perhaps understandably, those initial feelers were met with a hesitant no. Space was a concern, as the tumultuously-busy holiday season was fast upon them. Plus, given the individual's multitudinous diagnoses, the Center was reticent to take her on.

But, “we didn't take no for answer!” say Mrs. Silberman, rightfully taking credit. She knew from experience that a facility not equipped or experienced in catering to such patients was no place for her client. So the resulting diplomacy from Mrs. Freund was all but inevitable—and the results all but expected.

For two weeks, then, the client enjoyed top-flight professional attention, as the rehab Center's teams of therapists worked to isolate and diagnose the problem and execute concrete therapeutic solutions—all against the background of full cultural inclusion, including Orthodox Jewish therapists and fellow patients, that made her feel right at home.

That's not surprising given that the rehab is located smack in the middle of Borough Park.

But it's also not surprising that Tri-County Care fought to get her there. ★

# ► HEALTH NEWS

# Harvard Researchers Find Compelling Evidence of Cause of Multiple Sclerosis

*Long-Suspected Epstein-Barr Virus (EBV) Found at Far Higher Rates in U.S. Soldiers Later Diagnosed with MS*

**Boston, Massachusetts** — Multiple sclerosis (MS) is a progressive disease in which the immune system attacks the protective sheath (myelin) that covers nerve fibers. The result is communication problems between the brain and the rest of the body.

While MS was first described in 1868 and modern medicine can offer several treatments to make it more manageable, the condition currently has no definitive cause or cure. It affects about 2.8 million people worldwide.

But now, a new study by the Harvard T.H. Chan School of Public Health has found compelling evidence of a cause: the Epstein-Barr virus (EBV).

Long suspected of involvement, EBV is a herpes virus that can cause infectious mononucleosis later in life and establishes a latent, lifelong infection of the host. The generally-harmless virus infects most people in

childhood and is estimated to be carried by 95 percent of the U.S. public.

To establish a link, Harvard researchers turned to the U.S. military.

The researchers extensively analyzed decades of regular blood tests on personnel. They found that soldiers found to have EBV were 32 times likelier to be later diagnosed with MS.

Scientifically speaking, “Serum levels of *neurofilament light chain*, a biomarker of the nerve degeneration typical in MS, increased only after EBV infection,” explained a Harvard statement. “The findings cannot be



**CAUSE (MAYBE) FOUND: VIRUS SUSPECTED** explained by any known risk factor for MS and suggest EBV as the leading cause of MS.”

Most significantly, the research suggests that “most MS cases could be prevented by stopping EBV infection, and that targeting EBV could lead to the discovery of a cure for MS.”

“This is an impressive study ... that strengthens the scientific consensus that infection with Epstein-Barr virus is a trigger for MS,” said Dr. Bruce Bebo, Executive Vice President of Research for the National MS Society. “Development of Epstein-Barr virus vaccines is underway, and once one is proven safe and effective, it should be tested with haste in people at high risk for MS.” ★

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# Happening in Health Today



## COMPUTER ANALYSIS OF SPEECH COULD HELP DIAGNOSE ALZHEIMER'S

**Provo, Utah** — Utah-based software company Canary Speech, which made headlines recently, is not the first one to try what they're trying. But it's newsworthy nonetheless.

The idea? Using highly-programmed artificial intelligence (AI) software to listen to recordings of people's natural speech—and then tell you whether or not the speaker has Alzheimer's.

Apparently the first software company to probe the concept is the Toronto, Ont.-based Winterlight Technologies. In 2016, Winterlight used *deep learning*, a method AI software uses to essentially program itself, to analyze the speech of people with and without Alzheimer's with an accuracy of about 81 percent.

But now, Canary is working with deep learning company Syntiant to



USING ARTIFICIAL INTELLIGENCE (AI) TO HELP DETECT ALZHEIMER'S EARLIER: CANARY SPEECH'S SOFTWARE WILL ANALYZE PATIENT SPEECH TO DETECT CONDITION SOONER

build a wearable medical device that'll analyze a patient's speech sample in under a second to test for Alzheimer's.

While Alzheimer's is generally

associated with memory loss, research suggests that it can impact speech and language even before most symptoms are noticeable. ★

## PEANUT EXPOSURE THERAPY FOR ALLERGIC CHILDREN APPARENTLY WORKS, FINDS STUDY

**Little Rock, Arkansas** — Good news for children with severe peanut allergies: The IMPACT study, based out of Arkansas Children's Hospital in Little Rock and the University of North Carolina (UNC), found that the majority of participating children were desensitized to peanuts after about 2.5 years of regular and progressively-increasing exposure.

Among the 146 children ages one to three in the placebo study, 71 percent of those getting weekly exposure to measures of peanut flour were reaction-free by study's end—compared to just two percent exposed to a non-peanut flour placebo.

What's more, 21 percent of participants achieved *remission*, or sustained desensitization, at 160 weeks, versus two percent of the placebo patients.

The landmark research was published in the *Lancet*.

Currently, there are no approved peanut immunotherapies for this age group. The American Academy of Pediatrics (AAP), for its part,

recommends that infants be exposed to peanuts as early as four months of age to reduce the risk of allergies.

## NEW SPEED RECORD IN DNA TESTING FOR RARE DISEASES HIGHLIGHTS BENEVOLENT BIOTECH RIVALRY

**Stanford, California** — Here's the basic story: a team of medical professionals at California's Stanford University broke a world record for how fast their DNA tests diagnosed a rare disease.

Normally, testing all of a patient's DNA for any mutations takes weeks. Do it fast and it can take days. Do it "ultrafast" and it can take hours.

Until now, the record was held by San Diego, California's Rady Children's Genomics Institute, which with one patient went from first blood sample drawn to final diagnosis in about 14 hours. Stanford now broke that record with a time of just over seven hours.

But here's the real story: Rady uses equipment from Illumina, a biotech arguably the Microsoft of DNA testing. Most tests use Illumina technology. Stanford used Oxford Nanopore.

The essential difference is that Illumina has fewer computers crunching bigger pieces of DNA data, while Oxford Nanopore has more computers simultaneously crunching smaller pieces of DNA data.

## RESEARCHERS PINPOINT PART OF BRAIN THAT REACTS TO SINGING

**Cambridge, Massachusetts** — Researchers at Massachusetts Institute of Technology (MIT) have identified a group of neurons in the brain that react to singing but not to other types of music.

According to the MIT researchers, the neurons respond to the specific combination of voice and music—but not to instrumental music or regular speech.

In their study, researchers used recordings of electrical activity taken at the surface of the brain as 15 volunteers heard a succession of 165 sounds. The newly identified neurons had very weak responses to either speech or instrumental music, showing that they're distinct from the music- and speech-selective neurons previously identified.

Perhaps predictably, the limited

brain area reacting specifically to vocal singing is within the *temporal lobe*, the brain part involved in music and language. Researchers say their study is the first to identify these neurons.

## DEMENTIA ONSET LINKED TO PREVIOUS MENTAL DISORDERS

**Ann Arbor, Michigan** — According to a study published in *JAMA Psychiatry*, mental disorders are associated with later onset of dementia.

Researchers at the University of Michigan in Ann Arbor analyzed data on over 1.7 million residents of New Zealand between July 1988 and June 2018.

They found that, compared to individuals without a mental disorder, those with a mental disorder were at higher risk for developing subsequent dementia—doing so 5.5 years earlier on average before those without a mental disorder.

Associations were similar across gender and age, and even when adjusting for preexisting chronic physical diseases and socioeconomic deprivation. Associations persisted across mental disorders and self-harm behavior and were seen for both Alzheimer disease and all other dementias.

"Ameliorating mental disorders in early life might also ameliorate neurodegenerative conditions and extend quality of life in old age," the authors write.

## RESEARCHERS DRAW UP FIRST-EVER DETAILED MAP OF THE HUMAN GUT

**Raleigh, North Carolina** — For the first time, researchers from the University of North Carolina have successfully mapped out the entire human gastrointestinal (GI) tract, including how different cells living in the gut are important to daily life.

"Our lab showed it's possible to learn about each cell type's function in important processes, such as nutrient absorption, protection from parasites, and the production of mucus and hormones that regulate eating behavior and gut motility," said Scott Magness, PhD, associate professor in the Joint UNC-NC State Department of Biomedical Engineering and senior author of the study, in a statement.

"We also learned how the gut lining might interact with the environment through receptors and sensors, and how drugs could interact with different cell types."

To create the map to study cell gene expression, the research team studied the GI tracts from three organ donors. ★



● ► HAMASPIK NEWS

# Recreation, Restoration, and Inspiration

*Two Smashing Success Support Weekends for Parents of Youth with Disabilities Hosted by NYSHA*

At both events, the people who walked into the Armon Hotel and Conference Center on two consecutive Fridays were not the same people who left the following Sundays—as hundreds of fathers and mothers of children with disabilities convened for yet two more weekends of inspirational change that were hosted by NYSHA.

For years now, the New York State Hamaspik Association (NYSHA), Hamaspik's parent body, has known that no one can support a special-needs parent like another special-needs parent. Hence, the agency has been fielding its ever-popular weekend retreats to ever-growing crowds of parents supported by Hamaspik.

At the most recent ones, two back-to-back weekends, guests arrived in Stamford, Connecticut for 24-plus hours of recreation, restoration and inspiration—taking a thoroughly well-deserved break from the rigors of parenting children with intellectual/developmental disability (I/DD) to recharge and draw strength from one another.

Each event began on Friday afternoon, as arrivals were welcomed by longtime Hamaspik Special Events Coordinator Mrs. Brenda Katina and her distinguished husband, Mr. Chaim Mendel Katina, along with their staff. Each received an elegant welcome package, complete with snacks and other accessories, then proceeded to collect their room keys and head to their lovely and fresh-smelling rooms. Rich buffets, each a veritable meal in its own right, awaited them downstairs in the main lobby.

At the same time, recreational activities were offered to guests across the afternoons. These included a virtual-reality (VR) goggle attraction granting guests a selection of VR experiences, a stress-relief therapy workshop exclusively for women, and a professional shoe-shine stand for the menfolk. The “Exploding Science” hands-on physics demonstration, put on by self-taught science nerd Meir Licht, kept the crowd fascinated and entertained with its safely-bursting soda-bottle rockets and balloons.

Additional activities included swimming sessions and an entertaining



**A BANNER EVENT:** THE WRITING IS ON THE WALL IN THE BEST OF WAYS AS A PROJECTOR DECORATES THE ARMON HOTEL'S SPACIOUS ATRIUM TO COMPLETE THE EVENT ATMOSPHERE



**BRINGING IT ALL TO THE TABLE:** HAPPY TO GREET GUESTS, PROFESSIONAL WAITSTAFF PROUDLY PRESIDE OVER CULINARY DIVERSITY



**A RAINBOW OF ROYAL BLACK:** DECKED OUT IN FULL ETHNIC DRESS FORMALS, THE MENFOLK WELCOME THE ONSET OF SHABBOS WITH FRIDAY-EVENING PRAYERS LED BY THE SHIRA CHOIR

talk by real-life adventurer Moshe Klein about his sojourn through Ethiopia.

Throughout the weekends, including the activity-packed opening afternoon, baby-sitting was available on site.

Thirty minutes before the sunset onset of Shabbos (the Jewish Sabbath), the womenfolk lit the customary Shabbos candles in one corner of the lobby. With the vocals of the Shira

Choir men's chorus in the background, the Shabbos-ushering scene was magical. Evening prayers followed in the synagogue on site.

The weekends were then formally begun by opening remarks by popular community personalities serving as emcees—at one, Rabbi Meir Mordechai Berkowitz and the other, Rabbi Velvel Feldman. For example, Rabbi Berkowitz



**A MAP FOR SUPPORT:** A LABELED FLOOR PLAN LET GUESTS LOCATE EACH EVENT



**NO WALLFLOWERS HERE:** DINING-ROOM FLORAL ARRANGEMENTS WERE AS EXPRESSIVE AS THE DINERS BONDING OVER SHARED LIVES



**THE POWER OF SPEECH:** RABBI GREENWALD DELIVERS A MOVING MESSAGE

opened with the classic joke of the impoverished circus hiring a man to play a real bear, bearskin and all. Entering a cage with a lion, the “bear” prayed his last, only to hear the “lion”—also a man in disguise—respond with a prayer of his own. The message of letting down one's guard and sharing their true selves was not lost on the crowd.

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● ► HAMASPIK NEWS

# Recreation, Restoration, and Inspiration

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Rabbi Yosef Chaim Greenwald, noted community leader and guest speaker, next spoke powerfully at both weekends.

The talks were followed by an inspiring Shabbos evening prayer service led by Cantor Yoel Ausch and backed by the Shira Choir. Simultaneously, the womenfolk assembled in a separate conference room for inspiring talks—on the first weekend by Mrs. Breindy Rosenberg, who opened up on losing a precious child in the context of “tackling challenges” (the theme of her speech), and the second by the noted Mrs. Shaindy Kleinman and Rebbetzin Miryam Swerdlov.

Grand Friday night meals were then served.

One meal’s guest speaker was Rabbi Yosef Eisen, a noted Torah scholar from Brooklyn and grandparent of a child with special needs. He dwelt on the subject of what God does for us. The second Friday-night dinner event was keynoted by community lecturer Rabbi Avraham Malach, speaking on the subject of clarity in life.

After dinners, men gathered in a

side room for informal inspiration sessions known in Yiddish as *buttehs*—gatherings over food that’s centered on a free-flowing spiritual conversations and spiced by inspiring songs joined by all. Rabbis Greenwald and Feldman separately presided over those gatherings. Simultaneously, the Shabbatons presented hilariously entertaining skits for the women.

After a well-earned good night’s sleep (though quite a few guests stayed up for therapeutic conversations until the morning’s wee hours!), guests arose each Shabbos morning for sizable breakfast spreads. Those were followed by three consecutive *minyanim*, or formal group prayer services, beginning at 8:30 a.m.

The menfolk next repaired to a *Kiddush*—the Shabbos-day meal of sorts named for the brief Kiddush prayer over wine that opens every such meal. The inspiration was palpable as dozens of fathers individually rose to open their hearts and share their life experiences. “When we have someone to talk to,” noted Rabbi Berkowitz in proctoring his discussion, “others gain strength, too.”



**TAKE IT FROM THE TOP:** HAMASPIK’S VERY OWN HERSHEL WERTHEIMER INSPIRES



**WINGS OF INSPIRATION:** RABBI MALACH BUOYED PARENTS WITH UPLIFTING TAKES



**A NEW WEEK, A RENEWED LIFE:** THE POST-SHABBOS MELAVEH MALKAH MEAL ON SATURDAY NIGHT USHERS IN NOT JUST THE DAYS AHEAD, BUT A RECHARGED SENSE OF LIFE’S PURPOSE



**NEWSTALK:** WITH GUEST ELIYAHU GLICK (L), COMMUNITY MEDIA PERSONALITIES YITZCHOK DREZNER, SHIMON YOEL KLEIN AND VELVEL SHMELTZER (L-R) TAKE ON THE DAY’S ISSUES

Off at events of their own, mothers were enthralled by messages delivered by guest speakers Mrs. Pearl Klein and Rebbetzin Shlomtzy Weiss. Mrs. Klein shared the trials and triumphs of losing her husband to the coronavirus, helping a home full of young children, and starting life anew with remarriage and fresh hope. Rebbetzin Weiss expanded on the inspirational origin of a very popular folk song in today’s Jewish community.

With hundreds of guests seated at tables fit for kings, lunch was served.

Guest speaker Rabbi Shmuel Binyomin Youst, a synagogue leader from Monsey, New York, shared at one event what it personally meant for him to raise a son with Down Syndrome, lose a teen son, and still persevere. The other luncheon was crowned by Rabbi Malach, who explored the subject of happiness.

Separate inspiration sessions ensued after both lunches. Mrs. Shoshana Kay presided over Q&A sessions for women, while additional distinguished guest speaker (and Down Syndrome parent) Rabbi Noson Zev Nussbaum, and Rabbi Youst, presented their equivalents to the men.

Six o’clock p.m. on both weekends featured a “stunning performance,” as one participant described it, for women only—channeling the spiritual energies

of song and dance into a liberating group healing experience.

After long and restful afternoon breaks (again, marked with friends new and old seen all about the hotel grounds bonding in soulful conversations in twos and threes), the formal afternoon Minchah prayers were held in the synagogue.

At both *Shalosh Seudos* third Shabbos meals, Rabbi Greenwald delivered keynote addresses that empowered and inspired all. For the womenfolk, Mrs. Kay shared a powerful personal journey at one *Shalosh Seudos*; the other was marked with an electrifying presentation by Mrs. Shaindy Kleinman.

Each Shabbos was closed with a musical Havdalah ceremony.

The two post-Shabbos *Melava Malkah* meals were rich in food for body and soul alike. One was chaired by Rabbi Berkowitz, with entertainment provided by the Shira Choir, while the other featured inspirational remarks by Rabbi Malach. Both also featured “keynote addresses” on the history and inspirational message of Hamaspiik presented by Hershel Wertheimer, Executive Director of Hamaspiik of Kings County.

Community humorists Yoel Lebowitz and the Chatzatzker Rebbe entertained the crowd at the first weekend, while both Saturday nights were capped by live panels by Messrs. Velvel Shmeltzer, Yitzchok Drezner, and Shimon Yoel Klein, the hosts and producers of the popular “Leil Shishi” program on Kol Mevasser, the popular community news phone hotline.

A grand Sunday breakfast closed both weekend, as guests boarded buses or took their own vehicles home.

They had arrived with just their suitcases. But they left with so much more. ★



**WISDOM AND WIT:** VELVEL FELDMAN KEEPS EVERY GUEST LAUGHING—AND THINKING

A SHABBOS HAMASPIK GUEST MISPLACED HER RINGS. IF YOU HAVE FOUND THEM, PLEASE CALL 845-642-3032 OR 845-425-0458



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## Another Face of Public Service



PLAYING THE PART: YOSSEI (L) TAKES A MOCK CALL; CHAIM HERSH GLANZER (R) OPENS UP



COMRADES IN VESTS: DAY HAB DOES A GROUP PHOTO DECKED OUT IN CHAVEIRIM GEAR



TOOL TIME: VOLVI (L) WIELDS A RUBBER Mallet USED BY CHAVEIRIM TO NOT DAMAGE CAR PARTS WHILE LOOSENING THEM, WHILE MOSHE (R) GETS A FEEL FOR A PORTABLE CHARGER

# Together We Can Overcome

## Integrated Health Care Management Brings Hope and Healing into Clients' Lives

"Integrated Health is special because it's a need that isn't being filled elsewhere," says Mr. Dovid Lichtenstadter, director of Integrated Health and an experienced care manager himself. "The adult population with mental health or chronic medical challenges is often overlooked, and they and their families deserve support."

By providing care management and HARP services to adults navigating mental health or chronic medical conditions, Integrated Health ensures every client's satisfaction with the care they receive.

Following intake and enrollment, the client and care manager, together with anyone playing a supportive role to the client, collaborate to create a care plan that accommodates everything the client wants and needs. Many clients will receive HARP services along with

care management, which includes HCBS funding, peer and family support, and pre-vocational opportunities.

Often, it's simply about receiving much-needed information: education about the medical or mental health systems, referrals to the right professionals, and guidance to obtaining the services that the client is entitled to.

And that's what care management is all about. From arranging appointments to advocating for funding for services, or simply acting as a listening ear, an Integrated Health care manager will be there throughout the client's journey, a figurative hand to hold as they navigate what can be a challenging path.

Mr. Lichtenstadter sums it up: "Integrated Health means that when a client needs support, someone is there for them." ★

## On Hamaspik OC's Annual Public-Servant Theme Day, "Day Habbers" and K.J. Chaveirim Volunteers are Best Buddies

### Village of Kiryas Joel Community Emergency Assistance Corps, Including Several Hamaspik Employees, Educates Individuals with Tour of Emergency Response Vehicle

Every year, the Hamaspik of Orange County Men's Day Habilitation (Day Hab) program hosts a day themed for one of public service's several visible symbols. On that day, the "Day Habbers" will dress up like, say, firefighters, learn basic firefighting facts, safety and fire prevention techniques, and be visited by a real firetruck—along with real firefighters, protective gear and all.

This time around, it was the turn of Chaveirim to visit Hamaspik.

Chaveirim, whose name translates to "friends," is the volunteer emergency assistance squad now prevalent across every major Orthodox Jewish community in the U.S. and even abroad. Chaveirim members will typically respond to roadside flat tires and car lockouts, basement floods, children missing or locked alone in homes, or even unsavory loiterers.

Like the Hatzolah volunteer EMTs,

they are community heroes admired by all—especially the young men supported by Hamaspik.

The gentlemen were thus thrilled when "903," Chaveirim of Kiryas Joel's heavy-duty Chevy pickup outfitted with a ton of equipment for a range of common situations, pulled up to Hamaspik's parking lot.

Wearing authentic Chaveirim reflector vests, the gentlemen were given a "tour" of the vehicle's many features and onboard tools and received some tips and advice. Even more exciting was the fact that beloved staff member Chaim Hersh Glanzer is also a longtime Chaveirim member.

Making it even more exciting than that is the fact that, thanks to Mr. Glanzer, a Chaveirim encounter happens more than yearly at Day Hab.

"If he runs off on a call," says Day Hab Manager Yidel Kleinman, "they come with him." ★



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## “My Home is Your Home!”

*Dedicated Hamaspiik Day Hab Staffer Moshe Berkowitz Includes Individuals in Move to New Apartment*

It's one thing if your job and your workplace make you feel right at home. It's quite another when your job effectively brings your workplace right into your home.

But that's exactly what the perpetually-positive Moshe Berkowitz, a beloved staff member at Hamaspiik of Orange County's Men's Day Habilitation (Day Hab) Program, did when he moved into a bigger apartment: He brought in his “boys” to help him formally dedicate it.

*Kevias mezuzah*, or mezuzah-setting, is the ceremonial placement of the mezuzah scroll on the primary access point of Jewish-owned homes and businesses. This placement of the mezuzah, which contains sacred writings and symbolizes God's protection, culturally delineates the space within as a “Jewish zone,” so to speak.

So when Direct Support Professional (DSP) Berkowitz, driven by his blessedly-growing family, moved to a larger living space, he did what so many Hamaspiik employees do

when experiencing lifecycle events involving family: he included his Hamaspiik “family.”

And so a group of young men with disabilities found themselves happily haunting the doorways of a spacious new flat in a new area of Kiryas Joel, where the Berkowitzes had just taken up new residence.

With hammer, nails and a handful of mezuzos in plastic cases, Mr. Berkowitz warmly welcomed his guests. Those “handi-capable” among them were then honored to pound the sacred scrolls into place on his home's new doorframes. Besides showcasing integration, their skills also reflected the ongoing success of Day Hab in general—and especially that of MasterPick, its job-training sub-division whose unofficial slogan is, “a crew like never before.”

No Jewish home is complete without a mezuzah.

And now, it seems that no Hamaspiik-connected home is complete without the inclusive participation of Hamaspiik-supported individuals, either! ★

## Keeping It In-House



DOOR TO INTEGRATION: MR. BERKOWITZ HELPS AS VOLVI (L), HERSHY (R) PLACE MEZUZOS



CIRCLE OF LIFE: GUESTS AND STAFF SING AND DANCE TO CELEBRATE THE NEW HOME

## An Inflated Sense of Recreation for the Disability Family

*Hamaspiik Rockland's Airmont Briderheim Residence Puts Bouncy Carnival Atmosphere Right in its Own Backyard*

Bounce! Jump! Run! Play!

What could be better than enjoying the great outdoors of your literal own backyard? And what could be better than enjoying the great outdoors right in your own backyard, when you've got a veritable carnival or county fair set up right in your own backyard?

It is a scientifically proven fact that young folks love nothing more than “bounce houses”—you know, those huge, and hugely colorful, inflated attractions that draw them in like bees to flowers.

Whether it's a air-filled ball pit, slide, obstacle course, castle, any combination of the above, or what have you, you lay it out at your event and you're guaranteed a crowd of eager little or no-so-little beavers. (Adults of all ages have been spotted climbing and otherwise infiltrating bounce houses, too, perhaps predictably enough.)

With green grass below and

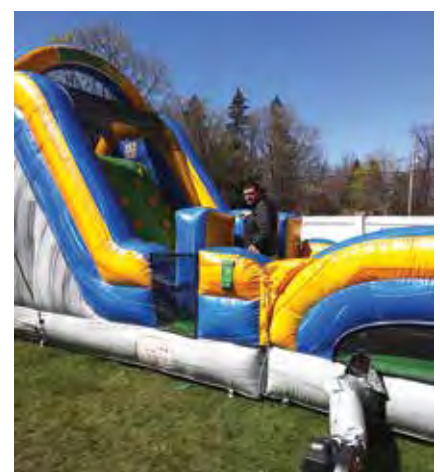
blue skies above, the gentlemen residing at the Airmont Briderheim Individualized Residential Alternative (IRA), Hamaspiik of Rockland County's newest group home, enjoyed four back-to-back days of their own backyard bounce-house carnival.

Over those four consecutive days, Home Manager Mr. Aron Schwartz and staff presided over several large inflated-equipment items, with a system in place for the residents to enjoy them each day for several hours.

Besides indulging in no shortage of good clean fun, the gentlemen also got impromptu informal workouts, with the climbing, stretching, pulling and exerting involved in exploring the bounce houses also working their bodies' main muscle groups.

When it comes to recreation, sometimes the simplest and most convenient ideas are also the best. And so that's exactly what Mrs. Schwartz and staff did. ★

## Putting on Airs



PUTTING A BOUNCE IN THEIR STEP: AIRMONT BRIDERHEIM RESIDENTS ENJOY THEIR OWN AIR-POWERED BOUNCY BACKYARD CARNIVAL FOR A FULL FOUR DAYS OF FUN AND GAMES



# The Autism Update

*News and developments from the world of research and advocacy*

## BARBER CATERS TO CUSTOMERS WITH DISABILITIES

**Owensboro, Kentucky** — It may be difficult to find a barber who's not only experienced in cutting the hair of people with disabilities, but who openly embraces them.

But if you live anywhere near Owensboro, a western Kentucky town of some 60,000 souls about 100 miles from Louisville, you can always visit Precision Studio—which, since its opening, has been deliberately catering to individuals with special needs.

Barber Sam Greer segued from working at hair salons to opening her own business—with the mission of serving a clientele with intellectual disabilities, having been inspired by close family members affected by disability, and how they were sometimes mistreated by others.

"I'm sure you go to the salon and get your hair done...and you feel like a million bucks," she told a local media outlet, "but I feel like the kids and people with intellectual disabilities ... afterwards, they feel so rewarded. They feel brand new, and it may be an experience that they've never had before."

## REPORT EXPLAINS APPARENT AND ONGOING RISE OF AUTISM NUMBERS WORLDWIDE

**New York, New York** — If you want to know how common autism is in the United States, there are several federal

agencies you can ask—each with its own number.

That is the problem in a nutshell—or at least one of the problems—when it comes to determining just how many people actually have autism in American today, according to a thorough 75-page booklet report published by industry outlet *Spectrum News*.

The downloadable book from Spectrum is entitled *Autism by the Numbers: Explaining its Apparent Rise—Spectrum's Guide to Prevalence Estimates*. Actually the fourth annual compendium on the subject, it offers an in-depth guide to the various factors that have helped to drive autism prevalence numbers up.

Those factors, according to the report, primarily consist of changes in biology and the environment, changes in society and its view of autism, and challenges in taking autism's measure.

## PUBLIC, PRIVATE ENTITIES JOINED BY CVS HEALTH TO BUILD HOUSING FOR PEOPLE WITH DISABILITIES

**Austin, Texas** — A huge new project being built by several public and private entities in Texas' capital city will provide "permanent supportive housing" for several underserved demographics, including people with intellectual/developmental disabilities (I/DD).

The planned complex of 171 studio apartments, dubbed *Espero Austin* at Rutland, is a joint effort of Caritas of

Austin, The Vecino Group, the Austin Housing Finance Corporation, the City of Austin, and the Texas Dept. of Housing and Community Affairs.

Perhaps most notably, CVS Health latter is investing \$11.6 million with Boston Financial Investment Management to help fund the project.

"As part of our commitment to address social justice and racial inequity, we're addressing social determinants of health at the community level," said a CVS statement, "which is where we can make a meaningful and lasting impact."

## FEDS REMIND SCHOOLS ABOUT "COMPENSATORY SERVICES" FOR STUDENTS WITH DISABILITIES

**Washington, D.C.** — The U.S. Dept. of Education issued a reminder to schools across the nation about their obligation to provide compensatory services to students with disabilities.

Due to rising complaints nationwide, the Dept.'s Office for Civil Rights issued a new fact sheet stressing the responsibilities schools have under Section 504 of the Rehabilitation Act of 1973.

That law requires that students with disabilities are provided appropriate evaluations and services, "regardless of the challenges schools face," as the fact sheet reads. And where such students don't get such services, such as during the now-past pandemic, federal officials now say that schools must determine if

"compensatory services" are required.

These services could mean remedial physical therapy sessions to compensate for school closures or delayed evaluations, according to the fact sheet.

## AMERICA'S FIRST IN-MALL AUTISM MUSEUM OPENS IN MICHIGAN

**Okemos, Michigan** — Your average American mall has no shortage of retailers hawking all sorts of goods and services, from clothing and food to banks and entertainment.

But now, the Meridian Mall in Okemos, Michigan has something that no other retail venue does: an on-site museum dedicated to both the past and the present of America's autism community.

The Autism History Museum will primarily feature a timeline illustrating the highlights of the autism movement over the past several decades. It will tell visitors about famous people with autism spectrum disorder (ASD), encouraging the message of integration and mainstreaming.

The Museum will also have a sensory-friendly educational program on the premises, modeled after popular mainstream children's programs.

The man behind the museum is Xavier DeGroat, 31, a self-described autism awareness advocate who was diagnosed at age four with Asperger syndrome, a condition on the high end of the spectrum. ★

## ABUSE AT RESIDENTIAL FACILITIES NEEDS HEIGHTENED ATTENTION, SAYS U.S. FEDERAL GOVERNMENT WATCHDOG

**Washington, D.C.** — According to a report by the nonpartisan Government Accountability Office (GAO), local, state and federal agencies are not sufficiently coordinating their efforts to monitor residential facilities for young people with disabilities and those in foster care.

More must be done to ensure that abuse does not go unnoticed at such facilities, the report says.

Disability officials in four states were interviewed by GAO investigators, who ultimately found that different interpretations of "maltreatment" can lead facilities to report too many or too few incidents.

It is primarily up to state and local agencies to oversee these types of facilities, but government investigators



**SIGN OF ACCOUNTABILITY:** GOVERNMENT AT ALL LEVELS NEED TO DO MORE TO MONITOR DISABILITY RESIDENTIAL PROGRAMS, SAYS GAO

said that they were told "states face some challenges related to data

collection, training and imposing consequences and holding facilities

accountable for maltreatment in these facilities." ★



● ► HAMASPIK NEWS

# Speaking the Therapeutic Language of Music

*Michael Gutmacher, International Man of Many Hats, Brings Stimulation of Organized Sound to Hamaspik Men's Day Hab*



**CIRCULAR REASONING:** MICHAEL GUTMACHER (L) LEADS HIS EAGER AND EXCITED HAMASPIK FRIENDS IN A GROUP PERCUSSION EXERCISE



**BEAT IT!** TULI (L) AND AVRUMI (R) ENGAGE

"Everybody loves music!" declares Yidel Kleinman, Director of the men's Day Habilitation program at Hamaspik of Orange County.

But as it turns out, that's just the exterior reason for one of his purview's newest programs.

The *Gazette* has just asked Mr. Kleinman to elaborate on what essentially is a weekly therapeutic jam session with Michael Gutmacher, a mysterious master of music from Paris, France, Freiburg, Germany, and, obviously, San Francisco,

California.

Naturally, Mr. Gutmacher is also a New York State licensed social worker with a flair for working with troubled teens, a guitar instructor perfectly at home on the Fender fretboard, a handy percussionist, an ordained rabbi, a competent flutist, a practicing marriage coach, a sturdy violinist, and an experienced young adult educator.

Now, he's also a game-changing music teacher at Hamaspik.

Mr. Gutmacher has been making the rounds of the special-needs circuit in upstate New York for several years now, working with various organizations and individuals to bring the therapeutic growth engendered by live music to special-needs lives.

It's been several months now that Michael Gutmacher has been working his weekly magic in an activity room on the premises of Hamaspik of Orange County's men's Day Hab program. Some sessions revolve around demonstrating, and rudimentary instruction in the playing of, such instruments as the guitar, the violin, the flute and yes, the kazoo. But most sessions consist of a drum circle, in which the gentlemen pound percussion instruments while learning how to unite around a common beat—learning a metaphorical lesson while picking up a literal one.

lugging any number of instrument-filled bags, saunters into a spacious multipurpose room and starts setting up shop.

A few minutes later, the first of several individuals breezes in and within 15 minutes, the entire crew is present.

Sitting around a huge circle of floor drums, wood-framed percussion instruments called djembes, the dozen or so young men are slamming palms and fingers against the rubbery surfaces, making merry music.

On Mr. Gutmacher's French-accented command (he lived in *République française* for a good 18 years), they punctuate the controlled chaos with rhythmic stops and starts, churning out an impressively-good stream of beats that could be a drum circle anywhere if you were only hearing it, not also seeing it. Instruction-wise, Gutmacher is the most benevolent of generals, and his troops all too gladly follow orders to produce something together they couldn't do alone.

One such recent Monday crossed paths with a visiting Kerri Neifeld, Commissioner of the New York State OPWDD. A typically-upbeat (pun intended) Gutmacher was all too happy to showcase his group's skills as well as his own, rendering Ms. Neifeld impressed.

On occasion, he'll break out his own flute or violin to stir the crowd with a few elegantly simple melodies. The

CONTINUED ON PAGE 13 >>

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## MARCHING TO THE HAMASPIK BEAT

Every Monday afternoon (his preferred visit day), Mr. Gutmacher,



● ► HAMASPIK NEWS

## Speaking the Therapeutic Language of Music

<< CONTINUED FROM PAGE 12

boys sit and listen on, rapt. Or he'll have them do the harmonica or kazoo. (There's actually serious music to be had with those simple inventions.) "It helps them learn how to use their voice and windpipe," he intones in all seriousness.

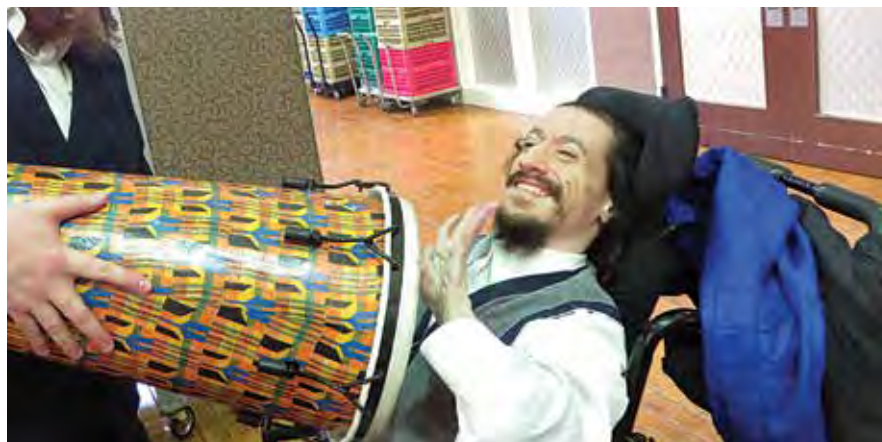
So, what does music give them that they would not have without it?

"It gives them a strong sense of self-confidence. They feel they can have joy in their ability to perform something. They start smiling, they start moving, it animates them! It's a big thing," he states. "Also, it gives them the ability to improve their fine-motor strength—to hold things that they may not be getting in everyday life."

"It's a very happy atmosphere—like a family," he adds, asked what he most likes about working with Hamaspiik. "They really care for

them and want them to experience positivity in their life."

Call it the Hamaspiik beat—a rhythm of commitment now accentuated both figuratively and perhaps literally by a weekly one-hour music program. But at Hamaspiik, the drumbeat of progress and growth goes on, every day. ★



**HAND IT TO HIM:** ALL SMILES AS A STAFF MEMBER MAKES PERCUSSION EASY



**SOUNDS REALLY GOOD:** (L-R) ELAZAR, VOLVI, AVRUMI AND MR. GUTMACHER WORK TOGETHER



**BEAT GENERATION:** PINCHOS PLAYS AWAY

● ► HEALTH NEWS

## In Early Trials, Genetically Modified Virus Boosts Survival Rates for Rare Cancer

*Glioblastoma Brain Tumors Infested with Harmless Virus Attract Attention of Body's Immune System*

**Birmingham, Alabama** — *Glioblastoma*, a rare form of brain cancer, does not come with a positive prognosis.

But now, neuroscientists at the Heersink School of Medicine, a part of the University of Alabama at Birmingham, have reason for cautious optimism—thanks to a harmless and genetically-modified herpes simplex virus.

The virus, which causes no illness in humans, is dubbed G207. However, it's long been known to directly attack and kill brain tumor cells.

In a small trial on six adults with glioblastoma, injecting the tumor sites with G207 after surgical removal of tumors attracted a substantial presence of the body's immune cells at those sites.

Glioblastoma is particularly hard to treat because it generally evades the body's immune system—without immune cells knowing it's there, the immune system can't fight it.

But by injecting the cancerous area with the G207 virus, scientists found that the presence of the virus attracted



**THE BEST WAY TO GO VIRAL:** UNIVERSITY OF ALABAMA SCIENTISTS ARE USING A HARMLESS VIRUS TO PROMPT THE BODY TO ATTACK A CANCER

immune-system cells, much like bait attracts hungry fish.

Patients with glioblastoma generally have an average survival rate of 12 to 15 months from initial diagnosis and four to six months after recurrence. But according to the study, patients given the

G207 virus treatment had significantly longer survival rates.

The research is one of several other trials across modern medical research that are using genetically engineered herpes viruses to attack tumors of the brain and spinal cord. They have

shown that the herpes virus treatment produces general improvements in overall survival.

Since glioblastoma is a rare disease, researchers hope to persuade the U.S. Food and Drug Administration (FDA) to allow accelerated approval of G207. ★



# Public Health and Policy News

## RARE-DISEASE REPORT LINKS TREATMENT SHORTAGE WITH PATIENT-CARE COST INCREASES

**Boston, Massachusetts** — The reason, or at least one reason, why only 350 of the world's known 7,000-plus rare diseases have a treatment or cure is cold hard economics: drugmakers and doctors can't make any money off creating new treatments or cure. In other words, the millions that it would cost to shepherd a new rare-disease treatment into usage wouldn't generate enough profit to justify that cost. There just aren't enough patients.

But, now argues a new report, the numbers actually *do* work out—simply because modern medicine is going to be spending those millions on the prolonged care and treatment of people with rare diseases anyways. “A lack of treatment for a rare disease is associated with a 21.2 percent increase in total costs per patient per year,” says the report from Chiesi Global Rare Diseases.

In fact, says the report, for all known rare diseases, “the societal responsibility...may be in the range of \$7.2 trillion to \$8.6 trillion per year.”

## JARDIANCE EXPANDED BY FDA TO HEART-FAILURE PATIENTS

**Silver Spring, Maryland** — Jardiance, a drug that improves glucose control in adults with type 2 diabetes, was originally approved by the FDA in 2014 as a supplement to diet and exercise.

The FDA has now approved it to help reduce the risk of adult cardiovascular death and hospitalization due to heart failure, both for patients with or without type 2 diabetes.

The approval “will provide a treatment option for a wider range of patients with heart failure,” said FDA official Dr. Norman Stockbridge. “While Jardiance may not be effective in all patients with heart failure, this approval... will provide physicians another tool to address heart disease.”

Heart failure is a syndrome in which the heart is not meeting the needs of the body, affecting over 650,000 people in the U.S. each year. Symptoms vary but can include shortness of breath, fatigue and swelling in the legs. Heart failure becomes more common with age.

## U.S. GOV'T TAKES NEXT BIG STEP ON NATIONAL ELECTRONIC FILE-SHARING STANDARDS FOR HOSPITALS

**Washington, D.C.** — The Trusted Exchange Framework and Common Agreement (TEFCA) has been years in the making. But TEFCA has now reached a key milestone, finalizing a long-awaited framework for nationwide health information exchange.

That TEFCA framework creates the baseline legal and technical requirements needed for uniform secure nationwide information sharing across disparate healthcare entities. In plain English, it lays out what hospitals and other participating caregivers have to do in order to securely and efficiently share electronic health records (EHRs).

Under TEFCA, providers will be eventually designated as qualified health information networks (QHINs), which are providers, payers or public health agencies that agree to the same data-sharing systems across the country.

The TEFCA concept originated in the 21st Century Cures Act, federal legislation that passed in 2016.



AMA: SOME HEART TESTS ARE UNNEEDED

## TOO MANY CARDIAC TESTS ARE “LOW-VALUE,” SAYS AMERICAN HEART ASSOCIATION

**Dallas, Texas** — You probably don't ask why you need it when your cardiologist orders a test—but perhaps you should, says a new report from the American Heart Association (AHA).

According to the AHA, too many Americans get heart tests and treatments that do little good, and more needs to be done about that fact.

The AHA says that about half of Americans get at least one such test or procedure every year—making the issue of so-called “low-value” medical care, and specifically cardiac care, a long-running one.

*Low-value medical care* refers to health care services unlikely to benefit patients in meaningful ways, expose them to potential harm and waste money. It's estimated that low-value medical care accounts for about 30 percent of health care spending in the United States—or up to \$101 billion annually.

## TO BETTER CARE FOR TRADITIONAL MEDICARE MEMBERS, CMS REDESIGNS ACO MODEL

**Bethesda, Maryland** — The federal Centers for Medicare & Medicaid Services (CMS) has newly redesigned its existing Global and Professional Direct

Contracting (GPDC) Model.

Medicare's GPDC Model is a model of healthcare known as an Accountable Care Organization (ACO). These models reimburse caregivers for health results, not services—meaning, in plain English, an ACO will pay more to a doctor who treats a heart attack successfully than to one who does not. The GPDC Model has now been renamed the new Realizing Equity, Access, and Community Health (REACH) Model.

The change was due to feedback from industry and members alike, as well as political considerations—including the promotion of value-based care for Medicare members.

Medicare is “testing new models of health care service delivery and payment to improve the quality of care that people receive, including those in underserved communities,” read a statement by CMS Administrator Chiquita Brooks-LaSure.

## RED CROSS SAYS ONLY THREE PERCENT OF ELIGIBLE BLOOD DONORS REGULARLY DONATE

**Washington, D.C.** — One American is in need of a blood donation every few seconds, reports the American Red Cross—but in 2022, there isn't enough donated blood to meet that need. According to the Red Cross, the country is facing its worst blood shortage in more than a decade.

Donations that keep blood banks sufficiently stocked are necessary to replace the blood that people lose and can't replace for a wide range of reasons, like heart surgery, organ transplants, burns, injuries or cancer treatments. But the Red Cross says that only three percent of people eligible to donate actually do so each year.

While recent months have seen the most dramatic shortage in blood donations in over a decade, the blood supply has been in trouble almost since the start of the COVID-19 pandemic, said Dr. Robert DeSimone, director of transfusion medicine at New York-Presbyterian Hospital/Weill Cornell Medicine in New York City. ★



SHAKY LIFELINE: MOST ELIGIBLE BLOOD DONORS ARE NOT GIVING, WARNS U.S. RED CROSS



# In the Know

The first question you may have here—other than, “What is that?”—is: “How do you pronounce that?”

Well, xeroderma pigmentosum—pronounced ZERO-duhr-muh pigmen-TOH-sum—is a rare inherited skin disorder. It is defined by heightened sensitivity to the effects of ultraviolet radiation (UV), a kind of light that primarily comes from sunlight. That means that people with XP basically can’t be exposed much to sunlight, if at all.

Xeroderma pigmentosum affects males and females in equal numbers. Some gene mutations associated with XP are more common in certain parts of the world; in these locations there is a higher prevalence of XP. In the United States and Europe, prevalence of XP is 1 in 1,000,000.

Besides causing a number of skin-related immediate symptoms, XP patients have a staggeringly higher risk of skin cancers, as well as cancer of the eye. The condition is not to be taken lightly. However, the good news is two-fold: One, XP is very rare and two, with proper regular skin protection, people with XP can live healthy lives.

## DEFINITION

The condition was first described in Vienna, Austria in 1870. In a dermatology textbook, Dr. Moriz Kaposi described a new disorder called *xeroderma*, which translates to “parchment skin.”

Put in modern terms, XP is an *autosomal recessive* genetic condition caused by *alterations* (mutations) in nine different genes. Eight of these genes make up the *nucleotide excision repair pathway* (NER), whose function is to identify and repair UV-induced DNA damage. The ninth gene acts to bypass unrepaired damage. In XP, the NER doesn’t function properly.

## SYMPTOMS

Individuals with XP are particularly sensitive to the DNA damaging effects of UV. Sources of UV include the sun, unshielded florescent light bulbs, mercury vapor lights and halogen light bulbs. Symptoms may differ from person to person, but typically impact the skin, eyes, and nervous system.

The symptoms of XP can be seen in any sun-exposed area of the body. The effects are greatest on the skin, the eyelids and the surface of the eyes but the tip of the tongue may also be damaged. In addition, approximately 25 percent of XP patients also develop abnormalities of the nervous system manifesting as progressive neuro-degeneration with hearing loss. People with XP have a 10,000-fold increased risk for developing skin cancer including basal cell carcinoma, squamous cell carcinoma and melanoma. They also have a 2,000-fold increased risk for cancer of the eye and surrounding ocular tissues. These symptoms appear early in life, typically before age ten.

### Cutaneous (skin) effects

Approximately half of XP patients develop blistering burns on sun-exposed skin after minimal sun exposure (sometimes less than ten minutes in the sun). These burns evolve over several days and may take greater than a week to heal. Sometimes these burns are so severe, child abuse is suspected. The other 50 percent of XP patients do not burn, but tan after sun exposure. However, both types of sun reactions result in the early onset of lentigos (freckling) of the skin.

*Lentigos* are a patchy freckling of the skin, that appear before the age of two years in XP patients. The lentigos can be seen on all sun-exposed skin, but are often seen first on the face. Lentigos are a sign of unrepaired UV damage in the skin.

Repeated sun exposure also results in *xerosis* (dry, parchment-like skin), *poikiloderma*, a mixture of both hyper (increased) and hypo (decreased) skin pigmentation, skin *atrophy* (thinning of skin tissue), and *telangiectasia* (a widening of the small blood vessels, which produces red lines and patterns on the skin). In people who do not have XP, *poikiloderma* is typically seen in older adults, such as farmers or sailors, with many years of sun exposure.

For people with XP, continuous repeated sun exposure has severe effects, resulting in the early development of precancerous skin spots (a.k.a., *actinic keratosis*) and skin cancers (see below).

### Ocular (eye) effects

The eyelids and the surface of the eyes exposed to sunlight will usually be affected within the first decade of life.

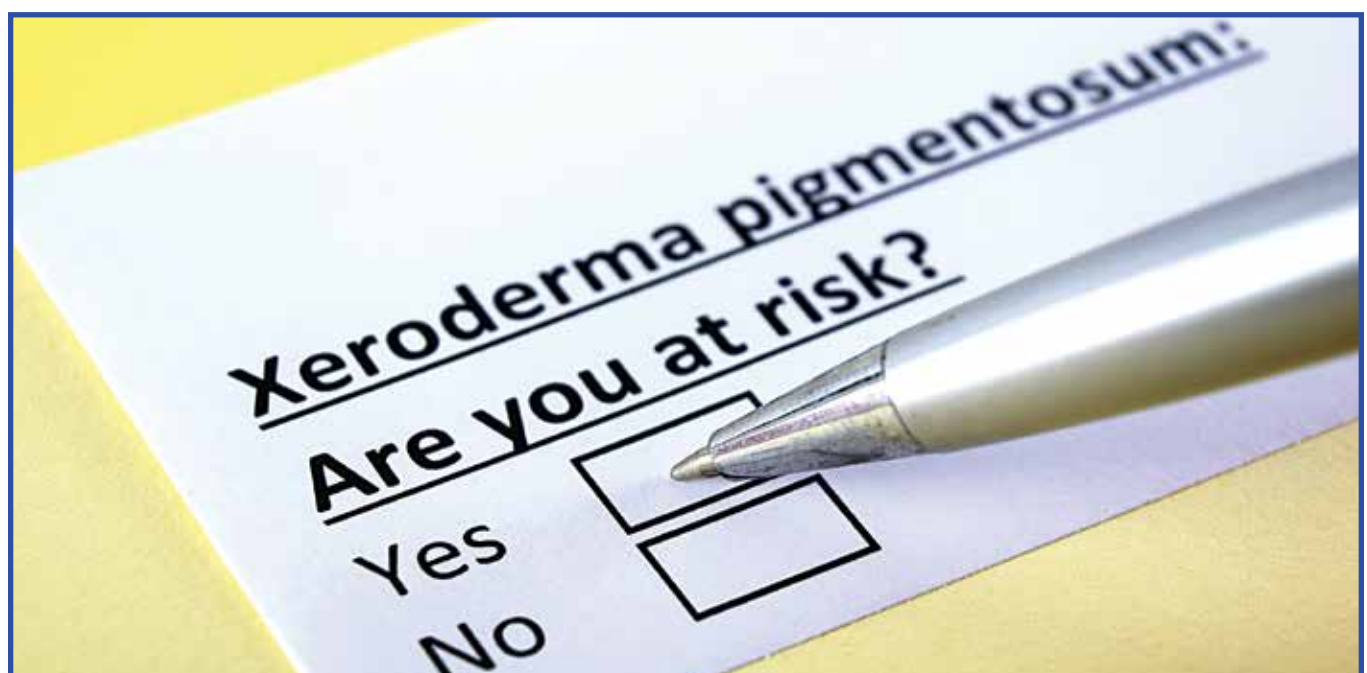
*Photophobia* (light sensitivity, or pain upon seeing light) is common and is often noted in infancy or early childhood. The *conjunctiva* (the white portion of the eye) may show sunlight induced inflammation. People with XP also develop dry eye. Symptoms of dry eye include a feeling of “something being in the eye,” constant irritation and redness of the eye. Dry eye can also result in chronic inflammation and keratitis. *Keratitis*, or inflammation of the cornea (the clear outer dome of the eye) may also occur in response to sunlight. In severe cases, keratitis can result in *corneal opacification* (lack of transparency) and *vascularization* (an increase in blood vessel density). These combined effects may obscure vision, contributing to blindness. With repeated sun exposure, the lids of the eyes may *atrophy* (degenerate), eyelashes may fall out, leaving the eyes unprotected and contributing to vision loss.

Cancers of the eyelids, tissues surrounding the eyes, cornea and *sclera* (white part of the eye) can occur very early in life. Surgeries to remove ocular

CONTINUED ON PAGE 18 >>

## ALL ABOUT... XERODERMA PIGMENTOSUM

Sources: National Organization for Rare Diseases (NORD), American Academy of Dermatology (AAD)





<< CONTINUED FROM PAGE 16

cancers can lead to lid abnormalities resulting in difficulty completely closing the eyes and vision loss. When cancers in or near the eye are large or invasive, the eye itself may need to be removed.

#### Neurologic (nerve) effects

About 25 percent of patients with XP develop a progressive neurodegeneration, which can vary in time of onset and rate of progression.

Symptoms of the neurodegeneration include: acquired microcephaly (a condition marked by smaller head size and structural changes in the brain), diminishing (or absent) deep tendon reflexes, progressive high-frequency sensorineural hearing loss (deafness caused by damage to the nerves of the inner ear), progressive cognitive impairment, spasticity (tightness/rigidity of the skeletal muscles), ataxia (poor muscle control and coordination), seizures, difficulty swallowing and/or vocal cord paralysis.

These issues are thought to arise due to the loss of nerve cells in the brain. The brains of XP patients with neurologic degeneration show atrophy (shrinkage) with marked dilation of the ventricles (fluid filled spaces in the middle of the brain).

#### Neoplasias (cancer)

Individuals with XP have a much greater chance of developing certain cancers. The risk of acquiring non-melanoma skin cancers (e.g., basal cell carcinoma and squamous cell carcinoma) is 10,000 times greater than in the general population in patients under 20 years of age. Median age of first non-melanoma cancer for XP patients is nine years old, which is 50 years earlier than in the general population. For melanoma skin cancer, the risk is 2,000 times greater for those with XP. The median age of onset is 22 years, which is 30 years earlier than in the general population.

Oral cavity neoplasms, specifically squamous cell carcinoma of the tip of the tongue (a non-pigmented sun exposed area), is common especially in dark skinned patients. Internal cancers that have been reported in individuals with XP include: glioblastoma of the brain, astrocytoma of the spinal cord, and cancer of the lung in patients who smoke, and rarely, leukemia (cancer of the white blood cells). Cancers of the thyroid, uterus, breast, pancreas, stomach, kidney, and testicles, have also been reported.

#### **DIAGNOSIS**

Xeroderma pigmentosum is typically first diagnosed on the basis of clinical symptoms; many patients with

XP do not have a past family history of the condition.

Molecular genetic testing for mutations in the XP genes is available to confirm the diagnosis.

#### **CAUSES**

Xeroderma pigmentosum is an autosomal recessive genetic disorder. Most genetic diseases are determined by the status of the two copies of a gene, one received from the father and one from the mother. Recessive genetic disorders occur when an individual inherits two copies of a non-working gene for the same trait, one from each parent. If an individual inherits one normal gene and one non-working gene for the disease, the person will be a carrier for the disease but usually will not show symptoms. The risk for two carrier parents to both pass the altered gene and have an affected child is 25 percent with each pregnancy. The risk to have a child who is a carrier like the parents is 50 percent with each pregnancy. The chance for a child to receive normal genes from both parents is 25 percent. The risk for inheriting the disease is the same for males and females.

#### **TREATMENT**

Rigorous sun (UV) protection is necessary beginning as soon as the diagnosis is suspected to prevent continued DNA damage and disease progression. Individuals with XP should avoid exposing the skin and eyes to ultraviolet (UV) radiation. This can be done by wearing protective clothing

such as hats, hoods with UV blocking face shields, long sleeves, pants, and gloves. High sun-protective factor (SPF) sunscreens, UV-blocking glasses with side-shields, and long hair can also provide protection.

The XP patient's surroundings (e.g., home, school, and work) should be tested for levels of UV using a UV light meter. The meter can help identify areas of increased UV and sources of damaging UV (e.g., from halogen, and unshielded florescent light bulbs and mercury vapor lamps) can be eliminated from the environment. Since UV can pass through glass, windows in homes, schools, work places and cars of XP patient should be treated with UV blocking film.

Vitamin D is an essential vitamin, which helps maintain healthy bones. Vitamin D is manufactured by the interaction of UV with the skin. Since people with XP avoid UV, oral dietary supplements may be taken as needed to avoid complications of inadequate vitamin D levels.

Certain carcinogens in cigarette smoke damage DNA in ways similar to UV and exposure to second-hand cigarette smoke should be avoided. Patients with XP who have smoked cigarettes have developed lung cancers.

Regular screening for changes in the skin, vision, and neurologic status is how patients manage their XP, along with preventative techniques like avoiding the sun, using sunscreen, and wearing protective clothing.

#### Skin care

The skin (including the scalp, lips, tongue, and eyelids) should be examined by a dermatologist every 6-12 months (or more often if necessary) to detect precancerous and cancerous lesions.

Prompt removal of any skin cancers is necessary to prevent further growth or spread of the lesions. Affected individuals and guardians of children should be instructed in skin examination techniques to aid in the early detection of possible skin cancers.

#### Eye care

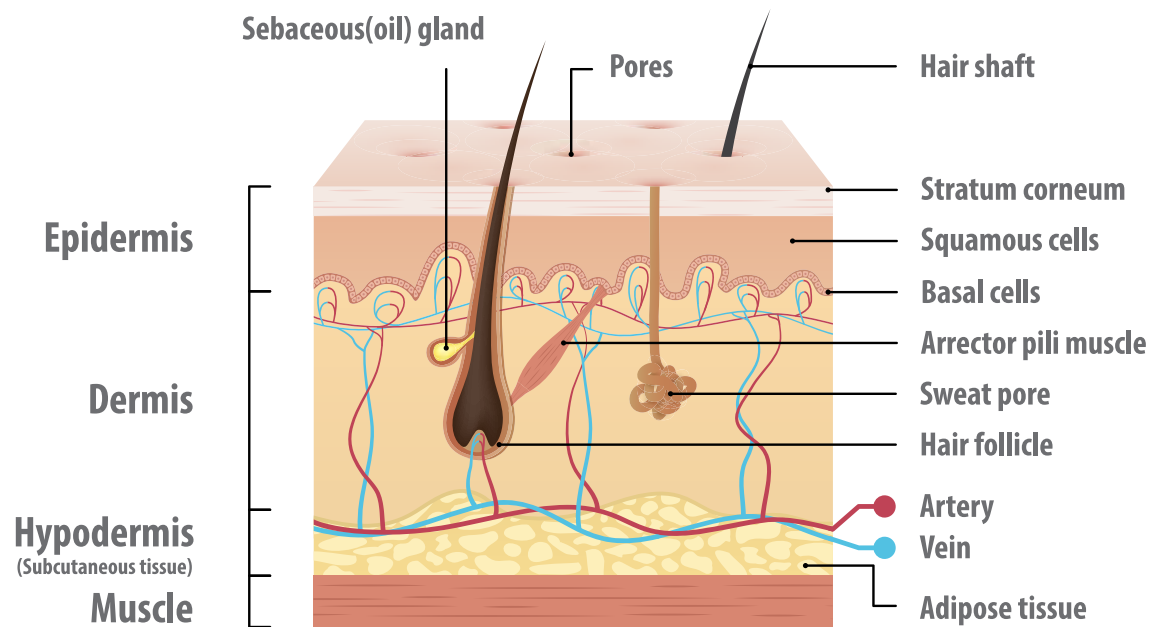
Individuals should also under-go routine eye exams by an ophthalmologist. The eyelids should be examined for *ectropion* (drooping and sagging), *entropion* (inward rotation, which may cause eye irritation), and *pterygia/pinguecula* (benign growths on the surface of the eyes). The cornea, which covers the eye, should be assessed for clouding, and the eyes should be tested for dryness; in the Schirmer test, a filter paper is placed under the eyelids to measure absorption of tears. A dilated eye exam is important to assess for any changes in the retina (back of the eye).

#### Neurological care

Basic neurologic examinations including measuring the occipital frontal circumference (to determine the presence of microcephaly) and assessing for the presence of deep tendon reflexes, should be part of the routine care of an XP patient. Hearing exams should be done on a regular basis to assess for early onset hearing loss, which is an indicator of XP with neurologic disease. If hearing loss is detected, hearing aids can be very beneficial in correcting the deficits. If neurologic problems are identified, more in depth exams by a neurologist are indicated.

While many symptoms can be treated with medication and/or surgery, some cancers and neurologic problems related to XP can be life-threatening. ★

## STRUCTURE OF THE SKIN





● ► HAMASPIK NEWS

# HAKTANIM



**Haktanim**  
Geared for: Children with special needs  
Ages: 2-6

**Location:** 1131 46th Street (Boro Park)  
**Second Shabbos location:**  
1571 55th Street (Boro Park)  
**Hours of Operation:**  
Monday-Thursday

**Early program:** 3:30-5:00 p.m.  
**After-school program:** 5:00-7:00 p.m.  
**Sunday:**  
**Early program:** 11:00 a.m.-3:30 p.m.  
**After-school program:** 3:30-5:30 p.m.

**Haktanim Too**  
Geared for: Children with high-functioning special needs  
Ages: 6-8

**Shabbos: 3:00-5:00 p.m.**

**To enroll:**  
**Call:** 718-387-8400 ext. 5250  
**Email:** ylerner@hamaspikings.org

The love is palpable, the joy is in the air. At Haktanim, an after-school program for children with special needs, each child finds their place—and a place in their counselor's heart. With endless giving, never-ending devotion, and a whole lot of fun, the children at Haktanim love every moment!

A program for toddlers can easily become a babysitting service, but not so with Haktanim. Divided by age, each group enjoys the same program on a different level. A lot of thought and expertise goes into creating the program, and every activity is carefully designed to give the children a good time as well as help them develop skills.

Each day begins with a circle time activity. The Surprise Box is one of the children's favorites, as they love trying to guess what's inside. The suggestions come thick and fast, and depending on their level, the children use their imagination differently. The element of surprise holds them in suspense, and it's

one activity they never tire of!

After circle time, they play various games that teach them all sorts of skills, like spatial awareness, remembering rules, and following instructions. Every activity has a twist to reflect the weekly theme. When they had "shopping week," the children all dressed up accordingly—one was the cashier, one doled out the bags, while the others were adult shoppers. The younger children loved the dress-up, and the older kids were taught the concept of buying and selling. They all felt so big and mature.

The exercise activities are based on the weekly theme as well. During "fire week," each child held a picture of a fire on a popsicle-stick while making fire sounds with "instruments" like egg-shakers, hand-clappers, and tambourines. Each activity gets the kids to move around and teaches them the skills that come naturally to other children their age.

Food decorating and baking is

something the children all look forward to. Wearing aprons and chef's hats, each child gets a card with a picture of an ingredient. The group leader picks up a card and the child who has the matching card gets to add that ingredient to the bowl. The result is a collaborative effort by all the children, and best of all, they get to take home the delicious goodies at the end of the day!

Haktanim's music teacher, who plays a few different instruments, teaches the children how to use the powerful skill of imagination. Children with special needs have a hard time imagining anything that's not physical. Through music and special activities, she guides them to start developing their imagination.

The relaxed atmosphere at Haktanim makes it a great place for the children to learn how to follow instructions and interact with others calmly. Even an activity like book time, when everyone sits on their bean bag and reads a book, is an opportunity to teach them

something. When a child is done with their book, they're taught to approach another child and ask, "Hazti g'endigt dein book?" (Did you finish your book?) Even those children who aren't verbal get prompted by their counselors so they'll learn the concept of asking and sharing.

Haktanim's Shabbos program is different from the weekdays, with all groups sitting together. There's a lot of singing, movement, and activities. The counselors are busy cheering, the children are playing and laughing, the atmosphere is joyous—it's incredible.

On Sunday, when the children spend a full day at Haktanim, the programming has a central theme that runs throughout the year. This year, the Sunday theme is "community workers." A few weeks ago, they were mailmen, and so they went on a trip to the post office to mail the letters they wrote. When they were firemen, they were delighted by a visit to the fire station. ★

## Interview



**Mrs. Yocheved Lerner, director of Haktanim, is there wholeheartedly for each and every child. Throughout the interview, you'll notice a common thread: Haktanim is there for one purpose—to give the children a great time, while teaching them daily living skills. Read the interview and be amazed at the daily dedication and education the children receive.**

**How did you found Haktanim? What were the challenges in the beginning?**

When we started out, we

weren't part of Hamaspik. We'd seen the tremendous need for an after-school program for children with special needs, so we opened Haktanim. But while the parents

were thrilled, we lacked the basic resources. The kids came with their own food, people donated some toys, the counselors walked the kids to the program, and the

parents needed to send money every time we ordered ice cream or went on a small trip.

I remember our first Shabbaton.

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● ► HAMASPIK NEWS

# Interview

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We had virtually no funds—we went around asking people for their basement apartments, the counselors made the Shabbos food, some people gave us nosh, and the parents had to pay for transportation. Someone gave us their basement for the program, and we had to walk 15 minutes with the kids to get there.

At that time, we heard amazing things about Hamaspiik and their fabulous after-school programs. I heard from other people whose programs had joined Hamaspiik that they still allow the founders to run the program, with just one difference—they provide the funds. In other words, they're really there to help the parents and work with you.

I met with Mr. Spangelet and saw right away that everything I'd heard was true. Hamaspiik does everything with heart, because they really care. In fact, at our first meeting, Mr. Spangelet offered more than the minimum funds to cover our expenses. He also gave several suggestions about how to treat our counselors so they'd enjoy working at Haktanim and at the same time, attract more staff.

Within just two weeks, Hamaspiik had renovated a floor for us, giving Haktanim a beautiful space on the third floor of the main building in Boro Park, 4102 14th Avenue.

Eventually, we moved to the 46th Street building. It's a huge, gorgeous place. The parents, counselors, and kids are way happier since we joined Hamaspiik. We provide food, transportation, and so many extras now.

## How do you keep attracting volunteer counselors?

When the volunteers get tremendous sipuk from their work and they're treated with respect, word spreads and more volunteers sign up. An umbrella, a waterproof camera case, a mug with our logo, or even an ice-cream drink can go a long way. When we have a Shabbaton, we have a special program for the counselors, and we have a beautiful shalosh seudos every Shabbos for the counselors who gave up their Shabbos afternoon for our children. We arranged for separate volunteers—or escorts, as we call them—to take the children home, so the counselors can have a good time.

Baruch Hashem, not only aren't we lacking volunteer options, but we can even afford to handpick them. Sometimes, we'll accept a child only a few weeks after they've applied, as we're careful to find a counselor that would best fit the child's needs.

On Sunday, though, we have a totally different system. Our Sunday counselors are high school graduates, and the day runs differently. They're more experienced and trained, so instead of the usual one-to-one ratio, we have one counselor per two kids and the children learn in a classroom setting, where they get acquainted with following group instructions.

## What part of Haktanim didn't you expect to turn out this way?

I didn't expect it to grow so much—we have so many kids! I also never thought we'd be able to do so many extras, like Shabbatons and parties.

## What goes into planning and running the Shabbatons?

We start working on the Shabbaton two months beforehand, as the children need to be occupied and entertained every minute of the day—literally. We have multiple people in charge of the different parts of the program, as there's so much involved. From the kids' program to the counselors' program to buying supplies to calling the parents to putting together the packages ... it's a full-fledged operation.

The anticipation is in the air for weeks beforehand. All the children can talk about is the upcoming Shabbaton. Although they're young and often unexpressive, their excitement is evident, long after the Shabbaton. In fact, one child refused to step into the building after the Shabbaton saying that he doesn't want to go to a building; he wants to go the Hamaspiik resort!

Our getaways don't stop at the Shabbaton. Like everything else Hamaspiik, we always strive to give the very best. On Chol Hamoed, we take the children out on fun, full-day trips, and they have a grand time. This past Chol Hamoed, we went to Urban Air, Adventures, and a park—the parents appreciated it tremendously! We take the children to places best suited for them.

In fact, we constantly go on trips, not only on Chol Hamoed. Every third Sunday, we take the children someplace special.

## What do you think parents enjoy most about Haktanim?

The fact that the children are out of the house having a great time while

they can have a break is something the parents all appreciate. They're thrilled to have amazing counselors give the children some action and fun while they can get their Shabbos rest. Hamaspiik is also very accommodating. As Haktanim grew, we realized that a lot of children were coming from the higher avenues, so we opened another location to better accommodate little feet that tire from walking such distances.

Additionally, they know their kids are happy and love coming. We constantly hear from parents that they're so appreciative of the fact they can feel confident their child is being cared for properly. We're a chassidishe, warm place, and they love that we're Yiddish-speaking.

When we created a video of our overnight trip, parents told us they'd watched it countless times. They couldn't get enough of the attention, love, and warmth of Haktanim and how we fill up each minute. When you truly want what's best for the children, they do their best!

## Any message you want to share?

I'd like to thank the multiple people involved in making Haktanim the success it is. Mr. Spangelet for bringing all Haktanim's dreams to fruition; Mr. Klar and Mr. Reich for always saving the day at any hour; the IT team for setting up our place and being there throughout all emergencies; Mr. Teichman and Mrs. Brinner for providing us with five star transportation; Mr. Kisch for being the kinderlach's favorite driver; Mrs. Lefkowitz for her devoted work; and all the other people who constantly give it their all. Thank you! ★

**We constantly hear from parents that they're so appreciative of the fact they can feel confident their child is being cared for properly.**





# The Senior Care Gazette

News from  
the World of  
Hamaspik  
HomeCare and  
Senior Health

## Crossing the Bridge of Bereavement

### A Brief Guide on Grief for Seniors and Family Members

Bereavement is the state of having suffered a loss. Grief is the natural response to bereavement.

Bereavement and grief are painful enough for anyone. For seniors, however, the loss of lifelong loved ones—and the resulting bereavement and grief—is especially wrenching.

In 1969, legendary psychiatrist Dr. Elisabeth Kübler-Ross (1926-2004) formulated the “five stages of grief”—shock, denial, anger, acceptance, and resolution—now famous worldwide. In other words, grief has a process that is measureable, natural and normal. With time, most bereaved people are able to heal normally.

But sometimes, grief persists longer than normal. This is now known as

1. How much trouble are you having accepting your loss?	Not at all	<input type="radio"/>	Somewhat	1	A lot	2
2. How much does grief still interfere with your life?	Not at all	<input type="radio"/>	Somewhat	1	A lot	2
3. Are you experiencing images or thoughts of the deceased at time of passing? Are there other thoughts about the loss still bothering you?	Not at all	<input type="radio"/>	Somewhat	1	A lot	2
4. Are there things you used to do with the deceased that you're uncomfortable doing now?	Not at all	<input type="radio"/>	Somewhat	1	A lot	2
5. Do you avoid pictures or conversations about the deceased?	Not at all	<input type="radio"/>	Somewhat	1	A lot	2
6. Since bereavement, do you feel distant from close family/friends or even regular people?	Not at all	<input type="radio"/>	Somewhat	1	A lot	2

complicated grief.

Behavioral symptoms of complicated grief include: searching, pre-occupation with thoughts of the deceased, excessive crying, disbelief, delayed grief or absence of grief, and

hopelessness. Medical symptoms include headache, chest pain, or chest palpitations.

For bereaved seniors, symptoms can include all of the above—plus a few more unique to their stage in life.

Some may display hostility towards surviving loved ones. This can be compounded by the fact that seniors' physical health, along with activities of daily living (ADL) and instrumental

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## Scratching Beneath the Summertime Surface

### A Beyond-Superficial Look at Seasonal Skin Care for Seniors

The warm (if not outright hot!) summer months—themselves on the heels of the warm spring months—are the best time for everyone, especially indoors-prone seniors, to get out and about in the sun. Besides the fresh outdoor air, skin exposure to natural sunlight is the best source for that all-important Vitamin D—critical on so many health fronts for youth and adults alike, and more so for seniors, whose increased health issues are often ameliorated by healthy levels of “the Sunshine Vitamin.”

But with more summertime outdoor activities comes more exposure of skin to the elements. So here are the primary threats to senior skin health come summer—and how to treat and prevent them.

#### ITCHING FOR A SUMMERTIME PRURITUS SOLUTION

Pruritus is the medical term for itching. (Pruritus, curiously enough, is also one of the medical terms most-frequently misspelled, even by medical professionals: Analysis of one medical-journal archive found that pruritus was spelled *pruritis* in five out of every 100

documents.)

But because we're outside in the summer more than other seasons, pruritus is often at its worst in the summer season. Here are its primary forms, along with solutions:

- Psoriasis and eczema. Summer's heat and humidity often worsens itching due to these common skin conditions. Recommended summertime treatment of these conditions is to take short lukewarm showers and then moisturize the skin immediately. Also, apply sunscreen before going outside, even if it's not sunny.
- Heat rash. This itch-causing skin irritation strikes when skin pores get clogged by extreme sweating while wearing tight or heavy clothing—resulting in itchy red skin bumps. Summertime heat rash can be prevented with loose-fitting or moisture wick-type clothing that keep skin dry.

#### AGE IS MORE THAN SKIN-DEEP

Healthy skin is important at any age—but because the skin changes with age, skin health is especially important

for seniors, and especially come summer.

Seniors tend to dehydrate more. Dehydrated skin tends to itch more. Therefore, seniors tend to itch more—especially in the summer, when people tend to lose fluids more.

But seniors dehydrate more in the first place because levels of collagen (a primary “building block” of skin) drop with age. Lower blood circulation in seniors also brings less nutrients to the skin, making it drier, and drier skin is

one of the side effects of often-many medications commonly taken by seniors.

Bearing all the above in mind, it is especially important for seniors—never mind the rest of us!—to stay constantly hydrated summertime, thus keeping our skin moist and healthy. ★

Home health aides (HHAs) can help the beloved seniors in your life safely enjoy summer's weather. Call Hamaspik HomeCare at 845-503-5700 to see if your loved one qualifies.

**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**







## Status Report

# Happening In Hospitals Today

### MAJOR MEDICAL SYSTEMS INVESTING IN NEW “HOSPITAL-AT-HOME” COMPANY

**Boston, Massachusetts** — One way to arguably know if something is one of the next big things in the hospital industry is if big hospitals are buying into it.

That’s apparently the case with “hospital-at-home” company Medically Home, a Boston-based innovator that has now attracted considerable attention—and considerable investment funding—from such hospital heavyweights like the Rochester, Minn.-based Mayo Clinic and the Oakland, Calif.-based Kaiser Permanente.

Those two companies were part of the \$110 million in funding granted to Medically Home by investors like Baxter International, Cardinal Health and Global Medical Response.

Medically Home provides the technology, reimbursement and treatments required by health systems with to provide hospital-level care for patients in their own homes. Over 7,000 patients have already been treated using the Medically Home platform, according to the company.

### HOSPITAL-SAFETY NON-PROFIT SPELLS OUT TODAY’S TECH HAZARDS

**Plymouth Meeting, Pennsylvania** — If you’re worried about what 2022 might still bring, you’re not alone—the respected ECRI (Emergency Care Research Institute) organization has now published its “Top Ten” list of health technology hazards for hospitals in the coming year.

Now you may be thinking, “How can biomedical technology directly threaten the health and wellbeing of patients?” Well, according to ECRI, in at least ten ways. Here are some:

1. Cybersecurity attacks can disrupt healthcare delivery, impacting patient safety;
2. Supply chain shortfalls pose risks to patient care;
3. Damaged infusion pumps can cause



**HOSPITAL TECH PATIENT DANGERS:** INDUSTRY GROUP ECRI POINTS OUT SEVERAL DOWNSIDES

4. Inadequate emergency stockpiles could disrupt patient care during a public health emergency;
5. Disposable gowns with insufficient barrier protection put wearers at risk; and
6. Wi-Fi dropouts and dead zones can lead to patient care delays, injuries, and deaths

### FEDERAL HHS DISTRIBUTING ANOTHER \$2 BILLION TO HEALTHCARE PROVIDERS AFFECTED BY PANDEMIC

**Washington, D.C.** — Over \$2 billion in Phase 4 of the federal Provider Relief Fund program is now being distributed nationwide to over 7,600 providers affected by the COVID-19 pandemic. Together with the \$9 billion paid out in December 2021, a total of \$11 billion in Phase 4 payments has been awarded to over 74,000 providers across all 50 states.

For its part, the Empire State is receiving just shy of \$300 million, to be distributed to 559 hospitals and other providers statewide—making it by far the largest state recipient of funding from the U.S. Dept. of Health and Human Services (HHS).

Provider Relief Fund payments have been critical in helping health care providers prevent, prepare for, and respond to coronavirus. Providers from

dentists to disability non-profits have used the funds to remain in operation and to continue supporting patient care by covering a variety of costs.

### CALIF. HOSPITAL GETS \$25-MILLION GIFT TO SUPPORT NURSING RESEARCH AND DEVELOPMENT

**Los Angeles, California** — Children’s Hospital Los Angeles (CHLA) was the grateful recipient this past February of one of the largest charitable investments ever made to a pediatric hospital nursing program: \$25 million.

The landmark gift, made by an

anonymous donor, will support important investments in programs targeting nursing certification, mentorship, training and research funding. Those investments include: Expansion of CHLA’s New Graduate RN Residency and Transition Fellowship nurse training programs; increased research funding for CHLA’s Postdoctoral Nursing Fellowship program; and support and sponsorship for nurse certification education

Founded in 1901, CHLA is the highest-ranked hospital in California and fifth in the nation on the prestigious *U.S. News & World Report Honor Roll of Best Children’s Hospitals*.

### INDUSTRY SURVEY FINDS 63 PERCENT OF U.S. NURSES HAVE EXPERIENCED WORKPLACE RACIAL BIAS

**Silver Spring, Maryland** — Until the day that Dr. Martin Luther King, Jr.’s “Dream” is the reality, U.S. nurses of color are still facing an uphill battle.

According to a survey of 5,623 nurses, conducted in October of 2021 by the American Nurses Association (ANA), 63 percent reported having personally experienced a racist act in the workplace.

Broken down further, that racially-biased treatment was reported as coming most from other nurses, followed by patients and then from supervisors.

The survey further found that 57 percent of nurses challenged that racism, but only 36 percent of those reported that their efforts resulted in positive change.

What’s more, 56 percent of survey respondents said racism in the workplace has negatively affected their professional well-being.

Finally, Black nurses reported the most personal racist experiences at 92 percent, followed by Asian nurses at 73 percent and Hispanic nurses at 69 percent. ★

## Crossing the Bridge

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activities of daily living (IADL) skills, may be declining due to age. This may be especially true when the deceased was a beloved spouse—whom the suffering senior may have spent the last few years caring for, only to now be “left alone” with a feeling of “no purpose.”

Bereaved seniors may also find it difficult to reach out for help, even to close family members—only increasing feelings of aloneness and disconnection.

Family members can also underestimate the severity of beloved seniors’ complicated grief.

That’s why it’s vital for a senior’s family members and caregivers to

monitor any such symptoms. On the questionnaire (see Page E22), a score of 4 or more suggests complicated grief.

In cases of complicated grief, a grief specialist can further evaluate and treat, helping isolate and identify the patient’s specific emotions and social needs, enabling him or her to express true feelings, process lingering grief and facilitate resolution. ★

*In addition to professional mental help, call Hamaspiik HomeCare at 845-503-0700 to see if you or your loved one may qualify for a home health aide, which can decrease feelings of loneliness resulting from bereavement and help maintain a senior’s overall health and well-being.*