

The Hamaspik Cazette

News of Hamaspik Agencies and General Health

JANUARY '23 • ISSUE NO. 207

0

GAZETTE SURVEY

The GAZETTE asks YOU:

HAVE YOU HAD, OR DO YOU CURRENTLY HAVE, GOUT? A: YES; B: NO

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

S HEALTH STAT

GROWING GOUT, SWELLING STATISTICS

arowing gool, sweeting statistics	
U.S. men with gout	6.1 million
U.S. women with gout	2.2 million
Total no. U.S. adults with gout	8.3 million
U.S. prevalence	3.9 percent of adult pop.
was National Health and Nutrition Examination Current (NHANES), via National Vidney Foundation	

⚠ HEALTH TIP

GET THAT GOUT OUT! SIX SYMPTOM-BEATING NATURAL REMEDIESBesides obeying those doctor's diet-changing orders, here are six supplemental natural items you can regularly take to help reduce and counteract that gout-causing uric acid: 1. Celery seed extract; 2. Black cherry juice; 3. Nettles; 4. Fish oil; 5. Proteolytic enzymes; and 6. Magnesium.

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Biodegradable implant strip relieves nerve pain, dissolves harmlessly into body later

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Random lookalike people actually have similar DNA, finds researcher

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Making family-outing dreams a reality: Hamaspik Kings hosts huge trip to Nickelodeon Universe park



With additional safety upgrades, the Hamaspik Estate is now an OPWDD Certified Respite Site



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CHANUKAH SPIRIT: SEEING THE LIGHT SIDE OF LIFE

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Tri-County Care Manager Gets Avrumi a Hit Original Single

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Hamaspik Treats Fathers and Mothers of Children with Disabilities to Yet Another Royal Weekend of Inspiration, Bonding

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● ► HEALTH NEWS

Two decades of Alzheimer's Research May Be Based On a Deceptive Research Paper

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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 socials 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

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

legal holidays when school is not in session.

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

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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

ΔΒΔ

Behavior modification services for children with

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

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 houseowners 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 Hamaspik 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.

ОМЦ

SIPUK, ARTICLE 31 CLINIC

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

омн/рон

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

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 sill

Habilitation: Assist to acquire and improve sills 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 followalong support when holding down a job.

CHILDREN HCBS SERVICES

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

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/

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

Musically-Inclined Individual Finds his Voice in Interview by Popular Pundit

Tri-County Caregivers Secure Interview of Avrumi, Aspiring Singer, by Community Commentator Velvel Schmeltzer

If you live in the flourishing Chasidic Orthodox communities of Brooklyn, the Hudson Valley or beyond, chances are you're familiar with Kol Mevaser.

But that Yiddish-language entity is far more than a news hotline. It's a phonebased institution whose numerous live and recorded features speak the highlynuanced language of a community.

One of the many offerings of Kol Mevaser—which spans weather reports to Wall Street and political commentary to political comedy—is a regular "column," so to speak, on the ever-growing world of Jewish music. Faith-driven in nature, Jewish music draws heavily from timeless religious texts to convey messages of personal inspiration. Whether old-school styles more contemporary beats, the music and lyrics blend for a highly-nuanced experience—which is why Mr. Velvel Schmeltzer's reviews of said music are just as nuanced, and equally

appreciated by his eager audiences too.

As Kol Mevaser's music "critic" of sorts (although never critical—negative talk is frowned upon in Orthodox communities), Mr. Schmeltzer is regularly in contact with the Jewish music industry's movers and shakers. If anyone has a finger solidly on the scene's pulse, it's him. And never mind the fact that he's the brother of well-known recording artist Lipa Schmeltzer and no slouch of a wordsmith himself.

Schmeltzer's weekly "column"—a live radio show minus the radio (you have to dial in to listen)—is listened to by hundreds regularly. It's why singers and producers regularly vie for exposure on his show.

And it's why, when individual Avrumi actually recorded his own hit single, complete with professional studio and backup children's choir, his support staff at Tri-County Care got him that much-

coveted live interview by none other than venerated music commentator Velvel Schmeltzer.

The story actually begins a good year or so ago when Avrumi, a beneficiary of Hamaspik of Orange County's Pre-Vocational (Pre-Voc) program, expressed interest in singing. That program, one of the many community programs that Tri-County Care works with, helps high-functioning individuals segue into the mainstream workforce.

As such, Hamaspik Orange's very own Yossi Farkas—Avrumi's Pre-Voc one-on-one staffer—worked painstakingly over the ensuing months with Avrumi to compose an original melody, complete with appropriately-matched inspirational words. Mr. Farkas got the song to be arranged, recorded and mixed at MK Studios, a professional studio in the village of Kiryas Joel, and even sold at community Judaica stores as a single

track on USB.

But backing up that exemplary communal effort was Tri-County Care's very own Mordechai Jungreis, Avrumi's Care Manager. Himself assisted by Care Manager Supervisors Yosef Meir Ginsberg and Yechiel Teichman, Mr. Jungreis shortly got Avrumi on the phone live with none other than Velvel Schmeltzer.

Mr. Schmeltzer spent a good hour chatting Avrumi up and sharing his music, and his story, with the community at large—telling the story of how a determined individual, a devoted agency one-on-one staffer named Yossi Farkas, and Tri-County Care's team made music happen.

"Care Management means helping the individuals live up to their aspirations," comments Mr. Teichman. "If that requires climbing Mount Everest, the Care Manager will do that!"

● ► HEALTH NEWS

Flexible Implant Relieves Nerve Pain—and Dissolves Inside Body Once Unneeded

Latest in string of water-soluble experimental devices, including pacemaker

Evanston, Illinois — Northwestern University has done it again.

The same biotechnology research lab at that school that in 2018 produced the world's first electronic device that was *bioresorbable*, or able to naturally and harmlessly dissolve into the human body, has now rolled out its third.

Northwestern's first such device was a biodegradable implant that speeds nerve regeneration. In 2021, the lab introduced a dissolvable pacemaker. That heart-regulating implant would eventually break down inside its host's body, eliminating further surgeries, and fears of infection, malfunction or other complications.

Now, Prof. John Rogers, PhD and associates have produced an experimental nerve-pain relieving implant.

The flexible device resembles a strip of Scotch tape. It is surgically wrapped around a pain-generating nerve. It contains small amount of liquid coolant.

An external pump enables the user



 $\textbf{ON A ROLL:} \ \text{NORTHWESTERN UNIVERSITY'S PAIN-RELIEVING IMPLANT MELTS AWAY AFTER USE}$

to remotely activate the device and then increase or decrease its intensity by regulating how much coolant it releases.

The coolant hinders the nerve's ability to send pain signals to the brain. It first slows down those signals and

then stops them altogether.

All components of the devices are biocompatible and naturally absorb into the body's biofluids over the course of days or weeks without needing surgical extraction, according to a Northwestern press release. Like existing absorbable stitches, the devices are completely harmless.

The scientists believe the device will be most valuable for patients who undergo routine surgeries or even amputations that commonly require post-operative medications. Surgeons could implant the device during the procedure to help manage the patient's post-operative pain.

Hamaspik Gazette

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Happening in Health Today

"SMART NECKLACE" ANALYZES SWEAT TO TRACK BODY GLUCOSE LEVELS

Columbus, Ohio — Researchers at The Ohio State University have developed a "smart necklace" biosensor which can monitor glucose levels through a person's sweat.

Researchers first had participants cycle indoors for 30 minutes and then take a 15-minute break. During the break, the group consumed sugar-sweetened drinks before cycling again.

According to the researchers, the sensor in the smart necklace successfully tracked glucose levels, suggesting it can successfully monitor other important chemicals in sweat as well. Moreover, the device only needed a minimal amount of sweat for the sensor's interface to work.

The necklace-mounted biosensor comes complete with a functional clasp and pendant.

Many people use their phones and watches to track their heart rate and other measures of health while exercising. Now, a new smart device might be on the horizon. Researchers hope the device could "read" sweat to detect various other changes in a person's health, too.

EXPERIMENTAL CANCER DRUG MAY HELP TREAT SPINAL INJURY, RESEARCH SUGGESTS

Birmingham, England — New research suggests that a drug in development as a cancer therapy may also help the body regenerate damaged nerves after spinal injuries.

In lab experiments on human cells as well as live mice, a drug called AZD1390 was reportedly shown to block the body's response to DNA damage in nerve cells and restore function after a spinal injury.

The research, conducted at England's University of Birmingham, is also investigating whether the drug can aid the body's own DNA repair system. That system sometimes activates in response to common cancers and also spinal cord injury.

The potential spine-injury treatment is particularly promising because it would entail simply repurposing an existing cancer drug, not developing a new drug from scratch. Additionally, it can be taken orally, not via injection.

The study was published in *Clinical* and *Translational Medicine*.

TWISTED THREADS COATED IN LIVING STEM CELLS RECREATE HUMAN HEART'S BEAT, STRUCTURE

Boston, Massachusetts — Since the first artificial hearts, the legendary Jarvik-7 device, was implanted in pioneering heart-failure patient Barney Clark in 1982, artificial hearts today consist of *ventricular assist devices* (VADs), or tiny implants that help hearts pump blood, or *total artificial hearts* (TAHs), or external-air pump-driven blood circulators.

Science is now making progress on building an artificial heart out of biological materials, similar to recent breakthroughs like windpipes or other body parts replaced with lab-grown "bio-transplants."

Harvard researchers recently duplicated the helical (twisted) structure

of heart cells by first making tiny twisted fibers and then coating them in human heart stem cells—resulting in several thin layers of beating tissue within a week, and mimicking the same twisting or wringing motion present in human hearts.

UNRELATED LOOKALIKES SHARE SIMILAR DNA

Barcelona, Spain — It's strange enough that you have someone out there who basically looks just like you—even if you're totally unrelated and even live on different continents.

But now, scientists researching the phenomenon of *doppelgangers*, or coincidental lookalikes, have found something even stranger but, given the sameness of appearance, not surprising: people and their doppelgangers have similar genes.

It's one thing that blood relatives who share relatively similar appearances—especially those who are identical twins—have the same genes.

But now, DNA analysis of doppelganger "twins" at the Barcelona, Spain-based Josep Carreras Leukaemia Research Institute has found that they have similar genetic variants.

"People with extreme lookalike faces share common genotypes," said lead researcher Manel Esteller. "Genomics clusters them together, and the rest sets them apart."

EXPERIMENTAL MATTRESS "TRICKS" BODY THERMOSTATS TO INDUCE SLEEP FASTER

Austin, Texas — If good health is a stool, then good sleep is widely considered its third leg, after regular exercise and good nutrition.

Like the fitness and nutrition industries, the sleep industry is still growing, with ever-new options increasing in mattresses, pillows, linens, sleep centers and clinics, and even "nap-ercise" classes on how to sleep ideally.

But now, bioengineers at the University of Texas, Austin have engineered a new type of mattress and pillow system that "tricks" the body into falling asleep faster.

The system uses a heated pillow to warm the neck, prompting the body to believe it's hotter than it actually is—in turn pumping more blood to the hands and feet to cool the body. (Lower extremity temperatures induces sleep faster.) At the same time, for the same reason, the mattress uses internal air or water systems to cool the body's core.

In experiments, participants using the system fell asleep 58 percent faster than when not.



SLEEPING ON IT: UT AUSTIN'S EXPERIMENTAL MATTRESS INDUCES SLEEP 58% FASTER

STRONGER KIDNEYS MAY DEPEND ON WHAT GENDER YOU ARE, SAYS STUDY

Tromsø, Norway — Besides chromosomes, anatomy and common sense, another way to tell the difference between men and women today may be—thanks to research—by testing the kidneys.

Medicine has long known that, with age, men and women have different types of declining kidney function: more women have chronic kidney disease (CKD) while more men develop kidney failure.

University Hospital of North Norway Researchers now looked into why.

Researchers first looked at 1,837 European adults (53 percent women) ages 50-62.

They measured their kidney function with over 4,000 kidney function tests done during 2007-2009, 2013-2015, and 2018-2020.

The study doesn't quite indicate why. But it did find that middle-aged women tended to have lower kidney function than men during the first part of the 13-year study, and that kidney function in men dropped faster with age.



HAMASPIK GAZETTE JANUARY '23 • ISSUE NO. 207

► HAMASPIK NEWS

Making Dreams Come True

Hamaspik of Kings County's Chol Hamoed Trip Gives Families the Experience of a Lifetime

It was an experience that none of the families who joined the trip are likely to forget.

When chartered busses arrived at American Dream mall one day of Chol Hamoed Sukkos, they were met by security volunteers, who efficiently directed the visitors to the park entrance. Once inside, families were welcomed by Hamaspik employees, and each received tickets, a custom 'bracelet,' and lost and found stickers for the children. A specially-produced video played on a loop, the animated logo with the slogan "Making Dreams Come True" highlighted the theme of the day. The atmosphere? Fun and excitement running high, and seamless organization underpinning it all.

Once inside, the families were delighted to experience not just the park itself-with dozens of rides and amusements for all ages and stages—but a fabulous program of entertainment, including "strolling entertainers" and various shows scheduled throughout the day. Little children were delighted to meet the 'Friendstein' mascots, and enjoyed the professional clowns and jugglers moving among the crowds. Shea Berko and Lipa Brach provided musical entertainment and magician Magic Mo treated the crowds to an enchanting magic show.

The crowds were also treated to gala refreshments, served in two locations: the terrace for the women and a specially-built rooftop sukkah for the

And when the trip was over, and the families left the park, every child received a magnificent gift package including Magnatiles and a Danish.

No detail was spared, and no stone left unturned, to ensure the success of the trip, and the enjoyment of all involved. From the program, to the rides, the food, the fun, the sukkah, and above all - the wonderful atmosphere, the Heimishe music playing, and the sheer numbers of volunteer staff available all over the park, throughout the day, to help with anything and everything - the families were able to bask in the experience, knowing that everything was being catered especially for them, including their child with special needs.

The feedback received afterwards from the American Dream management sums it up best: "With a trip that serviced over 10,000 people, we were expecting glitches to arise... and yet we have never seen such a complicated operation run so smoothly. The event was extremely



A DREAMY SCENE: HUNDREDS OF HAMASPIK'S CHILDREN, AND THEIR BELOVED FAMILIES, ENJOY THE NICKELODEON UNIVERSE INDOOR PARK



TRAINING DAY: EXCURSIONS OF FAMILY FUN IS ON TRACK ON THE "DORA'S SKY RAILWAY" RIDE



CIRCULAR CLOWNING? ROLLING JOY OUT

well-organized, well-planned, and wellexecuted - from A to Z!"

This event—which resulted in a tremendous outpouring of gratitude and feedback from delighted parents was the work of many, many months.

"We began planning this trip on Isru Chag Pesach," Mr. Joseph Moskowitz, Director of Customer Service at Hamaspik of Kings County, shares.

"Baruch Hashem, the trip was a huge kiddush Hashem and success, but didn't happen on its own," Mr. Wertheimer, Hamaspik of Kings County's Executive Director, says. "Many teams were involved in pulling it together. Every coordinator and the front desk and intake departments did a huge amount of work to invite the families, issue tickets, and arrange scheduling and transportation."

Everything from tickets to stickers for the sandwiches was branded with the custom-made logo designed by Hamaspik of Kings County's incredible marketing team. The theme and slogan, "Making Dreams Together," was printed on all the material distributed-



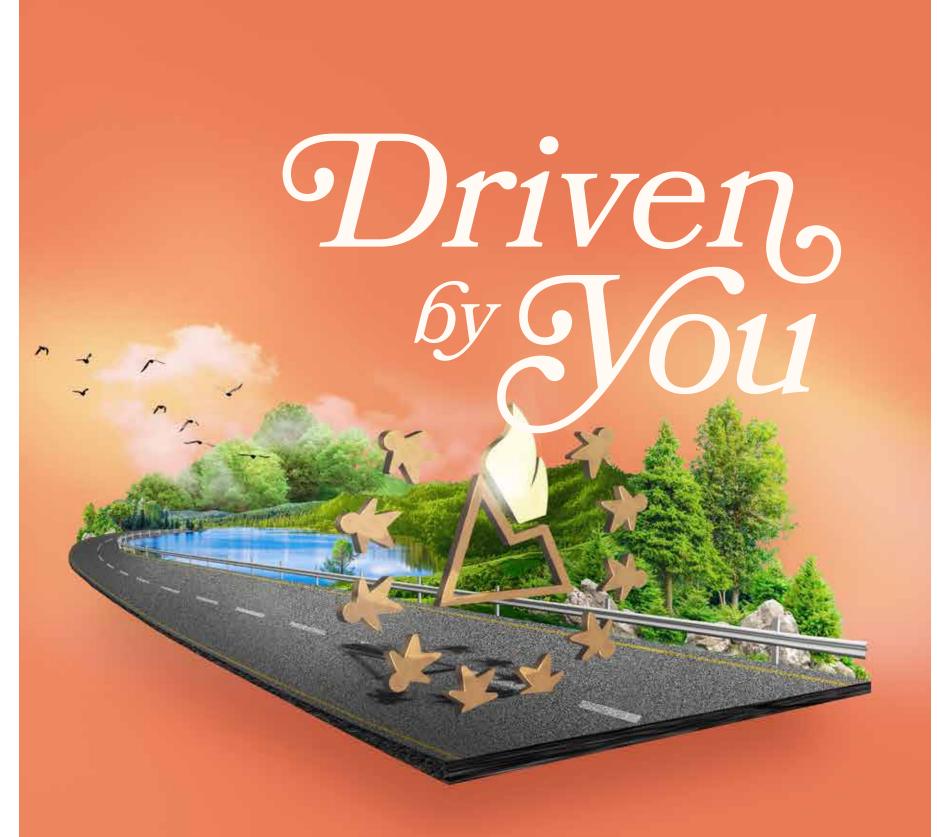
IN-HUT FOOD SERVICE: A GIANT ON-SITE SUKKAH HELPS FEED HAMASPIK'S CAPACITY CROWD

itself!—and set the tone for a magical experience.

Mr. Wertheimer also gives special credit to Ms. Miri Rosenberg, Administrative Supervisor, and Mr. Yaakov Kellner, Operations and Fleets Manager, together with his team, who worked tremendous hours and went above and beyond to ensure the trip's success. And above all, he thanks Mr. Joseph Moskowitz, whose devotion to

including the signage for the theme park planning and executing the trip over 6 months was the key to how smoothly everything ran.

"The achdus as everyone worked together to plan the trip was beautiful to see," says Mr. Moskowitz. "And the results—upwards of 10,000 people, parents and siblings and of course, children with special needs, all given an unforgettable simchas Yom Tov experience. This truly made all the efforts and planning worthwhile."



When we saw you needed a hand, we arranged the services you needed to get through it. When you had a question, we found answers. And when you're going through challenging times, we're right there with you.

Yours, truly.

Boro Park: 4102 14th Avenue Williamsburg: 44 Lee Avenue Five Towns: 76 Columbia Avenue 718-387-8400 // HamaspikKings.org



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● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK



Certifiably Picturesque







RESPITE-READY: THE HAMASPIK ESTATE'S MAIN RESIDENCE (BOTTOM L-R) IS NOW OPWDD-CERTIFIED—ROUNDING OUT THE ENTIRE GROUNDS (TOP) WITH ANOTHER LAYER OF SAFETY

Supporting Parents, Delighting Children

Machmadim, Hamaspik's Volunteer-Driven Weekly Youth Event, Helps Families and Exemplifies Community Values

Hamaspik of Rockland County, like Hamaspik as a whole, boasts dozens of programs and services for its communities. So what difference would another one make?

But in fact, Machmadim makes a meaningful difference indeed.

Unlike most other Hamaspik programs, Machmadim is driven by volunteers, not employees. That fact makes it all the more beautiful.

Machmadim consists of girls with special needs picked up by volunteermanned vans every winter Motzoei Shabbos [Saturday night post-Shabbos—ed.] and transported to the Hamaspik Terrace hall for at least two hours of quality stimulation.

The Machmadim program is led by Hamaspik's very own Ms. Wolhendler, who serves as onsite point person to counteract all logistical difficulties.

Each Machmadim Motzoei Shabbos event is essentially a dinner plus

entertainment and activities. Fresh hot food is served as the girls gather around tables to bond with their peers.

The altruistic teen volunteers—whom all hail from local schools and mostly hear about the program by word of mouth—then preside over camplike games and activities like coloring, painting, ceramics and other table-based arts and crafts.

With Machmadim's one-to-two ratio of volunteer counselors cheering on their young charges, the children also enjoy a live show by professional local entertainers.

But what motivates these amazing volunteers to step up to this fabulous community service?

Raised in a community that values giving to others, they want to give of themselves, explains Day Services Director Joel Moskovicz.

"Besides," he adds, "it also gives them something fun to do!"

New York State OPWDD Designates the Hamaspik Estate as Certified Respite Site

Hamaspik of Orange County's Respite House and Property, Based in Rural Warwick, New York, Now Carries Added Critical Designation

After a few years of effort, Hamaspik of Orange County has succeeded in gaining a critical approval from the New York State Office for People With Developmental Disabilities (OPWDD), Hamaspik's longtime public-sector partner.

The approval now officially designates the Hamaspik Estate, a sprawling house and property in rural Warwick, New York, as a "Certified Respite Site."

Sitting on far-reaching rural acreage, the Hamaspik Estate is a fully-equipped respite house and 29-acre property set among rustic ranches and spacious fields in the bucolic country surroundings of rural Warwick, New York.

The designation, while not legally necessary, merely adds an additional level of government-monitored safety and scrutiny, points out Joel Grosz, Hamaspik Orange's longtime Director of Quality Improvement. "You're legally allowed to take [group-home] residents to a hotel, too," he says, despite it not being regularly inspected for OPWDD safety standards—adding that the agency had voluntarily wanted the aforementioned designation for an added layer of inoculation against any possible infraction.

"It's safer for individuals now," says Mr. Grosz, noting that OPWDD auditors will now visit every two years.

To win the designation, Hamaspik retrofitted the site with a number of interior modifications, including a full fire-safety system, complete with lights, sirens, single-action exit doors and fire/gas detectors.

"It's difficult to arrange getaways at facilities not designed for individuals with disabilities," adds Mr. Grosz.

But now, Hamaspik has one.

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Shaarei Binah, Hamaspik Rockland's Yeshivah for Highest-Functioning Individuals, Gets New Teacher, New Study Materials, and New Results

Yeshivah Sharei Binah is Hamaspik of Rockland County's answer to the community's question, "Where can my son go?"

That question commonly came from parents of very high-functioning young adults. With disabilities too minimal for disability-oriented schools but too present for the mainstream, that subset struggled in the gray zone between.

But that's where Sharei Binah [Perception Gates—ed.] comes in.

Sharei Binah's daily schedule roughly mimics a standard yeshivah. Geared for post-18 young men capable of basic academics and even employment, Yeshivah Sharei Binah is an oasis of hope in a desert of despair.

Under director Chezky Szabovitz, and a curriculum comprising math, Yiddish writing and current events, students go home every day a little more informed and capable than yesterday.

They also get job training, including on-the-job training. And that personal growth has now shifted to the next gear with Mr. Szabovitz's hiring of Mr. Burich Leifer. Mr. Leifer, an experienced educator, was hired to serve as Yiddishlanguage instructor—and, per Hamaspik's above-and-beyond ethos, Mr. Leifer immediately implemented Director Szabovitz's vision of a positive-reinforcement campaign.

At the same time, Mr. Leifer has been involving parents on a new level—with students going home each Friday with a study workbook. Consisting of multiple-choice questions on every subject studied that past week, the "homework" turns parents into unofficial instructors.

"They understand very well what they need to do if they want to go bowling," the educator says of his students. "And so far, they have not failed."

Opening Gates of Potential







GETTING IT: INSTRUCTOR BURICH LEIFER AND STUDENT SHAYA IN A CANDID MOMENT OF INTELLECTUAL VICTORY (TOP L-R); THE YESHIVAH'S HALL SIGN (L); STUDY MATERIALS (R)

A Bonanza of Service to Everyone

Hamaspik Rockland's "Bonanza" Program Supports the Community—and the Agency Supporting That Community

Hamaspik is there for as many people in the community as possible.

So when there are people in the community who need help—or even programs and staff within the Hamaspik agency itself who need help—Hamaspik will do whatever it can do to provide that help.

Enter Hamaspik of Rockland County's Bonanza—an eclectic but vital program that perfectly fits that bill.

Operating out of Hamaspik's newly-acquired and contemporarily-made-over multipurpose center at 664 Chestnut Ridge Rd. in (surprise!) Chestnut Ridge, Bonanza does three specific things.

First, Bonanza is an employer an office-based workplace where compensated employees perform about six hours of clerical duties for Hamaspik of Rockland County every workday.

With Hamaspik of Rockland County alone serving thousands (never mind Hamaspik of Kings or Orange Counties!),

that's a lot of paperwork right there. Somebody's got to regularly digitize, organize and prioritize those reams of forms and other documents—and at Bonanza, women from the community of several ages and stages have found their place in a most respectable niche of the modern workforce. Working out of a fully-equipped modern office on site, the Bonanza team helps manage the unending conveyor belt of paperwork that a massive organization like Hamaspik of Rockland County generates and necessitates.

But their responsibilities extend well beyond clerical office work, duties which they reliably discharge.

Stars Shtick, a formerly-separate program now under the umbrella of Bonanza, is a popular local retailer that rents and/or sells novelty wedding-celebration items. It's Bonanza's mostactive facet, and it's now ensconced at

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The Back Office's Newest Front





THE COMMUNITY-SUPPORTING MACHINE'S NEWEST COG: HAMASPIK ROCKLAND'S NEW MULTI-PURPOSE CENTER IN CHESTNUT RIDGE (T); BONANZA'S HIGH-TECH WORKSTATIONS

HAMASPIK GAZETTE JANUARY '23 • ISSUE NO. 207

HAMASPIK NEWS

Special-Needs Parents Matter!

Hamaspik Hosts Another Inspirational Weekend of Support

You couldn't escape it. It was everywhere.

It was in every room. Every nook and cranny. Every serving of every meal. Every feature, offering, service and convenience.

"It" was the silent statement, "You are validated. You are celebrated. You are important. You matter."

And it was almost palpable across the 48 hours of Hamaspik's most recent weekend support event for the fathers and mothers of children with special needs supported by the agency.

The event was held yet again at the Armon Hotel and Conference Center in Stamford, Connecticut. There, spacious guest suites and sumptuous appointments were put at the disposal of the dozens of couples who trudge through each year bravely bearing the special burdens of special-needs parenting—only to repair to the relaxing retreat hosted annually by Hamaspik, where they supercharge their spiritual, emotional and physical batteries for the next 12 months.

From the moment guests walked



IT'S ALL OFF THE TABLE: FORGET THE FIVE-STAR SERVICE ON THIS TABLE—NOTICE THE SIBLING CARE PACKAGES ON CHAIRS AROUND THE TABLE

through the front door at Friday noon, to the moment they stepped out some two days later, longtime Hamaspik Special Events Coordinator Mrs. Brenda Katina and crew left no details unattended to-delivering once again in her imitable style the message that guests are nothing less than "kings and queens," as more than one interviewee for this report told the Gazette. But don't believe this reporter. Let the weekend's inspirational speakers themselves tell you.

Mrs. Miryam Swerdlov is a legendary speaker and event leader from the Crown Heights section of Brooklyn and a special-needs parent herself. Well known for her flowing way with words, Mrs. Swerdlov is a repeat Hamaspik presenter.

But, asked what makes the Hamaspik Shabbos weekend special, she gets right to the point: "I'll tell you why—because parents were treated like royalty. They were happy. They felt like someone understands them, someone appreciates them. Someone did something on the highest level for them. They felt like kings and queens." Case in point? On Shabbos morning, "There was Shabbos breakfast hanging on your door!" she incredulously exults. (That would be the reusable backpack-like bags dangling from every guest-room doorknob, each brimming with a full fresh breakfast to be enjoyed in the comfort of one's room together with one's spouse.) "Nothing was done backhandedly," Mrs. Swerdlov continues, with the unspoken message to parents being, "What can we do to make you feel important?"

As for the veteran speaker's Shabbos message to her onsite audiences? "Hashem entrusted you with His special child," she declares, "and He shows it through Hamaspik."

"If you had to sum up your Shabbos

message in one sentence, what would

"I thought I was the one going to give chizuk [inspiration—ed.]—it was the reverse!" enthuses Charlene Aminoff, replying to that question. Mrs. Aminoff, a popular community media personality, shared her own uplifting life story at the weekend, conveying the dramatic saga of a child's near-death experience and the path of inspiring living to which that experience led her. Members of her audience were seen weeping for the message of ultimate hope. "To see what Hamaspik does for these holy, often-exhausting children, to give them the most possible freedom... that was the most inspiring thing. Hamaspik is not an organization it's a support family! Everyone was a brother and sister."

Veteran social worker and Hamaspik employee Joy Stimmel, LCSW was on hand Friday afternoon to lead a therapeutic mental-health workshop for the womenfolk. "So many parents are depleted," notes the experienced professional. "This is a weekend when they get to make deposits: the peer supports, the [live] music, the bonding... It's a booster They leave renewed and reenergized to continue."

Rabbi Yisroel Fuchs, another presenter (and special-needs father himself), facilitated one of the weekend's most-popular events—an informal midday forum of sorts at which every willing father is invited to freely share with peers what CONTINUED ON PAGE 11 >>



● ► HAMASPIK NEWS

Special-Needs Parents

CONTINUED FROM PAGE 10

helps him most in his special-needs parenting journey. "Each parent has a very unique experience," he notes. "However, when parents share their experiences, both positive and negative, it's very helpful to know that they're not alone and that others have been down that road before."

While that feature has been a "Hamaspik Shabbos" staple since the weekend's inception, everything else about the tent-pole event has changed, says Rabbi Fuchs—for the better. "Hamaspik is always looking for new ways to make it better for parents," he observes. "What stays the same is that they keep upping the ante."

That ante consisted of everything from Friday-afternoon shoeshines and stress-relief massage therapy glassblowing demonstrations and virtual-reality (VR) goggle trips around the world. Sumptuous servings of food fit for kings were in ample supply at three formal meals across the weekend—never mind the appetizers and delicacies on hand before Shabbos and between meals. (And we haven't even gotten to the irresistibly-uplifting live private concert Saturday night, featuring famous inspirational storyteller Rabbi Yoel Gold along with popular singers Benny Friedman, the Berko



TOWERING VOICES: A MUSICAL SHABBOS-ENDING HAVDALAH UPLIFTS



SERENADED: THE LEV CHOIR AND EMCEE BORUCH PERLOWITZ (R)

Brothers and the Lev Choir!)

The midday-lunch keynote by Rabbi Shlomo Landau, noted Jewish-outreach leader, dwelt on never losing sight of the inspiration of the moment—a motif powerful enough that one longtime Hamaspik Shabbos regular later relayed to the rabbi that it had been the most inspirational message she'd ever heard at the weekend.

A Shabbos-afternoon address de-livered by acclaimed spiritual leader from California, Rabbi Yisroel Majeski, drove home the message that life neither requires nor demands perfection—as well as how specialneeds children improve the character of their siblings.

Rabbi Majeski, like other featured presenters, was there for his first time. "I had no idea what to expect," he recalls. But, asked what struck him most, he invokes the "incredible"



SIBS COUNT TOO! TOYS FOR THE WHOLE FAM

attention to detail. "Every couple was pampered, and everyone felt that way," he comments. "That was the purpose: Just to give them respite; and it was done with love."

But the rabbi was also inspired by guests brimming with optimism and



PARENTS HONORED: HERSHEL WERTHEIMER

faith, recalling one telling him: "I know this is my trial and I'm trying the best to make it work; this is my journey."

As he puts it: "I walked out with a million more times chizuk than I could have given."

A Bonanza of Service to Everyone

« CONTINUED FROM PAGE 9

employees work its counters and shelves. Stars Shtick offerings include flowery and/or white arches under which ecstatic brides giddily make their grand entrances for that riotous first dance. Also available are colorful tambourines, heart-filled transparent balloons, gloriously-hued mock brooms clearly not meant for sweeping anything but stodginess out the wedding-hall doors, and gold-colored rackets meant to smack open confetti-filled flying paper balls.

The Stars Shtick store area in the new complex boasts a brand-new front-door store area, complete with marble flooring and counter. There, some four to five calls are fielded a day, with community members responding to ongoing ads, or word of mouth, and coming in to purchase or rent various items.

Whether by phone or in person, Stars Shtick customers are all tended to courteously and professionally by



CELEBRATION AMMO: POWERED BY BONANZA STAFF, HAMASPIK'S STARS SHTICK DELIVERS

Bonanza staff.

Thirdly, Bonanza employees assist when groups from various Hamaspik day programs visit the spacious facility.

Those visitors, consisting of highor even low-functioning individuals with disabilities, arrive regularly to gain vocational skills as they perform productive repetitive basic tasks on site. Said tasks consist of packaging and itempreparation for local merchants.

Merchandise in various stages of completion and retail readiness is first delivered in bulk and then carried into the facility's spacious workshop. Working around a large table, the vocational groups then spend hours assembling and packing those items, all while Bonanza staff actively stand by to direct, support and assist.

Upon visiting the site, the *Gazette* encounters a Bonanza employee who clearly takes pride what she does. Readily answering questions, she is only too happy to command the conversation and confidently show the *Gazette* around the premises.

Also on site is Mrs. Ricky Blackman, Bonanza's Director. Mrs. Blackman comes to Hamaspik of Rockland County with seven years of invaluable employment experience in the universe of special needs, including a long stint at a school for individuals with intellectual/developmental disabilities (I/DD).

So where does the Director see Bonanza in 12 months? More hires and more Stars Shtick sales work, she begins, considering that the work arrangement created by Bonanza meets a community demand that until now has gone unmet.

There's no one in the community doing what Bonanza does, she points out.

But now there is. And given Hamaspik's growth (and ever-growing clerical needs), plus available space for good few more desks at Bonanza, there's room for growth here, too.

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The Autism Update

News and developments from the world of research and advocacy

GENES LINKED TO AUTISM MAY ALSO HAVE EARLY BRAIN DEVELOPMENT FUNCTION

San Francisco, California — Studying the brain genes of baby frogs before they're even born has apparently borne some revelations on what such genes do even before the frogs grow brains.

Previous unrelated research already found that ten specific genes are associated with autism. But the new research on frog *embryos* (unborn babies) found that when those ten genes had mutations, the brains of the frog embryos developed differently at a very early stage.

Specifically, the frog brains had the wrong amount of *neural* progenitor cells, which eventually become neurons, or nerve cells—resulting in brains too large or small.

The finding is significant because it now has the autism field considering the notion that some autism-related genes do more than just have a connection to autism—that they have different functions during early development than they do later in life.

HIGH-FUNCTION ADULTS WITH AUTISM LEARN MORE IN 'SPEED LEARNING' EXPERIMENTS: STUDY

Cambridge, Massachusetts — Normally, if you want to learn a new skill—say, to play the piano—you repeat one basic learned task until you master it.

But in what might be called a "speed learning" experiment, a study now published in the journal *Cell Biology* finds that high-functioning adults with autism learned more when they first learned that first basic task—and then didn't repeat it but were simply shown a flashing image of it.

Participants first were shown flashing lines on a screen; their task was to guess which way the lines were pointing. But then, instead of repeating that until mastering it, they were merely shown a single flashing image once a day for the next several days.

By the end of the experiment, the adults with autism getting the "memory flashes" did up to 25 percent better than peers not getting the "memory flashes."

SIX FLAGS PARKS NATIONWIDE NOW OFFERING ACCESSIBILITY CARDS TO GUESTS WITH DISABILITIES



CARD-CARRYING DISABILTY INCLUSION: THE SIX FLAGS U.S. CHAIN NOW ACCOMODATES CREDENTIALED GUESTS WITH DISABILITIES

Arlington, Texas — The 26-park Six Flags national chain of amusement parks recently launched its Attraction Access Program—"designed to accommodate guests with disabilities or certain other qualifying impairments so they may participate in the enjoyment of our Parks," according to a press release.

Here's how it works.

Guests who have cognitive disorders, disabilities or mobility impairments must first obtain an Individual Accessibility Card (IAC) from the International Board of Credentialing and Continuing Education Standards (IBCCES).

"Once a Guest has filled out the

online application and uploaded necessary documentation, they will be able to access their digital Accessibility Card," said Six Flags.

Guests wth duly verified disabilities may then present the card at a Ride Information Center at each park's main gate to receive any necessary accommodations.

UBER SETTLES FEDERAL CLAIMS OF OVERCHARGING PASSENGERS WITH DISABILITIES

Washington, D.C. — Uber, the pioneering ride-sharing global giant, agreed to resolve a multi-million-dollarlawsuitbroughtbythe U.S. Dept. of Justice (DOJ), settling claims of overcharging people with disabilities. The suit initially was brought in Nov. of 2021.

According to the initial April 2016 complaint, Uber was charging wait times to passengers with disabilities who "because of disability, needed more than two minutes to get in an Uber car." The DOJ alleged Uber's violation of the Americans with Disabilities Act (ADA) law by not reasonably modifying its wait time fee policy. "Passengers with disabilities may need additional time to enter a car for various reasons," said a DOJ statement.

Under the agreement, Uber will pay qualifying plaintiffs at least \$600 each to compensate for discriminatory fees due to disability.

REVIEW OF STUDIES: ANTIDEPRESSANTS REDUCE REPETITIVE BEHAVIORS, OTHER ADULT ASD SYMPTOMS

Taipei, Taiwan — If 16 studies come up with the same numbers, then they must mean something. That's the gist of a meta-analysis, or study of studies, that appeared in the *Journal of Psychiatry and Neuroscience*.

In that review, researchers at the National Taiwan University first wanted to know if antidepressant drugs have any beneficial effect on core and associated symptoms of ASD.

They first searched several study databases for keywords "ASD" and "antidepressants". They found 16 randomized controlled trials on the effects of antidepressant drugs on patients with autism spectrum disorder (ASD).

Between a total of 899 participants, the study showed improvements in repetitive behaviors and global symptoms in patients with ASD taking antidepressants versus placebos. They also "noted improvements in irritability and hyperactivity."

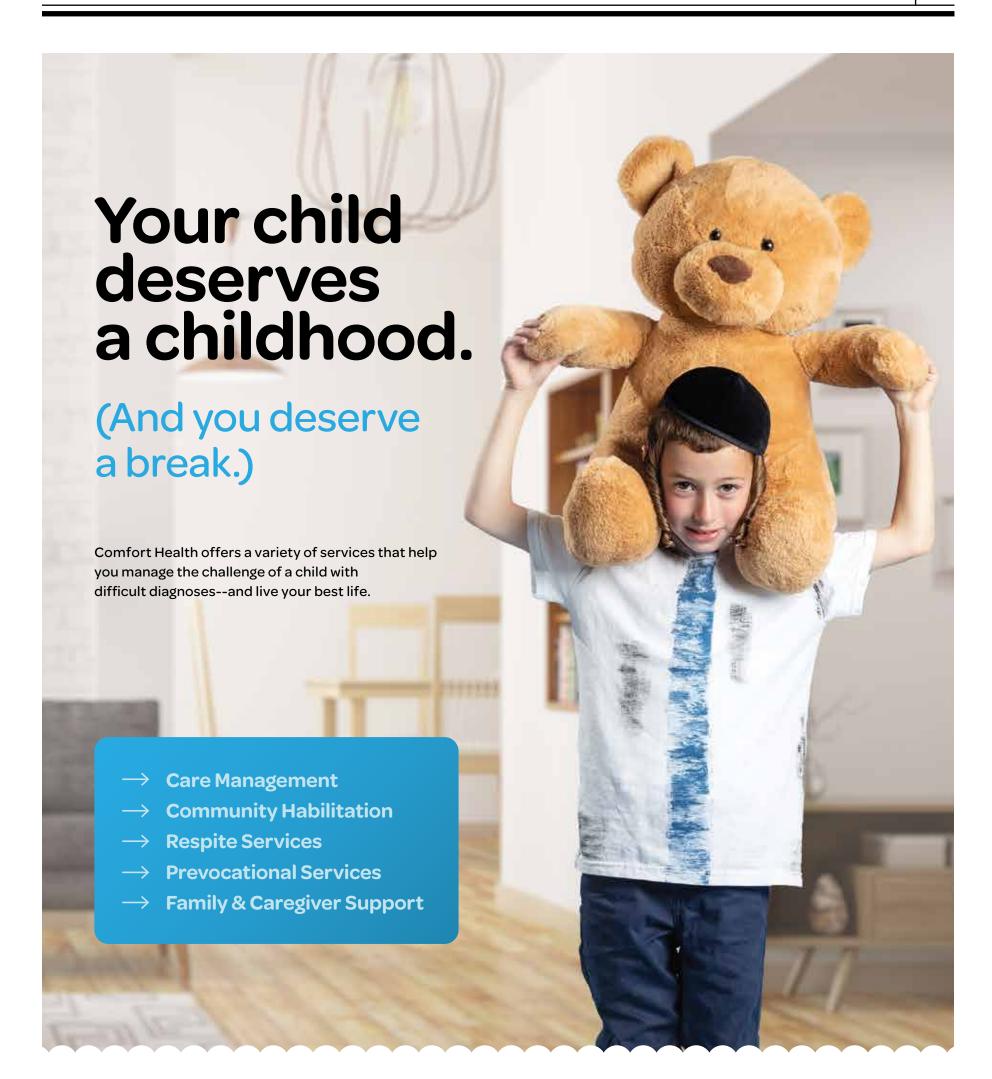
UP TO 60 PERCENT OF CHILDREN WITH AUTISM ALSO HAVE ANXIETY, STUDY SAYS

Toronto, Ontario — Typical children in middle childhood, defined as ages six through 12, are affected by anxiety disorders anywhere from 2.2 to 27 percent of the time. By contrast, according to a new study in the European Child & Adolescent Psychiatry journal, children with autism in middle childhood have anxiety disorder rates from 20 to 60 percent.

To reach those conclusions, researchers at Toronto's Holland Bloorview Kids Rehabilitation Hospital analyzed an existing long-term parent survey which had collected data on over 420 children with autism. The survey recorded children's levels of anxiety and insistence on sameness, measured using the Child Behavior Checklist and Repetitive Behavior Scale-Revised.

However, the study also says that anxiety in children with autism can and should be treated to reduce symptoms.

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"FOREVER CHEMICALS" EVERYWHERE MAY NOW MEET THEIR END, UCLA CHEMISTS SAY

Los Angeles, California — Short for *per- and polyfluoroalkyl substances*, PFAS refers to roughly 12,000 different synthetic chemicals—known informally in manufacturing as "forever chemicals" due to the fact that nothing in nature breaks them down.

Since the 1940s, PFAS have been used across a wide spectrum of items and appliances, from nonstick cookware to shampoo and from

electronics to food packaging.

But now, chemists at the University of California, Los Angeles (UCLA) have found that, in 12 tested of the varieties chemical, the central "forever" feature of PFASthe bond between its carbon and fluorine atoms-breaks when PFAS is exposed to water containing two other chemicals and heated to 176-248°F.

The finding may mean that public water treatment plants can start eliminating PFAS in public water supplies by merely adding those other chemicals to heated water.



Public Health and Poli

Stanford, California — "Our modern world grants us unprecedented access to high-reward, high-dopamine stimuli" like food, news, shopping and more, begins a recent interview of leading psychiatrist Anna Lembke, MD. Dopamine is the "feel-good" chemical the brain makes in response to pleasure. But according to Dr. Lembke, "this society-wide overindulgence in pleasure threatens to lead us to deeper pain."

"The heart of finding meaning" amidst today's instant-pleasure world is "reconnecting with ourselves," Dr. Lembke said in the interview by two Stanford doctors. "When we're chasing dopamine, we're essentially distracting ourselves from ourselves."

Dr. Lembke cited the example of a student initially "terrified" of disconnecting from all stimulation for an entire day—but then noticing the trees while walking to class. "The very first step is to abstain for long enough to be back in our bodies," she said, "to sit with the great quiet and reacquaint ourselves with ourselves, with other people."

Can you say, "Shabbos?"

NEW SURVEY FINDS HEALTH-INSURANCE IGNORANCE STILL COMMON

Philadelphia, Penn. — While a large number of Americans successfully navigate and counteract the otherwise-overwhelming challenge of surprise medical bills, a new survey finds that significant gaps remain in Americans' health insurance literacy.

Some 1,000 U.S. workers with employer-sponsored health insurance



THE HEAT IS ON FOR COMMON CHEMICALS: PFAS HAS BEEN FOUND TO BREAK DOWN IN CHEMICAL-TREATED AND HEATED WATER

were recently surveyed by the Penn.based employee benefits company Optavise.

Ten percent could not define a "premium" (the set monthly insurance fee) or "out-of-pocket limit" (the cap on what you have to pay on deductibles, copayments, and coinsurance). Nearly eight percent could not define "in-network" and "out-of-network," respectively referring to healthcare providers contracting with health insurers or not. Likewise, six percent couldn't define a "deductible" (the amount you pay for services before insurance pays for anything)—a number actually triple those who couldn't define it in 2021.

TWO DECADES OF ALZHEIMER'S RESEARCH MAY BE BASED ON A DECEPTIVE RESEARCH PAPER

New York, New York — Today's Alzheimer's science says that it's based on *amyloid proteins*: Amyloids form sticky brain *plaques*, plaques cause brain damage, and damage causes Alzheimer's. But now, the original research paper establishing that amyloid plaque model might have used altered images.

A 2006 paper in journal *Nature* concluded that mouse memory deficits were caused by accumulations of a substance called A β *56, a possible precursor to amyloid plaques. It then directly connected the condition to "cognitive deficits associated with Alzheimer's."



INSURING IGNORANCE: AN EMPLOYEE-BENEFITS COMPANY SURVEYED 1,000 AMERICANS ON HEALTH INSURANCE LITERACY—FINDING THAT INDUSTRY LINGO REMAINS INSCRUTABLE TO MANY

But according to a new review by *Science*, images in that paper supposedly showing the relationship between memory issues and $A\beta*56$'s presence now appear to have been altered.

Roughly 100 out of some 130 Alzheimer's drugs now in trials are directly designed to attack amyloids described in the paper.

INFLATION REDUCTION ACT LAW INCLUDES HISTORIC MEDICARE DRUG COST-CUTTING MEASURES

Washington, D.C. — The sweeping Inflation Reduction Act of 2022, signed into law by President Biden in August, includes a key measure long sought by activists: lowering prescription drug costs for Medicare members.

That measure makes several changes to Medicare—including a requirement (starting Jan. 2023) to directly negotiate prices for some high-cost drugs with manufacturers. The law may also help Medicare members save by:

- Requiring manufacturers to pay rebates to Medicare if they increase prices faster than inflation for drugs used by Medicare members
- Capping Medicare beneficiaries' Part D out-of-pocket spending by eliminating coinsurance above the catastrophic threshold (starting Jan. 2024)
- Limiting insulin cost sharing to \$35 per month (starting Jan. 2023)

But for their part, drug makers argue that requiring price negotiation stifles innovation.

TOO FEW PSYCHIATRIC BEDS: PSYCHIATRISTS' GROUP TAKES AIM AT ONGOING CRISIS

Washington, D.C. — Community mental-health activists will confirm that, for years now, modern hospitals have not had enough beds for people experiencing serious mental illness. But now, the authoritative American Psychiatric Association (APA) is doing something about it.

According to "The Psychiatric Bed Crisis in the US: Understanding the Problem and Moving Toward Solutions," a new report whose work began in 2020, "people in need of mental health care often approach the emergency department" because "too often, psychiatric inpatient beds are not available when needed."

While the report says there's no one-size-fits-all solution, it does strongly advocate for expanding local non-hospital community resources, like outpatient clinics and support services, for people experiencing psychiatric illness—especially for struggling children and youth.



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In the Know

ALL ABOUT... PERIPHERAL NEUROPATHY

Sources: Mayo Clinic, Massachusetts General Hospital, Foundation for Peripheral Neuropathy, National Institute for Neurological Disorders and Stroke (NINDS)



So, let's break peripheral neuropathy down.

First, the medical phrase *pathy* comes from the Greek "pathos," meaning "suffering or disease." You'll find it in words like myopathy (muscle disease) or even sympathy (literally, suffering together).

It also, obviously, appears in neuropathy (nerve disease).

"Peripheral" (pronounced: puh-RIFer-uhl) means "relating to or situated on the edge of something."

Thus, peripheral neuropathy is "disease of the nerves on the edge(s) of the body," meaning, the nerves of the body that are outside of the brain and the spinal cord—like the nerves in the feet, hands, legs and arms, for example. These nerves are known medically as peripheral nerves.

Peripheral neuropathy primarily strikes people in the world's developed countries who have uncontrolled diabetes, a situation that leads to breakdown of the nerves in the body's extremities—the feet and hands.

But the condition isn't limited to diabetes, and neither is it limited to the feet and hands. Here's everything you need to know about peripheral neuropathy to be... in the know.

DEFINITION

First, let's define the three categories of peripheral nerves—which, again, are nerves anywhere in the body outside of the brain and spinal cord.

- Motor nerves: These nerves control the body's movement by carrying signals from the conscious brain to the muscles, meaning things like walking, holding things, or talking.
- Sensory nerves: These nerves pick up signals of temperature (i.e. heat and cold), pain, vibration, touch or other sensations from the skin. In plain English, the sensory nerves let people feel things.
- Autonomic nerves: These nerves control the body's subconscious

"automatic" functions, like heartbeat, blood pressure, hearing, sweat, digestion and bladder function.

So, peripheral neuropathy means damage or destruction of the peripheral motor, sensory or autonomic nerves, resulting in those nerves being unable to messages from the brain and spinal cord to the muscles, skin and other parts of the body.

Next, within those three categories of nerves, we've got three different types of nerve signal disruption:

- Loss of signals normally sent (like a broken wire)
- Inappropriate signaling when there shouldn't be any (like static on a telephone line)
- Errors that distort the messages being sent (like a wavy television picture)

Most cases of peripheral neuropathy (about 75 percent) occur in the nerves furthest from the brain—meaning, the nerves in the feet. Medically speaking, this is called *length-dependent*. These nerves are also known as *small fiber* nerves.

Most cases of peripheral neuropathy consist of damage and resulting loss of signals that is caused by uncontrolled diabetes to the small-fiber, length-dependent motor and sensory nerves which are in the feet and legs. In other words, most cases of peripheral neuropathy are motor-nerve neuropathy.

CAUSES

Uncontrolled diabetes is the leading cause of the nerve damage that causes peripheral neuropathy. But peripheral neuropathy can also result from certain cancer treatments, traumatic injuries, infections, metabolic problems, inherited causes and exposure to toxins. Here is the basic list:

- Diabetes. This is the most common cause. Among people with diabetes, more than half will develop some type of neuropathy.
- Autoimmune diseases. These include Sjogren's syndrome, lupus,

- rheumatoid arthritis, Guillain-Barre syndrome, chronic inflammatory demyelinating polyneuropathy and vasculitis.
- Infections. These include certain viral or bacterial infections, including Lyme disease, shingles, Epstein-Barr virus, hepatitis B and C, leprosy, or diphtheria.
- Inherited disorders. Disorders such as Charcot-Marie-Tooth disease are hereditary types of neuropathy. In fact, according to the National Institute of Neurological Disorders and Stroke (NINDS), genetic mutations have been identified in more than 80 distinct hereditary neuropathies.
- Tumors. Growths, cancerous (malignant) and noncancerous (benign), can develop on the nerves or press on nerves. Also, polyneuropathy can arise as a result of some cancers related to the body's immune response. These are a form of a degenerative disorder called paraneoplastic syndrome.
- Bone marrow disorders. These include an abnormal protein in the blood (monoclonal gammopathies), a form of bone cancer (myeloma), lymphoma and the rare disease amyloidosis.
- Exposure to poisons. Toxic substances include industrial chemicals and heavy metals such as lead and mercury.
- Medications. Certain medications, especially those used to treat cancer (chemotherapy), can cause peripheral neuropathy.
- Injury or pressure on the nerve. Injuries, such as from motor vehicle accidents, falls or sports injuries, can sever or damage peripheral nerves. Nerve pressure can result from having a cast or using crutches or repeating a motion such as typing many times.
- Vitamin deficiencies. Vitamin B, including B1, B6 and B12, vitamin E and niacin are crucial to nerve health.

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SYMPTOMS

Symptoms can range from mild to disabling and are rarely life-threatening. Symptoms may develop over days, weeks, or years. They can even sometimes improve on their own and not require advanced care.

Peripheral neuropathy usually begins with the symptoms of weakness, numbness and pain in the affected area(s)—usually in the feet and hands, especially in the toes or fingers. It can stay limited to those digits, or spread to the rest of the feet and hands. It is also usually felt equally on both sides of the body—in both feet or in both hands.

The pain is generally described as any combination of the following: "burning," "freezing," "prickling," "throbbing," "jabbing" or "shooting." Patients have been known to describe it like "wearing an invisible sock or glove."

It's also known to be: worse at night; constant or periodic; and/or developing suddenly or slowly progressing over years.

Other symptoms can include:

- Extreme sensitivity to touch
- Difficulty sleeping because of feet and leg pain
- Loss of balance and coordination
- Muscle weakness; unable to hold objects in hands
- Muscle cramping, twitching or shrinking
- Difficulty walking or moving the arms; a sense of not knowing where the feet or hands are
- Unusual sweating
- Abnormalities in blood pressure or pulse

Sensory neuropathy

In cases of sensory neuropathy, symptoms are usually divided into "negative" and "positive" categories. Negative symptoms mean *less* ability to sense the world due to damage to sensory nerves, like reduced hearing (sensorineural hearing loss), reduced balance (sensory ataxia), or painless injuries. Positive symptoms mean that sensory nerves are sending false messages of sensation, like feeling a cut or burn even though nothing is touching the patient.

Autonomic neuropathy

Symptoms of this type of peripheral neuropathy depend on which organ is affected. If nerves servicing the heart and blood vessels are damaged, patients may notice low or fluctuating blood pressure or abnormal heart rate (usually fast), and feel weak or dizzy upon standing. Gastrointestinal (GI) tract nerve damage can include bloating, nausea, or vomiting, often after eating, and constipation, diarrhea, of both. Many cases of irritable bowel are caused

by peripheral neuropathy. Autonomic neuropathy can also affect the bladder and reproductive function. Rarely, some people develop eating or swallowing problems if nerves controlling the esophagus are affected.

Complications

Complications of peripheral neuropathy can include:

- Burns and skin injuries. Patients might not feel temperature changes or pain on numb parts of the body.
- Infection. Feet and other areas lacking sensation can become injured without the patient knowing. (Check these areas regularly and treat minor injuries before they become infected, especially if patients have diabetes.)
- Falls. Weakness and loss of sensation may be associated with lack of balance and falling.

DIAGNOSIS

The bewildering array and variability of symptoms that neuropathies can cause often makes diagnosis difficult. In fact, peripheral neuropathy is often misdiagnosed due to its complex array of symptoms. Nevertheless, a diagnosis of neuropathy typically includes the following:

- A full medical history. The doctor will review the patient's medical history, including symptoms, lifestyle, exposure to toxins, and a family history of neurological diseases.
- Neurological examination. The doctor might check the patient's tendon reflexes, muscle strength and tone, ability to feel certain sensations, and posture/coordination.
- Blood tests. Various blood tests can detect diabetes, vitamin deficiencies,

liver or kidney dysfunction, other metabolic disorders, infections or abnormal immune system activity.

- Magnetic resonance imaging (MRI) or computed tomography (CT) scans of the spine can reveal nerve root compression ("pinched nerve"), tumors, or other internal problems.
- Nerve function tests. Electromyography (EMG) records electrical
 activity in the muscles to detect nerve
 damage. A thin needle (electrode) is
 inserted into the muscle to measure
 electrical activity during muscle
 contractions. At the same time,
 the doctor will typically do a nerve
 conduction study. Flat electrodes are
 placed on the skin and a low electric
 current stimulates the nerves.
 The doctor will record the nerves'
 responses to the electric current.

TREATMENTS

Treatments depend entirely on the type of nerve damage, symptoms, and location. With proper education, some people may be able to reduce their medication dose or manage their neuropathy without medications. Definitive treatment can permit functional recovery over time.

Addressing neuropathy's causes. Correcting underlying causes can result in neuropathy resolving on its own as nerves recover or regenerate. Nerve health and resistance can be improved by healthy lifestyle habits such as maintaining optimal weight, avoiding toxic exposures, eating a balanced diet, and correcting vitamin deficiencies. Exercise can deliver more blood, oxygen, and nutrients to far-off nerve endings, improve muscle strength, and limit muscle atrophy. Self-care skills in people

with diabetes and others who have an impaired ability to feel pain can alleviate symptoms and often create conditions that encourage nerve regeneration. Strict control of blood glucose levels has been shown to reduce neuropathic symptoms and help prevent further nerve damage.

Inflammatory and autoimmune conditions leading to neuropathy can be controlled with some drugs. Plasmapheresis—a procedure in which blood is removed, cleansed of immune system cells and antibodies, and then returned to the body—can help reduce inflammation or suppress immune system activity. Intravenously administered doses of immunoglobulins, and antibodies that alter the immune system, also can suppress abnormal immune system activity.

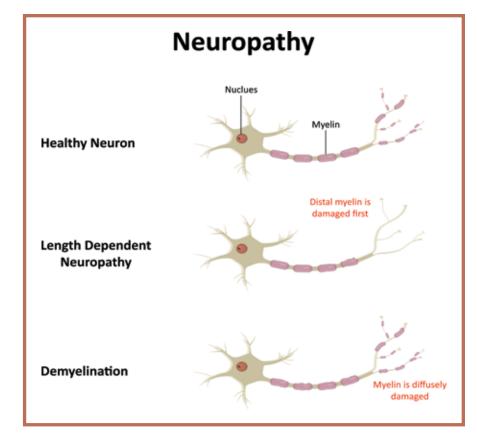
For motor symptoms, mechanical aids such as hand or foot braces can help reduce physical disability and pain. Orthopedic shoes can improve gait disturbances and help prevent foot injuries. Splints for carpal tunnel problems can help position the wrist to reduce pressure of the compressed nerve and allow it to heal. Some people with severe weakness benefit from tendon transfers or bone fusions to hold their limbs in better position, or to release a nerve compression.

Sensory symptoms, such as neuropathic pain or itching caused by injury to a nerve or nerves, are more difficult to control without medication. Some people use behavioral strategies to cope with chronic pain as well as depression and anxiety that many may feel following nerve injury.

PREVENTION

The best treatment is prevention, and strategies for reducing injuries are highly effective and well tested.

- Manage underlying conditions. The best way to prevent peripheral neuropathy is to manage medical conditions that increase risk, like diabetes, alcoholism or rheumatoid arthritis.
- Make healthy lifestyle choices to support nerve health. Eat a diet rich in fruits, vegetables, whole grains and lean protein to keep nerves healthy. Protect against vitamin B-12 deficiency by eating meats, fish, eggs, low-fat dairy foods and fortified cereals
- Exercise regularly. Try to get at least 30 minutes to one hour of exercise at least three times a week.
- Avoid factors that may cause nerve damage,including repetitive motions, cramped positions that put pressure on nerves, exposure to toxic chemicals, smoking and excessive alcohol.



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● ► HAMASPIK NEWS



Just One Shabbos

Shabbatons at Hamaspik of Kings County fill every moment with excitement, passion, and fun



Nothing Like Hamaspik Part II

The Day Services Department and Some Lucky Service Providers Share Their Insider's View

How have Hamaspik Shabbatons changed over the past few years? For one thing, they're a whole lot bigger than they used to be.

"When I began working with Hamaspik of Kings County, there would be groups of 20 or 30 children at each Shabbaton," says Mr. Kaufman. "Now we're talking about 60 or 70—and that's besides all the staff."

"The programs are huge now!" Mrs. Kohn says. "And the program directors do an amazing job—the Shabbatons just keep getting bigger, better, and more exciting."

Although the Shabbatons are bigger, it doesn't mean they're harder to run—in some ways, the stafffind it easier as time goes on. For example, Mrs. Kohn sees a difference in what it's like for her to run the medical aspects of the Shabbaton. Her job includes taking care of all the paperwork and medical forms in advance, and then being on call 24 hours a day throughout the Shabbaton for any medical issues that arise. (The Shabbatons are also accompanied by one or two EMTs.) She also gives medications at specific times for the children who take them regularly.

"At the beginning, I literally couldn't sleep at night, with the responsibility on my shoulders," Mrs. Kohn shares. "Now, baruch Hashem, I'm used to it—I know the routine, the children, and the way it works on a Shabbaton. Still, every time we get home afterward, I breathe a huge sigh of relief!"

Each successful and smooth Shabbaton is a huge achievement and leaves the staff feeling grateful and relieved. Every time the program runs exactly as planned, it's something to appreciate—because as perfect as the planning can be, there are always details beyond anyone's control

"We once had a blackout right before the children arrived for a Shabbaton," Mr. Spangelet recalls. "We got everyone who drove up to turn their cars and shine the headlights into the lobby. Our attitude was, 'We're going to make this work!' Baruch Hashem, a few minutes later, everything went back on.

While each Shabbaton is inspiring and memorable, some stories stand out.

"Recently, we had a fire alarm go off at 2 a.m.," Mr. Spangelet shares. "The children were sleeping, but the staff were still awake. Each counselor ran to their room, calmly woke the child they were responsible for, and brought them outside with a blanket. In under three minutes, the hotel was completely empty."

It's a testimony to the calm and coordinated efforts of the directors and staff that the evacuation went so smoothly, but what followed was no less inspiring.

"After the fire department gave us the all-clear to go back inside, the staff did the Shema circle all over again, starting the children's bedtime routine from scratch," Mr. Spangelet says. "Many children were too excited and off schedule to go back to sleep—and the counselors didn't utter a word of complaint. They continued caring for their charges throughout the night and the next day with so much devotion."

Mrs. Schwartz sums it up: "Going to a Shabbaton gives me the chizuk to continue doing what I do. When I see the children's happy faces, watch the results of all the hard work that goes into it—I know that what we're doing is so important."



Shabbaton in Progress

What it takes to create a Shabbaton to remember

Where does the process of running a Shabbaton begin? Where—and when—does it end? How many people are involved?

Here, Mr. Yehuda Spangelet, director of day services, and Mrs. Henny Schwartz, day services coordinator, take us behind the scenes to share the art and science of Shabbaton planning.

- The first step is setting up a calendar of all the Shabbatons, for all the programs, throughout the entire year. The Hamaspik resort is in use almost every single week, and since it's shared by Hamaspik of three counties, we need to schedule everything in advance. We arrange for each of our programs to get two Shabbatons a year, and for practicality and logistics, we try to keep a week's break between each Shabbaton (although it doesn't always work
- out like that—we recently ran four Shabbatons in five weeks!), Occasionally, we'll run two Shabbatons simultaneously, hosting one in another location, in order to make sure that every program receives their two slots. (But that's a LOT of extra work!)
- 2. Once the dates are in place, the planning is divided into three CONTINUED ON PAGE 19 >>

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Just One Shabbos

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Shabbaton in Progress

What it takes to create a Shabbaton to remember

CONTINUED FROM PAGE 18

categories: logistics, medical, and the program itself. While Mrs. Schwartz takes care of logistics, Mrs. Kohn oversees the medical aspects, and each program's directors take charge of theme, entertainment, and minute-by-minute programming. The entire process is a collaborative effort between the Day Services department office staff, the program directors, and the medical team—all under Mr. Spangelet's supervision.

- 3. Booking the buses is one of the first things on Mrs. Schwartz's agenda. "I find out the approximate number of children attending the Shabbaton, and make a reservation for the buses," she says. "The company has become busier over the years, and I've seen that the sooner we make a booking, the better."
 - Mrs. Schwartz also makes sure to review the contracts with a fine-tooth comb—a small detail, like a half-hour discrepancy in bus times could cause a huge headache at the last minute!
- **4.** In the meantime, each child has to be approved for the hours of the Shabbaton. As soon as that's confirmed, the program directors and office staff can work out a final number of attendees, with the staff in appropriate ratio to the children.
- 5. Next up is creating a menu for the Shabbaton—and it's a complex task, ensuring that every allergy and special diet is accommodated. "We'll figure out whether we need spelt challah as well as regular, and what alternatives to offer those with special dietary requirements," Mrs. Schwartz explains. "And then, of course, we're always looking to raise the bar, to make the Shabbatons more special, more exciting. We discuss what to prepare for the staff's melaveh malkah, and we'll go through several options until everyone is happy with the outcome."
- 6. On the medical side, there's a whole lot of preparation that most people would never guess. "We need every child's medical records, upto-date prescriptions, and several forms in case of emergency, chas v'shalom," Mrs. Kohn shares. If the child takes daily medications, the parents need to bring those in advance so everything is organized and prepared. Mr. Spangelet arranges the medical team that will actually attend the Shabbaton, whether it's Mrs. Kohn or another nurse, and which EMTs will accompany the group.

- 7. Then comes Mrs. Schwartz's biggest logistical challenge of Shabbaton planning—the family count, i.e., how many staff families will be attending, and arranging their rooms. It's literally like putting a puzzle together, dividing the children, counselors, and families between the 70 rooms—which ones downstairs, which ones upstairs, making sure parents with young children are together in larger rooms or suites, taking into account every child's needs and preferences... every small detail matters!
- 8. While all this is going on, the program directors are working hard to prepare the schedule for the Shabbaton. They'll choose a theme, and base the program around that to make the atmosphere fun and exciting—both for the children and the accompanying counselors. Once that's in place, it's time to fill every minute with fun activities and entertainment, including ordering all supplies and hiring entertainers such as storytellers, singers, or other performers.
- 9. Simultaneously, the directors work on staffing. Most programs require one-to-one supervision, meaning every child needs their own counselor for the entire Shabbos. It's a big undertaking—and includes the very important task of matching each child to a counselor. "With Shabbatons, the match-ups need to click from the first minute," Mr. Spangelet says. "It's so short, there's no time to start trying or changing. So the program directors work really hard to ensure that every child has a counselor who'll be the perfect fit and give them a fabulous time!"
- 10. Lastly, Mr. Spangelet says, there are the "little extra details" that aren't really so little or extra at all. One example: loading and unloading the buses. Who does it? How? What time? How is it done to ensure everyone's safety?

"It used to be just me and my children unloading the buses," he says. "But now we're talking about 150-200 suitcases each time. The Shabbatons have grown so much bigger, so we really need to plan this in advance: Who will be onsite to unload the suitcases and bring them to the right place, so the buses can leave promptly?"

While no two Shabbatons are the same, there's one thing Mr. Spangelet and his team aim to ensure each time: that every detail is ironed out to perfection to create the beautiful experience of a Hamaspik Shabbaton.











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Program directors share the what, the how, and the why of running Shabbatons

Achievers Shares the Best Feedback

When the mother of an individual told us, "It's the first time since my daughter was born 16 years ago that I had a completely worry-free weekend," we knew everything that goes into preparing a Shabbaton was worth it. And the girls themselves are so excited, they'll skip family events or simchos rather than miss out on the Achievers Shabbaton. That's amazing feedback as well!

-Bruchy Smilowitz, Achievers program director

Buneini Thinks Out of the Box

Buneini Shabbatons are 48 hours of fun and activities, keeping the boys entertained every minute of the day. One memorable Shabbaton, we had a large inflatable balloon for a major activity, but we couldn't find a machine to blow it up. One dedicated staff member jumped into his car and went around the Catskills, searching every store he could find until he located the item we needed in Walmart—just before the zman. He arrived back a few minutes before Shabbos, and the boys loved the activity!

-Sucher Dov Noe, Buneini program director

Ahavas Golda Shares a Special Moment

One child who attended our program was selectively mute. We'd never heard her speak. We worked hard to get her an amazing counselor, who showered her with attention throughout the entire Shabbos. At shalosh seudos, to everyone's disbelief, this child stood up and sang a solo! The warmth and positivity over Shabbos had enabled her to overcome her challenge and sing in public for the first time.

-Tzivi Gruenwald, Ahavas Golda program director

It's All Worthwhile When... The Hamaspik School Shares

One mother told us that the week of the Shabbaton was the first time she was able to host her newly married children, because she knew her child with special needs was being taken care of.

And for me personally, watching all 55 children receive their own becher and make Kiddush together loud and proud is such a beautiful sight!

-Idy Weber, The Hamaspik School director

Haktanim Highlight

At our recent Shabbaton, the fire alarm went off in the middle of the night. (B"H, there wasn't an actual fire.) The counselors, who were still awake, went quickly and calmly to wake the children and bring them outside—every single one was out within three minutes! It was amazing to see how cool and collected the counselors were, sitting with their campers and singing songs to keep the atmosphere positive. When the fire department arrived, they were amazed.

"We've never seen such a calm group after a fire alarm in the middle of the night," one fireman said.

It could have been the most stressful thing to happen, but instead, it turned into the highlight of the Shabbaton. The children thought it was the most fun and exciting thing to happen. Most of the children came home talking about the real fireman they'd seen!

-Yocheved Lerner, Haktanim program director

Boneich Speaks

Every part of a Boneich Shabbaton is memorable and meaningful, from beginning to end—it's hard to pinpoint one memory or story. Every second that the children are all busy is a milestone, every minute of the program is an achievement and a highlight, giving the parents, families, and the children themselves such an incredible gift.

-Yumi Menzer, Boneich program coordinator

Playhouse: Helping Every Child Shine

It's hard to pick out a single highlight, but the seudos at the Shabbaton are really special. The children each get to make Kiddush, using the tune they know from home, and we cheer each one on. They feel like a million dellars!

We also work hard to give the staff special entertainment and a program of their own once the children are sleeping. The entertainers—like Shimi Adar or Hindy Ausch's Harmony choir—are always amazed at what our staff do for the children, and how devoted and loving they are.

The best feedback we got was from Mrs. Breindy Katz, who joined us one Shabbaton as a speaker. She herself has a child with special needs, and she told the counselors, "If I would have known how caring you all are, I would have trusted my own daughter to any of you!"

-Chaya Tziry Jacobowitz, Playhouse program director

What Makes Fit With Friends Unique

Because we're the oldest group, with high-functioning adult individuals, Fit with Friends has a different focus at the Shabbaton—it's not as much about giving the families a break as it's about providing these adult individuals with a chance to have an independent, social experience.

And the social part is definitely the highlight! The individuals thrive on having an entire Shabbos to interact with each other and enjoy each other's company.

Some highlights of a Fit with Friends Shabbaton: our brachos party, where we enjoy great snacks but first make sure to say each brachah out loud and daven for people who need yeshuos; a themed performance by the individuals during shalosh seudos; "Tehillim and Tea," where we divide up sefer Tehillim to finish it together; and of course, the beautiful Shabbos meals! Each seudah is a few hours long, with divrei Torah and delicious food and lots and lots of singing. There's no rush to go anywhere or do anything—all we want to do is enjoy each other's company!

-Henny Lang, Fit with Friends program director $\,$

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A lifeline for parents of children with special needs.



Draw a wealth of chizzuk and guidance from the all-new lineup of renowned speakers and specialists on the Nishmoseini hotline.

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A CAREER IN NURSING: SCHOOLS PARTNER VANDERBILT TEAMS WITH PUBLIC SCHOOLS TO MENTOR FUTURE NURSES

Nashville, Pennsylvania — To lead monthly conversations with high school seniors about what it takes to become a registered nurse, Vanderbilt University Medical Center, based in Nashville, Tenn., is partnering now with Metro Nashville Public Schools.

The hospital's diversity, equity and inclusion committee has been paired so far with 19 students at Nashville's Pearl-Cohn high school, which Vanderbilt said is part of a diversity outreach program for future healthcare professionals.

From attracting a diverse pool of potential job candidates to expanding opportunities for local students, leaders say the collaboration has multiple purposes.

More than 200 students at the science academy are interested in becoming healthcare workers. According to Vanderbilt, the program will expand to other academies in the school system.

Other health systems, like the Iowabased UnityPoint Health, have launched similar efforts.

AMERICAN HOSPITAL ASSOCIATION (AHA) PUSHES BACK ON LOW-CHARITY JOURNAL CLAIMS

Chicago, Illinois — The *Wall Street Journal* recently claimed in a report that non-profit hospitals lag behind for-profit counterparts in providing charity care for area communities.

According to the Journal report,

non-profit hospitals wrote off some 2.3 percent of patient medical bills for which they received federal financial aid. In contrast, for-profit hospitals wrote off 3.4% of equivalent bills. The report was based on analysis of hospitals' most-recent annual reports filed with the government.

But the implication—namely, that non-profit hospitals take federal assistance but give little community assistance—was countered by a statement by American Hospital Association (AHA) CEO Rick Pollack.

"Charity care is only one part of a hospital's total community benefit," Pollack wrote. "Hospitals of all types have provided nearly \$745 billion in uncompensated care to patients since 2000."

VANDERBILT UNIVERSITY MEDICAL CENTER PLANS \$500 MILLION EXPANSION

Nashville, Tennessee — Huge hospital buildings going up in New York is happily no news—but how about in the Heartland?

In its largest expansion to date and first planned major addition since 2009, Nashville's Vanderbilt University Medical Center (VUMC) unveiled plans this summer for an inpatient building slated for completion in 2027.

The new structure is a 15-level tower to be named the Link Building. Depending on final design decisions, the Link Building will add approximately 180 inpatient beds along with ten operating rooms, radiology services, multiple specialty clinics, a spacious lobby and new administrative office space. Most importantly, it will expand VUMC's patient capacity by nearly 25 percent.

According to regional newspaper *The Tennessean*, the project is expected to cost at least \$500 million.

GREATER TRI-STATE AREA'S BEST HOSPITALS TO WORK FOR, ACCORDING TO FORBES

Jersey City, New Jersey — Of the 1,382 U.S. companies now surveyed by

business media leader Forbes to figure out which are the best to work for, over 260 hospitals scored "best employer."

The survey queried some 70,000 employees at companies across America which employ over 500 people each.

Working with market research company Statista, Forbes determined which companies provide employees with the best fair pay, safe working conditions, inclusive culture, remote work benefits and diversity initiatives.

Among those, 262 hospitals made the list.

So here, according to Forbes, are the two best hospitals to work for in Connecticut, New Jersey and New York:

- Connecticut: Yale New Haven Health, Hartford Healthcare
- New Jersey: Valley Health System, (Ridgewood), Atlantic Health System (Morristown)
- New York: Northwell Health (Great Neck), University of Rochester Medical Center

AFTER HOSPITAL GUARD KILLED, NEW HAMPSHIRE ADDS LAW PROTECTING HEALTHCARE WORKERS

Concord, New Hampshire — Under the Occupational Safety and Health Administration (OSHA), a division of the U.S. Dept. of Labor,

the federal government already has laws against workplace violence in the healthcare setting—a workplace setting that, unfortunately, has one of the highest national rates of attacks on employees.

Under OSHA regulations, hospitals and other healthcare workplaces are required to maintain minimum worker-safety protocols. However, states may expand upon those.

One such state is now New Hampshire, where Gov. Chris Sununu recently signed a state law to establish the state's Workplace Violence Prevention Program and the Health Care Workplace Safety Commission.

The law, SB 459, was prompted by the 2020 death of Richard Semo, a security guard at Frisbie Memorial Hospital in Rochester, New Hampshire, who was assaulted by a patient.

NEW YORK CITY AWARDS MOUNT SINAI WITH \$11.6 MILLION FOR SURGICAL INNOVATION CENTER

New York, New York — The New York City Economic Development Corp., fronted by Mayor Eric Adams, awarded the Mount Sinai Health System a grant worth \$11.6 million to develop its new Comprehensive Center for Surgical Innovation.

"With these awards, our administration is making critical investments in the health and prosperity of New Yorkers," said Hizzoner according to a statement released by Mount Sinai.

"Life sciences are central to our city's public health and economic recovery," continued the Mayor's statement, "and we will continue to marshal the resources necessary to grow this industry, create new economic opportunities for New Yorkers, and keep our city moving forward."

The grant is intended to accelerate the development of technologies and surgical procedures through adding new researchers, engineers and physicians.

The center will be located on 58th Street in Manhattan, near the Mount Sinai West hospital campus.



LAYING DOWN THE HOSPITAL-SAFETY LAW: NEW HAMPSHIRE'S STATE LEGISLATURE (ABOVE) SENT A BILL TO GOV. CHRIS SUNUNU, WHICH HE SIGNED, TO BETTER PROTECT CARE WORKERS

Hamaspik HomeCare Office Staff Visit Clients at Senior Living Center

Agency's Personal Care Aide (PCA) Coordinators Personally Meet and Greet PCA Patients for That Extra Touch of Caring

In a local senior living center in Rockland County where it is a highquality level of housing to its highfunctioning and mostly-independent senior residents.But the facility does not provide any personal care aides (PCAs), home health aides (HHAs), nurses (RNs) or therapists—all of which must be "imported" in by family members or outside organizations. Such care is commonly covered by Medicare, Medicaid and/or Social Security, for which most the assisted living facility residents qualify. With Hamaspik HomeCare providing much of that, dozens of the assisted living facility residents are also beneficiaries of various Hamaspik HomeCare services including PCAs, HHAs, nurses and aides with its popular Consumer Directed Personal Aide Program (CDPAP).

And so, Hamaspik HomeCare employee Ms. Esti Stern had the idea one day—she says she doesn't know where the idea came from—to visit the agency's senior living center patients.

Ms. Stern's official position is PCA Coordinator—an acronym short for Personal Care Aide—one of the several categories of trained one-on-one caregivers provided by Hamaspik HomeCare.

As their title implies, PCAs assist individuals in such activities of daily living (ADLs) as showering, dressing, personal hygiene and taking meals. In turn, PCA Coordinators work as concierges of sorts—scheduling shifts

for agency PCAs but more importantly, custom-tailoring which PCAs visit which patient for maximum personality compatibility. At Hamaspik HomeCare, that matching is where the PCA Coordinator's real work, and real talent, lies.

Ms. Stern was shortly granted permission to pay an unprecedented visit to her patients by supervisor Mrs. Rivky Bodner, HomeCare's Rockland County Director of Intake. And so one recent day, Ms. Stern and two other Hamaspik HomeCare PCA Coordinators arrived at the assisted living center, where they spent a good hour meeting and greeting their beneficiaries in person. Accompanied by Ms. Stern, PCA Coordinators Angelique Baldie

and Trany Deutsch, plus Authorization Coordinator Rebecca Kurtzner, paid a special visit.

"You're constantly dealing with their families," elaborates Ms. Stern, asked what she hoped the personal visit would accomplish. "Putting faces to names makes such a difference!"

But the most important fact was that the thoroughly professional Hamaspik HomeCare PCAs were "caught" on duty with assigned patients by the caring visitors. Thus deserving of honorable mention are PCAs Nancy Jean, Fanie Joseph, Schella Mallebranch, Monique Pierre and Barbara Tius.

"They were very happy to see us," recalls Ms. Stern—"and we were happy to see how hard they work!"

● ► HEALTH NEWS

By "True Cost of Aging" Index, Many Seniors Can't Afford Basic Necessities

Boston, Massachusetts — Some 54 percent of older women living alone are either "poor" according to federal poverty standards or with incomes too low to pay for essential expenses.

For single older men, that share—45 percent—isn't a whole lot better.

That's according to a valuable but little-known measure of the cost of living for older adults: the Elder Index, developed by researchers at the Gerontology Institute at the University of Massachusetts-Boston.

Nationally, and for every state and county in the U.S., the Elder Index uses various public databases to calculate the cost of health care, housing, food, transportation, and miscellaneous expenses for seniors.

To arrive at its conclusions—from the national level through all 50 states and down to individual counties—the Elder Index uses various public databases to calculate the cost of health care, housing, food, transportation, and miscellaneous expenses for

seniors

In 2020, according to data compiled by the Gerontology Institute, the Index shows that nearly five million older women living alone, two million older men living alone, and over two million older couples had incomes that made them economically insecure.

What's more, those estimates were based on figures compiled before current inflation hit a 40-year high; it is now believed that as a result, even more seniors are struggling.

To illustrate, the Elder Index points out that the minimum cost of living for older adults far exceeds federal poverty thresholds: A single older adult in good health paying rent needed \$27,096, on average, for basic expenses in 2021—which is \$14,100 more than the federal poverty threshold of \$12,996. For couples, the gap between the index's calculation of necessities and the poverty threshold was even greater.

Yet eligibility for Medicaid, food stamps, housing assistance, and other

safety net programs that help older adults is based on federal poverty standards, which don't account for geographic variations in the cost of living or medical expenses incurred by older adults, among other factors.

But now, the new Equity in Aging Collaborative, joined by 25 aging organizations, is planning to use the index to influence policies that affect older adults like property tax relief and expanded eligibility for programs that assist with medical expenses.

The goal is to fuel a robust dialogue about "the true cost of aging" in the U.S., which remains unappreciated, said Ramsey Alwin, president and chief executive of the National Council on Aging, an organizer of the coalition.

"There's a myth that Social Security and Medicare miraculously take care of all of people's needs in older age," said Alwin, of the National Council on Aging. "The reality is they don't, and far too many people are one crisis away from economic insecurity."

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