

The Hamaspik Cazette

News of Hamaspik Agencies and General Health

AUGUST '23 • ISSUE NO. 214

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GAZETTE SURVEY

The GAZETTE asks YOU:

HAVE YOU EVER TRIED A VEGAN DIET?

A: YES; A: NO

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



🔐 | HEALTH TIP

VIVACIOUSLY VEERING VEGAN

While you may think, "What I am going to eat?!", going vegan doesn't mean starving. Here's the #1 tip in switching to an animal-free diet: Instead of cutting your old foods out, just bring newly-discovered vegan foods that you like in.

Source: Hearing Health Foundation

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NYSHA Inc.

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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 legal holidays when school is not in session.

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

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

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

SELF-DIRECTION

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

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

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

ARTICLE 16 CLINIC

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

PARENTAL RETREATS

Providing: Getaways and retreats for parents of individuals with disabilities

EMOD, VMOD AND ASSISTIVE TECHNOLOGY

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

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

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

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

DOH

EARLY INTERVENTION (EI)

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

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

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

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

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

NURSING HOME TRANSITION AND DIVERSION (NHTD)

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

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

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

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

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

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

TRAUMATIC BRAIN INJURY (TBI)

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

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

Community Transitional Services (CTS) / Moving Assistance (MA): Provides moving assistance with packing and transporting individual's possessions and furnishings when he/she must be moved from an

inadequate or unsafe housing situation to a viable

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.

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

<u>Licensed HomeCare Services Agency.</u>

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.

ОМН

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: Peerdelivered services designed to promote skills for coping with and managing behavioral health symptoms, while utilizing recovery-oriented principles.

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 one.

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

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

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

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

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

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

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

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● ► TRI-COUNTY CARE NEWS

Nursing a Corporate Culture of Care

Tri-County Care's In-House Nurses Put Medical Practice Right on the Front Lines

Over one decade ago, a friend at a disability non-profit asked Amy Shulman, RN to cover for that agency's absent nurse.

"Once I started," she confesses today, "I fell in love with the population."

Now with Tri-County, she's been doing that beloved direct nursing work for some five years.

So, what does a typical day for a Tri-County Care Nurse look like?

Tri-County Care's nurses, Mrs. Shulman explains, are officially on-call to field any medical care-related question from Care Managers, Care Manager Supervisors, other TCC team members, and often parents, who just need that extra help in supporting their individual(s). "We help guide them," she explains.

Still, in being constantly oncall, "There's no predictability," she continues. "Every day is different." She shares how, for example, a parent of an individual supported by Tri-County recently reached out because she didn't feel that the psychiatric medications as currently prescribed were working for her son. Mom wanted a better option. The nurse recommended additional testing, to better help see which medications might work best.

Nurses also regularly participate at CM Supervisor meetings, log patient notes—and, most significantly, participate in hospital discharge meetings to ensure that transitions back home for the agency's individuals proceed smoothly. They're likewise involved in individuals' *Life Plans*, which govern all of each individual's personal services and supports.

Tri-County Care nurses also train Care Managers (CMs) on different illnesses so that they understand the disease process better, in turn knowing better how to support their individuals.

Tri-County Care nurses likewise

regularly discuss any and all care needs of individuals with family members—whether those be talking to doctors, helping families navigate language barriers (medical or otherwise), or otherwise advocating for the individual. Those discussions can, and also not-infrequently do, include directly communicating with individuals' doctors regarding medical decisions, and even accompanying individuals and/or family members at doctor visits or even hospitalizations.

In one case, Mrs. Schulman remembers, a mother felt that her child's doctor simply wasn't listening to her—so she provided care in the form of empowering her to seek out a second opinion. "You're the mother!" the TCC nurse recalls cheerfully encouraging her.

Speaking of how medical care for people with intellectual/developmental disabilities (I/DD) differs from typical care, the veteran medical professional

points out an unpleasant fact from the unenlightened and not-so-distant past: "The truth is, they didn't think our population would live that long, but they're living longer," Mrs. Shulman declares. "So you have to think out of the box."

But thinking out of that box to come up with solutions—especially ones that your gut and experience tell you would do the trick—is also the biggest challenge of her job, Nurse Shulman relates. "Sometimes when I come up with something I'd like it to be implemented right away, but due to family or insurance, it can't happen immediately. Sometimes the waiting is frustrating."

So, after a day's work at Tri-County, what gives her the most satisfaction?

"Knowing I was able to make a difference in somebody's life," Amy Schulman, RN replies. "I really truly enjoy what I'm doing now!"

● ► HEALTH NEWS

Exercise Best for Depression and Anxiety, Says Major Review of Studies

Analysis of Over 1,000 Existing Studies Finds Physical Activity Better than Drugs or Therapy for Mental Health

Adelaide, Australia — If you're feeling blue, hit that green. The putting green, that is.

A study by the University of South Australia—a review of many existing studies, actually—recently found that physical exercise does more good than prescription medication or even professional mental-health counseling.

The data analysis, published in the British Journal of Sports Medicine, looked at previous research on whether regular workouts or other forms of exercise were better for depression, anxiety, stress and general poor mental health than drugs or therapy.

In plain English, that means they looked at other studies that had actually compared exercise versus drugs or therapy on groups of depressed or anxious people. Those studies—1,039 clinical trials involving over 128,000 volunteers, to be exact—had found that exercise did more for mental health than



WORK THAT DEPRESSION OUT: REGULAR CARDIO AND/OR STRENGTH-BUILDING EXERCISE IS BETTER FOR MENTAL HEALTH THAN PILLS OR THERAPY, FINDS RECENT AUSTRALIAN STUDY

drugs or therapy. The current study just looked at all of them at once.

The review also found that even

just three months of a regular exercise regimen—or even any physical activity, never mind yoga or weight

training—is enough to counteract poor mental health.

Study authors also make the case that physical exercise should be part of standard prescribed treatment for mental-health problems—that psychiatrists, social workers and other mental-health professionals should be prescribing workouts and physical activity, too.

"The body of evidence [that] supports physical activity in managing mental health disorders," said researcher Dr. Carol Maher. "We hope this review will underscore the need for physical activity, including structured exercise interventions, as a mainstay approach for managing depression and anxiety."

Hamaspik Gazette

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HAMASPIK GAZETTE AUGUST '23 • ISSUE NO. **214**

Happening in Health Today

NEW AIR-PUFF SYSTEM COULD REPLACE ROUTINE NEEDLES

Dallas, Texas — If you don't like needles, experimental technology at the University of Texas at Dallas might one day almost-literally be a breath of fresh air.

There, biochemistry professor Jeremiah Gassensmith and team blended existing research on other ways of giving shots with existing technology on gas injector jets.

Using compressed-gasjets to "inject" medication into the body through the skin is actually old technology dating back to the '60s, though virtually unused. But now, Prof. Gassensmith and team put a gas injector jet device together with his lab's work on metalorganic frameworks (MOFs), which are microscopic pieces of metal carrying cancer drugs or other medications on their tiny surfaces—calling it the "MOF-Jet".

The device actually blows a puff of gas—and the MOFs in the gas—through the skin, where its medical "cargo" spreads through the body.

EXPERIMENTAL NEW OBESITY TREATMENT COULD CUT MAJOR WEIGHT WITHOUT SURGERY OR SIDE EFFECTS

Syracuse, New York — Getting the "sleeve" treatment, or the *gastric sleeve* weight-loss surgical procedure, is known for its often-dramatic effectiveness. But still, it involves surgery.

But could you get the benefits of weight-loss surgery without surgery? According to two doctor-researchers, if their drug trials get past current testing on animals, the answer for people may eventually be a resounding "yes!"

Robert Doyle, PhD of Syracuse University and Christian Roth, PhD of the Seattle Children's Research Institute have developed a new class of injectable compounds called GEP44 that—in obese lab rats—have dramatically reduced weight by curtailing eating and boosting calorie burn.

What's more, the compounds don't come with the nausea and vomiting common to current weight-loss

drugs—drugs that are dropped within a year by 80-90 percent of people who start on them.

HUMAN AGING COULD BE TRACKED EASILY WITH RETINAL SCANS, SAYS RESEARCH

Novato, California — Ongoing research at the Novato, Calif.-based Buck Institute for Aging has found that images of the *fundus*, the blood vesselrich tissue found in the retina, can help doctors track human aging.

What's more, the method is noninvasive, less expensive, and more accurate than other aging clocks currently available.

Buck's new method, which was developed in collaboration with Google Health and Zuckerberg San Francisco General Hospital, is called eyeAge.

"This type of imaging could be really valuable in tracking the efficacy of interventions aimed at slowing the aging process," said Buck's Prof. Pankaj Kapahi in a statement. "The results suggest that potentially, in less than one year we should be able to determine the trajectory of aging with 71-percent accuracy by noting discernable changes in the eyes of those being treated."

STUDY SHOWS CLUSTER, MIGRAINE HEADACHES MAY FOLLOW CIRCADIAN RHYTHMS

Houston, Texas — The human body "knows" when its bedtime. Now, for people with chronic severe headaches, it turns out that the body's clock may also play a part in what time of the day is "migraine time."

Migraines and cluster headaches share key features: Both are neurological diseases; neither can be easily identified via blood tests or imaging tools; and both are diagnosed based on symptoms.

Now, new research has found something else they have in common: timing.

"Our team found that about 70 percent of cluster and 50 percent of migraine headaches start at the same

time each day," said study leader Dr. Mark Joseph Burish, director of the Will Erwin Headache Research Center at the University of Texas Health Science Center at Houston.

The study linked both types of headaches to two genes that play a key role in regulating the body clock.

PROCEDURE SUCCESSFULLY TURNS VEINS INTO ARTERIES IN MAJORITY OF PATIENTS

Waltham, Massachusetts — According to new clinical trial results published recently in the *New England Journal of Medicine*, three out of every four patients undergoing an experimental new surgical procedure that turns veins into arteries wound up *not* needing leg amputations.

The procedure, which has yet to be approved by the FDA, is dubbed LimFlow.

It's meant to treat people who have *peripheral artery disease* (PAD), a narrowing of the arteries that carry blood to the limbs.

The PAD condition commonly occurs in people with diabetes, in which the slightest wound or ulcer can turn gangrenous if there's too little blood flow to promote healing.

In those cases, amputations of limbs—usually toes, feet or legs—are all-too-often medically necessary.

The minimally-invasive procedure has surgeons convert a vein into a new artery to supply fresh blood flow to an affected leg.

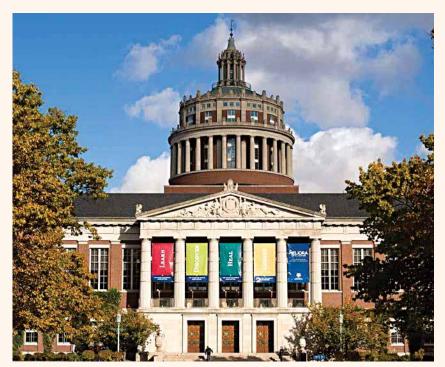
UNIV. OF ROCHESTER RESEARCH FINDS HEARING-RESTORATION CLUES

Rochester, New York — The most common cause of hearing loss is damage or loss of hair cells, the ear's primary sound-wave detectors. Because hair cells do not grow back if damaged or lost, hearing loss that involves hair cells is progressive.

But now, researchers at New York's University of Rochester Medical Center have gotten closer to identifying mechanisms which may promote the regeneration of hair cells in humans.

Those researchers had previously learned that a gene called ERBB2 could make new hair cells grow in certain animals—but didn't know how it did that.

The new research, now published in *Frontiers in Cellular Neuroscience*, explains the genetic mechanism behind it: In short, the ERBB2 gene "launches" a protein called SPP1 which eventually causes



REVERSAL: THE UNIV. OF ROCHESTER IS NOW CLOSER TO THE CAUSE OF HAIR-CELL LOSS

new hair cells to grow.

The process was discovered by

experimenting with lab mice with or without the ERBB2 gene.

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Welcome to Wings! Where we support you along the tumultuous roller coaster called life. There is no reason to go at it alone. We believe that a person is more than the sum of their disorders or challenges. We believe in strengths, in hope, in people, in YOU.

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E6 HAMASPIK GAZETTE AUGUST '23 • ISSUE NO. 214

● ► HAMASPIK NEWS

Fit for Healthier Bodies—and Spirits

Hamaspik Orange Welcomes New On-site Gym and Instructor

Hamaspik of Orange County now has a new onsite gym and fitness room—complete with professional fitness trainer Zisha Schnitzler.

Mr. Schnitzler, who boasts Certified Personal Trainer (CPT) credentials from the National Association of Sports Medicine (NASM), got into physical fitness as a hobby.

When a job switch and career opportunity simultaneously struck, Mr. Schnitzler joined a friend in getting a fitness coaching company targeting their community off the ground—and he's been happily doing it for two years now.

He's also happy to count Hamaspik among the clients for whom his employer, Flatit Fitness, provides personal training services.

In addition, Mr. Schnitzler is no stranger to the universe of special needs, having an uncle abroad affected by significant disability.

In turn, Hamaspik's world of disability supports is no stranger to the world of physical health and fitness. Each of Hamaspik's several Day Hab facilities supporting constituent communities in several counties features its own exercise room, replete with treadmills, ellipticals, exercise bikes and multifunction weight-training machines.

For Hamaspik Orange, that's all in addition to the Day Hab's weekly aqua fitness visits at the Hamaspik Resort's pool in Rock Hill, New York. In warmer spring and summer months, day trips to local parks and recreational venues—in plain-English, getting out and about to move and use those bodies—are par for the course across the agency.

(In the indoors-heavy winter months, not to worry, there are plenty of opportunities to stroll about at roof-based venues, as the Day Habs and group homes regularly do.)

What's more, most of the agency's numerous group homes also boast in-house exercise machines of some sort—at the least an exercise bike. In fact, for example, Hamaspik of Rockland County's Concord Briderheim has an entire mini-gym on the premises.

Mr. Schnitzler now regularly visits the agency's premises in Kiryas Joel, where a large room has been fitted out with a soft-surface dance floor for comfortable multipurpose usage.



A COLORFUL WORKOUT: STIMULATED AND MOTIVATED BY FLASHING LIGHTS AND THROBBING MUSIC, INDIVIDUALS JOIN INSTRUCTOR ZISHA SCHNITZLER IN A ROUND OF GREAT EXERCISE



HEALTHY PAINS, HEALTHY GAINS: PUSH-UP BARS HELP LIFT THIS MAN TO BETTER HEALTH



FOLLOWING STEPS: MR. SCHNITZLER AND AN INDIVIDUAL DO SOME CALISTHENICS

The walls and ceiling have also been equipped with a mood-enhancing colored-light system, allowing stimulating lighting effects—along with upbeat music—to truly create a motivating atmosphere that the gentleman now really enjoy. And with it being located in the Day Hab facility, travel to and from the physical fitness facility requires no transportation logistics whatsoever.

At each session, Mr. Schnitzler will have the gentlemen walk through some basic warm-up and stretching routines. With that out of the way, it's on to the main workout—which, like any workout, consists of what's best for each specific individual, and of course, what they like doing most.

Thus, one individual will find himself repeatedly tugging at a rubber resistance cord while another might be lifting his torso off the ground from the waist up in



PUTTING THEIR BEST FEET FORWARD: MUSIC POUNDING AND FEET FLYING, THE GENTLEMEN GET THEIR HEARTS PUMPING. IF THIS DANCE HAD A NAME, IT MIGHT BE CALLED "THE CARDIO"

a half-pushup of sorts. A third, more capable, individual will be busy doing rudimentary jumping jacks.

Besides body-only exercises, the sessions also incorporate the weights and even machines that the new fitness room features. As such, some of the young men will take to the treadmill or exercise bike for at least some of their session, putting their hearts into their workouts while they give workouts to their hearts.

Personal choice is front-andcenter throughout the workouts. "They do what they want," simply explains Yidel Kleinman, Hamaspik of Orange County Men's Day Hab's capable Director. "He [Mr. Schnitzler] leads the sessions, and they choose to follow or not."

Nevertheless, the trainer reports that he has seen health changes and improvements in the gentlemen since the fitness sessions started. "Sure!" Mr. Schnitzler readily replies, explaining: "There's the mental part to anything in life, especially in fitness. So the mental part, the vibe and atmosphere, is always improving, so they are always doing more resistance training."

In fact, adds Mr. Kleinman, "they look forward to it."

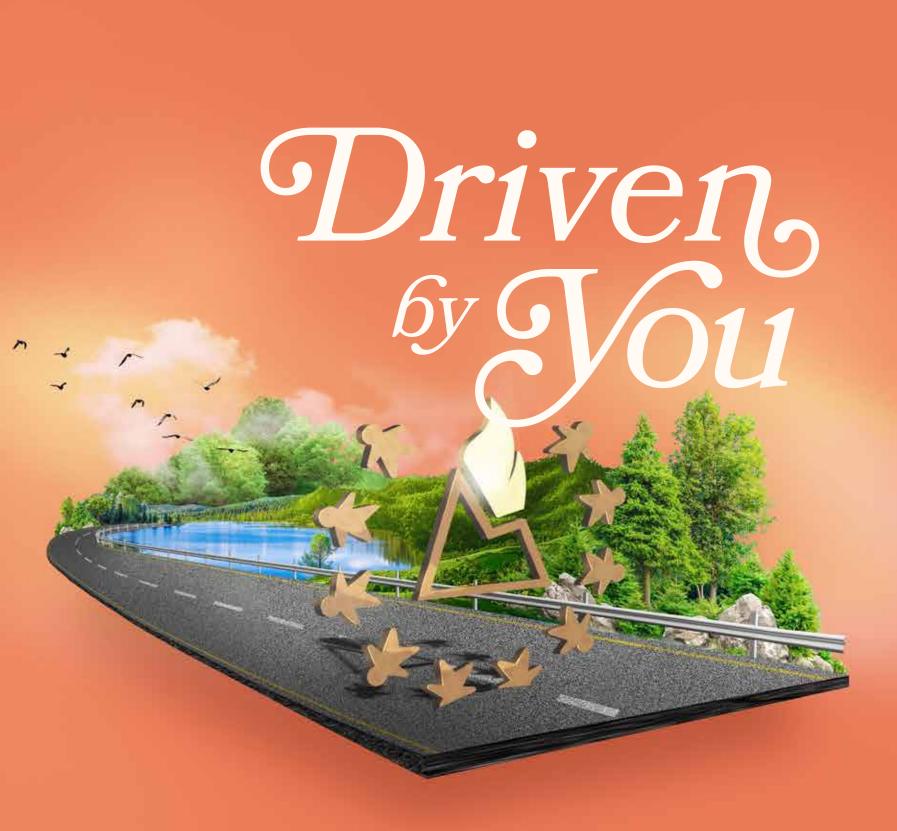
So, what does Zisha Schnitzler most like about working with Hamaspik? "To bring a smile to everyone and make them happy," he replies. "The energy when I walk into the room: 'Hey, Zisha! How are you?' I have the ability to make them happy."

How about what the boys like most about working with you?

"It's very interesting and delicate," he says. "On the one hand, it's hard to build up a connection. But once you have them, they're yours. I have the ability to connect with them, and they with me."

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HAMASPIK GAZETTE E7



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.

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● **HAMASPIK NEWS** | HAPPENINGS AROUND HAMASPIK



Grounds for fun







RECREATION STATIONS: A SPACIOUS, STATE-OF-THE-ART PLAYGROUND ACCOMODATES MAMTAKIM, FROM PICNIC TABLES AND SLIDES TO RAMPS FOR RAMBUNCTIOUS RUNNERS

Hello Hamaspik

Hamaspik of Kings County Treats the Five Towns to a Day of Unlimited Family Fun

Nearly five thousand people in the greater Five Towns area attended the grand 'Hello Hamaspik' Carnival on Sunday, June 25. The purpose of the event was to raise awareness of the services available for families of children with special needs, and to introduce Hamaspik of Kings County to the community.

Entertainment included inflatable rides, arcade games, jewelry making, ride-on animals, face painting, a photo booth, strolling entertainers, virtual reality games, and scheduled performances throughout the day by Uncle Moishy, Eli Marcus, and Dr. Schnitzel. There were abundant refreshments distributed, including pizza, popcorn, french fries, slush, cotton candy, and more. Most incredible, for the families who attended the event, was the fact that everything — from entry, to booths, to food, to the "swag bags" of gifts distributed at the end — was completely free.

The event showcased Hamaspik's dedication to inclusivity and its commitment to providing lifealtering services for those with special needs. It raised tremendous awareness of Hamaspik of Kings County's mission and services, with an information desk manned by dedicated employees, and was a success on every level, leaving parents and children alike with warm feelings and happy memories.

"The event was a really beautiful inclusionary experience for the community," Uncle Moishy shared after his performance at Hello Hamaspik carnival. "Children and adults with special needs enjoyed side by side with typical children and adults... The entertainment, games, activities, food was amazing — something for everyone. Judging from the faces, the Five Towns community had a blast. Yasher Koach!"

Camp Mamtakim Runs for Another Sweetly Successful Eight-Week Season

Word-of-Mouth Referrals Bring Campers With Special Needs From Across Tri-State Area and as far as Canada

"There's always room for something sweet," says the Talmud—and at Camp *Mamtakim*, an affectionate diminutive translating essentially to "sweetie pies," those sweets are its campers.

Mamtakim is the summer overnight camp run by Hamaspik for girls with special needs. This year, Mamtakim is back once again at the Hamaspik Resort, a former hotel complex in Rock Hill, New York.

From wake-up and breakfast all the way to daily bedtime rituals at nightfall, counselors lovingly shepherd their charges through their exciting routines. Each day at Mamtakim is filled with stimulating indoor activity "Clubs" and outdoor sports, swimming, lunch and free "hock" time, followed by dinner and more activities.

Mamtakim's theme this year—expressed with a "Word of the Day"—is homophones, or two same-sounding words spelled differently. One day, for

example, the words billed and build (identical to ears but not eyes) had Camp Mamtakim's campers billing each other and building toy-block castles.

As each day closes, campers gather at 6:45 p.m. for a round of scrapbooking. At the end of camp, they will be going home with scrapbooks brimming with memories to be cherished for a lifetime.

Following bedtime hygiene and routine, when campers are lovingly put to bed, staff enjoy their own night morale-boosting program—a blend of socialization, education, and inspiration.

Asked to recount one magic moment from this summer, Director Mrs. Brenda Katina recalls observing how when one camper needs help, the rest—in altruistic concern—all come running. "You could *melt*!" she exults.

But at Mamtakim, the campers sure don't.

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● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK

Rockland County Women's Day Hab Program Celebrates Double "Achievement Event" Graduation Celebration

Strive and STARS Program Students Joined by Parents, Staff in Marking Year of Personal Progress at Hamaspik

With individuals in its Day Habilitation (Day Hab) programs on different function levels, Hamaspik has long provided different programs within Day Hab catering to those levels.

At Hamaspik of Rockland County's Women's Day Hab, one of those programs is *Strive*, a transitional classroom-based program for newly-graduated women 18-24. Another is *STARS*, a day program for women and girls 18-plus with the highest levels of capability who are prepping for mainstream jobs.

Most recently, those women's Day Hab programs—like all of them, under the leadership of Mrs. Esty Schonfeld—marked "Achievements 2023," a graduation ceremony of sorts.

Both events were held the same day at the Hamaspik Terrace social hall in the heart of Monsey, with STARS celebrating at 11:00 a.m. and Strive later at 2:00 p.m.

Participants wore capes and pins to feel like the graduates that they were.

A stage, podium and mic occupied the front of the room, the rest of which was filled with guest seats, refreshment tables and family seating to the rear.

Once on stage, graduates danced and motioned along to several beautiful recorded songs, including a "Welcome Song" and a tender, touching tribute song to their beloved Mommies.

First to speak at both events was a teacher with both programs, who addressed the crowd about her philosophy. "I don't believe in 'No'!" she declared.

After words by two students, each graduate received a diploma and a gift. Their moment had arrived—and now, after a year of achievement, they stepped off the stage into the embrace of their loving and proud mothers.

Setting the Stage



THE NEXT STEP UP: LIFE'S NEXT MAJOR PLATEAU AWAITS A GROUP OF PROUD GRADUATES





A DIFFERENT DEGREE OF DRINKING AND EATING: PERFECTLY GRADULATION-THEMED WATER BOTTLES (L) AND FRESHLY-CATERED FOOD ARE ON HAND TO FOSTER CELEBRATION

Grounds for Experiential Education

Hamaspik Orange Men's Day Hab Takes on the Field of the Great Outdoors

Sun. Grass. Sky. Earth. Nothing is more therapeutic than the great outdoors. Just ask any hiker or camper. And best of all, it's free of charge.

It's also a fact long known to Hamaspik, which has repeatedly and consistently taken advantage of that big green world out there season after season, year after year.

The ancient notion of nature as therapy hasn't been lost on the modernday New York State Office for People With Disabilities (OPWDD), Hamaspik's public-sector partner, either.

"Get Outdoors & Get Together Day: Inclusive, Accessible Family-Friendly Recreation at State Parks & DEC Lands" was a partnership this early June between four state agencies, including the OPWDD, that hosted outdoor activities geared for individuals with disabilities in 18 counties.

For its part, Hamaspik takes the unstructured approach (at least for now!) to therapeutic outdoor activity—

at it recently did with an outing by the Hamaspik of Orange County Men's Day Hab program.

For the good part of a day, the gentlemen supported by that day program found themselves on the grounds of a rustic petting zoo. There, the goats, sheep and cows were eager to be fed, while the less-mobile members of the contingent who use wheelchairs were enthralled by the live bunny rabbits that they were allowed to pet.

Surrounded by the earthy grounds and overhead shelters of the visitorfriendlyvenue, the gentlemen connected with the natural world and its thriving animal denizens, its sights and sounds raw and untampered.

Hamaspik hasn't ever formally conducted a study on the gentlemen it supports before and after such naturalistic excursions. However, it would be no surprise if, after one such study, the post-trip numbers looked a lot better.

Getting out of Town



FIELD INQUIRIES: THE "DAY HABBERS" FAN OUT ACROSS THE FARM FOR OUTDOOR FUN





A FEEL FOR FARM LIFE: WHETHER A RABBIT OR GOATS AND SHEEP, IT'S ALL HANDS-ON HERE

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The Autism Update

News and developments from the world of research and advocacy

IN BIG BRAIN RESEARCH STEP, SCIENTISTS TURN STEM CELLS INTO TEN BRAIN-CELL TYPES—INCLUDING SOME LINKED TO AUTISM

Stanford, California — Science has long known that the body's several different types of cells—bone cells, muscle cells and skin cells, for example—all originate from one type of cell, the *stem cell*.

A significant part of modern medical research revolves around stem cells: cultivating them in labs and genetically turning them into specific types of cells—with the goal of replacing faulty existing cells.

In recent years, this approach has been having some success in treating or at least ameliorating various conditions. But now, researchers at California's Stanford University have turned stem cells into ten specific types of brain cells.

The development has excited the



WHAT AUTISM BRAIN-CELL RESEARCH STEMS FROM: STANFORD RESEARCHERS MAY NOW BE ABLE TO BETTER STUDY AUTISM-LINKED CELLS

brain research field because now, specific brain-cell types—including

those involved in autism—may be better studied and possibly even

cultivated, with an eye towards ultimately using them to treat autism *

DISABILITY ACCESS REVAMP AT DISNEYLAND'S POPULAR TOONTOWN AREA

Anaheim, California — Children with disabilities—and not just physical ones—will now be able to enjoy full access to all the rides and attractions at Disneyland's Toontown.

The popular area of the iconic theme park underwent a complete overhaul to remove as many barriers as possible for children with atypical abilities and needs.

With wheelchair ramps and pathways everywhere, water tables at lower heights for children's wheelchairs, and even quiet areas for children on the autism spectrum, Toontown now accommodates children with physical, developmental, behavioral, emotional and sensory disabilities.

Other examples are: calming and natural sound effects in the Goofy's How-To-Play Yard sound garden; sensory and tactile experiences on Donald's Boat; a quieter green space in Popcorn Park; and new companion restrooms for parents who want to accompany children in the facilities.

AUTISM NOW AFFECTS ONE OUT OF EVERY 36 U.S. CHILDREN, ACCORDING TO CDC

Atlanta, Georgia — According to the newest data from the U.S. Centers for Disease Control and Prevention

(CDC), autism rates across the country continue to climb. According to the federal agency, one in 36 U.S. children, or 2.8 percent, have autism.

The new estimate is based on information gathered on eight-year-old children in 11 nationwide regions in 2020 by the CDC's Autism and Developmental Disabilities Monitoring (ADDM) Network.

The most recent ADDM report before that, released in late 2021, pegged U.S. autism prevalence at one in 44 kids. By comparison, the rate was 1 in 150 in Year 2000.

"We suspect this is due to increased awareness, leading to more children being identified with autism," Dr. Karen Remley, director of the CDC's National Center on Birth Defects and Developmental Disabilities, said of the increase.

TODDLERS' ATTENTION TO "MOTHERESE" MAY BE USED TO DIAGNOSE AUTISM

San Diego, California — Toddlers' level of attention to "motherese," or the childish singsong adults speak to babies, can be used as an autism test, according to new research.

In a study published in *JAMA Network Open*, researchers at the University of California San Diego School of Medicine tested a group of 653 toddlers, ages 1 to 2 years old, with and without an ASD diagnoses.

In their experiment, the toddlers

were individually presented with two one-minute videos on a screen. One video showed a woman speaking motherese and the other showed either a busy highway or a movie of abstract shapes and numbers. The toddlers used their eyes to control which video was played.

Toddlers without ASD showed consistently high interest in motherese. Conversely, a sub-group of toddlers who fixated on motherese under 30 percent of the time could be accurately identified as having ASD through that measurement alone.

COMPARISON STUDY FINDS TODDLERS WITH AUTISM DO BETTER WITH EARLIER INTERVENTION

Philadelphia, Pennsylvania — Researchers at Children's Hospital of Philadelphia (CHOP) found that toddlers with autism spectrum disorder did better when subjected earlier in life than later to the Early Social Intervention (ESI) model.

Researchers had two groups of toddlers with diagnosed autism receive ESI treatments—one group with the Individual one-on-one parental form, and the other in the less-intensive Group form.

More specifically, toddlers randomized to Individual-ESI at 18 months showed greater gains during treatment than those starting Individual-ESI at 27 months in receptive/expressive language, social communication, and daily living skills.

Results revealed that children who received Individual-ESI earlier showed greater treatment gains than those who received this intervention later. Gains were demonstrated in several areas, which included: use and understanding of language; social use of communication skills; and self-help skills.

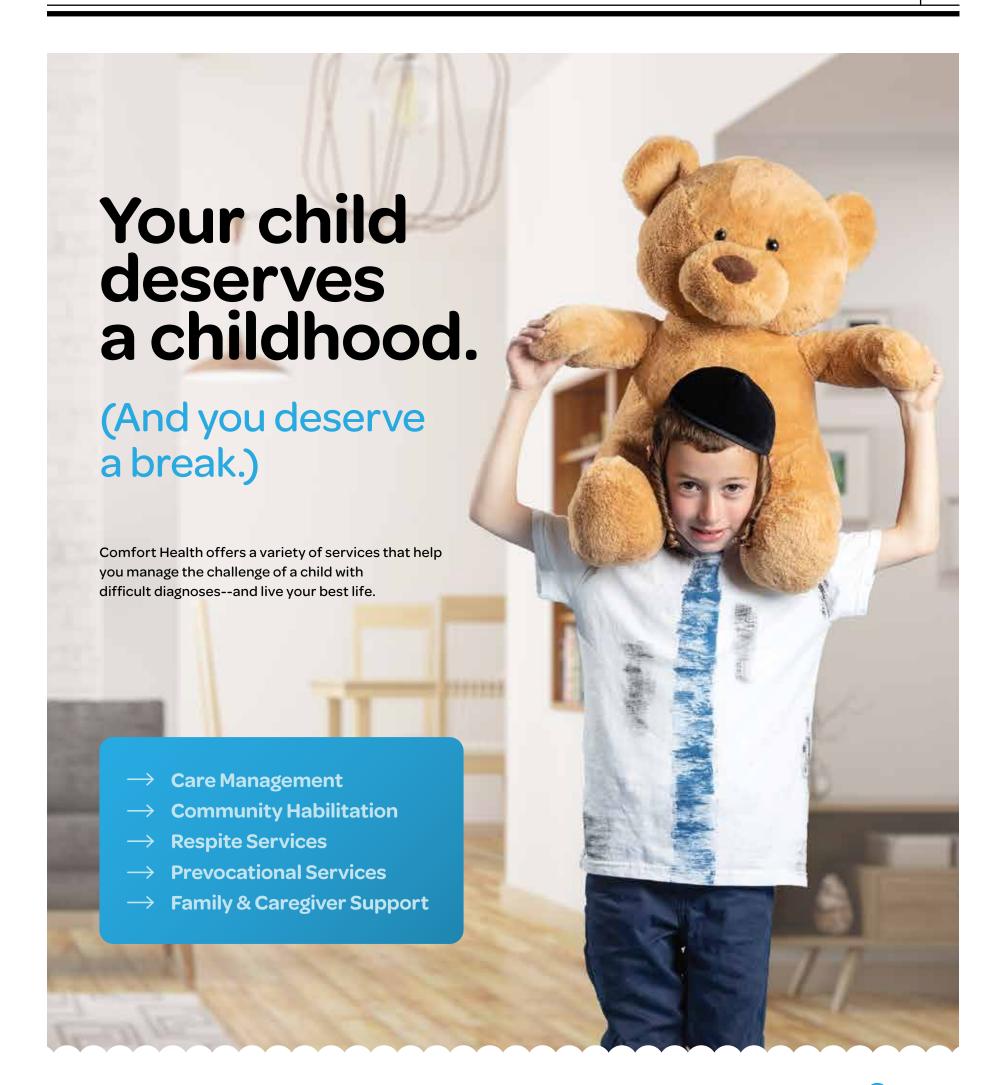
STUDY ASSOCIATES AUTISM IN CHILDREN WITH DIABETES, OTHER DISEASES

Lubbock, Texas — To help provide an insight into any possible link between autism spectrum disorder (ASD) and cardiometabolic diseases, researchers at Texas Tech University Health Sciences Center conducted a systematic review and meta-analysis.

The study reviewed 34 existing studies that included 276,173 participants who were diagnosed with ASD and 7,733,306 who were not. The results indicated that ASD was associated with greater risks of developing diabetes overall, including both type 1 and type 2 diabetes.

The research also established that children with ASD have an increased risk of obesity, and obesity has been linked to increased risks for cardiometabolic disorders such as diabetes and dyslipidemia (high level of cholesterol or fat in the blood).

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◆ ► HAMASPIK NEWS

Spectacular Session of Fun at Hamaspik of Orange County's Camp Neshoma After-School Respite (ASR) Program with Exciting Live Private Concert

Event at Hamaspik Terrace by Torah Tots Children's Entertainment Troupe Exclusively for Hamaspik's Individuals; Extensive Interaction Between Performers and Audience

Across the Hamaspik universe, the After-School Respite (ASR) Program remains one of the ever-growing agency's most popular community offerings.

Geared not so much for individuals with intellectual/developmental disabilities (I/DD) as it is for their parents, the program—as its name indicates—provides parents of such special-needs children several much-needed hours of respite time each school-day afternoon, as well as on any non-school day.

All across New York State wherever it is provided, or at least at Hamaspik, the After-School Respite program provides active, involved supervision and care of individuals with disabilities.

Instead of going home, participating students with disabilities are instead transported straight from school to their local ASR provider venue—which in this case would be the grand Hamaspik building at 1 Hamaspik Way in Kiryas Joel.

There, in several brightly-colored,



CIRCLE OF TORAH LIFE: IN FULL COSTUMED GEAR, THE TORAH TOTS JOIN HANDS IN LIVE SONG AND DANCE WITH HAMASPIK'S HAPPY CAMPERS

state-of-the-art classrooms and activity rooms, Hamaspik's ASR program and its elite staff cherry-picked from numerous applicants for that rare blend of professionalism, patience, maturity, flexibility and heart—puts its young charges first for the next several hours.

Because it operates when school is out, the ASR program—per New York State OPWDD regulations—also operates during the summer, when school is out on select days and weeks during that season.

As such, Hamaspik of Orange County has for years now operated a full-day (as opposed to an afternoon-only) ASR program during the summer—calling it Camp Neshoma.

In Kiryas Joel, home to Hamaspik of Orange County, Camp Neshoma is looked forward to eagerly—as is also the case in other Hamaspik locations—all year long by individuals with disabilities, who joyfully remember the exciting times they had the previous year.

And now, Camp Neshoma has spectacularly returned once again to Hamaspik of Orange County—with a spectacular kick-off event featuring no less than the popular Torah Tots children's educational entertainment troupe.

Taking on the Torah Tots

Camp Neshoma (and its programming) had been planned since Chanukah time by Hamaspik of Orange County's indefatigable and thoroughly dedicated pillar Mrs. C. M. Landau, a longtime special-events coordinator and lieutenant to primary Special Events Coordinator Brenda Katina. Besides

running Hamaspik of Orange County's long-running and equally successful Shnois Chaim community senior day program for years now, Mrs. Landau somehow regularly finds the time and energy to lend a critical hand to any number of Hamaspik special events.

Torah Tots is a multifaceted group that features several fronts in the field of Jewish children's education and entertainment. Their primary feature for which they are most known are their children's educational music albums, teaching eagers young listeners across the Jewish community all about the Torah, its Mitzvos (instructions), and the many holidays and customs that describe Jewish communal life.

The Torah Tots group also produces children's books, coloring books and several other themed items, all centered on their high-visibility animated Torahscroll mascots. But perhaps most popularly, Torah Tots also offers Torah Tots Live—a concert event for children in which costumed characters from their music albums and books—primarily Talmi, the larger-than-life Torah-scroll character—come to life and interact with audiences.

That extensive and delightful interaction was the red thread that ran through Torah Tots' entire recent Hamaspik appearance from start to finish, reports Mrs. Landau.

Over ten dozen children and adults with special needs—not counting their CONTINUED ON PAGE 13 >>



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● ► HAMASPIK NEWS

Spectacular

CONTINUED FROM PAGE 12

dedicated and trained Hamaspik Direct Support Professional (DSP) staff and others who were supportively on hand—were present in the spacious ballroom of the Hamaspik Terrace as the Torah Tots put on a show that had the youthful audience clapping and singing for joy.

That participation is not surprising, Torah Tots founder and creative driver Reuven Stone tells the *Gazette*, given that the special-needs population has been a large fan base of Torah Tots since its inception.

Besides having done many shows for Hamaspik over the years, Mr. Stone boasts a family member affected by disability, making his connection to the agency personal.

"We have a special bond," he says of working with Hamaspik, "and we want to accommodate."

Mr. Stone says the best part of doing a live show at Hamaspik is the agency's supervisors. "We've had very good experiences working with them," he says. "You can count on them to ensure that everyone is in the right place at the right time with the songs and dancing," especially at the end of each show. "There's real partnership and safety, but a lot of fun. They get everyone involved."

The high-energy live private visit was





PERSONALLY CONNECTING WITH THE TORAH (OR AT LEAST WITH A GUY DRESSED LIKE ONE): PERPETUATING MORAL ABSOLUTES CAN BE A FUN EXPERIENCE FOR CHILDREN, TOO!

intended to set the tone for the entire coming Camp Neshoma season, explains Hamaspik of Orange County's Shmaya Spitzer, Director of Day Services—in short, a kickoff event. With that much excitement in the air, the unspoken message to the "campers" here was to expect an equivalent level of excitement all summer long.

It's so much more than just the Torah Tots, adds Mrs. Landau—noting that legendary Jewish children's performer Uncle Moishy was also in the season-introducing lineup—along with a host of other high-octane activities that would keep "campers" adrenaline up all

summer long.

What did the individuals like the most about the show?

They liked the music and the way it conveyed the joy of a Torah-true life—
"when the music is booming and the Torah is dancing with real happiness"—
commented Mr. Spitzer.

"Interacting with the performers," responds Mrs. Landau. "It was very interactive. At the end of the day, they want to be included."

And included they were—as the Torah Tots, in character, sang their way through educational songs about the Jewish holidays, middos tovos (good

character traits like honesty, patience, kindness and forgiveness, for example) and, of course, the many Mitzvos of the Torah itself.

Individuals with disabilities were thus seen holding hands with the costumed performers, who stood before a stage at the front of the room that they had brought themselves—really a colorful backdrop emblazoned brightly in right-to-left Yiddish with the Torah Tots trademark branding.

Against that stimulating background, the Torah Tots group handled the individuals who kept flocking up to the stage with laudable sensitivity and understanding, dancing with them and gladly and repeatedly relinquishing their microphones to allow them to give voice to their feelings, participation and sense of belonging and inclusion.

In fact, for good long hours, though one trademark Torah Tots song after another, it was more of a concert *with* them than it was *for* them!

Camp Neshoma is all about igniting the soul within, placing secondary emphasis on the body and its external disabilities or "shortcomings."

And nowhere else was that spiritual value on active display—indeed, setting the theme for the entire coming season—than its opening concert event with the Torah Tots, where the audience itself brought down the house.

► HEALTH NEWS

Medicaid Coverage of—and Reimbursement for—Mental-Health Services Vary Widely by State, Finds Study

Psychiatrists Treating Medicaid Patients Reimbursed Least in Pennsylvania, Most in Nebraska

Portland, Oregon — Individuals on Medicaid, the federal healthcare program for people with low income, who need mental-health services may have better luck finding a good psychiatrist in some states over others, finds a recent study.

The research, by the Portland-based Oregon Health & Science University, found that many psychiatrists and other mental-health professionals in a number of states do not take patients with Medicaid simply because the program doesn't pay them enough.

The good news is that New York State is not one of them.

However, researchers found as much as a fivefold difference among states in Medicaid reimbursement rates.

The highest reimbursement rates were in Nebraska, Alaska and Arkansas. The lowest: Pennsylvania, Rhode Island



 $\textbf{NOT NECESSARILY A GOOD SIGN:} \ \texttt{MEDICAID PSYCHIATRY COVERAGE/REIMBURSEMENT VARIES}$

and Maine.

"We find that Medicaid reimbursement to psychiatrists for a common set of 20 frequently billed services varies across states and that on average, Medicaid pays about 80 percent of what Medicare pays for the same services," said lead researcher Dr. Jane Zhu, an assistant professor of medicine at Oregon Health & Science

University, in an interview with outlet *HealthDay*.

At the same time, a growing demand for help with depression, anxiety and substance use means many psychologists are unable to take on new patients, according to a 2022 American Psychological Association (APA) survey, *HealthDay* reported.

But low reimbursement rates are only one factor preventing people with low incomes from getting needed mental health care—a shortage of mental health professionals is another. Many who treat depression, anxiety and other mental health problems are swamped, resulting in long waits for appointments and plenty of patients who can pay for care out-of-pocket, *HealthDay* noted. This forces many who can't afford treatment to rely on emergency rooms for help when a crisis occurs.

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step in stemming deaths from opioid overdoses—specifically because people most at overdosing risk now have improved access to Narcan.

Still, medical and industry experts expressed caution about expanding access and its potential to address the overdose crisis, noting that an overdose is a symptom of a larger issue, not just a person needing an opioid reversal treatment.



IN MOVE AGAINST OPIOID
CRISIS, FDA APPROVES OVER-

THE-COUNTER NARCAN

Silver Spring, Maryland — The public now has a new weapon in the fight against the ongoing opioid overdose epidemic: over-the-counter (OTC) Narcan.

That means that anyone can now walk into participating retailers to purchase the product, which uses the active ingredient *naloxone* to stop an overdose emergency, much as epinephrine intercepts life-threatening allergy attacks.

The FDA decision was broadly praised by a wide array of medical association and public-health groups, which all called the approval a critical



OVERDOSE, MEET OVER-THE-COUNTER: RETAIL STORES CAN NOW SELL NARCAN

MEDICARE ANNOUNCES
NEW MODELS AND
SUPPORTS ACCESS
TO \$2 GENERIC
DRUGS

Bethesda, Maryland The Centers for Medicare Medicaid Services (CMS) rolled out new plans to help lower the high cost of drugs, promote accessibility to lifechanging drug therapies, and improve quality of care.

"Prescription drug prices in the U.S. are the highest in the developed world, resulting in affordability and access challenges," said

affordability and access challenges," said CMS Administrator Chiquita Brooks-LaSure.

"The prescription drug law is making lifesaving prescription drugs more affordable for millions of people who have Medicare."

The newplans will "lower prescription drug costs and improve access for people with Medicare and Medicaid, ranging from \$2 access to certain generic drugs to better deals for expensive new therapies," Ms. Brooks-LaSure said.

As part of the Inflation Reduction Act of 2022, Medicare will be able to negotiate lower prescription drug prices for beneficiaries.

PENTAGON STUDY FINDS
MILITARY PILOTS AND GROUND
CREWS HAVE HIGHER OVERALL
RATES OF CANCER

Arlington, Virginia — Keeping America's military aircraft up and running may be a high-flying career, but a study now shows it comes with a measurable health risk.

For the first time, a medical study—by the Pentagon itself, no less—has found that military pilots, and the ground crews who fuel, maintain and launch their aircraft, have high overall rates of cancer.

Inayearlongstudyofalmost900,000



SKY-HIGH: A STUDY FINDS FAR MORE CERTAIN CANCERS AMONG U.S. MILITARY PILOTS, CREW

service members who flew on or worked on military aircraft between 1992 and 2017, the Pentagon found that air crew members had an 87-percent higher rate of melanoma and a 39-percent higher rate of thyroid cancer.

Overall, the study found, air crews had a 24-percent higher rate of cancer of all types.

The data had long been sought by retired military aviators who have raised alarms for years about the number of air and ground crew members they knew who had cancer.

U.S. CANCER ORG. PUSHING FOR MORE MULTI-CANCER EARLY DETECTION TESTS (MCEDS)

Atlanta, Georgia — One of the reasons U.S. cancer treatment and prevention is still slow is because U.S. cancer treatment and prevention is largely based on a "one screening per cancer" approach.

In plain English, if medicine could develop a procedure that screens for several—or ideally, most or even all—cancers simultaneously, treatment and prevention would take a huge leap forward.

That's the gist of a recent editorial by Karen E. Knudsen, MBA, PhD, CEO of the American Cancer Society (ACS).

The editorial, in leading industry outlet *Health Affairs*, posited that if medicine could offer more multi-cancer early detection tests (MCEDs), more cases could be caught and counteracted earlier, making cancer much more of a treatable disease.

Lack of screening technology for various deadly cancers is one reason for the dearth of MCEDs, never mind the medicine that could detect those diseases early enough.

NEW STUDY CONFIRMS DIRE DOWNWARD SPIRAL IN PUBLIC-HEALTH OFFICES' STAFFING

Bethesda, Maryland — If you're a young, recently-trained public-health professional looking for your first career position out of school, your

prospects working for a local or state public-health agency aren't looking that bright, unfortunately.

That's because, according to a survey by the de Beaumont Foundation, a Bethesda, Maryland-based publichealth nonprofit, nearly half of all employees in state and local publichealth agencies left between 2017 and 2021—and, among those who in 2017 were age 35 or younger or had shorter tenures, about 75 percent had left by

De Beaumont's research, dubbed the Public Health Workforce Interests and Needs Survey (PH WINS), compared intent to leave or retire in 2017 with actual separations through 2021 among state and local public health agency staff.

The trend of public-health job departures is most attributable to low pay, according to the survey.

STUDY: MOST U.S. PATIENTS PREFER IMMEDIATE ONLINE ACCESS TO TEST RESULTS—EVEN IF BAD

Boston, Massachusetts — Researchers based at Beth Israel Deaconess Medical Center conducted a one-year survey of over 8,100 participating patients viewing results of recent medical tests online.

Participants were patients at hospitals in California, Colorado, Tennessee and Texas.

In reviewing results of the survey, which ran from April 2021 to April 2022, researchers found that about 90 percent of patients with normal test results—an overwhelmingly decisive margin—indicated preference for receiving results online via a patient portal over traditional printed reports or in-person doctor visits.

About 96 percent indicated preference for test results through the patient portal as soon as available, even if doctors hadn't yet reviewed them.

What's more, over 95 percent of those who received abnormal test results still reported preferring to continue to receive immediately released results through the portal.

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In the Know

Retinal detachment is a medical emergency. It describes an emergency situation in which a thin layer of tissue (the retina) at the back of the eye pulls away from its normal position.

Retinal detachment separates the retinal cells from the layer of blood vessels that provides oxygen and nourishment. The longer retinal detachment goes untreated, the greater the risk of permanent vision loss in the affected eye.

Warning signs of retinal detachment may include one or all of the following: the sudden appearance of floaters, flashes, and reduced vision. Contacting an eye specialist (ophthalmologist) right away can help save one's vision.

DEFINITION

Retinal detachment is an eye problem that happens when the *retina*, a light-sensitive layer of tissue in the back of the eye, is pulled away from its normal position at the back of the eye.

If only a small part of the retina has detached, one may not have any symptoms. But if more of the retina is detached, the patient may not be able to see as clearly as normal.

The symptoms of retinal detachment often come on quickly. If the retinal detachment isn't treated right away, more of the retina can detach—which increases the risk of permanent vision loss or blindness.

SYMPTOMS

Retinal detachment itself is painless. But warning signs almost always appear before it occurs or has advanced, such as:

- The sudden appearance of many floaters—tiny specks that seem to drift through the field of vision
- Flashes of light in one or both eyes (photopsia)
- Blurred vision
- Gradually reduced side (peripheral) vision
- A curtain-like shadow over the visual field

When to see a doctor

Seek immediate medical attention in case of experiencing signs or symptoms of retinal detachment: Retinal detachment is a medical emergency in which one can permanently lose vision.

CAUSES

There are three different types of retinal detachment: rhegmatogenous



THE LONGER RETINAL DETACHMENT GOES UNTREATED, THE GREATER THE RISK OF PERMANENT VISION LOSS.



(reg-ma-TODGE-uh-nus), tractional, and exudative.

Rhegmatogenous

This type of retinal detachment is the most common. Rhegmatogenous detachments are caused by a hole or tear in the retina that allows fluid to pass through and collect underneath the retina, pulling the retina away from underlying tissues. The areas where the retina detaches lose their blood supply and stop working, causing loss of vision.

The most common cause of rhegmatogenous detachment is aging. As one ages, the gel-like material that fills the inside of the eye, known as the vitreous (VIT-ree-us), may change in consistency and shrink or become more liquid. Normally, the vitreous separates from the surface of the retina without any complications—a common condition called posterior vitreous detachment (PVD). One complication of this separation is a tear. In other words, as the eye moves, the vitreous moves around on the retina without causing problems. But sometimes the vitreous may stick to the retina and pull hard enough to tear it. When that happens, fluid can pass through the tear and lift (detach) the retina.

As the vitreous separates or peels off the retina, it may tug on the retina with enough force to create a retinal tear. Left untreated, the liquid vitreous can pass through the tear into

the space behind the retina, causing the retina to become detached.

Tractional

This type of detachment can occur when scar tissue grows on the surface of the retina, causing it to pull away from the back of the eye. Tractional detachment is typically seen in people who have poorly controlled diabetes or other conditions.

Exudative

In this type of detachment, fluid accumulates beneath the retina, but there are no holes or tears in the retina. Exudative detachment can be caused by age-related macular degeneration, injury to the eye, tumors or inflammatory disorders.

Risk factors

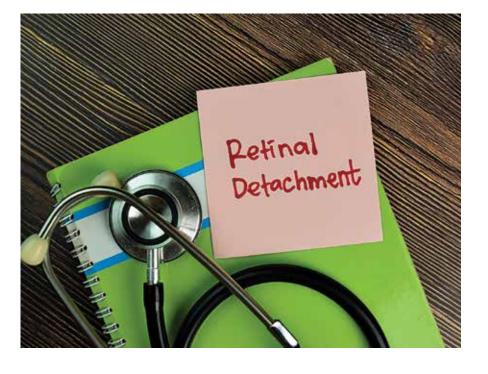
The following factors increase risk of retinal detachment:

- Aging—retinal detachment is more common in people over age
- Previous retinal detachment in one eye
- Family history of retinal detachment
- Previous eye surgery, such as cataract removal
- Previous severe eye injury
- Certain other eye diseases, including retinoschisis (when the retina separates into two layers) or lattice degeneration (thinning of the retina)



RETINAL DETACHMENT

Sources: Mayo Clinic, National Eye Institute (NEI), American Academy of Ophthalmology (AAO)



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- Glaucoma medications that make the pupil small (like pilocarpine) Other problems with the eyes may also put a patient at higher risk. These include:
- Diabetic retinopathy (a condition in people with diabetes that affects blood vessels in the retina)
- Need for glasses due to extreme nearsightedness (myopia), especially a severe type called degenerative myopia
- Posterior vitreous detachment (when the gel-like fluid in the center of the eye pulls away from the retina)
 Risk of retinal detachment from an eye injury can also be reduced by wearing safety goggles or other protective eye gear when doing risky activities, like playing sports.

DIAGNOSIS

First of all, diagnosing retinal detachment usually always begins with or otherwise revolves around the *dilated eye exam*, which grants the doctor a clear and unobstructed view of all areas of the eye.

If the eye doctor still needs more information after a dilated eye exam, the patient may get an ultrasound or an optical coherence tomography (OCT) scan of the eye. Both of these tests are painless and can help the eye doctor see the exact position of the retina.

The eye doctor may additionally use the following tests, instruments and procedures to diagnose retinal detachment:

- Retinal examination. The doctor may use an instrument with a bright light and special lenses to examine the back of the patient's eye, including the retina. This type of device provides a highly detailed view of the entire eye, allowing the doctor to see any retinal holes, tears or detachments.
- Ultrasound imaging. The doctor may use this test if bleeding has occurred in the eye, which would otherwise make it difficult to see the retina.

The doctor will likely examine both eyes even if symptoms are only being reported in one. If a tear is not identified at this visit, the doctor may have the patient return within a few weeks to confirm that the eye has not developed a delayed tear as a result of the same vitreous separation. Also, if new symptoms are experienced, it's important for the patient to return to the doctor immediately.

TREATMENT

If one experiences symptoms of retinal detachment, see an eye

doctor or emergency room right away. Retinal detachment can cause permanent vision loss—but getting treatment right away can help protect vision.

Surgery is almost always used to repair a retinal tear, hole or detachment. Various techniques are available. Ask the ophthalmologist about the risks and benefits of each treatment option. Together, doctor and patient can determine what procedure or combination of procedures is best.

Treatment for retinal detachment works well, especially if the detachment is caught early. In some cases, the patient may need a second treatment or surgery if the retina detaches again—but treatment is ultimately successful for about nine out of ten people.

Retinal tears

When a retinal tear or hole hasn't yet progressed to detachment, the eye surgeon may suggest one of the following procedures to prevent retinal detachment and preserve vision:

- Laser surgery (photocoagulation).
 The surgeon directs a laser beam into the eye through the pupil.
 The laser makes burns around the retinal tear, creating scarring that usually "welds" the retina to underlying tissue.
- Freezing (cryopexy). After giving the patient a local anesthetic to numb the eye, the surgeon applies a freezing probe to the outer surface of the eye directly over the tear. The freezing causes a scar that helps secure the retina to the eye wall.

Both of these procedures are done on an outpatient basis. After the procedure, the patient will likely be advised to avoid activities that might jar the eyes—such as running—for a couple of weeks or so.

Retinal detachment

If the retina has detached, the patient will need surgery to repair it, preferably within days of a diagnosis. The type of surgery recommended will depend on several factors, including how severe the detachment is.

• Pneumatic retinopexy (RET-ihno-pek-see): In this procedure, the surgeon injects a bubble of air or gas into the center part of the eye (the vitreous cavity). If positioned properly, the bubble pushes the area of the retina containing the hole or holes against the wall of the eye, stopping the flow of fluid into the space behind the retina. The doctor also uses cryopexy during the procedure to repair the retinal break. Fluid that had collected under the retina is absorbed by itself, and the retina can then adhere to the wall of your eye. The patient may need to hold his or her head in a certain position for up to several days to keep the bubble in the proper position. The bubble eventually will reabsorb on its own.

- Scleral (SKLAIR-ul) buckling: This procedure involves the surgeon sewing (suturing) a piece of silicone material to the white of the eye (sclera) over the affected area. This procedure indents the wall of the eye and relieves some of the force caused by the vitreous tugging on the retina. If the patient has several tears or holes or an extensive detachment, the surgeon may create a scleral buckle that encircles the entire eye like a belt. The buckle is placed in a way that doesn't block the vision, and it usually remains in place permanently.
- Vitrectomy (vih-TREK-tuh-me). In this procedure, the surgeon drains and replaces the fluid in the eye by removiong the vitreous along with any tissue that is tugging on the retina. Air, gas or silicone oil

the risks of surgery for detached retina:

- Eye infection
- Bleeding in the eye
- Increased pressure inside the eye, which can lead to glaucoma
- Cataract, when the lens in the eye becomes cloudy
- Need for a second surgery
- Chance that the retina does not reattach properly
- Chance that the retina detaches again

PROGNOSIS

Retinal detachment may cause loss of vision. Depending on the degree of vision loss, a patient's lifestyle might change significantly.

Patients may find the following ideas useful as they learn to live with impaired vision:

Get glasses. Optimize remaining vision with glasses that are specifically tailored for the patient's eyes. Request safety lenses to protect the better-seeing eye.

Brighten your home. Have proper light in your home for reading and other activities.

Make your home safer. Eliminate



SURGERY IS ALMOST ALWAYS USED TO REPAIR A RETINAL TEAR, HOLE OR DETACHMENT. VARIOUSTECHNIQUES ARE AVAILABLE. ASK ABOUT RISKS AND BENEFITS OF EACH TREATMENT.



is then injected into the vitreous space to help flatten the retina. Eventually the air, gas or liquid will be absorbed, and the vitreous space will refill with body fluid. If silicone oil was used, it may be surgically removed months later. Vitrectomy may be combined with a scleral buckling procedure.

After surgery, a patient's vision may take several months to improve. A patient may need a second surgery for successful treatment. Unfortunately, some people never recover all of their lost vision.

Surgery risks

All surgery has risks of problems. But if a detached retina is not treated, eyesight could be quickly and permanently lost. Here are some of throw rugs and place colored tape on the edges of steps. Consider installing motion-activated lights.

Enlist the help of others. Tell friends and family members about your vision problems so they can help you.

Get help from technology. Digital talking books and computer screen readers can help with reading, and other new technology continues to advance.

Check into transportation. Investigate vans and shuttles, volunteer driving networks, or ride shares available in your area for people with impaired vision.

Talk to others with impaired vision. Take advantage of online networks, support groups and resources for people with impaired vision.

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Mr. Yehuda Spangelet is the director of day services at Hamaspik of Kings County, and the force behind Achoiseini camp. His drive to bring the very best care and services to every individual is what gives the program the ability to reach new heights every summer.

Mrs. Esther Taub, director, and Mrs. Esty Sperber, assistant director are the passionate and dedicated duo who run Achoiseini's year-round program as well as its summer camp. Their constant focus is on helping individuals acquire life skills and employment skills, enabling them to use their time in a meaningful, enjoyable way, and on bringing them a program of the highest standards.

Mrs. Chani Klar, program director, and Mrs. Rivky Eisen, staff program director, draw on their year-round experience as teachers at the Achoiseini Academy to create a "wow" summer program that's designed specifically for the individuals of Achoiseini. Their creativity, exuberance, and warmth make the camp the incredible success that it is.

It Takes a Year to Make a Summer

Behind the Scenes with Achoiseini Camp Directors

What does it take to create a memorable, incredible summer experience?

Achoiseini director, Mrs. Esther Taub, shares that the preparation goes on year-round.

"We begin talking about next year's camp as soon as we get home," she says. "We discuss what went well, what could be even better, how we'd like to do things next time." While compiling feedback is best done immediately after camp ends, when memories are fresh, preparations "in

earnest" begin after Chanukah.

Achoiseini is a full summer, eight-week program run on the grounds of Camp Chaya Sura (a mainstream girls' camp). In camp, the girls of the Achoiseini Academy day hab enjoy a fabulous summer experience together while practicing real-life skills.

"The skills-building isn't intense, it just comes along naturally," Mrs. Chani Klar, program director, explains. "The program is all about fun: games, trips, activities, entertainers, sports... you name it.

"And along the way, the girls learn about friendship, getting along when sharing living quarters for an extended period of time, integrating within the camp at mealtimes and for certain events... it's a natural way to build life skills."

Every game and activity is a learning experience. How to compete in a friendly way, how to collaborate CONTINUED ON PAGE 19 >>

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with a team, how to lose with a smile. And there are also essential skills for daily living, such as sorting laundry and keeping the bunkhouse clean.

"Last year, we placed a big emphasis on a pleasant environment, coaching, and guiding the girls to keep their bunkhouse neat. They worked on making their beds — some knew how to do so before the summer, and some didn't, but by the end of the program, every girl knew how, and was doing it every day."

It's the staff who truly make the program, and as with everything else at Hamaspik of Kings County, Mrs. Taub puts tremendous time and effort into hiring the "best of the best". Each counselor is handpicked and works one-on-one with the girls to ensure that every camper has an amazing time.

Alongside hiring, there's a lot of coordination and paperwork to be done: making sure the timing of the program fits with that of the host camp; creating medical files with insurance cards and medical records; organizing timing of transportation for luggage, campers, and staff.

"There's a weekend break between the two halves of the summer, for the girls to go home and renew their energy, and for staff that's leaving or arriving to switch over and get acclimated, so there's the logistics of transportation and scheduling.

"There are things that seem like small details, but nothing's minor when it comes to making sure a program runs smoothly," Mrs. Taub says. "We set up a laundry service, order any supplies needed for the program, make sure to have any prescription medications the campers need — there is a lot involved."

THEMED FUN

And then there's the program itself. Achoiseini camp has a jam-packed, fun-filled program each and every day, and, in true camp fashion, has a theme as its centerpoint.

"Last year's theme was shoes, and every day we 'broke out' the daily theme, which was a type of shoe," Mrs. Klar says. "For example, rain boots, high heels, roller skates, sneakers.

rainboots day included water activities, trampoline shoes was a trip to Urban Air, and on loafers day we did baking-related activities. We also gave out Jibbitz accessories each day, matching the day's theme, so the girls had an entire collection by the end."

Achoiseini camp program is chock-full of fun and excitement. There are trips, songs, kumzitzes, and of course, lots of pool time, projects, crafts, and sports.

the lead role in projects and

"By the time the end of the first half rolled around, every single one of them wanted to stay! They were begging me to have the job for another month"

activities. For example, last year one highlight was creating a carnival for another camp — with the Achoiseini girls preparing and manning the booths.

"During the year, we help the girls get jobs, and last year many of them wanted to have 'jobs' in camp, too," Mrs. Taub says. "So we arranged this for them as well. Some worked in the canteen during rest hour, another was a babysitting assistant. This was a really big deal for them, giving them a confidence boost and helping them continue growing in their vocational skills and education."

Achoiseini camp enjoys superb activities and trips. Last year's program included a horse-and-buggy ride, a trip to a castle, a visit to a water park, and more. Other activities are on the campgrounds themselves, such as an inflatable water slide and a foam bubble pit.

"Everything is fun — even exercise is done with a song, or as water aerobics in the pool," Mrs. Klar says. "And every girl gets a chance to shine! At Achoiseini camp it's all about the girls, their needs, and each of them having an opportunity to enjoy what they love most."

HIRE TO INSPIRE

There are two non-negotiables when it comes to hiring staff, according to Mrs. Taub.

Firstly, they need to know the field of special education, and have experience — whether from having volunteered with children with special needs, or having worked in a summer program before. That's crucial.

But just as important is the Yiddishkeit factor. Achoiseini camp hires girls who adhere to the high standards of the program, and as per Hamaspik of Kings County's standards, Mrs. Taub is extremely particular in the hiring process to ensure this.

"It's hard to say 'no' to an amazing, experienced applicant, and it's hard to disappoint a great girl, but as a member of the Hamaspik of Kings County family, we have certain standards, and we have the responsibility to uphold them. I'd rather have to work harder and take more time hiring staff, to make sure that every girl who comes feels comfortable in the environment," she says.

While the camp experience centers on the campers, at Achoiseini, the staff is treated to their own fabulous program each night. It's a show of appreciation for these devoted counselors who bring infectious fun, laughter, and smiles along with them as they help their one-onone camper throughout the day. And the Achoiseini directors spare no effort to make this night program new, exciting, and special.

"We have a different activity each night of the week," Mrs. Rivky Eisen, staff program director, says. "Each week, there'll be one trip, one guest speaker, one craft, one entertainer, and one game or activity with great food."

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The staff program is almost like a "mini camp" of its own, with a theme song and a meaningful theme that ties in with the main Achoiseini camp theme. For example, last year's Shoes theme meant a corresponding theme for counselors, with the slogan "Perfect Fit" to sum up the experience. Each counselor is a perfect fit for her camper, and truly gives it her all!

And the counselors love the experience.

"Last year was the first time we ran through the entire summer — until then, we'd gone for one month," Mrs. Taub says. "When I hired, many counselors didn't want to commit to the full program, so I hired other counselors for the second half. But by the time the end of the first half rolled around, every single one of them wanted to stay! They were begging me to have the job for another month."

Mrs. Taub couldn't do that, since she had a full new staffarriving for the second half. But this summer, almost every counselor is staying the full two months.

"They love the experience, and have an amazing time," Mrs. Taub says.

And that's truly a win-win, because they give their campers the most incredible experience as well.

At the end of the summer, each girl received her own USB with all the photos taken at camp, so she can look back and enjoy the memories all year round. And the girls love reminiscing about their summers at camp, the glow lingering long after the buses pull out.

"It's all about having fun, letting go, and enjoying themselves," Mrs. Klar says. "We're here to make them happy, bring out their inner joy. And the huge smiles on the girls' faces make everything worthwhile."

The combination of fun, meaning, growth, and lasting friendships that we find at Achoseinu Camp are a perfect example of what Hamaspik of Kings County stands for, and it is what makes us so proud of this wonderful summer program.

An Interview with Mr. Spangelet

"In the past, Achoiseini Academy, our women's Day Hab program, ran throughout the summer," Mr. Yehuda Spangelet, director of day services at Hamaspik of Kings County, says. "The individuals who go there have always wanted to go to camp, to have the experience that other girls have. So a few years ago, with the encouragement and full support of Hamaspik of Kings County's Executive Department, we decided to try and make it work."

The first step was looking into options for how the program could be run. "After research and discussion, we saw that the best option would be to integrate Achoiseini camp as a bunk in a mainstream camp, so that they could enjoy the full experience of a "regular" camp. So then it was time to find a suitable camp to accommodate our program and give the girls the most amazing, positive experience — and Mrs. Sperber, Achoiseini assistant manager, took on the task of finding one."

Camp Chaya Sura became that host camp, and after three summers where the program ran for a month, Achoiseini camp is now in its second year of running for the entire summer.

And it has been a resounding success.

"The girls loved it and the host camp really accommodated our program — which is really a 'camp within a camp,' with its own staff, theme, daily activities, and so on," says Mr. Spangelet. "For example, Achoiseini camp has a program called Shabbos Buddies in which girls from Chaya Sura partner up to spend time on Shabbos afternoon with an Achoiseini camper. There's a waiting list of Chaya Sura girls who want to be partners on their Shabbos break!"

Achoiseini camp may be already in its fifth year, but each year requires intensive preparation. "We start by creating an outline of the program and basic logistics," Mr. Spangelet says. "There are lots of decisions involved."

Once the "basics" are in place, it's time to prepare every aspect of the day-to-day program. "Mrs. Taub and Mrs. Sperber work on this around the clock for weeks and weeks, starting the day that camp is over until the last minute before the next year's season begins," Mr. Spangelet says. "Also during the program, they are there for every last detail, ensuring that things run smoothly. Camp is 24/7, and both the campers and the counselors are our achrayus — and the Achoiseini directors do a fantastic job of caring for all of them, giving them the best summer possible."

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WARNING AGAINST DISPOSABLE DUODENOSCOPE PARTS ISSUED BY FDA

Washington, D.C. — Duodenoscopes are cameras mounted in the tips of long snake-like lines. Inserted through the mouth and threaded down to the small intestine, duodenoscopes give doctors a literal inside look at patients' digestive systems and allow far more precision medicine. They are used in about 500,000 procedures a year in the U.S.

However, the devices—which are difficult to sterilize after each use—are highly susceptible to harboring bacteria, making them a leading source of bacterial spread in hospitals.

Part of that problem was solved with the adoption of disposable components, which were simply trashed, not cleaned, after a single use. But now, the FDA has warned that the disposable parts pose another threat to patients: falling or breaking off inside patients' bodies, where they can cause internal bleeding or worse.

FOR BARIATRIC SURGERY, TELEMEDICINE PREP AS GOOD AS IN-PERSON CARE

Pittsburgh, Pennsylvania — Getting prepped for certain surgical procedures doesn't need to be done while the patient is actually in the

hospital, finds a new study.

In fact, patients getting their preoperative care via telemedicine, or live audio-video connection, had similar clinical outcomes to those who had in-person care, the study found.

Among nearly 1,200 patients preparing to undergo bariatric surgery, telemedicine was found to be no worse than in-person care for the following factors: operating room delay; procedure duration; length of hospital stay; major adverse events, ER visits within 30 days; or hospital readmission within 30 days.

"The advantages of telemedicine with regards to patient cost and time savings may facilitate accessibility to bariatric surgery, especially for the underserved," wrote the University of Pittsburgh researchers in JAMA Network Open.

WITH PURCHASE OF NATIONAL DOCTOR COMPANY, CVS MOVING CLOSER TO REINVENTING HEALTHCARE

Woonsocket, Rhode Island — With national retail pharmacy giant CVS Health recently acquiring Signify Health for \$8 billion, industry leaders feel that the move is another indication of the industry's shift toward retailbased, home-based and data-driven individual healthcare.



GET VIRTUALLY READY FOR BARIATRIC SURGERY: UNIVERSITY OF PITTSBURGH RESEARCH FINDS THAT ONLINE PATIENT PRE-SURGERY PREP IS JUST AS GOOD AS THE REAL THING



LOOK CLOSER: CVS' MOVES MEAN CHANGE

Which one day could even mean a CVS-branded hospital, opined HonorHealth chief innovation officer Kiran Avancha, PhD, speaking to industry outlet *Becker's Healthcare*.

As Dr. Avancha explained it, with CVS now owning Signify, which employs 10,000 clinicians across all 50 states who spend twice as long with patients as in-office primary care providers, CVS is developing its own medical ecosystem in which patients—and their data—are seamlessly transferrable from retail pharmacy services to walk-in clinics to home health care and more.

FAMILIAR OR PREFERRED OR STAFF, FASTER JOINT REPLACEMENT SURGERIES

Stanford, California — Analyzing the results of 641 arthroplasty (joint replacement) surgeries at a college-affiliated hospital, researchers at the California-based Stanford Health Care found that the greater the turnover in in operating room (OR) staff, the lower the efficiency of arthroplasty surgery.

The analysis looked at 641 total joint arthroplasties performed by five surgeons at a tertiary academic medical center in the Stanford Health Care network, with 279 being total hip arthroplasties (THAs) and 362 total knee arthroplasties (TKAs).

The researchers found that with THAs, turnover among circulating nurses correlated with an increase of nearly 20 minutes in surgery duration.

For the TKA procedure, that increase was just under 15 minutes.

Conversely, when a preferred or familiar anesthesiologist or surgical technician was part of the OR team instead of a rotating student visitor, surgery duration for THAs decreased by 26 minutes. The average decrease for TKAs was nearly 30 minutes.

NEW YORK CITY PUBLIC HOSPITAL SYSTEM PLANNING NEW \$30 MILLION HOSPITAL IN FAR ROCKAWAY

New York, New York — The NYC Health + Hospitals public health system newly announced plans to build a \$30 million hospital to service the Queens neighborhood of Far Rockaway.

The new health center will be located at 1720 Village Lane in Far Rockaway. It is expected to open in 2025.

The new site will offer primary care and specialty care, including women's health, vision, behavioral health, dental, podiatry, and imaging services.

The health system's Board of Directors approved a proposal to sign a 32-year lease for the 22,000 square foot site. The City of New York contributed \$30 million to cover the cost of outfitting the space.

The planned new hospital is part of the New York City Economic Development Council (NYCEDC)'s "Downtown Far Rockaway Roadmap for Action" and Mayor Eric Adams' "Rebuild, Renew, and Reinvent: A Blueprint for New York City's Economic Recovery."

CONGRESS GRILLS HOSPITAL INDUSTRY EXPERTS OVER COMPLIANCE WITH PRICE TRANSPARENCY RULE

Washington, D.C. — In 2021, a law passed that requires hospitals to publicly post their care costs on their websites.

In actuality, though, compliance has been slow coming—and recently, members of the House's Energy and Commerce Committee's health subcommittee grilled experts on how to get more hospitals in line with the rule requiring them to share pricing data.

The law requires hospitals to put data online in an easy-to-understand format so consumers can price shop, but industry experts testifying before Congress provided obtuse responses.

The federal Centers for Medicare & Medicaid Services (CMS) has warned nearly 500 hospitals about their compliance with price transparency regulations and recently raised the fee for noncompliance from more than \$100,000 a year to more than \$2 million per hospital.

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Reliving the Past to Reinforce the Present

A Look at Reminiscence Therapy and how it's Used to Help Senior Patients With Dementia or Other Memory-Affecting Conditions

When beloved Bubbies and Zaidies are affected by Alzheimer's or other such mind-robbing conditions, they may no longer be able to remember what they did yesterday—but they sure recall what they did yesteryear. Reminiscence therapy can help.

This therapeutic discipline is based on the scientific fact that, in patients with dementia, while the short-term memory may be failing, long-term memory actually still works surprisingly well in many cases.

Reminiscence therapy was invented in the 1960s as a discipline that uses largely-intact long-term memories to help empower seniors with dementia, as well as their caregivers. It uses sight, sound, smell, touch and taste to trigger long-term memories in beloved seniors—in turn giving seniors not just something to talk about but something to feel in control about, which is very important for seniors with dementia who tend to feel they've lost their place of dignity in this world.

Reminiscence therapy can give seniors with dementia a feeling of success and confidence because it's something they're still able to do. It also gives them the opportunity to share something meaningful instead of just listening to others talk.

For example, reminiscence therapy would have a caregiver show a beloved Zaidy a photo of his childhood home—prompting a stream of recollections. A caregiver might also sing Zaidy's

father's *Shir HaMaalos*, taking Zaidy back to his youthful years. A caregiver could bake Bubby's brownie recipe (which she got from her own mother), letting her sniff that evocative aroma that speaks volumes. Of course, tasting a freshly-baked slice would have the same empowering effect.

Finally, the caregiver could bring out a vintage outfit, letting Bubby or Zaidy touch and feel it to bring back memories—and that sense of importance and well-being. (Other familiar *tactile*, or touch-based activities include drawing, painting, pottery, knitting, sewing, or other crafts.)

The positive feelings gained from sharing pleasant memories can

decrease stress, boost mood, reduce agitation, and minimize challenging behaviors like wandering, anger, or defiance. Such happy memories also helps such seniors cope with stress.

If a painful or unhappy memory surfaces during reminiscence therapy, it's important to respond with kindness and understanding. Depending on the senior's personality, you might want to listen and offer support, or gently steer away to a happier memory so he or she won't be stuck in a sad, distressed state.

For best results, plan for the time of day when they're most interested in activities, and choose a quiet, comfortable location where they'll be able to hear and see you well.

● ► HEALTH NEWS

New Form of Omega-3 May One Day Prevent Vision Loss Due to Age, Disease

Chicago, Illinois — Medicine has long known that various diseases come with lower levels of DHA in the eyes, resulting in diminished vision.

Docosahexaenoic acid (DHA) is a main ingredient of the supplement omega-3, a fatty acid commonly found in fish.

However, the DHA in the omega-3 fish oil capsules you buy at your local health-food or vitamin store is a kind of DHA called *triacylglycerol* (TAG) DHA—which cannot enter the eyes.

This is because TAG-DHA cannot travel from the bloodstream into the retina.

But now, for the first time, researchers have developed a new form of DHA that is in fact capable of crossing into the eye's retina—at least in the lab mice they worked with.

For their study, researchers at the University of Chicago created a new kind of DHA called *lysophospholipid* (LPC) DHA. In lab tests, LPC-DHA successfully increased DHA in mouse retinas and reduced mouse eye problems associated

with Alzheimer's-like processes.

Once a number of safety issues are resolved, the researchers plan on conducting their first trial of LPC-DHA on people.

How LPC-DHA would work

In healthy eyes, DHA is concentrated in the retina, where it helps maintain photoreceptors, the cells that convert light into signals that are sent to the brain.

Deficient levels of DHA in the retina are associated with vision loss. People with AMD (Age-related macular degeneration), Alzheimer's, diabetes and other diagnoses also frequently have low levels of retinal DHA, resulting in diminished vision.

But boosting retinal DHA levels has been medically challenging, as DHA must first be absorbed from the intestine into the bloodstream and then cross from the bloodstream into the retina.

The researchers tested their LPC-DHA supplement in mice bred to exhibit processes similar to those found in early-

onset Alzheimer's. After six months, mice that were fed LPC-DHA daily showed a 96-percent improvement in retinal DHA content. In contrast, TAG-DHA supplements had no effect on retinal DHA levels.

"Dietary LPC-DHA is enormously superior to TAG-DHA in enriching retinal DHA and could be potentially beneficial forvarious retinopathies in patients," said Sugasini Dhavamani, a research assistant professor in the Department of Medicine at the University of Illinois at Chicago, in a press release. "This approach provides a novel therapeutic approach for the prevention or mitigation of retinal dysfunction associated with Alzheimer's disease and diabetes."

Dr. Dhavamani presented her research at Discover BMB, the recent annual meeting of the American Society for Biochemistry and Molecular Biology.

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Call Hamaspik HomeCare's Intake Dept. directly at

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- The Homecare Agency that keeps me safe 24 hours a day -

