



The Hamaspik Gazette

News of NYSHA
Member Agencies
and General Health

SEPTEMBER '23 • ISSUE NO. 215



GAZETTE SURVEY

The GAZETTE asks YOU:

HAVE YOU HAD AN INGROWN TOENAIL?

A: YES; A: NO

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



HEALTH STAT

NUMBERS ON THOSE DIGITS

Basic stats on ingrown toenails in the U.S.

Ingrown nail prevalence	2.5 to 5%
Female-to-male case ratio	2 to 1 (approx.)

Source: Journal of Dermatology, Dec. 2018



HEALTH TIP

PUT THAT FOOT DOWN ON PUTTING THE RIGHT SHOES ON

Most ingrown toenails occur due to footwear, mostly from the women's shoe-store shelves, compressing the toes (esp. the big toe). To prevent this condition, replace fashionable with functional—your feet will thank you for it.

Source: American Podiatric Medical Association (APMA)

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LOCAL PUBLIC SERVANTS JOIN NYSHA AGENCY STAFF IN INAUGURATING THE BRAND-NEW OUTDOOR PARK AT THE HAMASPIK RESORT, BENEFITING THE NUMEROUS ON-SITE PROGRAMS, INCLUDING CAMP MAMTAKIM



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Services Provided by NYSHA MEMBER AGENCIES

OPWDD SERVICES

INDIVIDUALIZED RESIDENTIAL ALTERNATIVE (IRA)

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

INDIVIDUALIZED SUPPORT SERVICES (ISS)

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

HOME FAMILY CARE (HFC)

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

DAY HABILITATION (DH)

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

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

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

COMMUNITY HABILITATION (CH)

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

COMMUNITY PRE VOCATIONAL

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

SUPPORTED EMPLOYMENT (SEMP)

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

FAMILY SUPPORT SERVICES (FSS)

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

INTENSIVE BEHAVIORAL SERVICES (IBS)

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

RESPIRE:

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

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

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

Sundays: Respite program provided every Sunday.

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

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

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

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

SELF-DIRECTION

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

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

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

ARTICLE 16 CLINIC

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

PARENTAL RETREATS

Providing: Getaways and retreats for parents of individuals with disabilities

EMOD, VMOD AND ASSISTIVE TECHNOLOGY

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

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

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

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

DOH

EARLY INTERVENTION (EI)

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

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

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

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

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

NURSING HOME TRANSITION AND DIVERSION (NHTD)

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

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

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

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

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

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

TRAUMATIC BRAIN INJURY (TBI)

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

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

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

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

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

SOCIAL DAY PROGRAM

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

SENIOR DINING PROGRAM

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

HAMASPIK CHOICE

MLTCP:

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

HMO/INSURANCE

ABA

Behavior modification services for children with autism.

Social Group: ABA service delivered in a group setting.

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

HAMASPIK HOMECARE

LHCSA

Licensed HomeCare Services Agency.

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

NHTD/TBI Home & Community Support Services (HCSS): Our HCSS Certified Aides assist those enrolled in the NHTD or TBI Medicaid Waiver Programs with oversight and supervision, in addition to personal care services.

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

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

CDPAS/CDPAP: CONSUMER DIRECTED PERSONAL AIDE SERVICES/PROGRAM

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

NYS HCR

ACCESS TO HOME

Providing home modifications for people with physical disability.

RESTORE

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

US AND NYS AGRICULTURE

CHILD AND ADULT CARE FOOD PROGRAM (CACFP)

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

NYSED SERVICES

ACCESS VR

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

PATHWAY TO EMPLOYMENT

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

NYSHA

THE HAMASPIK GAZETTE

Providing: A bilingual monthly newspaper keeping the community up-to-date on all major news in medicine, public health, disability, hospitals, senior care, and general Hamaspiik news.

MAMTAKIM

A summer camp for individuals approved for OPWDD services.

BOE

THE HAMASPIK SCHOOL

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

KINDERVILLE

A summer camp for individuals approved for OPWDD services.

OMH

SIPUK, ARTICLE 31 CLINIC

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

OMH/DOH

ADULT HEALTH HOME CARE MANAGEMENT SERVICES

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

CHILDREN HEALTH HOME CARE MANAGEMENT SERVICES

Intensive, comprehensive care management for children ages 0-21 with chronic condition(s) and/or mental health issues at greater risk for relapse and/or lack of care

ADULT HCBS SERVICES

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

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

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

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

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

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

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

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

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

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

CHILDREN HCBS SERVICES

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

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

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

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

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

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

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

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

● ► TRI-COUNTY CARE NEWS

Care Manager Leads Teamwork and Paperwork to Secure Legal Guardianship Needed for Individual's Surgical Treatment

'Just doing my job,' say Tri-County Care staff member

If you're a Care Manager with Tri-County Care (TCC), and an individual you care for (on your roster of several dozen such individuals) needs major invasive surgery for urgent life-improvement needs, of course you're going to go all out to secure that surgery.

If that individual is a legal minor under 18, the individual cannot legally consent to that medical treatment—leaving it to the legal guardian, usually meaning father or mother, to sign off on said. But if that individual is a legal adult over 18, the individual can in fact consent—unless functionally incapable of making objective best-interest medical decisions. In such cases, a legal guardian would be required.

Which is why a TCC Care Manager found himself getting a crash course in legal guardianship—learning on the job, from several experts, exactly how to get an individual in need covered.

The agency, and the specific Care Manager, had been faced with the unique situation of an individual under 18 not

living with biological family when major surgery became a need. (For maximum anonymity per family request, as few details as possible are being specified.)

As mentioned, the individual normally would have parents or other such legal guardians sign off on the surgery, being under 18 as the individual was at the time.

Here, however, the individual would be turning 18 just days before the planned surgery—rendering the individual a legal adult. Hence, informed consent, including a signature, would be required.

However, the individual's intellectual disability made an informed decision or consent impossible, at least legally speaking, which necessitated a legal guardian. The hospital's surgical staff would have it no other way, and insisted on it, in fact. That's where complications began.

Now a legal guardian would have to be used to sign off on the surgery. But first, someone would have to be appointed

legal guardian. And to appoint someone a legal guardian, a wealth of paperwork and legal procedures would be needed.

Well, Tri-County Care got right to work.

One of the first problems was that chief among the needed documents was a birth certificate. Compounding that problem was the fact that the individual did not have an original birth certificate, simply because the individual had not been residing with biological birth family for years now, rendering that document lost for good in the shuffle somewhere. A new one would be needed—but the process of getting a new one through official state bureaucracies would take weeks at the earliest, and here the surgery was looming.

So, thanks to informed administrative staff, the Care Manager and his supervisor learned of a state Office of Vital Records location where appointments could be made at practically the last minute and at which

new birth certificates could be obtained in as little as two days.

For the individual in question, that meant calling in the legal cavalry. This would secure him that birth certificate needed so that a biological family member could become the individual's legal guardian. Attorney Jacob Naoulou of the Schulman Law Group was referred to Tri-County by Brooklyn's venerated United Jewish Organization (UJO), a capable non-profit group. In turn, Mr. Naoulou brought in two capable functionaries of the upstate-based Mental Health Association of Orange County, Anne Klingner and Sandy Schwartz.

At the end of the day, the individual got a legal guardian—and the surgery successfully proceeded as planned.

The Care Manager in this case, who also asked not to be identified, humbly deflects when asked about the success. "It's just my job," he asserts. "I have 30 individuals under me"—meaning, what I do for one I do for all. ★

● ► HEALTH NEWS

New York Congressman Wants More Defibrillators on U.S. School Campuses

Washington, D.C. — When someone has a heart attack, in which blood flow to the heart is impaired or blocked, they have a fairly good chance of survival if emergency medical care is provided promptly.

But when someone suddenly goes into cardiac arrest, in which the heart simply stops and the patient ceases breathing, it's a far greater emergency—without immediate emergency care within minutes, the patient will simply die.

Following a high-profile case of cardiac arrest in a young and healthy person in the past year in front of a national audience, national interest spiked in *automated external defibrillators* (AEDs), or devices that electric-shock a stopped heart back to a healthy pulse.

Now, New York State's very own Rep.

Brian Higgins, a U.S. Congressman for the state's 26th District representing Western New York, is one of the drivers of the Access to AEDs Act.

As originally cosponsored by Higgins, the legislation would increase training and availability of AEDs on U.S. school campuses. The bill was introduced during a news conference on Capitol Hill led by the American Heart Association and Congresswoman Sheila Cherfilus-McCormick, (D-FL-20). The conference was also attended by a number of athletes

and public servants.

"This legislation provides the resources to make schools a safer place on the court, on the field, and in the classroom," said Congressman Higgins.

Sudden cardiac arrest (SCA) is a life-threatening emergency caused by a malfunction in the heart's electrical system or structure.

The Access to AEDs Act would direct the U.S. Secretary of Health and Human Services to award grants to elementary and secondary schools in partnership with nonprofit healthcare



SHOCKING LAW: MORE ONSITE AEDS WANTED FOR PUBLIC SCHOOL CAMPUSES

organizations. The grants will support the development and implementation of programs that promote access to defibrillators in schools. ★

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Happening in Health Today

YOUNG CHILDREN USING DIABETES TECH DEVICE HAVE BETTER BLOOD-SUGAR CONTROL: STUDY

San Diego, California — Children with Type 1 diabetes ages two to six using a high-tech blood-sugar monitoring devices had consistently healthier levels of blood sugar than a control group of peers using standard diabetes control methods.

In a study funded by the U.S. National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), 68 young participants at three study sites nationwide used the Control-IQ “artificial pancreas” technology, a handheld screen-based device the rough size of a small smartphone. Another 34 participants served as a control group.

The study, published in the *New England Journal of Medicine*, found that those using the system had blood-sugar levels about 12 percent higher than those not—and 18 percent higher between the hours of 10 p.m. and 6 a.m., during which very low sugar can prompt life-threatening reactions.

CLOSE EMOTIONAL PARENT- TEEN BOND HELPS KEEPS TEENS PHYSICALLY HEALTHY, SAYS DATA ANALYSIS

Philadelphia, Pennsylvania — A data analysis by the Children’s Hospital of Philadelphia (CHOP) found that strong ties between teens and parents promote mental and physical resilience lasting well into adulthood—where, the study also found, such young adults were less likely to abuse substance.

Researchers first reviewed data from a nationwide health survey of 15,000 adults who had enrolled in 1994-1995 between ages 12 to 17. They were surveyed again in 2008-2009 on current levels of stress, depression, optimism, substance use, and other general health measures.

Participants who had reported getting more warmth, communication, time together, academic expectations or communication with fathers and mothers reported higher levels of general health as young adults—and

HAIRS TURNING GRAY LINKED BY STUDY TO ‘STUCK’ STEM CELLS



GETTING TO THE HEAD OF IT: RESEARCHERS NOW UNDERSTAND GRAYING HAIR BETTER

New York, New York — A new study by New York University (NYU)’s Grossman School of Medicine shows that certain stem cells have a unique ability to move between growth compartments inside of hair follicles. But the same study shows that these stem cells get stuck as people age—thus losing their ability to mature and maintain hair color.

The new work focused on cells in the skin of mice and also found in humans called *melanocyte stem cells*, or McSCs. Hair color is controlled

by whether nonfunctional but continually multiplying pools of McSCs within hair follicles get the signal to become mature cells that manufacture the protein pigments which are responsible for color.

The new study showed that McSCs are remarkably elastic. During normal hair growth, such cells move back and forth on the maturity axis as they transit between compartments of developing hair follicles. However, when they lose the ability to move, pigmentation fades, causing graying hair. ★

significantly higher levels of optimism and lower levels of stress and depression.

RESEARCH FINDS SOLRIAMFETOL MOST EFFECTIVE FOR EXCESSIVE DAYTIME SLEEPINESS (EDS) IN SLEEP APNEA PATIENTS

Hamilton, Ontario — People with obstructive sleep apnea (OSA) don’t just have a chronic sleep-interfering condition to contend with at night—they too-often also have to deal with the resulting excessive daytime sleepiness

(EDS) by day.

However, researchers at Canada’s McMaster University have now found that solriamfetol, the active ingredient in prescription drug Sunosi, is the most effective treatment for excessive daytime sleepiness (EDS) for people with obstructive sleep apnea (OSA).

Solriamfetol is a class of drug known as a *dopamine and norepinephrine reuptake inhibitor* (DNRI). While the standard treatment for OSA is a positive airway pressure (PAP) machine, some people with OSA may benefit from anti-fatigue medication.

The study reviewed 14 clinical trials of anti-fatigue medications involving 3,085 people.

BRAIN THINKS FASTER AS ADOLESCENTS BECOME YOUNG ADULTS: STUDY

Rochester, Minnesota — One would think that the brain’s optimal function—like athleticism or general health—peaks in the prime of one’s life, meaning, in early adolescence.

However, recent research at the Mayo Clinic finds that, on the contrary—the further into young adulthood, the faster that certain signals travel along certain nerves in the brain, meaning, that certain information gets processed faster.

Researchers measured times taken for signals to travel among brain regions in 74 research participants ages four to 51. The study, in *Nature Neuroscience*, found that transmission speeds within the human connectome, the structural system of neural pathways in the brain, continue to increase into early adulthood.

“Just as transit time for a truck would depend on the structure of the road, so does the transmission speed of signals among brain areas depend on the structure of neural pathways,” lead researcher Dora Hermes, Ph.D. explains.

SENSE-OF-BELONGING EXERCISE IMPROVES COLLEGE STUDENTS’ ACADEMIC PERSISTENCE

Bloomington, Indiana — It’s one thing to be a great student who naturally studies hard and does well in school. It’s quite another to be an average student—but one who then does well thanks to a sense of belonging at school.

A new study led by Indiana University (IU) researchers finds that incoming students who participated in an online belonging exercise completed their first year as full-time college students at a higher rate than their peers. However, the belonging exercise only yielded fruit when the schools in question had strong resources in place to support students’ belonging.

The research team first offered a brief online reading and writing exercise to nearly 27,000 students from 22 diverse colleges and universities across the United States in fall 2015 and 2016, including IU. The researchers found significant effects on students’ persistence, course taking and sense of belonging after engaging with the reading and writing exercise. ★

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POWERED BY HAMASPIK'S 25 YEAR EXPERIENCE AND COMMITMENT TO SERVE THE COMMUNITY.



● ► HAMASPIK NEWS

Upstate Official Formally Inaugurates Hamaspiik Resort's New Playground

Town of Thompson Supervisor Bill Rieber Joins Planning Board Members, Fire Chiefs, for Grand Ribbon Cutting Event

"Ten! Nine! Eight!" the campers and staff cried out, launching the countdown.

Excitement was in the air as Town of Thompson Supervisor William J. "Bill" Rieber, wielding giant ceremonial shears and flanked by public servants and Hamaspiik staff, stood at the ready.

In front of him was a bright red ribbon strung across the entrance to the Hamaspiik Resort's spacious rear lawn—a vast green space now enhanced with a riotously colorful new playground.

Across the assembled guests, the dozens of campers and counselors comprising Camp Mamtakim—the one-of-its-kind summer overnight camp for girls with disabilities—continued the count: "Three! Two! One!"

At "Zero!" the scissors closed, the crimson line gave way, and Camp Mamtakim erupted in raucous cheers. From Hamaspiik founder Meyer Wertheimer and guests to even the professional musicians and wait staff on hand, everyone beamed. The happiness was organic, fresh, and unaffectedly real. After months of effort, the new playground had arrived. Now was time to celebrate.



The story arguably began when Hamaspiik acquired a former hotel complex in the upstate New York town of Rock Hill. Conveniently located off the Route 17 regional corridor, the Hamaspiik Resort quickly filled a vital need for a year-round support event venue.

Fast-forward to last summer, when NYSHA created and launched Camp Mamtakim, an eight-week overnight summer camping program for girls and young women with disabilities. Hailing from Hamaspiik-supported communities across greater New York, Mamtakim was an instant hit, giving dozens of campers the time of their lives.

Camp Mamtakim returned this summer season, bigger and better. Exemplifying its chock-full daily roster of stimulating activities was a recent field day of sorts, in which the entire camp was split into four teams competing in three athletic endeavors, including jump roping and distance jumping. With rhyming cheers included, the Hearts, Squares, Stars and Triangles squared off against each other, resulting in four



IN PLAY: THE COLORFUL, AND FULLY ACCESSIBLE, NEW PLAYGROUND STANDS READY FOR PLENTY OF YOUTHFUL ROMPING ALL YEAR 'ROUND



ON-RAMP: SUPERVISOR RIEBER HAILING HIS TOWN'S PROJECT NOD

exhausted but triumphant finalists.

But before that, Hamaspiik Resort Manager Eliezer Appel and other Hamaspiik staff undertook the painstaking process of planning a new onsite playground, an ultimately-successful effort entailing numerous local Planning Board meetings that culminated in a mutually agreeable plan. In the wake of that, contractors were hired, equipment purchased, and slides, swings and more soon took their places in the Resort's very backyard.



To express appreciation to local officials for their vote of confidence for

the backyard park, NYSHA hosted a Ribbon Cutting Ceremony to both say thanks and formally open the park.

The event began with dozens of Camp Mamtakim counselors and campers sitting neatly outside near the soon-to-be-inaugurated new park. The large group, all decked out in Camp Mamtakim uniform shirts, created a neat air of organization and professionalism.

To one side, three musicians played classical music, while waiters stood across the way by a table of refreshments, from which they'd shortly be passing trays.

Just before 12:00 p.m., the official event start time, Town of Thompson



ALL ABOARD! SHULEM KATINA ENJOYS THE PLAYGROUND'S TRAIN

Planning Board member Arthur Knapp arrived, with Mr. Wertheimer engaging him in friendly conversation. Town Supervisor Rieber next arrived with respective Fire Chief and Assistant Fire Chief Robert Green and Eddie Walsh, joining the other public-service guests in mingling and socializing.

The group of campers and staff soon took seats directly across the red ribbon, where the formal ceremony would take place. Before the ribbon was a podium decorated with the event's "Ribbon Cutting Ceremony" logo. (Staff and even some guests were seen wearing matching "Ribbon Cutting Ceremony" lapels pins

CONTINUED ON PAGE 7 >>

Hamaspik Resort's New Playground

<< CONTINUED FROM PAGE 6
handed out earlier.)

Hamaspik Special Events Coordinator and Camp Director Brenda Katina took the stand to formally welcome the crowd. "Thank you to our guests for coming to be part of history!" she began.

In a short speech, Emcee Katina amusingly commented that children actually learn life skills from the classic, time-tested children's park. For example, she said, the slide teaches in life, when one climbs the ladder rung by rung, joy is always found at the top. She also briefly praised Hamaspik Founder Mr. Wertheimer for 30 years of accomplishments. "Congratulations to all of us for getting to the top of the slide!"

Mrs. Katina's son Shulem, who lives a thriving life despite disability, next delivered a surprisingly rousing rendition of "God Bless America." Supervisor Rieber, right hand over heart, stood by visibly moved.

Camper Goldy, a young woman with disabilities, stole the show next with her irresistible cuteness. "Hey, what's up?" she delightfully began. "Thank you for making our life better," she continued. "This is a dream come true. The world is our playground!"

Mr. Wertheimer spoke next—first thanking the officials present, then sharing the parable of an orchard boasting both fruit trees and stately cedars. While the cedars were pristine and orderly, the fruit trees were scraggly and disorganized in appearance. By way of that analogy, Mr. Wertheimer praised those who, like fruit-producing trees, give of everything they've got, prioritizing fruitful productivity over strait-laced externality. "Those who serve individuals [with disabilities] give of themselves," he declared.

He especially praised the entire Town Planning Board including those who were present board members Arthur Knapp and Kristin Boyd, for their critical support of, and sensitive consideration towards, the special needs of the Resort and the disability-supports programs making ideal usage of it. He likewise thanked Chief Green and Assistant Chief Walsh for keeping the community safe.

He next thanked Camp Mamtakim's 24/7 counselors and staff—and concluded by thanking Hamaspik's public-sector partners. "While the staff works hard, so do our officials," he said. "We appreciate you!" He concluded by extending an invitation to the officials to visit anytime and feel they belong.

Thompson Supervisor Bill Rieber then shared a few words.

He first thanked the members of the Planning Board for ultimately authorizing the playground, noting that their decision helps people in need. He also thanked his local fire department. "This playground is the envy of Rock Hill," he commented. He then shared that he has close family affected by disability, giving him a personal affinity for the Hamaspik community. "Thank you for your commitment," he said, then praising the "wonderful" camp counselors and expressing support for the park itself. "Use it in good health!" he concluded.

Hardworking Resort Manager Appel, whose critical advocacy and involvement helped cement the day at hand, then shared a few words. He recalled how he sat at Planning Board meetings and how today, he remains optimistic that the Board will remain the Resort's allies. "I hope that you'll help us," he said, noting that the Hamaspik Resort will be still be welcoming guests from the general public mainstream as well.

The aforementioned ribbon-cutting then ensued, triggering boisterously loud cheers from Camp Mamtakim. Officials then took an impromptu walk up the grassy field to the park, where they chatted with Hamaspik staff and other guests about the park's various features.

The crowd then entered the Resort for a catered lunch.

From the podium, Mrs. Katina presided over a delightful playground-naming decision, with suggestions proffered by Mamtakim counselors and voted on by guests.

The winner emerged as "Rocking Hill Park"—with the winning counselor coming forward for a photo with her peers, all too happy to enthusiastically cheer for her as the event formally closed.



As guests slowly left and staff cleared tables, counselors up the Resort's main hallway were back to regular duty. One group was seen sitting with campers to one side, coloring large colored papers with the casual abandon so typical of summertime.

Further down, a camper suddenly wandered off. Her one-on-one counselor, demonstrating maturity and poise, rose to her feet to stride purposefully after her, ensuring alert supervision at all times.

It was just another average occurrence. But dozens of such impressively responsible occurrences 'round the clock are average at Camp Mamtakim.



SPECIAL NEEDS STANCE (L-R): MR. KNAPP, MR. RIEBER, MR. APPEL AND MR. WERTHEIMER



FROM THE TOP: NYSHA EXECUTIVE DIRECTOR
MEYER WERTHEIMER THANKS PUBLIC OFFICIALS



IT TAKES A VILLAGE: SUPERVISOR MR. BILL
RIEBER EXPRESSES SUPPORT FOR HAMASPIK



THE SOUND OF HARMONY: A MUSICAL TRIO CREATES A CLASSICAL EVENT ATMOSPHERE



BRINGING IT TO THE TABLE: OFFICIALS, NYSHA LEADERS ENJOY A CATERED LUNCH

● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK



Puppet Government



SPEAK FOR YOURSELF: BY THE HAND OF MR. SILVERSTEIN, SHLEIKES HAS THE LAST WORD

In the Rebbe's Backyard



FULL COURT PRESS: THE BP NIKOLSBURGER REBBE (R) WARMLY GREETES HIS SPECIAL GUESTS

“The Shleikes Show” Wows Hamaspiik Orange Day Hab Again

Master Puppeteer Yisroel Silverstein and His Popular Puppet, Shleikes, Return to Kiryas Joel for Another Exciting Event

“The kids know Shleikes very well,” ventriloquist Yisroel Silverstein tells the Gazette. “They can’t wait to greet him!”

He’s referring to “the Shleikes Show,” which recently performed for Hamaspiik of Orange County’s Day Hab programs. The show ran for 45 minutes, during which Hamaspiik program participants were “screaming for joy and laughing and amazed to see a puppet talking,” said one staff member.

Also among the animated objects to perform was Shimileh, a generic Chasidic boy and Hamaspiik mascot of sorts. A three-foot Shimileh cutout was brought to life by the ventriloquist.

Likewise part of the show was the affixing of a remotely operated mask to a Day Hab volunteer’s face. That young man danced while his faux face flapped its jaws, “singing” awfully but

tolerably along with the ventriloquist to the delight of all.

Mr. Silverstein’s “Shleikes Show,” in constant demand at community children’s events, is named for his main character, Shleikes, a goofy grade-schooler who somehow commands perpetual correction. In the context of Shleikes’ fictional exploits, he promotes good character traits and awareness of God. “That’s the DNA of the show,” he says.

Of the roughly 80 shows he does a year, some seven to ten are for youth with special needs and the organizations that cater to them, he says—and of those, at least five a year are for Hamaspiik.

Now, what did Shleikes have to say to his Hamaspiik audience? (Shleikes wasn’t available for comment.) Says Yisroel Silverstein: “Keep smiling between shows!” ★

Orange County Men’s Day Hab Visits Nikolsburger Rebbe in Upstate Woodbourne

Despite Popular Court Increasingly Frequented by Growing Cross-Section of Orthodox Community, Spiritual Leader Harbors Special Love and Attention for Individuals from Hamaspiik

For several summers now, the Hamaspiik of Orange County Men’s Day Hab program has been departing its native Kiryas Joel to drive up to the Catskills, to visit the beloved Nikolsburger Rebbe of Woodbourne, New York.

The Rebbe is known to express a formidable love towards everyone, reports longtime Day Hab staff member Mendel Klein—and being so warmly received on a regular basis now by the Rebbe, the gentlemen of the Day Hab “talk about it a whole year,” continues Mr. Klein. “They feel a real bond with him. They look forward to visiting. They like his blessings. He puts his hands on everyone’s heads and blesses them so heartily!”

At their most recent visit, the guests and their special needs were admirably accommodated by the Rebbe’s staff, who made the facility

more suitably accessible. Upon arriving, the Hamaspiik contingent first enjoyed the popular shul and the “minyan factory” crowd, with which they enjoyed talking. They then seated themselves on a large shady outdoor porch, where they were addressed by the Nikolsburger Rebbe in person. “The whole world exists for you!” the Rebbe exclaimed, continuing with loving words of support and affirmation. The gentlemen also sang songs appropriate to the Jewish calendar. “It was heartfelt and it was real,” says Mr. Klein.

The entire visit, from arrival to departure, lasted just over an hour.

The Rebbe expresses genuine emotion to every visitor, Mr. Klein says. “He is there to show respect to others, especially special-needs kids”—whom he famously greets with his trademark hug. ★

● ► HAMASPIK NEWS | HAPPENINGS AROUND HAMASPIK

A Vivacious Vacation for the Fosse “Family”

Exciting Extended Weekend for Residents, Staff Builds Bonds

“How does a vacation benefit you?” rhetorically asks Mrs. Esty Landau.

The tireless longtime Manager of Hamaspiik of Rockland County’s Fosse Shvesterheim residence for women has just been asked how that home’s recent vacation benefited its vacationers.

Just like everyone else, Mrs. Landau essentially says.

Which is exactly the idea of group of individuals with disabilities opting for vacation—and, for that measure, exactly the idea of mainstreaming, and homes for people with disabilities in the mainstream, in the first place.

But this vacation was not just prompted and planned by the much-beloved young women who call Fosse home—it was also for its hard-working, much appreciated staff, too.

That corps of Direct Support Professionals (DSPs), each hand-picked by Mrs. Landau for that perfect blend of poise, passion, professionalism and personality, joined the residents just a few weeks ago for one extended weekend together.

The vacation consisted of an extended weekend spent at a rented lovely private residence in a Rockland County suburb. It started on a Thursday afternoon and ended late Sunday.

In keeping with its vacation theme for residents and staff alike, Mrs. Landau arranged for additional Hamaspiik staff DSPs from at least one other Hamaspiik Rockland program, each with full training for specific needs, to come in and take care of the individuals as they relaxed around the rental home... while the regular Fosse staff were treated Thursday afternoon to a small private trip boating and then to a restaurant.

Thursday evening was marked with a backyard barbeque, along with a kumzitz singalong led by a female guitarist/singer.

The following day, Friday, the Fosse residents—still being on vacation, of course—stayed quite literally in-house in the rented house. There, all meals were “ordered in”—meaning, brought in ready-made from a restaurant or caterer. The Fosse staff was also treated to a private aqua aerobics session in the rental home’s private backyard pool with a professional instructor.

Furthering the vacation atmosphere on Friday were also the professional female massage therapists brought down to give all the guests, residents and staff,

that relaxing and healthy experience. (Individuals who use wheelchairs or who otherwise have difficulty with mobility were gently placed on their beds by staff so that they could receive those massages.) Likewise, each participant was also treated if they so chose to a manicure.

To yet further the vacation recreation atmosphere, the entire group even had a painting instructor. “It was very relaxed for everybody,” the aforementioned staff member recalls.

Across the extended vacation weekend (excluding Shabbos, of course), all the Fosse residents—despite their range of function from high-function to severely-limited mobility—were assisted by staff in enjoying the swimming pool on more than one occasion. “We had extra staff to help with that,” the Fosse staff member says.

Guests also enjoyed the large backyard awning, which allowed them to be outdoors even during the limited times that there was rain.

So, what did the girls like the most about it? What was the most fun?

“I think the nicest part was that they had something for everyone,” says Fosse DSP and veteran Hamaspiik employee Ms. Shaindy Goldstein. She notes that while the Fosse residents are all across the range of function, they were still all able to enjoy the vacation. Even one resident who is non-verbal was seen smiling more, Ms. Goldstein reports.

“I find that the change of scenery does something unbelievable for them,” declares Mrs. Landau. “Everyone is calm and relaxed. They just feel they’re on vacation! [They love] Really everything—the whole ambience. There was so much of everything.”

What benefits or positive differences did you see in the girls individually? “They keep talking about it. They’re very proud of it,” says Ms. Goldstein. “It created positive memories.”

But the veteran DSP insists above all that the main thing about the vacation is that it underscored that “We’re a family—we’re sisters! Also,” she concludes, “it’s summer! So they got a vacation.”

Mrs. Landau seconds those notions, asked how the Shabbaton benefited the girls as a group. “You cannot imagine the excitement! It was one big happy family. When you go away with a family, everyone gets along better.” ★

Pooling Resources



RIGHT IN THE BACKYARD: A HIGH-END SWIMMING POOL AWAITS FOSSE’S HAPPY PARTY

Action Around Orange County



BLOWING IT BIG TIME: THE GENTLEMEN OF HAMASPIK ORANGE’S MEN’S DAY HAB PROGRAM PRACTICE SOUNDING THE SHOFARS HEARD IN SYNAGOGUES THIS TIME OF THE YEAR



FEEL GOOD: A CATHERINE IRA RESIDENT IS TREATED AFTER A MEDICAL PROCEDURE



LABOR OF LOVE: ENJOYING HANDMADE ARTS AND CRAFTS AT THE GROUP HOME

The Autism Update

News and developments from the world of research and advocacy

CHILDREN AT RISK FOR AUTISM STRUGGLE TO NOTICE MISMATCHED AUDIO AND VIDEO

New Brunswick, New Jersey — Research at Rutgers University may eventually enable far-earlier autism diagnoses. It shows that typically developing infants perceive audio-video synchrony better than infants at high risk for autism.

Researchers assembled two groups of infants ages four to 24 months. One was comprised of children whose developmental delays indicated an elevated ASD risk. The other was comprised of typical developers.

The researchers showed participants from both groups two types of videos with progressively longer time separation between image and sound. The first videos featured a ball making noises as it bounced against a wall. The second showed a woman talking.

When watching videos of the ball, the two groups performed similarly. When watching videos of the woman, however, the differences were stark. Typically, developing children perceive audio-visual gaps that are, on average, a tenth

of a second smaller than those perceived by the kids with developmental delays.

TO IMPROVE RESEARCH ACCURACY, AUTISM RESEARCHERS STREAMLINING AUTISM-SEVERITY TESTS

New Haven, Connecticut — How severe a child's autism is can actually depend on which test was used to arrive at a diagnosis of autism.

Like tests for "high blood pressure," whose results depend on which professional definition of "high blood pressure" is being followed, a positive autism diagnosis can be moderate or severe depending on how those tests define severity of autism.

That fact of varying standards can skew results of autism research studies.

That's why the Yale University-based Autism Biomarkers Consortium for Clinical Trials is now working on cleaning up autism-test results in study participants.

In plain English, the Consortium—consisting of five universities and hospitals nationwide—is working to ensure that children confirmed to have

autism with one of eight common tests before joining studies all have the same general severity level of autism.

SCIENTISTS DISCOVER HOW MUTATIONS IN A LANGUAGE GENE PRODUCE SPEECH DEFICITS

Cambridge, Massachusetts — A new study shows that faulty versions of a gene called *Foxp2* disrupt neurons' ability to form synapses in brain regions involved in speech.

In research on lab mice, scientists at the Massachusetts Institute of Technology (MIT) found that mutations of the *Foxp2* gene disrupt the formation of synapses (connections between brain cells) in the brain's striatum, a part of the brain that controls movement.

But the research also found that *Foxp2* controls speech production—linking mutations in *Foxp2* to a type of speech disorder called apraxia that makes it difficult to produce sequences of sound. Specifically, they found that apraxia occurs because *Foxp2* mutations prevent the proper assembly of motor proteins, which move molecules within cells.

Apraxia, in turn, is not uncommon in people with autism—making *Foxp2* mutations something to look into for further autism research.

NATIONAL GOV'T AUTISM TRACKING SITES EXPAND FROM 11 TO 16

Atlanta, Georgia — Until recently, the federal government's Autism and Developmental Disabilities Monitoring (ADDM) Network consisted of 11 sites nationwide.

Those sites, mostly offices on college campuses, regularly keep tabs on regional rates of diagnosed autism cases—giving the CDC an idea of how much autism is out there. (The autism rate, now estimated at 1 in 36 U.S. children, is constantly rising largely due to a broadening definition of "autism," allowing more children to be diagnosed)

But now, the CDC has expanded the ADDM network to 16 sites.

With the newly added sites, data collection will occur in Atlanta; Austin, Texas; Baltimore; Indianapolis; Laredo, Texas; Little Rock, Ark.; Madison, Wis.; Minneapolis; Nashville, Tenn.; Newark, N.J.; Philadelphia; Phoenix; Salt Lake City; San Diego; St. Louis; and Puerto Rico.

AUTISM-RELATED GENES AFFECT SPECIFIC PARTS OF ZEBRAFISH BRAINS

New Haven, Connecticut — Autism scientists may now have a better idea of which type of brain cells, and which brain-regulating natural chemicals, are controlled by autism-related genes.

Previous autism research has associated mutations in several genes with higher risk of autism. Now, researchers at Yale University deliberately edited ten such genes in laboratory zebrafish—finding that the ten genetic mutations affected the fishes' brain size, activity and behavior.

The researchers specifically found that the genetic mutations caused changes in the fish brains' *microglia*, or brain-maintenance cells, as well as in their levels of *dopamine*, a chemical used by the brain to send signals between cells. For example, the fish brain had lower-than-normal levels of neurons that produce dopamine.

By pinpointing what part of the fish brains the mutated genes affect, researchers hope to eventually learn what part of the human brain those same genes affect. ★



FROM A(UTISM) TO Z(EBRAFISH): GENES ASSOCIATED WITH AUTISM FOUND TO AFFECT

SOCIAL, LANGUAGE SKILLS MAY BE HELPED BY AUTISM INTERVENTION BEFORE AGE TWO

Philadelphia, Pennsylvania — The majority of autism cases in children are diagnosed at age 24 months or above. But now, according to a new study at the Philadelphia-based University of Pennsylvania, toddlers with autism getting personalized interventions at about 18 months of age showed greater gains in expressive language, social communication and daily living skills than those starting such therapy at 27 months.

Researchers trained participating parents of 82 autistic toddlers, aged 18 to 27 months, to practice behaviors with their children that prioritize social communication and emotional regulation—a model called Early Social Interaction (ESI).

Toddlers who began with the individual treatment showed an increase in receptive language scores, as well as an increase in daily living skills and expressive language scores, the researchers found. ★

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● ► HAMASPIK NEWS

Learning, Laughter, and Love

Kinderville Camp Gives Campers and Staff the Summer of a Lifetime

Two years ago, a dream became reality with the founding of Kinderville camp, a seven-week sleepaway camp and full-scale educational program for children with special needs.

“Although there are other camps for this population, the demand exceeded the supply, and many parents weren’t comfortable sending their children to an environment that was very different from their homes and communities.

“Kinderville is a heimish, chassidish camp run with the Hamaspik warmth and standards. It’s a place where children can thrive, where fun and growth are intertwined.”

The camp, which opened in 2021, was an instant success. Currently, the camp is at maximum capacity, with fifty-four campers, aged five to eighteen, and 180 staff members — a 3:1 ratio!

Kinderville’s secret to success is partially due to the fact that they provide not only a haven for summer fun, but also a complete educational program to maintain and expand the children’s skills throughout the summer.

Each day is divided into two: first a full educational program in the morning run by educational director Mrs. Frady Spitzer and a team of seven qualified teachers, followed by a full afternoon camp program run by program director Mrs. Shaindy Zaidmans and her head counselors.

“The educational program includes structured activities, as well as daily swimming with individualized goals set by an expert OT, and a therapy department in which each child receives a continuation of the therapy services they get at home.

The children’s 1:1 counselors wake them in the morning, get them dressed and ready for the day ahead, and accompany them to meals. When they bring the camper to “school,” they hand them over to the “*morahs*” — girls who act as 1:1 paras for the educational part of the day.

These girls help the campers in the classroom with every activity, including swimming and sports, and allow the dedicated counselors some time to themselves.

At three p.m., the campers return to their counselors for an incredible camp program, all fitting into the annual camp theme — this year’s being “Colored Up.”

Every day’s activity fits in with the



A CLASS OF ITS OWN: BURSTING WITH COLOR, A KINDERVILLE CLASSROOM STANDS AT THE READY FOR INTERACTIVE SUMMERTIME LEARNING



SPACE FOR FUN: AN ACTIVITY ROOM GIVES CAMPERS MULTISENSORY EXPERIENCES EACH DAY



DOWN TO EARTH: CAMPERS PLANT SEEDS

color of the week — from shaving foam and instant snow for White Week, to police car demonstrations during Blue Week, and so on. The program includes exciting shows, excursions to a petting zoo or another camp, and special appearances by fire trucks and police cars.

Rejuvenated after their morning break, the counselors are in high spirits. They lavish the campers with attention, and ensure that each day brims with excitement.

Every meal at Kinderville camp is a special occasion: starting with a menu that offers a wide range of options to accommodate various

dietary needs — each dish is crafted in gluten-free, dairy-free, or soy-free versions as required. And to add to the enjoyment, there’s lively music and dancing follows the meal, creating an upbeat atmosphere.

“The energy in the room is so high, you’d think it was the first day of camp every meal,” says Mrs. Tilly Gordon, camp secretary.

The campers’ day ends with Shema Circle — a heartwarming half-hour medley of Shema and bedtime songs, sung over and over until every single child has been mentioned by name.

Bath and bedtime is accompanied by special music of its own, to help the

children follow the routine. Finally, each counselor waits with her camper until they’re sleeping, and then the bunkhouse is left with a rotation of OD shifts that lasts until the morning.

Alongside the incredible daily camper program at Kinderville, there’s a fabulous program for the staff run by Mrs. Hindy Lefkowitz. It takes place during the counselors’ off-hours.

“We run a camp within a camp, and this is what makes our camp so unique,” Mr. Spangelet says. “We have hundreds of applications for counselors each summer, because

CONTINUED ON PAGE 13 >>

● ► HEALTH NEWS

Implanted Pancreas Could Eliminate Constant Insulin Injections for Diabetics

Computer-Controlled Built-in Delivery Device Mimics Natural Behavior of Normal Pancreas

Washington, D.C. — For decades, people with Type 1 diabetes—which affects 46.3 million people worldwide—had to constantly inject themselves with insulin to keep their blood sugar levels, and hence their body function, normal.

But what if an implanted device could do that for them?

That's the idea behind a newly-developed automated insulin delivery system, or artificial pancreas, that delivers insulin inside the body.

While such a device is actually not new at all, one of the newest systems is a joint project by Yale University, and the University of Padova and University of Pavia (both of Italy). It consists of a *novel algorithm*, or new computer software program, that both works fast and, most importantly, closely mimics

natural physiological insulin delivery.

The system was described recently in the journal *APL Bioengineering*.

“Not only is intraperitoneal infusion of insulin much more physiological because you are reproducing the natural physiology, but it simplifies the control problem because you don't have delays,” author Claudio Cobelli said. “So, this means you can have a very simple, robust controller to handle the everyday situations.”

The current method of automated insulin delivery, which is based on technology called continuous subcutaneous glucose sensors, requires patients to manually enter the number of carbohydrates they consume, announcing their meals to the system before they eat. It is also slow to sense and deliver insulin. These delays, along



A GOOD SHOT AT ELIMINATING SHOTS? PANCREAS IMPLANT COULD CUT OUT DAILY INSULIN

with the likelihood of errors in manual meal calculations, make the system prone to inaccuracies and increase the

prevalence of hyperinsulinemia, a state of high insulin in patients that causes diseases of the large blood vessels. ★

● ► HAMASPIK NEWS

Learning, Laughter

<< CONTINUED FROM PAGE 12

the program is set up to give them so much. Additionally, the counselors are assured of a standard of *ruchniyus* that the parents and schools are happy with.

“By giving the counselors abundant support and a custom-crafted, exciting program, we have staff that's filled with energy and *chizuk*. We're able to hire superb counselors, and that overflows onto the campers — they give them all they've got,” Mr. Spangelet says.

The staff program is a huge project, and is designed to help the counselors rejuvenate from the hard work they do during the day.

Mrs. Hindy Lefkowitz, staff program director, describes the schedule.

“After three p.m., when the *morahs* finish their jobs in the classroom, we have a program especially for them — beginning with Minchah, then a *shiur*, and then an activity,” Mrs. Lefkowitz says.

“It's like a TC program in a mainstream camp. There's a theme song, activities, and off-ground trips twice a week.”

Later, from nine thirty to eleven thirty at night, there's a staff program

that includes everyone, counselors, rotators, floaters, and all. It's their two hours, with food, activities, entertainment, dancing, and an exciting program.

“The programs are optional, but 95% of the staff come every night,” Mrs. Lefkowitz says.

“It's amazing to see how the staff bond and create connections between themselves. We have a wide variety of girls from many locations — New York, L.A., Milwaukee, and more — chassidish and Litvish, all sitting together and enjoying themselves as if they've known each other for years.

“There's a healthy, wholesome attitude that comes from sharing a mission. You can instantly feel the positive vibes when the staff is together.”

Kinderville prides itself on excellent management, fantastic programming, and true Yiddishe warmth — but most importantly, its focus is on helping children achieve what they've never achieved before.

A wheelchair-bound child took his first steps in Kinderville last year. And this year, encouraged by his counselors, he's not only taking steps, but walking confidently around the campgrounds!

In educational achievements, behavioral strides, or significant milestones like learning to walk or swim, Kinderville consistently

exceeds expectations. “Thanks to Mr. Spangelet and his incredibly devoted staff,” says Mr. Hershel Wertheimer,

Executive Director, “year after year, the camp goes beyond mere fun; it's a place where substantial growth happens.” ★

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Public Health and Policy News

MEDICARE ADVANTAGE PROVIDER PAYMENTS TO RISE 3.3% IN 2024

Bethesda, Maryland — If you're a doctor providing care to patients who have Medicare Advantage (MA), you'll be earning slightly more come 2024.

The federal Centers for Medicare and Medicaid Services (CMS), which oversees Medicare and Medicaid, recently finalized a proposal to increase Medicare Advantage payments by 3.3 percent.

The change, according to the CMS, is meant to help correct the problem noted among some MA providers of preferring healthier patients and avoiding sicker patients. The increased payments for what MA can bill for come hand-in-hand with changes to what MA plans cannot bill for—thus encouraging providers to care more equitably for members across the board.

The change is “how we ensure that people enrolled in Medicare Advantage... can continue to access the care they deserve,” said CMS Administrator Chiquita Brooks-LaSure in a statement.

FEDERAL TRADE COMMISSION INCREASINGLY TARGETING DRUG INDUSTRY'S 'ANTI-COMPETITIVENESS'

Washington, D.C. — Mergers of small, medium-sized and even large drug companies have been going on for several decades now. In fact, from 1995 to 2015, the number of leading pharmaceutical companies shrank from 60 to ten, thanks to companies merging with each other.

But now, the Federal Trade Commission (FTC) is now suing in federal court to block the merger of drug giants Amgen and Horizon Therapeutics. The FTC says that the \$27.8 billion deal would enable Amgen to leverage the monopoly power of two top Horizon drugs and further harm any competition.

At the same time, the FTC is moving against two major pharmacy benefit managers (PBMs, or companies managing prescription drug benefits for insurance companies). The biggest U.S. PBMs negotiate prices and access to some 80 percent of U.S. prescription drugs, giving them huge bargaining power.

NATIONAL PHARMACY CHAIN CVS CLOSING ITS CLINICAL TRIALS UNIT

Woonsocket, Rhode Island — It would actually seem like a pretty good idea: Use your existing millions of retail health customers, or at least their anonymous data, to conduct clinical trials and related medical research on shots commonly administered at CVS

walk-in clinic locations.

But that was two years ago.

Currently, the Woonsocket, Rhode Island-based retail pharmacy giant is planning to close down its clinical trials unit, recently reported industry outlet *Healthcare Dive*. According to that report, CVS will wind down that unit in phases, with a full exit by the end of 2024.

The clinical trials unit opened in mid-2021. The company says its nationwide infrastructure and reams of patient data allow it to connect with a broad swath of patients, according to *Healthcare Dive*—but CVS has yet to disclose publicly whether the business has been financially successful.

MAJOR MEDICAL JOURNALS DECLARE POPULAR AI CHATBOT 'NOT AN AUTHOR'

Washington, D.C. — Artificial intelligence (AI) has been a hot topic in recent times, with the software's increasingly-human responses the subject of ongoing ethical debate.

In modern medicine, one question is whether ChatGPT, the popular and powerful chatbot software, can be considered an author if—upon user request—it generates a research paper.

Now, in a joint article entitled, yes, “ChatGPT is Fun But Not an Author,” *Science* and the *Journal of the American Medical Association* (JAMA) make their answer clear.

The official reason given is that ChatGPT does not meet all four of the *International Committee of Medical Journal Editors'* authorship criteria: Substantial contributions or processing of data; drafting or revising of the work; approving final version; and agreeing to accountability for any questions on the work.

COURT STRIKES DOWN ACA-MANDATED FREE PREVENTIVE SERVICES; INSURERS PLEDGE COVERAGE

Fort Worth, Texas — After a U.S.



NIXED: COURT BLOCKS FREE PREVENTIVES

District Court judge struck down a key provision of the Affordable Care Act—the mandate for health insurance companies to cover certain preventive services for free—health insurance plans say that their members intend to keep offering those services despite change in legal status.

Judge Reed O'Connor of the Northern District of Texas blocked the enforcement of recommendations made by the U.S. Preventive Services Task Force. Those recommendations included no-cost screenings for certain cancers, diabetes screening, and vision tests for preschool-aged children.

O'Connor's ruling applies to all employers and insurers nationwide.

The ruling is almost certain to be challenged in the courts, experts said. Also worth noting is the fact that catching diseases early for free saves insurance companies from paying a lot more to treat them later.

EXPERIMENTAL DUCHENNE MUSCULAR DYSTROPHY (DMD) DRUG MOVED TEPIDLY FORWARD BY FDA

Silver Spring, Maryland — A new gene therapy that would ideally help treat a form of muscular dystrophy (MD) was recently approved 8-6 by a board of FDA advisors.

A slim majority of the 14 members of the FDA's Cellular, Tissue, and Gene Therapies Advisory Committee said the overall benefits and risks supported a treatment dubbed SRP-9001.

Duchenne is characterized by a mutation that leads to a lack of dystrophin, a protein found in skeletal muscle, and muscle loss. It affects about one in 3,300 boys and has no known cure. The treatment, developed by biotech Sarepta Therapeutics, delivers a gene that codes for a shortened form of dystrophin called micro-dystrophin to help preserve muscle.

The approval means the therapy can now go to clinical trials. But the fact that a good number of committee members voted no means that more substantial evidence is needed..



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In the Know

ALL ABOUT... ANEMIA

Sources: Cleveland Clinic,
Mayo Clinic

Anemia is a condition in which a person lacks enough healthy red blood cells to carry enough oxygen to the body's tissues. Anemia, also known as *low hemoglobin*, can make one feel tired and weak (as in the adjective in this sentence: "I'm feeling *anemic*.").

Anemia affects more than two billion people globally, which is over 30 percent of the total population. It is especially common in countries with few resources, but it also affects many people in the industrialized world. Within the U.S., anemia is the most common blood condition. An estimated three million Americans have the disorder.

But even though anemia has one basic definition (low level of red blood cells), the condition has many different causes—and therefore, many different types. As such, anemia can be temporary, long-term, mild or severe.

However, in most cases, anemia has more than one cause.

Additionally, because anemia can often be a symptom of an underlying bigger problem, see your doctor if you suspect anemia. It may be a warning sign of something serious.

Treatment for anemia depends on which type of anemia. Treatments range from taking supplements to undergoing medical procedures—and in fact, some kinds of anemia might even be prevented by simply ensuring that you eat a varied and healthy diet.

DEFINITION AND SYMPTOMS

Signs and symptoms of anemia depend on the cause and severity of the patient's anemia. In fact, depending on its cause(s), a patient might even have no symptoms.

At first, anemia can be so mild that a patient may not even notice it. But as a case of anemia worsens, so often do symptoms. Anyways, signs and symptoms of anemia might include:

- Fatigue
- Weakness
- Pale, dry, yellowish or easily-bruised skin
- Irregular or fast heartbeat
- Shortness of breath
- Dizziness or lightheadedness
- Sore tongue
- Chest pain
- Cold hands and feet
- Headaches
- Unintended movement in the lower leg (restless legs syndrome)

Anemia primarily causes fatigue but fatigue isn't always caused by anemia—so don't assume that one has anemia if one is feeling fatigued. However, if you are feeling fatigued and you don't know why, see a doctor.



CAUSES

As mentioned, anemia happens when the blood doesn't have enough red blood cells. But this falls into two categories: *congenital*, or a condition present at birth, or *acquired*, or a condition a person develops later in life.

Whether congenital or acquired, anemia has three general causes:

1. The body not naturally producing enough red blood cells
2. The body destroying its own red blood cells
3. Due to bleeding, the body losing red blood cells faster than they can be replaced
4. The body not producing enough hemoglobin (low hemoglobin - an iron-containing protein in red blood cells that transports oxygen around the body)
5. The body producing enough hemoglobin, but the hemoglobin doesn't work correctly

Iron deficiency anemia

The most common cause of anemia is *iron deficiency anemia*—meaning, the body doesn't naturally produce enough red blood cells because it doesn't have enough iron to do so.

Iron is a necessary ingredient for

the bone marrow (where red blood cells are manufactured) to make red blood cells—and so if the “factory” doesn't have its needed “raw materials,” it can't produce its “products.”

Without iron supplementation, this type of anemia occurs in many expectant mothers. It's also caused by blood loss, such as that caused by: an ulcer in the stomach or small bowel, cancer of the large bowel, and regular use of some pain relievers that are available without a prescription, especially aspirin (which can cause inflammation of the stomach lining resulting in blood loss). *It's important to determine the source of iron deficiency to prevent recurrence of the anemia.*

Vitamin deficiency anemia

Anemia is also commonly caused by low levels of folate and/or vitamin B-12. These ingredients are also needed by the body to produce enough healthy red blood cells. Thus, a diet lacking in these and other key nutrients can lower red blood-cell levels. Modern medicine also sometimes refers to this type of anemia as *pernicious anemia*.

Inflammatory anemia

Certain diagnoses, including cancer, rheumatoid arthritis, kidney disease, and Crohn's and other inflammatory

“

THOUGH ANEMIA HAS ONE BASIC DEFINITION (LOW LEVEL OF RED BLOOD CELLS), THE CONDITION HAS MANY DIFFERENT CAUSES.

”

diseases, can interfere with the production of red blood cells, resulting in a type of anemia called *inflammatory anemia*. Similarly, diseases of the bone marrow can affect its red blood cell production, also causing anemia.

Hemolytic anemia

This category of anemia, which contains quite a few sub-types, develops when red blood cells are destroyed faster than the bone marrow can replace them. Certain blood diseases increase red blood cell destruction. Hemolytic anemia can also be either congenital or acquired.

Congenital hemolytic anemia includes: sickle cell disease, thalassemia, red cell membrane disorders (of which there are about five), pyruvate kinase deficiency (PKD), and glucose-6-phosphate dehydrogenase (G6PD) deficiency. Of these, sickle cell anemia—which most often (but not always) is found in young people of African origin—is the most common.

Acquired hemolytic anemia includes: immune hemolytic anemia, mechanical hemolytic anemias, something called PNH (paroxysmal nocturnal hemoglobinuria), malaria, and several others.

Aplastic anemia

In this rare, serious form of anemia, the body doesn't produce enough red blood cells due to a range of causes, including infections, certain medicines, autoimmune diseases and exposure to toxic chemicals.

Diamond-Blackfan anemia

This is a rare blood disorder that may be inherited or acquired. In this type of anemia, the bone marrow does not make enough red blood cells. Diamond-Blackfan anemia is diagnosed within the first year of life in almost 90 percent of people who have it.

Other lesser forms

Other rare or at least not-common forms of anemia include: Fanconi anemia, caused by the bone marrow does making enough red blood cells and resulting in abnormal bone structure and abnormal skin color; Mediterranean anemia (a.k.a. Cooley's anemia), which actually refers to beta thalassemia major; and *vegetarian* or *vegan* anemia, which refers to the false idea that vegetarians or vegans don't get enough iron because they don't eat meat, poultry or seafood.

Risk factors

These factors place a person at increased risk of anemia:

- Vitamin-deficient diet. A diet consistently low in iron, vitamin B-12, folate and copper increases risk of anemia

- Intestinal disorders. Intestinal disorders affecting the absorption of nutrients in the small intestine, like Crohn's disease and celiac disease, heightens risk of anemia
- Expectancy. It's vital during this special time to counter its increased risk of anemia by taking a multivitamin with folic acid and iron (speak to a doctor)
- Chronic conditions like cancer, kidney failure or others can lead to a shortage of red blood cells and hence anemia
- Slow, chronic blood loss from an ulcer or other source within the body can deplete the body's reserves of iron, leading to iron deficiency



LEFT UNTREATED, ANEMIA CAN CAUSE MANY HEALTH PROBLEMS, INCLUDING EXTREME FATIGUE AND HEART PROBLEMS.



anemia

- Family history. If your family has a history of inherited anemias like sickle cell anemia, you also might be at increased risk of such anemias

Other factors

- Personal medical history. A history of certain infections, blood diseases and autoimmune disorders increases risk of anemia. Alcoholism, exposure to toxic chemicals and the use of some medications can affect red blood cell production and lead to anemia
- Age. People over age 65 are at increased risk of anemia—especially those who are on blood-thinning medications like aspirin, Coumadin, Plavix or Xarelto.

Complications

Left untreated, anemia can cause many health problems, such as:

- Extreme fatigue. Severe anemia can make one so tired that he or she cannot complete everyday tasks
- Heart problems. Anemia can lead to arrhythmia, or a rapid or irregular heartbeat. A person with anemia will have his or her heart pumping more blood to make up for the lack of oxygen in the blood—which can lead to an enlarged heart or even heart failure

DIAGNOSIS

According to the Cleveland Clinic, some people first find out that they are low in iron when they go to donate blood. However, the first step to getting anemia diagnosed, of course, is seeing a doctor. Your primary care provider will ask you several questions to determine if your suspicions are founded.

The next step in determining whether one has anemia are various blood tests. The primary such test is known as the *complete blood count* (CBC). A CBC will tell you how many red blood cells you have, how large they are and what shape they are.

the pharmacy or grocery vitamin shelf; in iron-rich foods; in foods that help your body absorb iron (like foods with vitamin C); in iron shots administered via intravenous (IV) infusion (which is commonly done for patients with chronic kidney disease (CKD); or even transfusions of red blood cells.

Surgery

In cases where anemia is caused by internal bleeding, surgery may be needed to correct it. Surgical repair has been used to cure anemia in people with the *paraesophageal* type of hiatal hernias, with or without ulcers (called Cameron's ulcers).

Other treatments

Other types of anemia may require other types of treatment. For example, genetic disorders (like beta thalassemia and sickle cell anemia) may require bone marrow transplants.

If one's anemia is being caused by CKD, treatment could also include injections of *erythropoietin* (EPO), in addition to iron supplementation (through oral or IV means). *Erythropoietin* is a hormone that tells the bone marrow to make red blood cells.

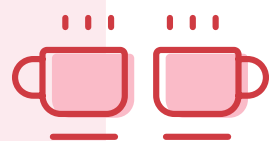
Because anemia is a known side effect of the radiation and chemotherapy commonly used to treat cancer, such patients may need iron supplementation, blood transfusions, B vitamins and/or shots that stimulate the body to produce EPO before continuing with such treatments.

PREVENTION

While many types of anemia can't be prevented, one can avoid iron deficiency anemia and vitamin deficiency anemia by eating a diet that includes a variety of vitamins and minerals. This includes:

- Iron-rich foods like beef and other meats, beans, lentils, iron-fortified cereals, dark green leafy vegetables and dried fruit.
- Folate, which can be found in fruits and fruit juices, dark green leafy vegetables, green peas, kidney beans, peanuts, and enriched grain products, such as bread, cereal, pasta and rice. Folate can also be obtained in the form of folic acid.
- Vitamin B-12, to be found in vitamin B-12-rich foods like meat, dairy products, and fortified cereal and soy products.
- Vitamin C, to be found in C-rich foods like citrus fruits and juices, peppers, broccoli, tomatoes, melons and strawberries. (All these also help increase iron absorption.)
- Drinking enough water daily, as some studies have indicated that this will help keep up healthy levels of hemoglobin. ★

● ► HAMASPIK NEWS



An Experience for the Soul

Nishmoiseini Overnight — for the mothers, by the mothers

Hamaspiik's mission is to provide services, support, and hope to people going through challenges so they can live a fulfilling, productive life. And the Nishmoiseini brand plays a key role in the support and hope provided, by connecting parents with others like them, by providing inspiring speeches and *chizuk*, and giving access to practical resources, advice, and guidance geared toward the challenges they face.

The Nishmoiseini coffee room is an added dimension, giving parents the platform in which to connect as a group, share experiences, give tips and advice, and develop relationships with others who know exactly what they're going through. Recently, the coffee room "live experiences" have allowed parents to meet in person and gain more *chizuk* and inspiration from each other.

The Rosh Chodesh Adar Nishmoiseini Overnight Experience, for mothers of the Yiddish-speaking coffee room, created by the mothers themselves, was a beautiful demonstration of all this in action.

The program was organized by a group of mothers, and led by Mrs. Sarah Greenfield, while Nishmoiseini's Mr. Joel Landau took care of logistics and provided help where needed.

The event, which took place in the Hamaspiik Resort, was unique in that no "outsiders" at all were present — not even Hamaspiik employees! The mothers themselves provided the program, led the various workshops, and enjoyed the experience together.

And what an experience it was!

Over 100 mothers joined, from Boro Park, Williamsburg, Monsey, Monroe, and even NYU — two mothers were discharged from the hospital with their child with special needs, and went straight to



the experience, demonstrating what a lifeline this is to mothers going through challenging times.

Upon arriving in the morning, every mother was greeted personally by Mrs. Greenfield, and presented with a room card and a welcome gift bag (arranged by Mr. Moskovits of Gifts and Events, and Mrs. Chayala Teitelbaum, Stardust host). As women introduced themselves to each other, faces lit up in recognition — everyone knew the names from the coffee room on the hotline, but actually meeting in real life was a thrilling experience.

Refreshments were served, and the atmosphere was open, friendly, and informal, making it easy for mothers to get to know each other. They sang Hallel together, turning the tefillos into a deeply emotional experience.

Lunch was served, followed by an icebreaker game prepared by a mother. Then the mothers divided into groups, rotating between the gym, the pool, and a



therapeutic painting workshop.

With only mothers present, connections formed deeply and quickly. Later in the day, one mother told her moving personal story, and another shared the

CONTINUED ON PAGE 19 >>

"I was at the Nishmoiseini overnight, and I wanted to share my amazing feelings of appreciation. It was a day of so much *chizuk*, I don't even have words to describe it! When I came home I felt so inspired, and was able to feel that my *nisayon* was given specifically to me, that it was *bashert*.

"It was so *geshmak*, so *b'achdus*, so calm. It was nice that it wasn't formal, and there was no pressure. Everything was done so perfectly; I can't think of anything that should have been different. I just feel full. Full of *chizuk*."

"Nishmoiseini is *chizuk* for free!

Nishmoiseini, our *neshamah* די ערקיין וויקסט דא!

Nishmoiseini gives us ווי נאך ווי!

Nishmoiseini — a overnight די פיסט דא!

Nishmoiseini, געווען האפט דא,

yiddishe beauty מיט הארץ געפיל

Nishmoiseini — a night forever inscribed in our memory!

Thank you so much!"

Client Feedback

"I just came back from the Nishmoiseini overnight, and I am overwhelmed with gratitude to those who organized and sponsored it. I

have two special needs children and we live in constant crisis mode, so it was unbelievable to be able to spend an entire 36 hours with other mothers! Besides for *shepping chizuk*, we laughed so much, it was so therapeutic!

"Everything was amazing. The food, entertainment, the place where we stayed! It was amazing to be able to talk to other mothers, see what worked for them and get ideas. Now we can go back to the day-to-day grind with a *frishkeit* and *simchah* to manage daily life. I'm very grateful!"

"Wow, wow, wow!! I'm sitting on the bus with other mothers from Hamaspiik of Kings County. Everyone here is going home SO HAPPY and truly rejuvenated! The ladies here are discussing how the messages will sound on the Nishmoiseini line. How there is NO criticism or complaints at all (!), and how amazing Hamaspiik is for providing this for us! They are an agency that shows that they REALLY care."

"I wanted to thank you for the Nishmoiseini overnight! I have no words! I'm new to this. My baby got a diagnosis three weeks ago, and after this get-away, I feel like I have a whole new family who's in the same circumstances and understands me and is ready to help me. I can't describe what it was like — the warmth that enveloped me! Thank you so much to whoever had a part in this, Hashem should repay you with everything good!"

● ► HAMASPIK NEWS

★ Inner Circle | Keeping You Posted

<< CONTINUED FROM PAGE 18

beautiful song she composed about her son.

In the evening, supper was served, and two mothers, who are very active on the line and whose names are well known to all coffee room participants, presented a comedy performance complete with soundtracks from messages left on the coffee room — true “laughter therapy” and a real highlight.

Games with musical headphones, an amazing slide presentation, and a *kumzitz* completed the program, along with, of course, delicious refreshments. But the conversation continued long after the program ended... throughout the entire night.

In the morning, following a lavish breakfast, another mother spoke, and the women sang Hallel together as a grand finale.

The feedback received by Nishmoiseini following the event was unbelievable. Dozens and dozens of messages, each sharing the same sentiments: how validated the women felt, how they were able to open up to other mothers like never before, how they had never felt so understood since they’d had their child with special needs.

What made the Nishmoiseini overnight so special? It wasn’t just an event or a retreat; it was immersive and transformative. Bonding and sharing deeply with

other women means that those who previously hadn’t posted many messages on the coffee room now feel comfortable opening up, and can access this haven of support every day of the year.

The intimate, engaging, and purposeful atmosphere provided a strong sense of belonging, of being in it together.

And Nishmoiseini, which was born at the request of parents at a Shabbaton, who wanted to access *chizuk* all throughout the year, has truly managed to accomplish its goal: not just supporting parents, but giving them the chance to support and strengthen each other, in the deepest, most valuable way.

Hamaspik’s early intervention department plants hope and nurtures potential

first step to a
BETTER
TOMORROW

Mrs. Chana Baila Horowitz is the dynamic director of the early intervention department. She launched and grew the department from its conception less than two years ago to the thriving department it is today, servicing dozens of children each week.

Early Intervention

The People & the Process

The early intervention department is essentially three departments in one: evaluation, service coordination, and therapy,” explains Mrs. Chana Baila Horowitz, director of EI. “At Hamaspik of Kings County, the entire team works seamlessly together to provide for the needs of the child.”

Referral

The early intervention process begins with a referral. Parents may turn to early intervention if

their baby has a diagnosis or medical condition, or it might simply be precipitated by a toddler not meeting important milestones.

Every child referred to EI gets a service coordinator who is the family’s contact in the program. The service coordinator’s first task is to complete paperwork and arrange for an evaluation.

Evaluation

Anyone who wants their child evaluated is

eligible for a full evaluation by trained therapists. Sometimes there will be more than one evaluation, especially in complex or medically involved cases.

The evaluation is done at home by a team of therapists who each specialize in a different area: OT, PT, SLP, and so on, working together under a team leader. Hamaspik evaluators are handpicked for their professional expertise and warm approach.

CONTINUED ON PAGE 20 >>

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First Step to a Better Tomorrow

Hamaspiik's Early Intervention Program

<< CONTINUED FROM PAGE 19

The evaluation is scheduled around the mother's and baby's schedules. "It's all about the baby and family, all the time," says Mrs. Leah Gefen, developmental therapist and Hamaspiik of Kings County evaluator.

Although the team is there to evaluate the baby's development, every therapist mentioned that an important part of their role is to make the family feel comfortable.

"There's a lot of handholding and support," Mrs. Gefen says. "We want the family to feel calm and secure."

Mrs. Amy Englander, OT and evaluator, shares that one of her favorite parts of the job is to show the parents that there's hope. "They may have just gotten a diagnosis and feel lost," she says. "I explain what OT can achieve, show them things they can do to build their child's skills."

The evaluation includes an extensive parent interview to hear about the child's medical history, and the concerns the parents have. Then the team does a series of tests to evaluate the child.

"Even if the parent only has one concern, such as a fifteen-month-old not standing or walking, we do a full evaluation to make sure there's nothing else that's concerning," Mrs. Gefen says.

What kind of issues are the evaluators looking for?

"We'll start with looking at how the child is performing in relation to what's expected of that age group," Mrs. Dena Borenstein, developmental specialist and evaluator, says. "You'd be surprised how much we can assess even at six weeks old!"

"Things like social-emotional connection, can Baby establish eye contact, can Baby track objects with his eyes, is he responsive to sounds, can he lift his head when he's put on his stomach. By two months we're looking to see if he'll move his hands toward a toy, and if he can bear weight on his legs when held upright."

Sometimes, the evaluation process can be misleading. The baby may make strong eye contact with the evaluator when the mother says it's never happened before. Or the opposite — a baby may refuse to "perform" something he does regularly.

"There's a lot of handholding and support. We want the family to feel calm and secure"

"The best thing we can do is listen to the parents," Mrs. Borenstein says. "And then we ask more questions. Maybe the child can track, but only in a certain position — that's also a concern."

"When I see a little baby on the floor, I'm looking for several different things," Mrs. Englander explains. "I'll tell the mother: it looks like I'm watching her put her pacifier in her mouth, or I'm looking at a two-year-old coloring, but I'm actually assessing which muscles are stronger, or why she can't do what she's trying to do — is it the finger hold, a lack of strength, or a coordination issue?"

In summary, the evaluation is about getting the whole picture. From the parents, from observing the baby, and from the tests.

"You get a feel

for it," Mrs. Borenstein sums it up.

Once the evaluation is over, the evaluators have to write a report, which, according to Mrs. Borenstein, often takes as long as the evaluation itself.

The reports of each evaluator are combined and summarized, and then submitted to the state to see what services the child is eligible to receive.

The evaluation can be fraught with tension for parents who are nervous about what the results will be, or disappointed that their child is not checking the boxes of what they "should" be able to do.

"I'm not looking for what your child *can* do," Mrs. Englander reminds parents. "I'm looking for what they *can't* do because that's the way to show where they need services."

Even at the evaluation stage — which can be a clinical process — the Hamaspiik heart shines through. Hamaspiik of Kings County's evaluators are caring and approachable, going well beyond the job description to put parents at ease, answer questions, and assuage concerns.

"We tell the mother that she can sleep soundly because we're taking care of things," Mrs. Englander says.

"We'll discuss the case as a team and think about which therapists would be the best fit for the child, so that when he's *b'ezras Hashem* approved for services we can suggest the ideal providers."

Recently, Mrs. Gefen was part of an evaluation team in a home in which the family was struggling to manage day-to-day. "We spent a while discussing how we can help them access more help, more respite," she says. "This was nothing to do with the evaluation — but we want to be there for the families in every way we can."

TO BE CONTINUED





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Status Report



“HEART”-Y HIGH TECH: STANFORD'S NEW SOFTWARE WINS PRIZE FOR CARDIAC PREVENTION

STANFORD AWARDED \$100K FOR HEART ATTACK RISK-IDENTIFYING AI TOOL

Palo Alto, California — Artificial intelligence (AI) continues to make inroads into numerous industries, including modern medicine, as evidenced by the AI tool newly developed by the Palo Alto, Calif.-based Stanford Medicine.

The AI tool, really a custom software program, earned Stanford a \$100,000 award because it can identify patients who are at risk of a heart attack. The AI-based algorithm searches patients' chest CT scans in their medical records to identify calcium deposits.

The algorithm was able to score the highest in the competition in the following categories: health impact, data science approach, operational sustainability, scalability, significance of problem and solution, and mitigation of bias.

The award was the Hearst Health Prize, a competition that evaluates data science projects or programs that have been proven to improve health outcomes.

HOSPITAL GROUPS AIM TO BLUNT EFFORT TO REVERSE ACA BAN ON PHYSICIAN-OWNED HOSPITALS

Washington, D.C. — The Washington-based American Hospital

Association (AHA) and the Federation of American Hospitals (FAH), two of the country's leading industry groups, are mobilizing on Capitol Hill to help keep a ban on physician-owned hospitals in place.

Under the 2010 Affordable Care Act (ACA), hospitals may not be owned by doctors' groups. The goal of the ban was to combat facilities that supposedly admitted primarily healthier patients and only admitted patients on private insurance. But opposition to that ban has been growing in recent years.

The hospital groups favor keeping the ban intact, arguing—among other things—that physician-owned hospitals would deny healthcare to some patients in favor of more desirable and cherry-picked other patients. But critics say the hospital industry simply wants to stifle competition as the industry becomes more consolidated.

DRUG-RESISTANT CANDIDA SPREADING IN U.S. HOSPITALS, BUT NEW ANTIBIOTIC APPROVED BY FDA

Washington, D.C. — A recent report by the CDC says that *Candida auris* (C. auris) has surged across the nation since the first case occurred in 2013.

It has now been reported in 28 states as of 2021, up from just four

states in 2016. According to the CDC, the percentage of dangerous C. auris infections nearly doubled in 2021 alone.

C. auris, one of the several strains of *Candida*, is a yeast infection that has since become resistant to two of the three main classes of antifungal medicines, and is threatening to become resistant to the third. While innocuous to healthy people, C. auris can cause severe and life-threatening infections. More than one in three invasive C. auris cases—for example, infections of the blood, heart or brain—are fatal.

But in good news, the FDA at the same time approved new antifungal drug Rezzayo to treat cases of candidemia (Candida bloodstream infections) or candidiasis (general infection).

SCIENTIST DISCOVERS HOW SOME CHOLERA STRAINS RESIST ANTIBIOTICS

Orlando, Florida — With bacterial strains constantly developing natural resistance to most or even all known antibiotics used in hospitals, figuring out how they do so is critical to fighting them.

Now, researchers at Orlando's Central Florida University have made an important discovery in that direction—by figuring out how the *Vibrio cholera* bacterium develops that resistance. *Vibrio cholera* is the bug that causes cholera, an acute diarrheal illness that sickens up to four million people worldwide a year, including many hospitalizations.



BUG OFF: VIBRIO'S RESISTANCE DECODED

According to the research, the membrane (outer skin) of *Vibrio cholera* contains a protein called OmpU. The research specifically found that *Vibrio cholera* had resistance to numerous antimicrobial agents when it had genetically mutated versions of OmpU.

The finding suggests that resistance in other hospital-common bugs is also caused by mutated OmpU proteins—warranting further investigation.

NEW ANTIMICROBIAL COATING COULD TACKLE HOSPITAL SUPERBUGS

Nottingham, England — A practical solution to the problem of healthcare-associated infections (HAIs) could be the simple combination of two existing substances.

Chlorhexidine is a common antimicrobial liquid mouthwash prescribed by dentists to reduce levels of certain bacteria in the mouth. *Acrylonitrile butadiene styrene* (ABS) is a type of plastic used widely in medical (and retail) manufacturing, including intravenous bags, implantable devices, hospital beds and even toilet seats.

But now, researchers at the University of Nottingham's School of Pharmacy coated ABS with chlorhexidine—showing that the coating effectively kills many bacteria and viruses, including MRSA and Covid-19, that otherwise would thrive on such plastic surfaces.

The researchers say that manufacturing ABS-based plastic items with a built-in chlorhexidine coating could reduce hospital infections.

LESS TEENS VISITING ERS FOR MENTAL-HEALTH EMERGENCIES, SAYS CDC

Atlanta, Georgia — Weekly emergency department (ED) visits nationwide for mental health conditions among adolescent boys have fallen by ten percent, according to a recent report by the U.S. Centers for Disease Control and Prevention (CDC).

“By fall 2022, weekly ED visits among adolescents, and females in particular, for mental health conditions overall... decreased compared with those during fall 2021,” the agency wrote in its *Morbidity and Mortality Weekly Report* (MMWR).

To arrive at its conclusions, the CDC examined ED visit data for adolescents from facilities consistently reporting data to the National Syndromic Surveillance Program (NSSP) from January 2019 to early February 2023. The NSSP is joint project of the CDC, local, and state health departments, and federal, academic, and private sector partners. It receives anonymized medical record data from approximately 75 percent of EDs nationwide. ★



The Senior Care Gazette

News from
the World of
Hamaspik
HomeCare and
Senior Health

“Stars” Honored at Hamaspik HomeCare’s Annual Staff Appreciation Event

Yearly Get-Together Celebrates Agency’s Accomplishments, Fosters Team Spirit; Prominent Judge Inspires Crowd

Hamaspik HomeCare began as a single point of light—a solitary program created just to help one community member with complex care needs.

Well over a decade later, that lone star has transformed into a colossal constellation, with the agency embracing thousands of seniors and others in need of home care.

Celebrating that fact was the agency’s recent Employee Appreciation Event 2023, with its theme of “Where Every Employee is a Shining Star.”

The event, held at the Dumbo Loft event space in Brooklyn, connected employees from the Hudson Valley to Brooklyn and Long Island, with staff from agency offices large and small

converging like stars to form a single constellation.

The purpose of the event was for all of Hamaspik HomeCare’s numerous offices to come together for a meet-and-greet, explains agency Regional Director Raizy Mermelstein.

“All of our satellite and regional offices always work together,” she says, “and this was an opportunity to get to know each other and enjoy an event together.”

Guests were first formally welcomed by event emcee and veteran agency Field Nurse Leah Lichstein, RN.

Mrs. Lichstein next introduced Hamaspik HomeCare Executive Director Asher Katz, who shared opening remarks.

Driving home the event’s rallying theme was the heartwarming video then shown, in which Hamaspik HomeCare patient David enjoyed an unscripted visit by his entire Hamaspik HomeCare team of home health aide (HHA), Field Nurse, and two Coordinators.

“It’s a great group of people that you have,” said Charlie, David’s lifelong friend and advocate, also present for the visit. “It shows. It really does. It shows that you really hire good people who care for their patients.”

The video communicated a buoyant, positive and upbeat message—leaving viewers with a sense of family and, most importantly, professional pride at being part of Hamaspik HomeCare.

Following that motivational video,

more motivation followed in the form of a 15-minute award ceremony, in which several employees across all departments were applauded for their devotion and dedication to their jobs—and the heart and soul that they put into it.

Guests were next inspired by New York State Acting Supreme Court Justice Rachel Freier, the event’s guest speaker, who expanded on the place each individual star has in the constellation of Hamaspik HomeCare.

“Besides the appreciation and getting treated, it was very nice to get all the offices together,” says Field Nurse Adina Bodlander, RN. “We all work together.”

And now, they know it better than ever. ★

► HEALTH NEWS

International MRI Study Links High Blood Pressure to Dementia, Cognitive Decline

Edinburgh, Scotland — It’s bad enough to have hypertension, or high blood pressure. The condition, which—according to the CDC—affects some 70 percent of U.S. seniors, is the top cause of heart disease and stroke.

Now, an international team of scientists has found that that high blood pressure directly impacts specific areas of the brain, which could lead to dementia and cognitive decline—also common health risks for seniors.

Put otherwise, high blood pressure isn’t just bad for the heart—it’s bad for the mind, too.

Using brain MRI scans, genetic analyses, and data from thousands of patients, the researchers discovered that nine specific brain regions—particularly those connected to memory loss and cognitive abilities—particularly suffer due to high blood pressure. These included the putamen, a part of the brain involved in regulating movement, learning, motor control, language functions, reward, cognitive

functioning, and addiction.

Other areas affected include the anterior thalamic radiation, which is involved in executive functions like the planning of simple and complex daily tasks. Also found to be affected are the anterior corona radiata and anterior limb of the internal capsule, which are involved in decision-making and emotion management.

The changes to these areas included decreases in brain volume and the amount of surface area on the brain cortex, changes to connections between different parts of the brain, and changes in measures of brain activity.

The study was led by Prof. Tomasz Guzik, affiliated with both the University of Edinburgh in Scotland and the Jagiellonian University Medical College in Poland. To arrive at their conclusions, Prof. Guzik and his team analyzed MRI images of over 30,000 patients from the UK Biobank study. Their study is said to be the

first to pinpoint the exact areas most impacted, a breakthrough that could guide scientists and doctors in creating new treatment methods for cognitive impairment due to high blood pressure, and also identify individuals at higher risk of developing dementia.

“Studying the genes and proteins

in these brain structures could help us understand how high blood pressure affects the brain and causes cognitive problems,” said Prof. Guzik in a media release. “We may also be able to predict who will develop memory loss and dementia faster in the context of high blood pressure, aiding precision medicine.”

High blood pressure affects approximately 30 percent of the global population. ★

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