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A QUARTERLY PUBLICATION OF THE POTTER-RANDALL COUNTY MEDICAL SOCIETY

Summer 2017 | VOL 27 | NO. 3

Patient Advocacy

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President's Message: **Medicine: Business vs. Art**

by Rouzbeh K. Kordestani, M.D., MPH

It is truly amazing how dynamic medicine has become. Unfortunately, sometimes the dynamics throw curve balls.

As some of you may have heard, I will soon close my practice here in Amarillo and will go into a sabbatical. I do this for many reasons and those reasons are of particular note.

As the tides of medicine have shifted, I (like many of you) have noticed that medicine is no longer in our control. The BUSINESS of medicine has forced the ART of medicine to take a back seat, and I truly cannot tell you why. I do realize it is important to run a business. However, when an insurance company/medical system can dictate fierce negotiating terms and force a patient and a doctor to make a tenuous relationship or to sever one, there is definitely something wrong. When physicians work non-stop, even at back breaking pace, to simply keep up, there's something really wrong. When residents refuse to pick surgical specialties or sub-specialties in medicine because they are simply "too hard," something is definitely wrong.

I point all of these out because medicine is going in the wrong direction. And I believe we are all so busy that we cannot simply stop, look and put a hold on it. Each and every one of us has the power to control our patients. By control, I mean educate and make the patients understand what truly is going on. We can do so much with each and every one of the patients. However, in all fairness, none of you/us can. Between the number of patients you are forced to see, the paperwork you are instructed to fill, and the dictations and the corrections you are mandated to complete, you have no time to do anything. I suspect many of you do not even have the time to really be a doctor.-----THAT NEEDS TO STOP.

That's what happened to me. I practice here in Amarillo and am faced with more and more changes. The help from the hospitals seems to be withering. The staffing in the hospitals seems to be waning. The quality of care is definitely compromised, simply because there are not enough experienced people. There

are more patients and more acuity per patient....You can see this is coming to a tipping point. The system will crash..... unless....

Unless each physician starts to slow things down. Each physician needs to take time to re-evaluate his practice. You need to see what you can do and what you cannot do. If you are over-extended, for the sake of the patients, you need to know your limits. Remember this is a marathon, not a sprint. Each of you needs to have a heart to heart with yourself and realize what you need to do to be able to supply effective care to a group of patients. That's all. No one asked you to be a martyr. You are a physician, a care giver. GIVE GOOD CARE. If the system is failing you, change it. If it continues to fail you, walk away, take some time and make the changes to make yourself the physician you need to be. That's what every one of us needs to do. Why? Because the BUSINESS of medicine should never displace the ART of medicine.

That is what I needed to do. I believe the system needs change, and I hope to do that from the non-practicing side. I will be back when I think I have changed it enough to make it better.

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Our Next Issue Of

***Panhandle
Health***

Features:

**Patient Advocacy
Part 2**

Alliance News

by Irene Jones, Co-President

The Potter-Randall County Medical Alliance had a busy spring semester. From Doctor's Day, playdates, quarterly meetings to handing out Hard Hats, it has been nonstop fun. We had over sixty people in attendance at our Doctor's Day event. Kristen Atkins and Lacie Schniederjan presented a \$5,000 check to our local Children's Miracle Network and a \$12,000 check to Our Children's Blessing.



A group of ladies met and learned the artistry of making flower arrangements. We all walked away with stunning flowers to take home from our 2nd Quarterly meeting.

Thank you to Dr. Jessie Dieguez-Arsenault and Regence Health Network for teaming up with the Alliance on a very successful Hard Hats event. We are so thankful for all the staff from Regence Health Network that helped make this day happen. We handed out over 235 helmets to kids and raffled off over \$1,500 in bikes and scooters. Special thanks to our Alliance members and Physicians who took time out of their busy schedules to help work stations at our event: Dr. Daniel Arsenault, Dr. Jason Jones, Audra Kirkendall, Claire Shear, Kristen Atkins,

Dr. Aaron Atkins, Dr. Matthew Turrie, Olga Tolscik, Elisia Miller, Dr. Morgan Black, Dr. Alison Lunsford, Dr. Amanda Griffin, Dr. Steve Griffin, Dr. Rachel Anderson and Dr. Sean Anderson.

SHOUTOUTS!

Thank you Erica Beggs, Jamie Williams, Kristen Atkins and Carlene Lennard for stocking the Hygiene Closet the last few months. Also shout out to Anna Holland, Liana Proffer, Shelby Neichoy and Jesa Hernandez for providing a meal to the Ronald McDonald House from March-June. We appreciate you ladies. Thank you to Dr. Kat McNeil, Olga Tolscik-Uzzynski, Cliff Craig, Dr. Jason Jones, Anna Holland, Dr. Scott

Miller, Dr. and Mrs. Dennis Cannon, Matilda Ritter, Dr. & Mrs. Doug Hyde and Dr. Jessie Dieguez-Arsenault for your bike and helmet donations. Thank you Kiki Brabham for planning our 2nd Quarterly meeting at Amarillo Flower Market.

Hope to see you at our upcoming events!

July 13th: Family Event @ Western Bowling 6-8pm

August: Quarterly Meeting TBA

August 12: Back to School Event @ Heal the City (volunteer opportunity)

September 14th: Couples Fall Social @ Wilhem's Home

Doctor's Day & Hard Hats for Little Heads Event.



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Secretary: Anna Holland,

Christi Rush, Lara Assadourian



Executive Director's Message

by *Cindy Barnard, Executive Director*

This edition of *Panhandle Health* contains various articles on Patient Advocacy. Patient Advocacy groups help patients, their families, and their caregivers navigate the medical landscape as well as receive appropriate and timely care, education, and financial assistance, when needed. There are different types of advocacy groups such as condition-specific groups (varying in their mission), umbrella groups or alliances (possibly advocating for specific protective legislation), and general support groups. General support groups may offer personal connections, medical information, resources, lists of doctors and clinics, and/or a registry or a collection of information focusing on a specific diagnosis or medical condition. There are also nonprofit patient advocacy groups offering data on enrollment in clinical trials. For patients and their families searching for medical information, treatment options, research, or financial aid resources, patient advocacy groups provide that information and service. In general, patient advocacy groups provide our community with a wealth of helpful medical resources.

From: Blum, Alan <ablum@ua.edu>
Date: Wed, 12 Apr 2017
To: <prcms@suddenlinkmail.com>
Subject: Another superb issue

Cindy Barnard
Executive Director
Potter-Randall County Medical Society

Dear Cindy,

You may recall that I am a huge fan of Panhandle Medicine and the Potter-Randall County Medical Society. As the former editor of the New York State Journal of Medicine and the Medical Journal of Australia, I produced a number of theme issues, so I know how challenging it can be to attract consistently well-written and engaging manuscripts. Please extend my congratulations to Dr. Crnic and the editorial board for the superb issue on prematurity. The cover is also especially beautiful. Thank you for your thoughtful comments about the artist.

Sincerely,
Alan

PS--You'll soon be getting a topnotch family physician member in Dr. Blake DeWitt, who will be graduating from our family medicine residency in June and returning to West Texas. He is an outstanding doctor and has been a marvelous chief resident.





Letter from the Editor: *Patient Advocacy Reference Project, Part 1*

by Tracy Crnic, M.D.

Summer is finally here, and we are all preparing ourselves for the summer time rush in our practices. I've noticed, especially when rushed, that I find myself in need of a quick reference or information about a service that is offered for our patients, but I rarely succeed at quickly producing it. I have made several efforts to find a succinct but inclusive tool that provides these resources with little success; thus, I hoped to use this project to create one. Obviously, there exist a vast number of options to serve different purposes; there are also many great local and specific services available to our patients that we may be unaware of and/or how to access them. I wanted to create a practical and efficient tool for all of us to be able to pull out and use in those spur of the moment times. Our patient and colleague population are often in need of support, advice, additional information about their conditions, financial assistance, or other ancillary services that are not available in the office or hospital setting. In addition not all of us are in a setting that provides us information regarding the existence of or rapid access to the providers of these services and how to enlist their aid. I've noticed this to be true, especially regarding services that may not commonly pertain to my subspecialty of patients.

With this in mind, I hoped to create a reference aid with this project, of patient advocacy groups available us and our patients. The bulk of information is intended to highlight local assets, informing you of their services and goals as well as a brief description of the institution. Additionally, an expanded listing of services in abbreviated form, a "phone book" of sorts, is included at the conclusion of these editions. In the process of putting this project together, I encountered such enthusiasm from the contributing groups that one issue just didn't seem a fair rep-

resentation of our great community. In that light, I have broadened this project into both our summer and fall issues. A logical way of dividing the two seemed to me to be age related. Our summer issue therefore will highlight a broader range of adult and elderly services, and the fall issue will emphasize services more geared toward our younger population.

There are thousands of organizations, websites, blogs, social media sites, and random information to comb through. This project is intended to organize that spectrum in to credible and reputable options and to highlight those that are specific to our area. With the understanding that this is the tip of the iceberg so to speak, I hope that it serves to enlighten those of us that are unaware of some of the benefits our area offers us and helps provide a link for our patients and colleagues to better overall patient care.

Again, noting the breadth of options available, in efforts to make this a practical tool, there may be services that are unintentionally but nonetheless absent here. If you as readers are aware of something that should be included, please feel free to let me know. They can be included in "Part 2" or later issues if necessary.

Also of note, you will recognize that the format of entries here differs some from our standard protocol of submissions. This is intended to allow inclusion of as many resources as possible, while preventing the volume of material from impeding your research. Most entries provide a contact with which you can use to gain additional information about their services. As mentioned, at the conclusion of these issues is a listing of additional services and contact information in more of a phone book or index style. This includes groups that are available on a national level, emergency access information, and a section for you to create notes if desired to make future searches easier to find.

I want to thank all of our contributors for the overwhelming enthusiasm and willingness to participate in this endeavor. Many of them made great efforts toward helping us in a format unusual to our norm, and I appreciate that. Thank you also to our readers and members for taking the time to pick up such a reference and to use it to provide our community of patients with the best we have to offer them.



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Panhandle AIDS Support Organization (PASO)

by Michael Timcisko

Charles lay dying in a Chicago hospital room in 1985. Lesions covered his skin. He was the victim of a mysterious disease, one that was unknown and feared. Rumors raged as to how this virus was spread – So much so that Charles's visitors stopped at his doorway to talk, reluctant to approach his bedside. Charles, a clinical psychologist with a successful practice, died eight months into his battle with Acquired Immunodeficiency Syndrome (AIDS).

Public response was negative in the early years of the epidemic. The Centers of Disease Control called the infection GRIDS or gay-related immunodeficiency syndrome.

The first recognition of the AIDS epidemic in the United States occurred in spring of 1981. HIV, the virus that causes AIDS, was not isolated until 1983. From 1981 through 1987, the average life expectancy for people diagnosed with AIDS was 18 months.

Hundreds of people died every week.

The first case diagnosed in Amarillo surfaced amid community shock. The Texas Panhandle had regarded itself as an insular refuge when it came to the national epidemic.

The Panhandle AIDS Support Organization Inc. opened its Amarillo doors in August of 1987, offering education to the public and emotional support to those infected with HIV disease in the 26 counties of the Texas Panhandle.

Today, our not-for-profit agency is a full-service community organization. A case management system provides referrals to doctors, dentists and optometrists, therapeutic counseling, transportation, housing assistance and support groups.

PASO collaborates with the City of Amarillo Health Dept. to provide free HIV testing. Call 806-351-7220 for times and appointments.

AIDS education is ongoing. Civic groups, churches, hospitals, businesses and the public can request programs and information. PASO became a Local Performance Site of the South Central

AIDS Education Training Center in 2008.

Dr. Arlene Hudson M.D. serves as PASO's clinical director and primary educator. In collaboration with Amarillo College Center for Continuing Healthcare Education, PASO presents a HIV/AIDS Symposium every spring, free with Continuing Education credits available.

In spite of national awareness and education, the AIDS crisis persists. "Over the past year, we served 296 clients," says Michael Timcisko, executive director of PASO. "Some 39 of those clients were new to us over the past year."

Those numbers break down to reveal that about 50 percent of clients are homosexual or bi-sexual. About 50 percent are heterosexual, and 25 percent are women.

HIV infections are increasing more rapidly among women who have unprotected sex with infected male partners, according to the National Institutes of Health.

Timcisko also points to a "dangerous chasm between AIDS/HIV reality and perception among today's youth with an upward trend in HIV infection in people younger than age 24."

Lack of education is to blame, he says, and the tendency to downplay the severity of the disease in light of advances in AIDS/HIV medications. Death rates – which reached as high as 650,000 by the year 2013 in the U.S. – began to decline after multidrug therapy became widely available.

"I do think it's a lack of education, especially in Amarillo where we have an abstinence-only philosophy in our school districts," Timcisko said. "We cannot go in and talk to students at a high school, or a junior high school or middle school, and tell them how to avoid or lessen their risk of acquiring HIV infection. I also think we have a lot of young people that, when they do research on their own, they are reading about how wonderful our medications are today...I think they feel like 'well, if I get it there's this one pill a day I can take,' so they aren't as safe or responsible as they should be."

PASO funding comes from state and federal grant funds, private foundations and local contributions. To supplement these sources, PASO relies on several fundraisers each year. The agency's largest fundraiser, Turnabout, a musical event every November where boys are girls and girls are boys, provides not only exceptional entertainment but also information on AIDS/HIV.

"Turnabout is one of our events that we are able to speak to our audience," Timcisko said. "We update them on what we are doing at PASO, what our client levels look like, any changes that are going on at the agency, any trends that we're seeing in infection rates in certain population groups. It is an opportunity for us to educate our audience in a 10-minute time frame. The great thing about Turnabout is that if you come once, you're going to come back."

Other fundraisers include a Friends of PASO gathering and a new cabaret-styled piano bar event, Café PASO, both scheduled in the summer.

Timcisko says access to the public is important. "Someone thinking about becoming a client can go to our website and read about our services," he said. A new video also features the organization's history, operations, culture and interviews.

"You're going to be able to put faces with the agency; faces that have been with the agency for a long time who can convey to someone what we have to offer them," he said.

PASO continues to look for corporate sponsorships and volunteers to help with various events and projects.

PASO

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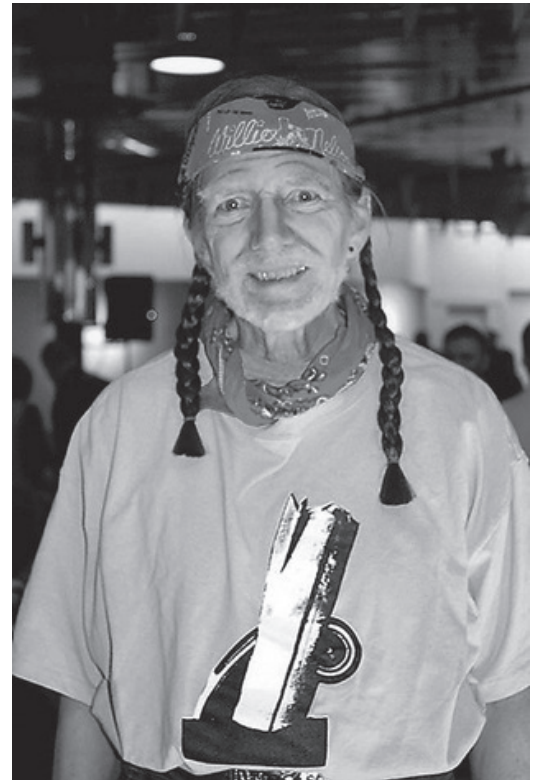
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Catholic Charities of the Texas Panhandle

by Jeff Gulde, Executive Director

Catholic Charities of the Texas Panhandle was formed in 1932 during The Great Depression as Catholic Charities of the Diocese of Amarillo, serving the areas that are now the Dioceses of Amarillo, Lubbock and San Angelo. Over the years, the agency was also known as the Catholic Welfare Bureau and Catholic Family Service. Today, Catholic Charities of the Texas Panhandle continues the same mission of providing help and creating hope. Our Mission Statement says, "Catholic Charities of the Texas Panhandle supports the value and dignity of human life, promotes self-worth and independence, and strives to meet the ever changing needs in our community" Our programs target those in need regardless of race, creed, color, sex, sexual orientation, etc. Our main number is 806-376-4571 and we are located at 2801 Duniven Circle, or can be found online at www.cctxp.org.

Pearl Longbine Emergency Youth Shelter

Our emergency youth shelter is a 28-bed transitional emergency placement for at-risk, abused, neglected, runaway and homeless youth ages 5-17. Our staff's ultimate goal is to ensure the youth are in a safe, secure and welcoming environment until they are placed in long-term or permanent residence, or until they return home to family. The shelter is also a National Safe Place agency, providing crisis intervention through our crisis hotline (806.376.7731), educating area youth on the dangers of running away, and providing access to resources so that youth have alternatives to ending up in law enforcement, criminal justice, or mental health systems.

Refugee Resettlement Program

One of two resettlement agencies in Amarillo, our Refugee Resettlement division has a diverse staff, dedicated to meeting the needs of refugees arriving to reunite with family members, as well as secondary migrating refugees who arrive in the area. Through a cooperative agreement with the State Department, managed by the U.S. Conference of Catholic Bishops, our agency resettles refugees from all around the world. We receive approximately 160 reunification refugees annually. Our case

managers, many of them former refugees, help new arrivals by setting up a fully-furnished apartment, taking clients to health screenings and assisting with orientations (school, home, city, etc.). Our job developers help these clients find jobs by arranging interviews for jobs that complement their skills and interests. We strive to help new arrivals become self-sufficient as quickly as possible.

Citizenship and Immigration

Our citizenship and immigration division is the only Board of Immigration Appeals-accredited immigration service agency in the Texas panhandle. In addition to Amarillo, we provide services throughout the Texas panhandle. Services provided include family reunification, lawful permanent residence, adjustment of status, asylum, and citizenship services for refugees and immigrants. We offer the lowest fees in the area.

Amarillo Interpreting Service

Established in 2000 as an extension of the Refugee Resettlement program, this service was created to meet interpreting needs throughout the Texas panhandle. This program employs a diverse, trained staff that covers over 30 different languages. Each interpreter is thoroughly trained and guided by a strict code of ethics. Amarillo Interpreting and Translation Service charges a reasonable fee to cover expenses.

Community Services - Affordable Housing

Catholic Charities of the Texas Panhandle is a Community Housing

Development Organization, designated by the City of Amarillo. This enables us to use HOME funding to acquire and renovate properties which are then rented to low-income clients. We have 13 apartment complex units consisting of one bedroom, efficiency and two-bedroom units. The apartments are "all bills paid," and 10 percent are handicap-accessible. Additionally, we have three single family homes to help meet the housing needs for families.

Community Services - Adult Eye Care

Our adult eye care division works in conjunction with local optometrists and ophthalmologists to provide eye exams and glasses for adults unable to pay for these services. Donors and the Family Care Foundation provide money for us to buy eyeglasses, and local eye care professionals provide services at no cost to clients who qualify.

Catholic Charities Hunger Project

The CCHP is a grocery store located in our building at 2801 Duniven Circle. CCHP serves those in need 55 and older or disabled. Food is donated from parishes, businesses and individuals, as well as purchased from the High Plains Food Bank and grocery vendors. This program currently serves 500-600 each month and is growing rapidly. Clients shop for what they want and know they will use, leading to greater use of resources. We also deliver groceries once a month to approximately 60 homebound individuals. The Hunger Project continues to be a critical lifeline to this growing population.

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Amarillo Recovery from Alcohol and Drugs (ARAD):

Shelter Program and Residential Treatment Center

by Skyler A. Mueller, BS, QMHP-CS, CM-II

Mission: To lead in the education, treatment and healing for those affected by alcohol and other drug addiction.

Vision: To make recovery a reality.

Shelter Program

History: In 2007, a group of concerned individuals from Amarillo, Texas united to create Amarillo Recovery from Alcohol and Drugs (ARAD). ARAD was formed out of concern for individuals and families impacted by substance misuse, and the unwavering belief that treatment is effective and recovery is possible. Encouraged by the generosity of many local benefactors, and after many years of dedicated planning, ARAD's intensive outpatient program for homeless persons began successful operation in February of 2013.

About Us: Amarillo Recovery from Alcohol and Drugs (ARAD) is a non-profit organization that provides an intensive outpatient treatment program for individuals experiencing homelessness in Amarillo and the surrounding area.

Program Staff: Roger W. Yoakum, B.A., LCDC, QMHP:

Amarillo Recovery from Alcohols and Drugs - Director of Community Services

Skyler A. Mueller, B.S., QMHP-CS, CM-II:

Amarillo Recovery from Alcohol and Drugs - Director of Admissions and

Administrative Assistant

Texas Panhandle Centers - Case Manager II

Mary C. Vanek, Ph.D.:

Amarillo Recovery From Alcohol and Drugs - Volunteer Assistant

Services Offered: ARAD provides 30 days of clinical treatment over the course of approximately 6 weeks at no cost to participants. Treatment services are provided Monday-Friday from 9:00 AM – 4:00 PM, and Saturday from 9:00 AM – 1:00 PM.

Transportation, lunch, and all program materials are provided for program participants. Clients are also provided transportation to and from local 12-step support group meetings four nights per week.

ARAD is centered on the 12-step model of recovery and focuses on drug and alcohol education, relapse prevention, life-skills training, and meditation. Individual counseling, group counseling, and case management are provided by licensed professionals.

Eligibility Requirements: Clients are required to maintain residency in one of the participating homeless shelters for the duration of their treatment episode. Current participating homeless shelters include: The Salvation Army of Amarillo, Faith City Mission of Amarillo, Downtown Women's Center: The Haven House and The ABBA House, Family Support Services of Amarillo- Domestic Violence Shelter, Another Chance House,

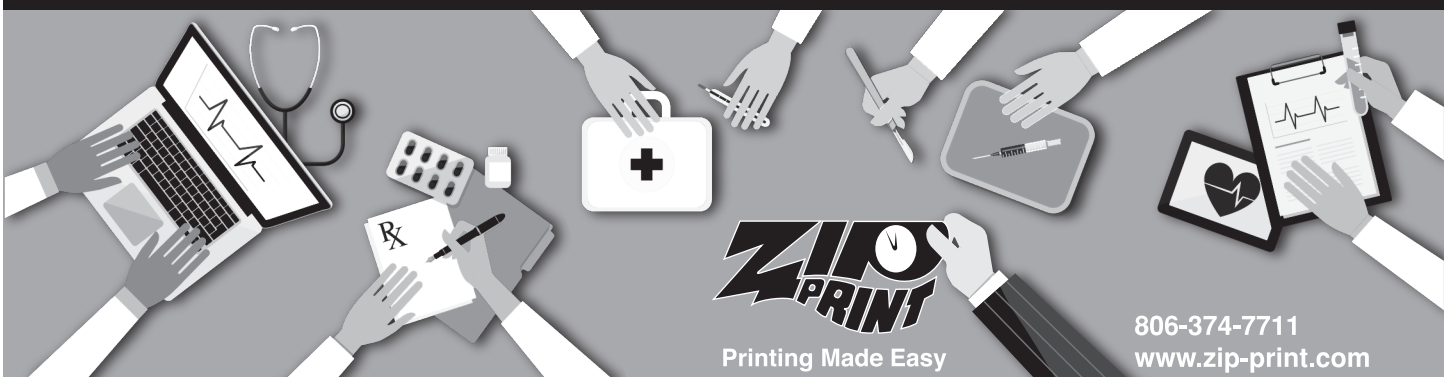
Texas Panhandle Centers-Respite Center, and Martha's Home.

Admission Process: All applicants must be screened prior to admission. Screenings are conducted in person every Tuesday at 2:30 PM in the main lobby at The Salvation Army of Amarillo, or via phone by calling Skyler Mueller at (806)353-2862 or (806)679-2937.

Community Impact: Sixty-seven percent of ARAD's clients complete our entire treatment program. ARAD has provided this treatment to over 550 patients since February 2013. In a large study of ARAD clients from February through December, 2015, ARAD had treated 370 clients. ARAD could contact 68% of those graduates two months later; 99% were still sober. Of those 370 clients, including those who did not graduate, their arrest rate declined 81% in the year after graduation as compared to the year prior to treatment. An arrest was valued at \$5,000 – police time and expense, jail expense, hospital emergency room clearance for some individuals prior to booking, and court costs including public defender cost. The reduction in arrests saved community taxpayers approximately \$1,510,00 during that period. For those clients who stayed and graduated, their arrests declined 87%, a savings to taxpayers of \$940,000.

| continued on page 14

Proud to Serve the Amarillo Medical Society.



The advertisement features a collage of medical and healthcare-related icons and hands. Icons include a laptop with a heart rate line, a stethoscope, a pill bottle, a first aid kit, a syringe, a clipboard with a heart rate line, and a heart with a pulse line. Hands are shown holding these items, suggesting a medical or healthcare setting. The ZIP PRINT logo is prominently displayed in the center, with the tagline "Printing Made Easy" below it. The contact information "806-374-7711" and "www.zip-print.com" is located in the bottom right corner.

ARAD also tracked the hospitalizations of those who graduated and were able to be contacted two months later. Hospital admissions declined 13%. A hospitalization was valued at \$15,000 – ambulance transportation, emergency department screening, ICU treatment, and regular hospital admission. Many of this group required extraordinary medical care because of their history of poor or non-existent healthcare. The decline in hospitalizations resulted in a savings of \$165,000 to the Hospital District's Indigent Care Fund.

Residential Treatment Center

History: Building on the success of the organization's intensive outpatient treatment program for homeless persons in Amarillo, Amarillo Recovery from Alcohol and Drugs is opening a 30-day residential treatment program.

About Us: ARAD's residential treatment center will bring affordable, personalized, comprehensive, and holistic treatment to individuals struggling with substance misuse and related behavioral health issues. ARAD's residential treatment program serves individuals and families from the Amarillo area and beyond.

Center Staff: Martha D. Burkett, MPA, LPC, NCC, CAADC, ACS, D.O.T., SAP, ADS:

Amarillo Recovery from Alcohol and Drugs- Director of Residential Services

James Avery Rush, IV, MD:

Amarillo Recovery from Alcohol and Drugs- Co-Medical Director

Michael D. Jenkins, MD:

Amarillo Recovery from Alcohol and Drugs- Co-Medical Director

Services Offered: ARAD's residential treatment center works with individuals and families to create personalized, client-centered care plans and to offer evidence-based protocols across the continuum, from intake to aftercare. We provide case management and coordinate with other health care providers and community resources, as well as law enforcement/courts, as appropriate.

Eligibility Requirements: Clients must meet DSM-5 diagnostic criteria for a moderate to severe substance use disorder, and must be medically stabilized prior to admission. ARAD will provide thorough documentation for insurance and reimbursement and will also accept cash, money order and credit card payments.

Admission Process: Please call us at (806)350-2723 or (844)403-2723, for a free, compassionate and confidential consultation about services for yourself or someone close to you about whom you are concerned.

Board of Directors: Perry Gilmore, Ph.D., Bob Sanders, Carol Allen, J.T. Jolley, Chuck Alexander, Ron Bankhead, Rosemartha Cates, Ross Clopton, Pattilou Dawkins, Nathan Goldstein, MD, Ronald Lacy, MD, Vince Nowak, Sharon McDonald, Tisha Peterson, Benny Teafatiller, and John Marmaduke (Honorary Chair).

Contact: Amarillo Recovery from Alcohol and Drugs - Shelter Program
1703 South Avondale Street, Amarillo, Texas 79106

arad.prg@gmail.com

Phone: (806)353-2862

Fax: (806)353-2835

Amarillo Recovery from Alcohol and Drugs - Residential Treatment Center
1001 Wallace Boulevard, Amarillo, Texas 79106

info@aradamarillo.com

Phone: (806)350-2723

Toll-Free: (844)403-2723

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Panhandle Community Services

by Kaitlin Mosley, Assistant Director for Health Services

Panhandle Community Services (PCS) is one of the oldest social services agencies in the Texas Panhandle. Founded in 1966, PCS provides services to low income families in all 26 counties in the Texas Panhandle.

PCS's mission is to work with community partners to change lives and lead change for low-income people, bridging the gap from poverty to self-sufficiency. PCS's vision is that low-income people have the power to live independent of government assistance.

In 2015, after a year of consulting with community partners, low income families and PCS staff, the Board of Directors approved a strategic plan based on evidence of factors that prevent low income families from becoming self-sufficient. An important factor was access to quality health care. Evidence shows that low income families lose a number of uncompensated work hours due to lack of quality healthcare for themselves and their families. As a result their path to self-sufficiency is slowed down or stopped. To meet this need, PCS designed and now implements a healthcare initiative with the purpose of bridging the healthcare gap for families in the Panhandle in 3 different areas.

1. Access to Healthcare

PCS is the only federally health care certified navigator agency in the Panhandle. With a staff of 20 federal and state certified staff, PCS assists families with enrollment in private (marketplace) or public (Medicaid or CHIP) insurances based on their individual or family needs. Staff can also make referrals to clinics who offer free or reduced healthcare services in the community.

2. Education

In addition to access to quality care, it is very important to educate families in two major areas:

a. Preventive care:

PCS staff educates families on the importance of preventive care, with an emphasis on reducing the chronic illnesses that impact the families' ability to obtain and maintain self-sufficiency. Staff also distribute a pamphlet called "Know

your Numbers" to clients designed for families to take to their doctor and develop a preventive health plan for that individual/family.

b. Use of insurance:

PCS staff provides families with training on how to use their insurance and the importance of developing a relationship with their primary provider.

3. Outreach:

PCS staff makes presentations to community groups and organizations about the importance of health care insurance and how it can be used to improve the health care of individuals, families, and communities.

Helping someone become self-sufficient requires more than one strategy or service. PCS administers a number of programs and services that are focused around families to help them become more successful. They include:

1. Family Development:

The Family Development Program is family-driven and encompasses the entire family unit. The process includes creating a set of family-wide goals, identifying and overcoming barriers, and charting a clear course of smaller attainable goals, which lead to reaching the larger goal of self-sufficiency. Staff works with the family, community organizations and other programs at PCS to bundle services to meet each family's need. Families make a 3-5 year commitment to work with staff under this program.

2. Utility Assistance:

The Utility Assistance Program is designed to prevent utility disconnects and to stabilize utility costs for low income households. PCS works with both public and private funds to assist qualifying residents. In addition, staff members provide families and individuals with educational information to help reduce their utility cost.

3. HUD Housing:

As a HUD Housing Authority, PCS promotes the "Fair Housing Act" that strives to achieve affordable and decent

living environments for all people. More than 1,900 Section 8 vouchers for rental assistance are issued throughout the 26 counties to serve thousands of Texas Panhandle residents.

4. Weatherization:

The Weatherization Program combines public and private resources to help eligible families reduce energy consumption, heating, and cooling costs by doing minor repairs to their home. Trained and certified staff members conduct in-depth reviews of each home and work with local contractors to make necessary repairs.

5. Panhandle Transit:

Transportation is a major barrier for people in the Panhandle. In a 2015 needs assessment of the Panhandle region conducted by PCS, transportation ranked as one of the top five major needs in the area. Panhandle Transit provides transportation to non-urban areas across the Texas Panhandle for access to employment, education, shopping, recreation, healthcare, and social services.

6. Retired and Senior Volunteer Program:

The Retired and Senior Volunteer Program (RSVP) provides seniors with volunteer opportunities to use their talents and experiences to enrich the lives of others in meaningful ways. Many of the seniors serve in organizations that support low income families.

While PCS receives the majority of its funding from public, private and foundation agencies, they also host an annual fund raiser, Festival of Trees, during the middle of November. PCS provides pre-lit Christmas trees, and local business, organizations or individuals adopt a tree and decorate it. On the night of the fund raiser the trees are auctioned off to the community.

For more information on any of our services, please visit our website or give us a call.

www.pcsvcs.org

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City of Amarillo Department of Public Health

by Casie Stoughton, MPH, BSN, RN, CPH – Director

The City of Amarillo's Public Health department is responsible for promoting health and preventing disease in the citizens of Potter and Randall counties. Public Health serves as a safety net for many of the most vulnerable in our community and provides services and expertise in a wide range of specific services, from tuberculosis and immunizations to STDs and public health emergency preparedness.

The **Communicable Disease** program conducts disease surveillance and epidemiology, interfaces with hospitals and other providers, and provides community education. This team receives reports of Texas notifiable conditions, per Chapters 81 and 121 of the Texas Health and Safety Code. They follow up with each report to ensure the safety of both individual patients and the public, to ensure appropriate treatment of patients and contacts, and to identify and respond to outbreaks. The Perinatal Hepatitis B Prevention Program is another component of the program that offers case management for infants and contacts for mothers who have Hepatitis B. This team also collaborates with the Department of Animal Management and Welfare to assess the need for rabies post-exposure prophylaxis for animal bite victims and provides pre-exposure vaccine as needed to member of the community.

In an effort to reduce cases of vaccine preventable diseases, the **Immunization** program provides adult and childhood immunizations through the mobile clinic and at fixed locations. This team offers immunization outreach, community education and school/daycare compliance assessments. Vaccines are offered at low or no cost to both children and adults. Target areas for the mobile clinic include disadvantaged areas like shelters, low-income housing, community events and community centers. In 2015, this pro-



gram gave 11,581 shots to 4,457 children and adults. Immunization clinic is available Monday thru Friday on a walk-in basis.

Amarillo is an international resettlement community for refugees. The **Refugee Health** team provides health screenings for primary refugees within 90 days of arrival. Screenings include TB skin testing, medical history, physical assessment and necessary referral for

medical care. Follow-up immunizations for primary and secondary refugees, assistance with the medical portion of green card paperwork, and community education are important components of this program.

The **Tuberculosis Control** program provides TB testing for the public, treatment and contact investigation for active cases, treatment of latent cases, and community education. In 2015, the TB team



provided treatment for 15 active and 204 latent TB infections in Potter and Randall counties. TB skin tests are available to the public on weekdays, excluding Thursday.

The **STD/HIV Prevention and Treatment** program provides an STD clinic for identification and treatment of STDs, disease intervention, contact investigation, HIV outreach and community education. HIV/STD risk reduction counseling and referrals to services and care are also provided. In 2015, this team tested 1,300 people for HIV, performed 2,434 STD exams and treatment and distributed 85,000+ condoms. STD clinic is available Monday thru Friday, by appointment at 806-378-6300.

The **Public Health Preparedness** team conducts all hazards preparedness, collaborates with community partners in planning, response, and evaluation and also provides community education. This team provides Strategic National Stockpile coordination and is involved in planning and exercising mass vaccination/mass distribution of medications.



The **Public Health Promotions** program supports community efforts aimed at reducing childhood obesity and teen pregnancy as well as encouraging childhood safety. This team assists with the Community Health Assessment and Community Health Improvement Plan, and provides accreditation for the

department through the Public Health Accreditation Board.

The City of Amarillo Department of Public Health is located at 1000 Martin Road. Thank you for partnering with public health to protect and serve our community.

PANHANDLE HEALTH

A Publication of the Potter-Randall County Medical Society

Editorial Policy and Information for Authors

Purpose *Panhandle Health* strives to promote the health and welfare of the residents of Amarillo and the Texas Panhandle through the publication of practical informative papers on topics of general interest to most physicians while maintaining editorial integrity and newsworthiness.

Spectrum *The Journal* seeks a wide range of review articles and original observations addressing clinical and non-clinical, social and public health, aspects as they relate to the advancement of the state of health in the Texas Panhandle. Pertinent letters to the editor, news submissions, and obituaries listings are accepted pending editorial review. The Editorial Board accepts or rejects submissions based on merit, appropriateness, and space availability.

Submission process Material should be e-mailed to the editor at prcms@suddenlinkmail.com or mail a hard copy to Cindy Barnard, PRCMS, 1721 Hagy, Amarillo, TX 79106. A recent photograph of the author (optional) and a curriculum vitae or a biographical summary are also to be submitted.

Conflict of Interest Authors must disclose any conflict of interest that may exist in relation to their submissions.

Journal Articles Manuscripts should be double-spaced with ample margins. Text should be narrative with complete sentences and logical subheadings. The word count accepted is generally 1200 to 1500 words. Review articles and original contributions should be accompanied by an abstract of no more than 150 words.

References References to scientific publications should be listed in numerical order at the end of the article with reference numbers placed in parentheses at appropriate points in text. The minimum acceptable data include:

Journals: Authors, article title, journal, year volume, issue number, inclusive pages.

Books: Author, title, place of publication, publisher, year.

Web sites: URL of the site and the date the information was accessed.

Other sources: Enough information must be included so that the source can be identified and retrieved. If not possible, the information for source should be included parenthetically in the text.

Illustrations Illustrations should be black and white only with complete-sentence legend.

Previously Published Material Short verbatim quotations in the text may be used without permission but should be quoted exactly with source credited. Otherwise, permission should be obtained in writing from the publishers and authors for publishing extensive textual material that was previously published.

Editing Accepted manuscripts are edited in accordance with the *American Medical Association Manual of Style*.

Letters Letters will be published at the discretion of the editor and editorial board. The length should be within 400 words. References should not exceed five. All letters are subject to editing and abridgment.

News News should be e-mailed prcms@suddenlinkmail.com or mailed to Cindy Barnard, PRCMS, 1721 Hagy, Amarillo, TX 79106.

Obituaries Listings of deceased members of PRCMS with highlights of their contributions are published when adequate information is available.

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City of Amarillo

Department of Public Health

Amarillo Bi-City, Bi-County Health Authority



Health Advisory: Mumps

May 16, 2017

The City of Amarillo Department of Public Health is reporting 2 cases of mumps in Randall County. "Texas is experiencing an outbreak, similar to the national trend at a 25 year high, due to declining vaccination rates," said Casie Stoughton, Director of Public Health.

Mumps is a virus that is best known for the puffy cheeks and swollen jaw that it causes, as a result of swollen glands in the mouth. Other signs and symptoms include:

- Fever
- Headache
- Muscle aches
- Tiredness
- Loss of appetite

Some people with mumps have mild cases or no symptoms at all; however, more serious complications can occur. Occasionally, mumps can cause meningitis, deafness, or swelling in the testicles and ovaries.

Mumps is spread by droplets of saliva from the mouth, nose, and throat of an infected person. Coughing, sneezing and sharing cups and eating utensils are ways to pass along the virus.

If you suspect you have mumps:

- Contact your healthcare provider.
- Stay home for 5 days after symptoms begin.
- Cover your mouth and nose when you cough or sneeze.
- Wash your hand frequently!

Healthcare providers are encouraged to test patients whom they suspect have mumps:

- Buccal swab – PCR within 3-5 days of symptom onset.

The City of Amarillo Department of Public Health urges everyone to be fully vaccinated. "Vaccines are the strongest protection against mumps and other vaccine preventable diseases," said Dr. Scott Milton, Health Authority. "It is important to protect our community with strong vaccination rates."

For more information, <https://www.cdc.gov/mumps/hcp.html>

You can reach out to Carol Hill, 806-378-6327, at the City of Amarillo Department of Public Health for additional information.



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The International Red Cross: Its Beginnings and Where It Is Today

by Rouzbeh K. Kordestani, M.D., MPH

"Would it not be possible, in time of peace and quiet, to form relief societies for the purpose of having care given to the wounded in wartime by zealous, devoted, and thoroughly qualified volunteers?"

This is a quotation from the book, *A Memory of Solferino* (1862), written by Henri Dunant (the founder of the Red Cross). Henri Dunant was a businessman who was stuck in a small town in Italy in 1859 during the battles of the War of Italian Unification. During this time, at Solferino, a battle ensued between the Austrian and the Franco-Sardinian armies. By many accounts as many as 40,000 soldiers died in the first few days. The wounded, numbering in the thousands, completely overwhelmed the medical abilities of both armies. The wounded that could travel found their way to the small city of Castiglione that was close by. There the local peoples treated the wounded.

Henri Dunant was stuck in Castiglione and was witness to the carnage. He himself canceled his business duties and tended to the wounded in a local church. Thousands died there from their wounds, without appropriate medical treatment. This left a lasting impression on Henri Dunant.

Henri Dunant was a Swiss national, born in Geneva. He was raised in a Calvinist family and was by all counts charitable and a believer. He began his career in banking and had several businesses. During the time of the Battle of Solferino, Dunant was traveling to meet with Napoleon III to set up new businesses in the region. Because of the battles, he was inadvertently stuck in Castiglione.

After his experiences in Castiglione, Dunant authored his famous book. His book and its details of the horrifying endeavors were studied widely. By

chance, a copy of the book was secured by a group of intellectuals in Switzerland, who called themselves The Geneva Public Welfare Society. This group took it upon themselves to push the findings of the book to enact changes. In turn, this group soon changed its name to The International Committee for Relief of the Wounded. These individuals and their society later advocated the formation of an international conference to discuss the issues raised by Dunant. Fortunately, the members of the society were politically and economically powerful and found their influence helpful. The initial findings of the committee were accepted by the Swiss government. The Swiss government in turn called for a much larger international conference. In mid 1864, the Swiss government sent out formal diplomatic invitations to all European governments, to the United States, and to Mexico and Brazil. In August of 1864, delegates of these governments met in Geneva to discuss the essential question raised by Dunant. After days of meetings, the delegates adopted ten resolutions that established the societies for the relief of the wounded soldiers during times of war. These resolutions were signed and became the "Geneva Convention for the Amelioration of the Condition of the Wounded in Armies in the Field." The Convention and its resolutions were quickly ratified by the twelve attendant countries and their respective governments. Soon after, the resolutions were tested as Europe was besieged by a series of wars: the Austro-Prussian War of 1866, the Franco-Prussian War, the Eastern Crisis (1875-8), the Serbo-Bulgarian War (1885-1886), and the Balkan Wars (1912-13).

During these wars, the individual national relief societies each did a worthy job of trying to help the wounded. Each society was met with some success and failures. Unfortunately, the societies continued to work separately in their respective countries. World War I changed all of that.

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As World War I raged, it became obvious that no individual country or national society had the strength or the power or the resources to handle the scales of human suffering. Because of this, the different national societies began to band together not only to police the handling of the wounded but also to simply be able to handle the tasks at hand. In 1919, at the end of World War I, in 1919, the International Federation of Red Cross and Red Crescent (IFRC) Societies were founded. The First World War and its overwhelming nature established a need for close cooperation between all member Red Cross Societies. The cooperation between the national groups had been essential to the survival of thousands. Hence, the cooperation needed to continue. The formal establishment of the international society made that possible. (The emblem is an inverse of the Swiss flag, with a red cross on a white background. The Red Crescent was recognized as the symbol of the societies in Islamic countries. In 2007, the Red Crystal was added as a new symbol and was recognized as a neutral emblem for states objecting to the cross or the crescent on religious grounds.)

The Geneva Convention(s)

Although the original set of ten resolutions became known as the First Geneva Convention, as time went on, additional amendments were made. In 1907, at the Hague in the Netherlands, amendments were ratified and officially designated as "Laws and Customs of War on Land." This clarified the legal basis for the Red Cross work for prisoners of war. It led to the involvement of the Red Cross efforts in prisoner camps and the treatment of the wounded in those camps.

As a direct consequence of World War I and the development of noxious chemicals, in 1925, an additional protocol was adopted in Geneva that outlawed the use of suffocating or poisonous gases and biological agents as weapons. In 1929, these new protocols were adopted and ratified by member states and declared as the Second Geneva Convention rules. These also served as the legal basis for the work of the Red Cross and the international associations during the Second World War.

In 1949, additional changes were made to the two original Geneva Convention

rules. Specifically, the additional adoptions were "for the Amelioration of the Condition of Wounded, Sick, and Shipwrecked Members of Armed Forces at Sea." This was technically considered the third Geneva Convention (the Second Geneva Convention was later renamed The Hague Convention). A further revision, the Fourth Geneva Convention, was soon penned in. This encompassed new amendments "relative to the Protection of Civilian Persons in Time of War."

Since 1977, the last convention, more than 600 articles and rules have been adopted and are now the hallmarks of the Geneva Convention Rules during times of war and peace.

ICRC/IFRC in the Second World War and Now

By the Second World War, the ICRC had been in place for approximately 50 years. Its presence and activities were well known and highly respected. During its inception and since, it had earned the respect of the world and had been given the Nobel Prize for Peace in 1917 (two additional Nobel Peace Prizes would be given to them, one in 1944 and one in 1963). By the end of the Second World War, the ICRC had conducted 12,750 visits to concentration and prisoner of war (POW) camps. This set of visits took place in 41 member countries around the world. The ICRC also catalogued and kept track of up to 45 million prisoners and refugees during this same time period.

The ICRC unfortunately had its most difficult time during the Second World War. The major obstacle was the German Red Cross. Even though the German Red Cross was a Red Cross institution, they refused to cooperate with the Geneva Convention(s) and statutes and actively participated in the deportation of the German Jew population and were privy to the mass murders conducted in their territories in Germany and in Poland and at the Nazi concentration camps. The ICRC also had difficulties with Russia and Japan during the war. Neither Russia nor Japan had ratified the Geneva Rules and Statutes, and so both refused to abide by its conventions. In this case, the ICRC had its only major failure in a time of war.

Since the end of the Second World War, the ICRC/IFRC has branched into 189 countries and has had 97 million volunteers in its ranks.

Since the end of the Cold War, the ICRC/IFRC has had its bloodiest times. Since 1989, more delegates and members have died while working with local and regional forces in internal armed conflicts. This is further aggravated by the fact that terrorist organizations and small militias do not accept or abide by the rules of the Geneva Conventions. In fact, in many cases, militant or radical forces like the Islamic State or Al-Qaeda specifically target ICRC/IFRC members and forces in an attempt to make a statement. This has had dire results and consequences.

POTTER RANDALL COUNTY MEDICAL SOCIETY (PRCMS) OFFERS HELP TO ADDICTED PHYSICIANS

If you, or a physician you know, are struggling with addiction and are unsure what to do or whom to contact, the Potter Randall County Medical Society is here to help. We offer face-to-face confidential sessions with the PRCMS Physician Health and Wellness Committee, made up of your physician peers who know and understand recovery. Please don't struggle alone when help is a phone call or an email away. Whether you are calling for yourself, your practice partner, or as a family member of a physician, contact Cindy Barnard, PRCMS Executive Director, at 806-355-6854 or prcms@suddenlinkmail.com. Membership in PRCMS is not required.

Baptist Community Services:

Quality Senior and Wellness Services in Amarillo

by Vicki Brooks, Director of Corporate Communications and Community Development

Baptist Community Services (BCS), a local non-profit organization, provides services to help people live healthier, more fulfilled lives. Its senior living neighborhood, Park Central, is nestled between five churches in thriving downtown Amarillo. The Arbors, a skilled nursing center located in the medical center, serves individuals of all ages recovering after surgery, illness or injury. The Amarillo Town Club, Amarillo's premier fitness center, has served the wellness and recreation needs of families since 1967.

Park Central

The Park Central neighborhood is comprised of seven vibrant residential centers and offers a continuum of care that includes independent living, assisted living, long-term care and memory care. This selection of communities allows seniors to find the right community for their needs

and is flexible to allow seniors to stay at Park Central as their needs evolve. Local ownership provides a comfortable and safe community that is lovingly managed.

Independent Living

Park Central's independent living communities feature apartments designed for seniors, and give residents a chance to create lasting friendships with neighbors through a full calendar of social events. These apartments make life easier for residents, as they come with complete apartment maintenance, scheduled group transportation and more.

Park Central's Independent Senior Living includes four communities:

Park Place Towers is an elegant 10-story apartment for adults 62+. Monthly pricing includes two restaurant-style meals each day, all utilities including cable TV, weekly

housekeeping, resident assistants, nurse navigators, pastoral care, private dining rooms and much more.

The Continental has many of the same features as Park Place Towers, and is an ideal community for pet lovers, as pets are welcome on designated floors. The community features an enclosed pet run and private screened balconies for an enjoyable home life.

Plemons Court offers affordable housing for seniors 55+ with qualifying incomes, in addition to the apartments' standard rate for all seniors. The community welcomes pets in first floor apartments, and each apartment features a private patio or balcony.

The Talmage is an Amarillo landmark that has been lovingly renovated in the Park

| continued on page 26

Be A Part Of The Circle

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Interim Healthcare
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Daryl Curtis, CLU, CHFC - Physicians Financial Partners
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Be a part of the circle. In 2006, Potter Randall County Medical Society introduced the Circle of Friends, a program designed with the business of medicine in mind. Members of the Circle of Friends are companies that pay an annual fee to participate in Medical Society events. Their financial commitment allows PRCMS to provide quality programs throughout the year, such as the Annual Meeting, Doctors Day, Resident Reception, Family Fall Festival, Retired Physicians Lunch and Women in Medicine. In return, these companies are invited to attend these events and discuss with the physicians the benefits that their companies offer a physicians practice.

We are grateful for the support of these organizations and anticipate another great year of serving the needs of our members. The purpose for Circle of Friends is to provide a valuable base of

resources to assist the physician in the business of medicine so their practice of medicine can improve.

This program has proven to be a valuable resource of services such as liability insurance, accounting, banking and much more. This year, we hope to expand the Circle to include services the physician may use in his or her personal life. Through this program, we can invite businesses serving physicians to support the Society and increase their visibility among its members. Corporate support contributes to the Society's ability to advocate and care for physicians and patients in Potter and Randall Counties.

The Medical Society thanks all of its supporters as it offers new opportunities to its membership. If your business is interested in being a part of our Circle of Friends, please contact Cindy Barnard at 355-6854 or e-mail prcms@suddenlinkmail.com.



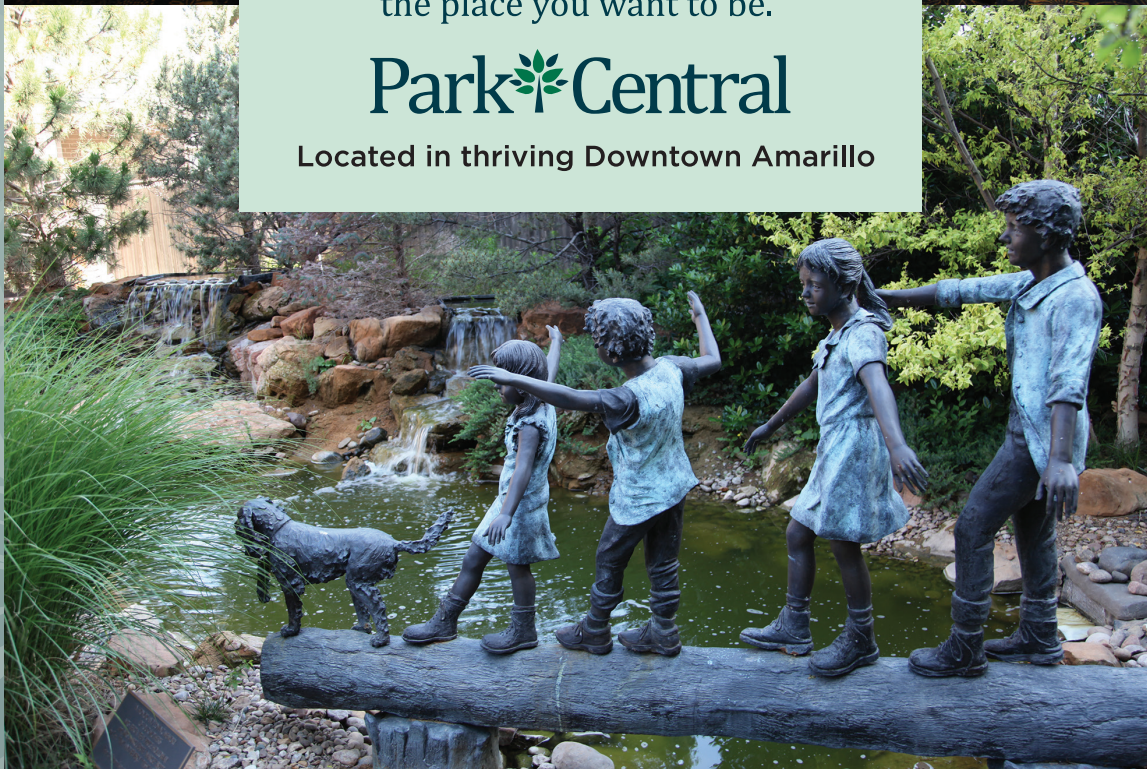
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Central community. Seniors 55+ can live in this comfortable and beautiful residence and enjoy the library and arts and crafts room. In addition to its low standard rate for seniors, The Talmage offers affordable housing options for seniors with qualifying incomes.

Assisted Living

Park Central's two assisted living residences, The Harrington and The Moore, offer seniors the support services they need to continue living independent, healthy lives. Apartment fees for these two communities include:

- Full breakfast, lunch and dinner
- Medication management and administration
- Personalized assistance with daily tasks such as bathing, dressing and grooming
- Management of physician appointments and dialysis, including transportation
- Oxygen and respiratory management
- Pastoral care

The Harrington's elegant, spacious apartments give residents a chance to personalize their space with their own furnishings and décor and are designed for senior safety and ease of use. From the library to outdoor patios, residents appreciate The Harrington's features that allow them to enjoy life.

The Moore Assisted Living Center provides more complex support services than The Harrington, while still allowing residents to live in the comfort of their own apartments, surrounded by their furnishings and décor. Residents get a choice of three daily restaurant-style meals from Park Central's talented culinary team.

Long-Term Care

For seniors in need of long-term nursing care, the **Ware Living Center** provides the highest quality of care and an opportunity for residents to achieve maximum independence. Residents enjoy companionship, spontaneity and meaningful interaction on a daily basis.

Residents are offered a variety of services and amenities, including:

- Rehabilitative services
- Wellness center
- Personal laundry and housekeeping
- Whirlpool baths
- Pastoral care and support groups

Memory Care

Later this year, Park Central will open a state-of-the-art memory care center, **The Sycamore at Park Central**, to create an outstanding quality of life in a home-like setting for those with memory care needs.

The Arbors

The Arbors offers people of all ages a beautiful, comfortable and friendly place to recover from surgery, illness or injury. The community has been designated a 5-star facility by the U.S. Government Centers for Medicare and Medicaid Services, which is based on quality of care, safety and staffing.

The Arbors specializes in:

- Skilled nursing
- Rehabilitation
- Physical therapy
- Occupational therapy
- Speech therapy
- Pain management
- Wound care
- Infusion therapy
- Digestive disease services
- Respiratory services

Residents at The Arbors have access to pastoral services, medical transportation, laundry services, housekeeping, a beauty salon and activity programs, among other services and amenities.

Amarillo Town Club

Amarillo's premier fitness facility, the Amarillo Town Club offers something for every member of the family, from toddlers to seniors. Those who want to get fit will find many options, including yoga and spin classes, personal training, the latest exercise equipment, a training pool and two family-friendly pools.

The Amarillo Town Club truly has something for everyone. Families appreciate the Town Club's child care options while they work out, as well as swim lessons for all skill levels from 6 months old and onward. The Amarillo Town Club's newest offering for members is **TRIBE Team Training**, a group training system that lasts six weeks and helps participants get fit, strengthen their core and improve mobility.

Amarillo Town Club's friendly and knowledgeable staff helps members find the right exercise options for their goals, interests and fitness level. Featuring a variety of membership options, the Amarillo Town Club is Amarillo's top-quality option for getting and staying fit for life.

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Physicians Caring for Texans

Family Support Services of Amarillo, Inc.

by Shyla Dubois, Executive Coordinator

Family Support Services of Amarillo, Inc (FSS) is a private, non-profit, multi-service agency that can trace its history back to 1908 and was incorporated in 1952. FSS serves over 25,000 people each year, including:

- Victims of sexual assault and family violence
- At-risk children, families, and individuals in the Amarillo area
- Area Residents in need of individual, group, marital, and family counseling
- Veterans, family members of veterans, and surviving spouses.

FSS places an emphasis on helping Amarillo and Texas Panhandle residents, especially during times of crisis or family turmoil. We provide integrated services in a continuum of care to meet the diverse needs of our clients. For our counseling services, we offer cutting edge

modalities that include:

- Eye Movement Desensitization and Reprocessing (EMDR)
- Equine Assisted Psychotherapy (EAP)
- Trauma-Informed Cognitive Behavioral Therapy (TF-CBT)
- Trauma Informed Yoga Therapy
- LGBTQIA specific counseling

We have highly experienced counselors certified as LPC, LCSW, LMFT, LMSW, LPC-I and LCDC. We offer counseling for children, adults, couples and families. We are the only domestic violence/sexual assault/human trafficking safe house in the Amarillo and Canyon area. We provide a 24-hour crisis response and hotline service.

Our Education and Preventions services provide evidence-based programs addressing bullying, substance abuse,

teen pregnancy, and dating violence. Our focus is on breaking the cycles of abuse and neglect for at-risk children, families and individuals. All veterans and their families are welcome at our Veteran Resource Center to be greeted by our staff to navigate through veteran specific resources.

CONTACT:

We are conveniently located downtown at 1001 S Polk. We are open Monday - Thursday from 8 a.m. until 8 p.m. and Friday 8 a.m. until 4:30 p.m.

24-HOUR CRISIS HOTLINE:
806.374.5433

www.fss-ama.org



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lawprohealth@gmail.com**

Speak to be Heard:

Steps Toward Improving Patient Advocacy

by Teena Hall, LCSW, C-SWHC

Advocacy is a core value in social work. It is more than just looking out for the best interest of the population we serve. What is advocacy and how does it apply to Veterans in this changing world? Often there are more questions than answers. No doubt, the changing and controversial political climate of today is having a great impact on Veteran centered care. As we seek to conquer the challenge of providing the best care to those who have sacrificed so much, we must begin a critical examination of how to provide the highest level of advocacy for our Veterans.

Social workers are called to promote the right of clients to self-determination. We promote the well-being of those we choose to serve. In the interest of this article, we will examine the changing VA system and how change is promoting better services and benefits for our Veterans. Advocacy can be on a global, national, state, community or individual level. Emphasizing the issues that have and will impact our Veteran population is the challenge we face as advocates. No special license or accreditation is needed to be an effective advocate. However, you must be willing to face a wide range of

issues which impact those for whom you wish to advocate.

Improving Veteran outcomes is perhaps one of the basics of this high-profile topic called Veteran advocacy. We strive to seek change and improvement for our Veterans, at all government levels for best care policies. With a passion for advocacy, we must remember the Veteran's voice is the one to be heard, not our own. Nothing can be more detrimental to a person than an advocate with a personal agenda. This challenge calls for constant self-evaluation. Whether you are a physician, nurse, social worker, or family member; you are called to advocate for those in your care.

As our World War II Veterans age, there is a rising impact on healthcare. We are losing our World War II Veterans at an alarming rate and no doubt, in the future they will be a generation of history. We seek to give them a voice now, but also we will strive to keep their voices heard in the coming generations. As we learn from each passing generation, we learn new ways to advocate for our veterans. As our WWII Veterans returned home, they were generally treated as heroes. The country

united as we faced the ever-imposing threat of communism. Although not everyone was on board with WWII so to speak, it was a time in our history when multiple generations banded together for a common cause.

No doubt, those men and women signed on 'the line' with an understanding that their healthcare future was secure because of their service. However, as this group ages, the impact on the Veterans Administration has been one not expected in the years to follow. My father and father in law were WWII Veterans and told me often of the promises made to them by those recruiting young men and women to serve for this world cause. They thought their futures were secured by their service to our country. As the impact of their aging process became evident to the system of care, we began to see what was not foreseen in the trenches of service time. It is doubtful their choice to serve would have been any different had they known the future of the changing system of healthcare, but neither does our responsibility as advocates.

Each period of military service presents its own challenges. Though not all periods of service time will be discussed here, we can perhaps agree that each period of service presents differing points of advocacy. The role of the advocate often means exerting influence on behalf of the one for who we advocate.

Our Vietnam Veterans were surrounded by vast controversy both in the US and abroad. When returning from service, they were often spat upon and shamed, called baby killers and were embarrassed to wear the uniform. That has, in many instances, translated into their choices to seek healthcare services from the Veterans Administration. A Vietnam Veteran told me his story of returning to the US after his service time in Vietnam. He told me that as soon as he was able, he changed out of his uniform into civilian clothes so not to be

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recognized as a Vietnam participant. This example is at the center of patient advocacy: providing those who feel their voice has been silenced with the power to reclaim it.

Who are the stakeholders at the center of Veteran advocacy? Our Veterans themselves are the ones we seek to empower. Though it would be difficult to name one entity at the front of the line, we can without a doubt name those working within the VA system as stakeholders in change for our Veterans. Physicians, nurses, mental health providers, social workers, VA appointed patient advocates and chaplains should all stand together to close the gap in services to our veterans. This diverse mix of advocates has a responsibility to society to work together for the best Veteran outcomes. The interdisciplinary approach to advocacy is perhaps a requirement to best meet the needs of those receiving complex medical care. Now, add the Veteran into this mix and we have the perfect blend for success. We as the stakeholders, are those identified as the key players of change. Change can take decades but we must never stop to improve the quality of life for those who chose to serve on our behalf.

We watch this world change in ways our elders never thought possible. The information highway of the internet as well as the benefits and challenges of social media bring challenges to the role of the advocate. The responsibility that comes with these changes can be daunting. On the positive side, these avenues can help our Veterans find their own voices. Veterans and their families often research benefits and services and can use the tools at hand for collecting information to benefit themselves and those they love. Of course, as advocates, we welcome this desire of self-education as they arm themselves with the power of knowledge.

There are many VA programs to provide education and support to those who deserve our best. We will outline a few of these programs in this article. However, please do not think these are the only programs provided to Veterans. The list of services is unending and comprehensive. If so, then why do we often hear that our Veterans are not being taken care of or provided services in the manner they deserve? This question will be one that

continues to arise as we strive to provide for changing needs within this special population. As we continue to invest our time, services and money into those who deserve our best, we will find it is difficult to provide advocacy to all those deserving of the honor. We, as social workers, reinvest efforts into change daily, often facing barriers that impact our hope for short term and long term change. However, we will not be swayed into thinking the challenge is not conquerable. Rather we will rise to the level needed to provide advocacy leading to the best possible outcome.

On a national level, programs have been implemented throughout history using a massive to-do list that some find has often left our Veterans without the services needed. At the risk of posing programs will be the answer to change, we must clearly outline and examine the issues facing Veterans. While programs are an instrumental tool of advocacy, we must not lean on them to provide all the care needed. We must analyze the benefits of these programs and alter them in any way needed to impact change. As a change agent, we can use programs within the VA to begin to provide access to help and services needed on an individual basis.

As social workers, we work within these programs to offer options that can be used as a catalyst for personal change. Advocacy is more than just providing programs or looking out for someone's best interest. It can pose ethical dilemmas that require critical thinking to meet unforeseen challenges. Advocacy is not always the easy road but we choose to use our specific skill sets to provide options for individual change. We must recognize the need of our Veterans as we help them choose wellness strategies that save lives and improve the quality of life.

Historically, the VA has implemented a variety of programs toward meeting the needs of Veterans. It is the goal that those who work within these programs seek to

provide the best care possible as we meet each Veteran at his or her place of need. Timeliness in care, access to services and education regarding benefits and how to access them are topics surrounding Veteran centered care.

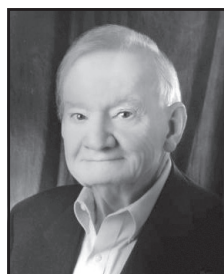
The Amarillo VA implores the role of social workers within programs as a point of contact for change. Though the right to self-determination is honored, seeking to bring knowledge to Veterans provides opportunity for change and empowerment. Those who chose to serve our country are deserving of the best we have to offer.

Veterans are provided care on both an outpatient and inpatient basis. The outpatient programs are extensive and provide a variety of services from which to choose assistance. The social workers in the outpatient clinics strive to meet the needs of Veterans seeking medical treatment on an outpatient basis. This includes all levels of advocacy from accessing mental health services to addressing transportation issues. These services can't be ranked in order of importance, but are provided with the Veteran's best interest and presenting need at the forefront.

Veterans who are admitted to the hospital are provided services of advocacy for both quality and quantity of life. The services include psychosocial support during illness, addressing barriers to safe discharge and end of life care. Again, the services provided and offered on an inpatient basis are vast and not able to be listed in their entirety. Providing education and completion of advance directives, providing support and services during life threatening illnesses and ensuring a safe discharge plan are included in the acute care social worker's advocacy role.

At the heart of service for many Veterans is their ability to cope with issues

| continued on page 32



Dr. Clyde Williams, Obstetrician,
died on Saturday, January 21, 2017 at the age of 79.
He was a member of the Potter Randall County
Medical Society for 39 years.

that have been presented to them during their time of service. For example, some Veterans face challenges which affect their tendency toward substance use. The substance use disorder program is a sobriety based program that offers multiple recovery treatment programs. Programs highlight skills for life, and offer a complete, personalized treatment experience. Recovery is a journey and must be practiced throughout life. Encouragement is provided to each Veteran as they actively engage their mind, body and spirit throughout the journey. There are a variety of recovery treatment programs such as the intensive outpatient program. It offers services based on the 12-step model, and a post-traumatic stress disorder (PTSD) track embedded in the program, as well as an interdisciplinary team approach to recovery. Interviews for the program are offered daily by trained staff who specialize in treatment recovery. There is a Veterans Continuing Recovery Program (VCR) that allows for additional support on an outpatient basis using recovery maintenance and support, educational groups/classes, and establishing long term relationships that encourage

sobriety. Outpatient treatment also can include individual, couples, or family therapy.

The Mental Health Intensive Case Management (MHICM) program is designed to meet the needs and challenges of those who face severe and persistent mental illness which poses a severe functional impairment. Those who are not able to have their needs met on an outpatient basis benefit from this program as ongoing case management is provided. This in turn, reduces the number of psychiatric hospitalizations and improves the life of the Veteran in many ways. These advocates seek to provide support and direction using their specific skills set for mental health care.

The Housing First program is built on the premise that housing a Veteran will meet the immediate need of shelter and safety. Once this has been secured, the advocate can begin working with the Veteran on access to healthcare, benefits, and services which are often not accessed due to homelessness. Addressing chronic homelessness is at the center of

The Housing First Program. The VA has partnered with Housing and Urban Development (HUD) program to offer housing vouchers to those who face chronic homelessness. Healthcare for Homeless Veterans (HCHV) is an integral part of the Housing First model. Seeking ways to change or improve life can be overwhelming in the face of homelessness. These advocates work tirelessly to provide services to those in need of a place to call home.

Home Base Primary Care (HBPC) is a service provided to home bound Veterans, as it is difficult for these Veterans to come to appointments in the traditional outpatient setting. A goal of this program is to allow the Veteran to safely remain in the least restrictive environment for care. These advocates provide counseling to help Veterans and families cope with changing lifestyles due to illness and aging. Services range from completing advance directives to assisting in locating appropriate alternate living arrangements if needed such as assisted living or nursing home care.

NEW MEMBER SPOTLIGHT 2017

BOARD OF CENSORS REPORT: The following were approved for membership on January 10, 2017

REGULAR MEMBERSHIP:

CLEMENTS, KELLY E., M.D. - NPM
1600 Wallace, NICU, Amarillo TX 79106.

Graduated from Albany Medical College, Albany NY 2009. Internship and Residency at Albany Medical College, Albany NY 2009-2015 (Pediatrics and Neonatology).

GOPALACHAR, ANURADHA, M.D. - IM
6010 Amarillo Blvd., VA, Amarillo TX 79106.

Graduated from Bangalore Medical College, Bangalore University, Karnataka, India 1992. Internship and Residency at Emory University, Atlanta GA 1995-1998.

GREGSTON, JAY, M.D. - EM
2101 S. Coulter, Amarillo TX 79106.

Graduated from University of Oklahoma College of Medicine, Oklahoma City OK 1996. Internship and Residency at University of Oklahoma Emergency Medicine, Oklahoma City OK 1996-2000.

HERRICK, SHANNON, M.D. - PD
1400 Coulter, Amarillo TX 79106.
(Former member/rejoined).

Graduated from University of Texas Southwestern, Dallas TX 2001. Internship and Residency at University of Texas Southwestern, Dallas TX 2001-2003. Residency at Texas Tech University Health Science Center, Amarillo TX 2003-2004.

TRANSFER MEMBERSHIP:

CABRERO, JOSE E., M.D. - EM
Transfer from Dallas County Medical Society.
5800 S. Coulter, ER NOW, Amarillo TX 79119.

Graduated from University of South Florida College of Medicine, Tampa, FL 2000. Internship and Residency at Louisiana State University, New Orleans LA 2000-2004.

RETIRED MEMBERSHIP/LIFE MEMBERSHIP:

CALDWELL, TURNER, M.D. - D
2929 Dunaway St., Amarillo, TX 79103.

COSCIA, JOHN, M.D. - DR
7802 London Court, Amarillo TX 79118.

DODSON, LEONARD EDWIN, M.D. - END
2005 Julian Blvd., Amarillo TX 79102.

JENNINGS, RICHARD LEE, M.D. - FM/GER
P.O. Box 196, Bushland TX 79012.

PERIMAN, PHILLIP O., M.D. - HO
3209 Hawthorne, Amarillo TX 79106.

BOARD OF CENSORS REPORT: The following were approved for membership on March 21, 2017

FIRST YEAR MEMBERSHIP:

KIRKENDALL, SAMUEL, M.D - GS
6 Medical Drive, Amarillo TX 79106.

Graduated from University of Texas Medical School at Houston, Houston TX 2011. Internship and Residency at University of Texas Southwestern, Dallas TX 2011-2016.

MATZEN, DORIAN R., D.O. -FM
4510 Bell BSA Urgent Care, Amarillo TX 79105.

Graduated from Touro University College of Osteopathic Medicine, Vallejo CA 2013. Internship and Residency at Arnot Ogden Medical Center, Elmira NY 2013-2016.

The VA has a Community Living Center (CLC) which is an inpatient nursing care facility. The CLC advocates work toward providing a safe, home-like environment for Veterans who are no longer able to reside in their own homes. They provide advocacy services for the heroes who reside in the CLC so they may receive needed medical services while maintaining quality of life. A memory care unit is provided for those with a diagnosis of dementia/Alzheimer's. The CLC also maintains short term rehab beds that provide physical and occupational therapy to those who are seeking to return to their highest level of independent functioning. The services provided in this short-term rehab program are instrumental in helping our Veterans recover from illness or injury.

The mental health services provided to our Veterans are ever changing to meet the needs of those who defended and protected our nation. Therapy can be provided on individual, couple, family and group setting. The plan of care is directed to counsel the Veteran toward a better, more fulfilling life. Advocates for changes in mental health services have worked tirelessly to ensure Veterans have every chance to healthy outcomes. The therapy is evidence based and provided by highly trained individuals who have the training, skills and knowledge to meet Veterans' mental health needs.

Coupled with the mental health program is the suicide prevention team. The rate of Veteran suicide is being reduced based on the services provided in this program. There are many advocate social workers who work toward providing counsel, safety plans and care to our Veterans who see no hope. They instill hope as they provide services to these Veterans. The Veteran's suicide hot line is a 24-hour line offered as a safety net for seeking help. The national hotline number is 1-800-273-8255 (TALK). All calls to the hotline are followed by this team to offer additional services and support to the Veteran.

The Veteran's Justice Outreach Program (VJO) has been awarded for advocacy. The program works to insure those with mental illness are not crimi-

nalized. The social worker coordinates with courts and attorneys to provide a felony diversion program to insure veterans receive treatment. A legal aid clinic for civil matters is offered, as well as legal planning clinics to assist with last will and testament for Veterans who can't afford this service elsewhere. The program allows the social worker to enter the jail system and assess and advocate for the needs of individual Veterans.

Our newly returning Veterans face challenges unique to their generation. Services for a returning Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF) Veteran services are tailored to the need of the Veteran. Medicine on the battle field has improved greatly and, as a result, many of these Veterans are returning with massive injuries such as traumatic brain injury (TBI). There is a wide range of effects it can have on one's life. A mild TBI can affect a Veteran's life in many ways not known until research has improved to provide new insight into this injury. Our returning Veterans are provided services both to reintegrate into society and to cope with illness or injury received during their time of service.

The annual Welcome Home event is held nationwide to honor not only those who have recently returned from duty but also honor Veterans from all eras. The Welcome Home event is held in conjunction with Veteran's Day. It showcases services offered to Veterans, assists with accessing benefits, food, games and an environment of respect and honor to these and their families.

The caregiver support program is directly related to those who are returning and who need care and support of someone in the home. This program provides referrals, services and in-home support to those who are impacted by their service in the Middle East. As these advocates work to promote change and provide additional services to this population, it is evident their devotion to this group is at the forefront of important services to our Veterans. The caregiver of the Veteran is provided services to strengthen and support their efforts to succeed in the home which reduces the number of those who are led to seek services in a facility.

Of interest, are the services and advocacy provided to Veterans in rural areas of the Panhandle and surrounding areas. To better serve these Veterans, community based outpatient clinics (CBOC) have been implemented. These free standing clinics advocate for change and services for the rural areas. They are based all over the United States serving areas not often providing direct medical care.

As noted earlier, this article in no way outlines or highlights all the advocacy services provided to our Veteran population in the Panhandle and surrounding areas. It is meant to be an overview of the role advocates play in providing services to all Veterans. This is a challenge we have chosen to accept for a reason: we are dedicated to serving those who first served us. It is a calling that is not for the faint of heart! Most anyone in today's world can tell you that working within the confines of government bureaucracy can be frustrating at best. However, we seek to provide the highest quality advocacy to those who have chosen to step up and serve; giving their best.

As advocates, we chose to accept the role to represent those who are under-represented or disenfranchised. Together, we are a strong influence on those we seek to help find their own voice. We are improving lives, empowering those who feel unheard, and increasing awareness of the need for change in the system. Perhaps then, may we continue to provide answers to complex problems. We can provide educational and psychosocial support, as we use science and theoretically based knowledge to bring about change that impacts our Veteran's health-care. Together, we seek education, early intervention, and wellness strategies to empower those who served us and help them make positive change in their lives. With diligence and energy, we will continue to work toward instilling hope and encouraging empowerment. From the battle field and beyond, we will seek to provide a resounding voice and accept the challenge to serve "To care for him who shall have borne the battle".

For further information on available programs and benefits please see the following website: www.va.gov

Hands On Amarillo

by Lizzie W. Mason

"Amarillo needs a way to connect willing volunteers with their favorite organizations!" That is a thought I had many times in the past, while working with several Amarillo non-profit organizations and coordinating volunteer efforts at Amarillo National Bank. I would sit in board meetings and listen to the needs of most of the organizations, and what is stated most often is the need to recruit and retain volunteers. On the flip side of that, I would hear from eager individuals who wanted to volunteer but didn't know where or how to get started. I knew there had to be a good way to make those connections, so I decided to get educated. There is a Non-Profit Studies Center at Austin Community College in Austin, TX so I went there and got a Certificate in Volunteer Management. This program taught more about recruitment, how to retain volunteers and most importantly, the Get Connected software.

Shortly thereafter, we formed Hands On Amarillo! Hands On Amarillo is an Online Volunteer Center for the non-profit community of Amarillo and surrounding areas. We connect volunteers with agencies that are appropriate for their passions or cause. Whether it be helping children, senior citizens and everyone in between, we can help find an agency that fits best for each individual to serve as a volunteer.

Hands On Amarillo kicked off in early 2015. Our Mission is to connect local non-profit organizations with passionate, enthusiastic volunteers. Our Vision is to adequately fill the needs of the entire Amarillo non-profit community with volunteers. The idea behind the entire program is to connect people with their individual interests by matching them through our software when they register on the website. Once an individual is

registered, it will point them in the direction of compatible agencies so they can volunteer. The volunteer is then able to respond to the needs of those agencies directly, thus making a seamless connection!

Our organization is energetically pursuing all individuals who want to do good in our community and who are seeking out non-profit agencies that can benefit from unpaid assistance.

Since our inception, Hands On Amarillo has registered 85 non-profit organizations and over 700 volunteers. These volunteers have fulfilled 450+ needs so far, and they are adding up week by week. We are currently involved with a third-party fundraiser put on by TownSquare Media called, *Texas Panhandle Craft BeerFest* held at the Amarillo Civic Center in August. We also rely on individual donations and corporate donations. We all love Amarillo and the surrounding communities and have volunteered extensively for many organizations.

Our Board of Directors consist of:

Lisa Hoff Davis, President
Shannon Williams, Treasurer
Savannah Singleton, Secretary

As stated earlier, we are only online! You can reach us at www.handsonamarillo.org or email our Founder, Lizzie W. Mason at lizzie@handsonamarillo.org.



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Be Wise — Immunize is a joint initiative led by TMA physicians and the TMA Alliance, and funded by the TMA Foundation.



Be Wise — ImmunizeSM
Physicians Caring for Texans

Be Wise — Immunize is a service mark of the Texas Medical Association.

Heal the City

by Mettie Taylor

HTC's mission is to provide free quality urgent care and referral services with compassion and dignity to the uninsured of our community. HTC seeks to provide those medical needs while connecting them to the existing health community and sharing Christ's love and hope with patients and volunteers alike. HTC's goal is to love the economically disadvantaged by providing quality medical care and education on health-related topics, while shifting the way our target group seeks medical care and empowering them to achieve and maintain a healthy lifestyle in order to prevent disease.

Dr. Alan Keister founded Heal the City after realizing that the desperate need for health care he witnessed on medical mission trips to Central America was equally pervasive in neighborhoods within Amarillo. The vision of opening a free medical clinic in Amarillo was born.

In September 2014, that dream was realized when HTC opened its doors. HTC has grown rapidly since its inception, treating over 5,400 patients, administering over

1,500 immunizations to children, and providing thousands of prescriptions in 2016 alone. The medical care is delivered by a phenomenal network of volunteers and providers who generously donate their time to serve HTC's patients.

Target Population

HTC's target populations are the uninsured in our communities who are economically disadvantaged and unable to receive quality medical care through traditional settings.

Services Provided

- Adult and pediatric medical care
- Dental care
- Physical therapy
- Mental health services through Texas Panhandle Centers
- Vision referrals
- Childhood immunizations
- Class A pharmacy on site
- Referrals to specialists when medically indicated
- Diagnostic services
- Women's health screenings on the 4th Tuesday of the month at 4:30 p.m.
- Connections to community resources

- Social work services
- CLIA waiver for lab services
- Spiritual support

Contact Information

609 S. Carolina • Amarillo, Texas 79106
(806) 231-0364

www.healthcityamarillo.com

Facebook: www.facebook.com/healthcityamarillo

Instagram: [healthcity](https://www.instagram.com/healthcity)

Information on Obtaining Service

Patients need to be at HTC at 1:30 on Mondays, where they will either be assessed for possible care or given a number, depending on the type of services needed. Patients then return at 4:00 to begin the intake process.

Information on Volunteering at HTC

If you would like to volunteer at HTC, you can obtain a volunteer application at www.healthcityamarillo.com or call the clinic for more information.

NEW MEMBER SPOTLIGHT 2017

REGULAR MEMBERSHIP:

MARTIN, THOMAS G., M.D. - EM

1501 S. Coulter, Amarillo TX 79106.

Graduated from Pennsylvania State University, Milton S. Hershey Medical Center, Hershey PA 1977. Internship and Residency at Truman Medical Center, Kansas City MO 1977-1980.

NIKAM, SRINIVAS, M.D. - CD

6010 Amarillo Blvd. W., Amarillo TX 79106.

Graduated from Government Medical College, Mysore University, Mysore India 1972. Internship at Mysore Medical College, Mysore India 1972-1974. Residency at Meharry Medical College, 1974-75, St. Elizabeth Hospital, OH 1975-76, and Philadelphia General Hospital, Philadelphia PA 1965-77. Fellowship at Henry Ford Hospital, Detroit MI 1978-80.

SAMES, THOMAS, M.D. - FM

P.O. Box 1156, Canyon TX 79015.

Graduated from Texas A&M University Medical School, College Station TX 1989. Internship at Mayo Clinic, Rochester MN 1989-1990 (GS). Residency at Wilford Hall Medical Center, Lockland AFB TX 1993-1996 (EM).

TRANSFER MEMBERSHIP:

LEMERT, JAMES, M.D. - U

Transfer from Bell County Medical Society.
1900 MediPark, Amarillo TX 79106.

Graduated from Texas Tech University of Health Sciences, Lubbock TX 2010. Internship and Residency at Baylor Scott & White Hospital, Temple TX 2010-2015.

BOARD OF CENSORS REPORT:

The following were approved for membership on May 9, 2017

FIRST YEAR MEMBERSHIP:

CHRISTIAN, AMANDA RAE, M.D. - OBG - OBSTETRICS & GYNECOLOGY

1400 S. Coulter, Amarillo TX 79106.

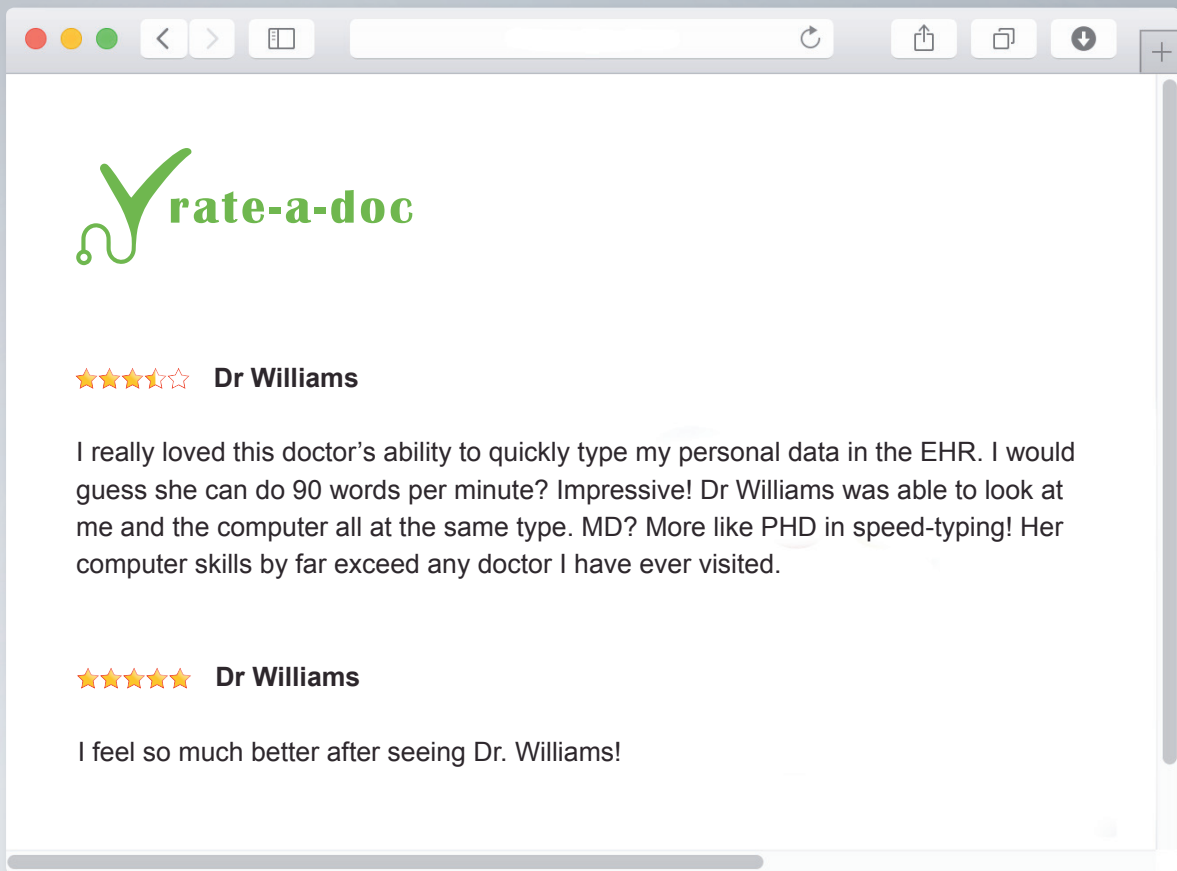
Graduated from University of Oklahoma Medical School, Oklahoma City OK 2013. Internship and Residency at Texas Tech University Health Science Center, Lubbock TX 2013-2017.

REGULAR MEMBERSHIP:

ELLINGTON, R. TODD, M.D. - GE - GASTROENTEROLOGY

6700 W. 9th, Amarillo TX 79106.

Graduated from University of Texas Medical School at San Antonio, San Antonio TX 1992. Internship and Residency at University of Texas Southwestern, Dallas TX 1992-1995. Fellowship at University of Texas Southwestern, Dallas TX 1996-1999.



At TMLT, we know what really matters and we've got you covered.

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2-1-1 Texas

by Courtney White

A Mission statement or purpose and goals description – and history of the organization/purpose/foundation of...

2-1-1 Texas, a program of the Texas Health and Human Services Commission, is committed to helping Texas citizens connect with the services they need. Our goal is to present accurate, well-organized and easy-to-find information from state and local health and human services programs. We accomplish this through the work of our 25 Area Information Centers (AICs) across the state. 2-1-1 Texas is a free, anonymous social service hotline available 24 hours a day, 7 days a week, and 365 days a year. No matter where you live in Texas, you can dial 2-1-1, and find information about resources in your local community.

Your target population

Anyone in the State of Texas

What services you provide or assist with – especially Amarillo specific

Services include information and referral for things like: Budgeting Education, Clothing and Food Resources, access

to Counseling Programs, Emergency Shelters, Health Services, Transportation Programs and many more...

Any programs, research, or fundraisers, camps etc. you provide or refer to.

Texas has a Summer Food Program through the Texas Department of Agriculture for kids 18 and younger. We refer many families to these program sites throughout the summer.

Seasonal Programs depend on the agencies providing the programs themselves. You can always call 2-1-1 for the most recent information concerning seasonal programs that can include: Christmas gifts and food, Thanksgiving Meals, and many more....

Contact information for patients and healthcare professionals, numbers, websites

2-1-1, or (877) 541-7905,
2-1-1texas.org

Amarillo 2-1-1 Center
200 South Tyler St.
Amarillo, TX 79101



Dr. Charles Wright, Family Physician,
died on Monday, April 17, 2017 at the age of 65.

He was a member of the Potter Randall County
Medical Society for 18 years.

NEW MEMBER SPOTLIGHT 2017

HAKIM, PAUL F., M.D. - DR - DIAGNOSTIC RADIOLOGY

P.O. Box 2780, Amarillo TX 79116.

Graduated from Eastern Virginia Medical School, College of Hampton Roads, Norfolk VA 2010. Internship at Eastern Virginia Medical School, Norfolk VA 2011-2012. Residency at Saint Barnabas, Livingston NJ 2012-2016. Fellowship at Cedars Sinai, Los Angeles CA (Body Imaging & Intervention) 2016-2017.

HUSAINY, MUHAMMAD N., D.O. - EM - EMERGENCY MEDICINE - ER Now

2101 Coulter, Amarillo TX 79106.

Graduated from West Virginia School of Osteopathic Medicine, Lewisburg VA 2007. Internship at University of Tennessee, Knoxville TN 2007-2008. Residency at University of Mississippi, Jackson MS 2008-2011.

SCHOCKER, JASON, M.D. - PTH - PATHOLOGY

1301 S. Coulter, #400, Amarillo TX 79106.

Graduated from University of Texas Medical Branch, Galveston TX 2009. Internship and Residency at University of Colorado Anschutz Medical Campus, Aurora CO 2009-2013.

TROUT, ELIJAH S., D.O. - DR - DIAGNOSTIC RADIOLOGY

1901MediPark, Amarillo TX 79106.

Graduated from Lake Erie College of Osteopathic Medicine, Bradenton FL 2011. Internship and Residency at Oakwood SouthShore, Trenton MI, 2011-2016. Fellowship at University of Iowa, Iowa City IA, 2016-2017 (Musculoskeletal Radiology).

TRANSFER MEMBERSHIP:

KENNEDY, CHAD M., M.D. - ORS - ORTHOPEDIC SURGERY

Transfer from Denton County Medical Society
1600 S. Coulter, Bldg B., Amarillo TX 79106.

Graduated from Texas Tech University Health Science Center, Lubbock TX 2009. Internship and Residency at University of Texas Health Science Center San Antonio, San Antonio TX 2009-2014.

RETIRED MEMBERSHIP:

MARTINEZ, ROBIN, M.D. - PD - PEDIATRICS

6305 Sunlake, Amarillo TX 79124



Prurigo Nodularis

by Kamel Azhar, M.D., Qassim Aljabr, M.D.

Introduction:

- Prurigo nodularis (PN) is a chronic skin condition that presents as multiple, firm, pruritic nodules typically localized to the extensor surface of the extremities.
- The incidence, prevalence and pathogenesis of PN remain unknown.
- The histopathology of PN shows thick, compact ortho-hyperkeratosis; irregular epidermal hyperplasia or pseudo-epitheliomatous hyperplasia; focal parakeratosis with irregular acanthosis; diminished nerve fiber density; and a nonspecific dermal infiltrate containing lymphocytes, macrophages, eosinophils, and neutrophils.
- PN can be associated with chronic renal failure, liver failure, hypothyroidism or hyperthyroidism, HIV infection, parasitic infestation, or malignancy.

Case report:

Chief complaint/Presenting symptoms:

- 49-year-old female patient presented to the clinic with six months of rash-like symptoms on her upper arms and lower legs that has been progressively getting worse over the last 1 to 2 weeks.
- She described little red bumps that were extremely itchy. She will scratch and they become scabs and then scar over.
- She has tried hydrogen peroxide over the wounds to help them from being infected.
- She has not tried any creams or lotions to help with the itching.
- She denies any change in detergents, soaps, or lotions.
- No other members of her household have similar symptoms.

Pertinent Physical Exam Findings:

Vitals: BP 136/80, HR 82, RR 18, Temp 98F

Skin Exam: Multiple areas of scabbing and wounding along the upper arms

bilaterally as well as a few lesions below the tibial plateau of her right and left lower extremities. Signs of multiple small, raised, erythematous papules, especially over the external aspect of her upper arms. Signs of excoriation. There is no crusting, weeping, or purulent discharge. No signs of eczema or scaling.

Clinical Course:

- ² The patient was started on Bactrim DS and hydroxyzine HCl as it was thought that it is secondary to a staph skin infection. She showed no improvement and the pruritus was uncontrolled.
- ² Punch biopsy: surface prurigo nodule with underlying dermal sclerotic changes which represent a small dermatofibroma.
- ² She was evaluated for associated conditions by ordering CBC, CMP, TSH and HIV testing. She was started on oral corticosteroid for 5 days and noticed mild improvement.
- ² She was switched to moderate potency topical corticosteroid and noticed significant improvement.

Discussion

Prurigo nodularis has an unknown incidence, prevalence, pathogenesis or definitive treatment. Reporting cases with PN may promote a better understanding of the disease and how to control it.

Presentation:

- This patient presented with a history of chronic rash associated with pruritus. She is also a known case of hypothyroidism and was not properly managed at the time of presentation.

Diagnosis:

- Diagnoses is suspected clinically, but a definitive diagnosis can be made with skin biopsy which will show hyperkeratosis, prominent acanthosis, hypergranulosis, and superficial dermal fibrosis.
- Patients should be evaluated for associated medical conditions such

as chronic renal failure, liver failure, hypothyroidism, HIV or malignancy.

Treatment:

- There is no specific treatment for prurigo nodularis (PN).
- Treatment goals are to control the pruritus and skin lesions.
- Antibiotic treatment is not effective as PN is not a bacterial infection.
- Antihistamines showed very little effect in controlling the pruritus.
- Topical corticosteroid is the first-line therapy to control both the pruritus and the skin lesions.
- The patient responded well to topical corticosteroid. The pruritus and skin lesions have improved over time. Her hypothyroidism was also managed at the same time with levothyroxine. It is unknown whether the patient's condition improved due to the topical treatment or the control of her hypothyroidism.
- Systemic treatment or phototherapy with narrowband UVB can be used in widespread lesions or as a second line therapy.
- One trial has shown benefit of topical capsaicin in 33 patients with gradual healing of skin lesions and a complete elimination of pruritus in 12 days.
- Patient education is important. They should be encouraged to reduce scratching and excoriation. Keeping the nails short and covered at night will help decrease the excoriation. Applying a dressing will also prevent excoriation and possibly prevent skin infections.

Prognosis:

Prurigo nodularis is a chronic skin condition that may have an effect on patients' daily life activities. The disease rarely resolves completely. It recurs commonly even after response to treatment.

Conclusion:

Prurigo nodularis is a poorly understood chronic skin condition that needs further study to identify its incidence, prevalence,

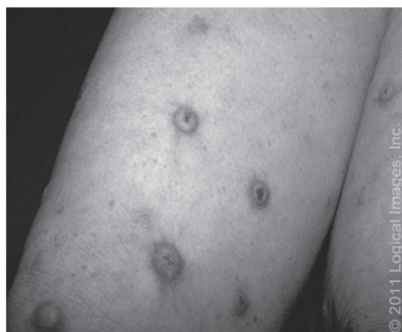
pathophysiology and treatment. Patients present with pruritic nodules that are typically localized to the extensor surface of the upper and lower extremities. It is diagnosed clinically, but a definitive diagnosis is made by skin biopsy showing hyperkeratosis, prominent acanthosis, hypergranulosis, and superficial dermal fibrosis. Patients should be evaluated for associated conditions. First line treatment is topical corticosteroid. Systemic treatment or phototherapy can be used in widespread lesions and as a second line treatment. Recurrence is common and the disease rarely resolves completely.

References:

1. Lee MR, Shumack S. Prurigo nodularis: a review. *Australas J Dermatol* 2005; 46:211.
2. Weigelt N, Metze D, Ständer S. Prurigo nodularis: systematic analysis of 58 histological criteria in 136 patients. *J Cutan Pathol* 2010; 37:578.
3. Bruni E, Caccialanza M, Piccinno R. Phototherapy of generalized prurigo nodularis. *Clin Exp Dermatol* 2010; 35:549.
4. Ständer S, Luger T, Metze D. Treatment of prurigo nodularis with topical capsaicin. *J Am Acad Dermatol* 2001; 44:471.



Picture 1A:
Prurigo nodularis on the lower limb
of some excoriated nodules.



Picture 1B:
Excoriated nodules of lower limb which is
a common presentation of PN.

Laboratory Results

Chemistry		CBC		LFTs		Other Labs	
Na	141	WBC	5.7	T. <u>Bili</u>	0.52	Cr Kinase	11
K	4.6	<u>Hgb</u>	14.3	T. Protein	7.2	ESR	28
<u>Cl</u>	101	<u>Hct</u>	46.6	<u>Alk Phos</u>	126	TSH	10.819
CO ₂	32.9	<u>Plt</u>	202	AST	15	Free T4	0.9
BUN	13	MCV	94.1	ALT	20	HIV test	Refused
Cr	0.64	MCH	28.9	Albumin	3.1		
Glucose	139			Immunological <u>Mmarkers</u>			
				ANA		<u>Neg</u>	
				Thyroid Peroxidase		8	
				Thyroglobulin Ab		1	

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Minority Scholarship Program
Physicians Caring for Texans



by Tarek Naguib, M.D., M.B.A., F.A.C.P.

Deadliest Drugs *Texas Med* (5/17) – 47,000 died from drug overdose in 2014. According to the U.S. Department of Health and Human Services report; 23% from heroin, 12% Cocaine, 12% oxycodone, 9% alprazolam and fentanyl alike, and 8% morphine, methamphetamine, and hydrocodone each.

Prescriptions Down but death Up from Opiates *Texas Med* (5/17) – According to CDC, scripts for opioid pain relievers in 2012 are down by 10% but death from overdose of opioids overdose is up 11% in 2014.

Senate Investigates Drug Companies *JAMA* (5/17) – Senator Claire McCaskill (D, Missouri) has launched a senate investigation into whether 5 drug companies marketed their opioid painkillers in a manner that may have contributed to the nation's opioid epidemic. Internal documents are being sought citing credible evidence suggesting some companies actually misrepresented or exploited addictive qualities for marketing purposes.

Cannabis Use and Risk of Substance Abuse *JAMA* (3/17) – Within the general population, cannabis use is associated with an increased risk for several substance use disorders. This was shown in a 35,000 person sample that is nationally representative of US adults 18 years or older.

TB Cases Hit Record Low in US *Infect Dis News* (4/17) – The 2016 U.S. case count of 9,287 represents the lowest level ever achieved in the country for TB. However, the decline has slowed suggesting elimination is not possible soon.

Polio Elimination on the Horizon *Infect Dis News* (4/17) – Failing eradication goal in 1988, polio cases exceeded 350,000 in 125 countries; the disease appears to be endemic in only 3 countries in 2016.

Listerine Helps Control Gonorrhea *JAMA* (2/17) – In a research study on men who have sex with men with throat gonorrhea, those who gargled with Listerine mouth

wash for one minute were 50% less likely to have the bacteria grow in throat cultures.

Asbestos Still Poses Risks *JAMA* (4/17) – CDC reports 2579 deaths from malignant mesothelioma in 2015 similar to the figures of 1999. The disease is linked to asbestos exposure and may show up 20 to 40 years later. Asbestos production stopped in the US in 2002 but is imported for the manufacturing of soap, fertilizers, and alkaline batteries. Texas remains to be one of the lowest states affected. Men are much more affected by the disease than women.

HIV is less in Black Women *JAMA* (3/17) – US Centers for Disease Control (CDC) released figures suggestive of decline in disparities between black women and white and Hispanic women between 2010 and 2014.

Hospital Costs for Birth Defects in Billions *JAMA* (2/17) – The cost of hospitalizations related to birth defects tops 5% of total hospital costs in the US in 2013, about \$23B.

Fish anyone? *JAMA* (3/17) – FDA recommends pregnant women eat 2-3 servings weekly from the best choices list of fish. The best fish list in the US includes: Shrimp, pollock, salmon, canned light tuna, tilapia, catfish, and cod. This is the lowest mercury-containing fish.

Decline in Post-Partum Depression *JAMA* (3/17) – Postpartum depression appears to decline with improved screening and treatment, in the 27 states that report

the condition. But the CDC cautions that postpartum depression remains common among new mothers.

US Suicide Rates Up *JAMA* (4/17) – US census bureau reported increase of suicide rate among US residents above 10 from 12.6% to 14.4%. The increase in less urban areas was suggested to be linked to social isolation, opiates epidemic, and less access to mental health.

Depression is the Leading cause of Disability in the World *JAMA* (4/17) – About 322 million persons are living with depression accounting for 4.4% of the world's population. The prevalence has increased by 18% from 2005 to 2015. The most involved areas are the South-East Asia and the Western Pacific regions.

Texas Medicaid by the Numbers *Texas Med* (4/17) – The total enrollees in Texas Medicaid in 2013 is 5.2 million. The total spending is \$36.1B, out of which \$21.4B are federal dollars in 2015. Medicaid uses 50% of all the federal money to come to Texas in 2015, while education utilizes 21%.

More of the Public Views ACA Favorably *JAMA* (4/17) – Kaiser Family Foundation released a survey this year suggesting that 49% of the public view ACA (Obama Care) favorably as opposed to 44% who view it unfavorably, with 6% who do not know. Both democrats and republicans agreed on the highest priorities being lower individual healthcare cost and lower prescription drug cost.

HEALTHY NOW | HEALTHY FUTURE

Texas Medical Association Foundation* harnesses the volunteer and philanthropic spirit of TMA and TMA Alliance members.

TMAF supports key health improvement initiatives of TMA and the family of medicine that create a Healthy Now and a Healthy Future for all Texans.

Learn more at www.tmaf.org or call (800) 880-1300, ext. 1664.

*TMAF is a 501 (c) (3) organization and your gift is tax-deductible to the full extent of the law.



Patient Advocacy for the Texas Panhandle- Reference Guide

Emergency Contact Numbers

911

Amarillo Police Department - 806-378-3038

Canyon Police Department - 806-655-5055

Ambulance Service Amarillo - 806-358-8511

Ambulance Service Canyon - 806-222-1222

Amarillo Red Cross - 806-376-6309

Suicide Crisis - 1-800-692-4039

Poison Control 1-800-222-1222

Amarillo Fire Department - 806-378-9360

Canyon Fire Department - 806-655-7133

Northwest Texas Hospital - 806-354-1000

Baptist St. Anthony Hospital - 806-212-2000

Coffee Memorial Blood Center - 806-358-4653

Alzheimer's Association -STAR

www.alz.org/westtexas

5410 Bell St. #411 Amarillo TX 79109

806-372-8693 or 800-272-3900

Caregiver support groups in Amarillo, Borger, Friona, and Pampa

Caregiver Conference "The Journey Continues"

Memory Screening: TTUHSC

Transportation, Hospice, Nursing services, Attorneys, Physician contacts

Amarillo Area Parkinson Association

Support and Information for families and patients dealing with Parkinson's disease.

2211 Peach Tree Street P.O. Box 19721

Amarillo, TX 79114

(806) 355-7979

Amarillo City Transit

806.378.3095 www.ci.amarillo.tx.us

- Adult \$.75
- Children (ages 6 - 12) \$.60
- Children under 6 with paying adult FREE
- Student - Middle/High School with ACT Transit card - \$.60
- Senior Citizens 65 and older with Medicare and City Transit ID card only - \$.35
- Medicare Card holder - \$.35
- People with Disabilities - \$.35 with ACT I.D. Card.

Spec-Trans Services:

- Individuals need to apply for this service.
- Individuals with disabilities who cannot navigate the fixed route buses.
- Fares are \$1.50 for one-way trips

A public transportation providing demand responsive CURB-TO-CURB service for certified mobility-impaired citizens of Amarillo who cannot physically use accessible fixed route buses. The service is operated by Amarillo City Transit Monday through Saturday, except holidays, between 6:15 a.m. and 7:00 p.m.

Amarillo College Disability Services

Amarillo 806.371.5436 www.actx.edu/disability

- Personalized Academic Advising & Accommodations
- Specialized Testing & ADA Classroom Accommodations
- Student Success Class
- LITE Scholarship

Works with students, faculty, and agencies to provide a smooth transition into college while providing appropriate academic accommodations. Provides funding through the Living Independently Through Education (LITE) Scholarship program, available during the Spring semester.

Advocacy Inc.

West Texas Regional Office 1001 Main St. Suite 300

Lubbock, TX 79401

806-765-7794

Works to protect and advocate for the legal rights of people with disabilities in Texas

Alcoholics Anonymous

www.aa.org

Support for recovering Alcoholics

1301 S. Taylor St. Amarillo, TX (806) 373-4600

Other Amarillo locations: 107 N. Hughes St. 806-373-2740

4000 SW 58th Ave. 806-355-0123

Amarillo Area Mental Health Consumers- Agape Center

Peer Support, Education, and Advocacy

Hours: M, W, F—10:00-4:00, Tues.—12:00-4:00, Thurs.—3:30-7:30

Phone: (806) 373-7030

Website: www.aamhc.us

Amarillo Council on Alcoholism and Drug Abuse

Hotline 800-566-6688 Amarillo Branch 806-374-6688

Substance Abuse Services

803 South Rusk Street

Amarillo TX 79106

Phone: (806) 374-6688 Hotline: (800) 566-6688

Medical Center League House

www.leaguehouse.org

7000 W Amarillo Blvd. Amarillo TX 79106

806-358-3759

Provides housing and resources for families visiting Amarillo for medical services.

Director: Amber Glawe

American Cancer Society - Amarillo

3915 Bell ST. Amarillo TX 79109

806-353-4306

1927 available resources in Texas, programs including wigs-free or reduced cost, look good feel better program, road to recovery, reach to recovery, health education, and hope lodge

www.cancer.org

American Heart Association - American Stroke Association

www.heart.org local Krystal Stone, Austin

7272 Greenville Ave. Dallas TX 75231

1-800-AHA-USA-1, 1-800-242-8721, 1-888-474-VIVE

Programs including My life check, Heart360, Professional Heart Daily, Scientific sessions, You're the Cure, and eBooks

ARC Alcoholism Recovery Center

412 SE 16th Ave. Amarillo TX 79101

Phone 806-376-7993 Fax 806-373-1677

Email: amarilloarc@yahoo.com website: arcamarillo.org

Recovering alcoholics and families providing education and training in life skills with life coach approach.

The Arc of Potter/Randall County

Offers a respite program for children or adults with special needs, camp scholarships, an equipment lending library, and fills emergency fund requests on limited basis.

202 S. Louisiana St.

Amarillo, TX 79106

Contact: Susan Stokes, (806) 655-7151

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CliffNotes

Insurance Made Simple

Professional Liability
Commercial
Personal
Employee Benefits

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INSURANCE

Cliff Craig, CPCU, CIC
(806) 376-6301
ccraig@neely.com

Burkhart Center for Autism Education and Research

Texas Tech University -Lubbock 806-742.4561 www.depts.ttu.edu/burkhartcenter

- Applied Behavioral Analysis Training (ABA)
- Family Resource Support Line
- Burkhart Transition Academy
- Project CASE: Connections for Academic Success & Employment

The Burkhart Center provides ABA training and consultations, postsecondary educational transition program for people with ASD; helps parents find resources in the community and provides both educational and social events for families

The Bridge

The Bridge is a comprehensive, child-focused program that offers a highly effective, one-stop approach to child abuse investigation. The facility allows law enforcement, child protective services professionals, prosecutors and the medical and mental health communities to work together to assist child victims in a comprehensive and cohesive manner.

804 Quail Creek
Amarillo, TX 79124
www.bridgecac.org
(806)372-2873

Catholic Family charities of the Panhandle

2801 Duniven Circle Amarillo TX 79109
806-376-4571

Community Living Assistance and Support Services (CLASS)

Toll Free 877.438.5658 www.dads.state.tx.us/services/faqs-fact/class.html

- Diagnosed with a Related Condition Before Age of 22.
- In need of Habilitation and Case Management Services.
- Must Live in Your or Your Family's Home.

Provides home and community-based services to people with related conditions as a cost-effective alternative to an intermediate care facility for individuals with an intellectual disability or related conditions (ICF/ IID) such as: respite care, nursing services, adaptive aids/supplies, home modifications, case management, attendant care, specialized therapies, and other related services.

Counseling Services

Alcoholics Anonymous 806-373-4600
Al-Anon (Families of Alcoholics) 806-371-6366
Family support services 1001 S. Polk 806-342-2500
PASO (Panhandle AIDS Support) 1523 S. Tyler 806-372-1050
Texas Panhandle Centers Behavior/Developmental Health 1501 S. Polk
806-337-1000

DADS- Department of Aging and Disability

State Headquarters
701 W 51st. St. Austin TX 78751
PO BOX 149030 Austin TX 78714
512-438-3011

DARS Division of Blind Services, Texas Department of Assistive and Rehabilitation Services

Gives information, medical service coordination and help obtaining adaptive equipment to families of children from birth through age 10 with visual impairments. Also provides Division of rehabilitative services through Office for Deaf and Hard of Hearing Services (DHHS) for services to all ages and all socioeconomic states with multiple daily functional issues,
7120 W. Interstate 40, Ste. 100 Amarillo, TX 79106 (806) 353-9568

Deaf-Blind Multiple Disabilities Program (DBMD)

Toll Free 877.438.5658 www.dads.state.tx.us/services/faqs-fact/dbmd.html

- Individuals who are Deaf-Blind & Have another Disability
- Diagnosed by the Age of 22
- Must Meet Level of Care Criteria for Placement in an ICF/IID.

Provides home and community-based services to consumers to communicate and interact with their environment. It is a cost-effective alter-native to an intermediate care facility for individuals with an intellectual disability or related conditions (ICF/IID). Services include: respite care, nursing services, adaptive aids/supplies, home modifications, case management, attendant care, orientation & mobility services, specialized therapies, assistive living, chore provider, and other related services

Disability Rights Texas

Amarillo/Lubbock Area 806.765.7794 State Toll Free Number 800.252.9188 www.disabilityrightstx.org

- Information & Referral Services
- Advocacy
- Legal guidance related to special education

Disability Rights Texas (DRTx) protects and advocates for the rights of people with disabilities. They provide legal assistance, educate and inform policy makers, family members & the community about the rights of people with disabilities, and make referrals to programs and services.

Panhandle Down Syndrome Guild – Buddy Walk

Works to increase awareness about, and to assist families and patients with Down syndrome
PO Box 20783 Amarillo, TX 79114
Contacts: Vicki Cabrera (806) 670-1568, Jeff Medford (806) 678-4450
panhandledsg@yahoo.com

Early Childhood Intervention

offers services for families with children from birth to 3 years old who were born premature or possess disabilities, injuries or developmental difficulties.
For Potter and Randall counties (provided by Texas Panhandle Centers)
2201 S. Western St.
Amarillo, TX 79106 (806) 358-8974
For 20 rural panhandle counties
Region 16 Education Service Center
5800 Bell St.
Amarillo, TX 79109-6230 (806) 677-5228

Epilepsy Foundation – Amarillo Branch

600 S. Tyler Suite 2007, Box 12013 Amarillo, TX 79101
888-548-9716 or 806-352-5426
Eftx.org

Programs and services for patients and families living with epilepsy including public and professional education and awareness, camps Spike 'n' Wave, Kamp Kaleidoscope, Camp Neuron and Adult and family Retreats, Specialized Medical care, Education and Consultation services.

Goodwill Industries of Northwest TX

Amarillo 806.331.6890 Plainview 806.293.1055 Lubbock 806.744.8419 www.goodwillnwtexas.org/

- Placement & Support Services
- Rehabilitation Programs
- Resources for Farmers & Ranchers with Disabilities
- Thrift Stores

Provides vocational evaluations and training, personal and social development, sheltered employment, job placement, and independent living classes for adults with disabilities. Thrift stores available with affordable clothing and household items.

Heal The City

609 S Carolina Amarillo, TX 79106
806-231-0364 healththecityamarillo@gmail.com

Providing free urgent medical care and referral services with compassion and dignity to the uninsured in Amarillo. Our vision is to provide for the medical needs of the uninsured while connecting them to the existing health community

| continued on page 44

High Point Village

Lubbock 800.698.0015 www.highpointvillage.org

- Youth & Adults with Disabilities
- Educational Center

High Point Village provides enrichment activities including Reach High, a day program for adults, Afternoon Enrichment classes, a Special Olympics team, summer camps, and various social parties during the year.

Home and Community-Based Services (HCS)

Intakes at the following centers:

Texas Panhandle Centers (TPC) - Amarillo area 806.351.3212 www.txpan.org

Star Care -Lubbock area 806.740.1421 www.lubbockmhmr.org

Central Plains Centers -Plainview area 806.293.2636 www.clplains.org

www.dads.state.tx.us/services/faqs-fact/hcs.html

- Available Statewide
- Persons with Intellectual Disabilities or Autism
- All ages

Provides individualized services and supports to persons with intellectual disabilities who are living with their family, in their own home, in other community settings, or group homes with less than 4 residents. Services include case management, therapy services, habilitation, residential assistance, nursing, dental treatment, supported employment, adaptive aids/supplies, and home modifications

LIFE/RUN Center for Independent Living

Lifetime Independence for Everyone (LIFE)

Rural Utilization Network (RUN)

Lubbock Toll Free 800.429.4371

Phone & TTY 806.795.5433 [ww.liferun.org](http://www.liferun.org)

- Advocacy, Information and Referral, Peer Support, Independent Living Skills Training

- Home By Choice Nursing Home Relocation Program
- Deaf & Hard of Hearing Program

LIFE/RUN Centers provide individuals with disabilities the information and skills necessary to become independent and to achieve full inclusion in every aspect of their communities. Services are provided regardless of disability, age, gender, race, or ethnicity. Life Inc. consist of three independent living centers: LIFE/RUN in Lubbock, Not Without Us in Abilene, and Disability Connections in San Angelo

Make-A-Wish Foundation North Texas

Amarillo 806.358.9943

Lubbock 806.785.9474, 800.242.7167

www.ntx.wish.org

Make-A-Wish will grant any child with a life-threatening illness a wish of his/her dreams to enrich the human experience with hope, strength, and joy.

Medical Transportation Program (MTP)

Toll Free 877.633.8747 www.dshs.texas.gov/cshcn/mtp.shtm

- Available Statewide
- Medicaid or Children with Special Health Care Needs recipients
- Children & Adults on Medicaid

MTP sets up non-emergency rides for people who have no other way to get to their Medicaid health-care visits. This includes people on Medicaid, children who get services through the CSHCN program, and people in the Transportation of Indigent Cancer Patients program. The program can pay back (reimburse) someone who uses their personal car to drive a Medicaid or CSHCN client to their appointment.

National Kidney Foundation of West Texas

6141 Amarillo Blvd. PO Box 51231 Amarillo TX 79106

806-358-9775 <https://www.kidney.org>

Financial Aid, medications, food, other assistance for patients with kidney disease and dialysis patients

National Lekotek Center

Toll Free 800.366.7529 www.lekotek.org

- Support & Information to families
- Toy Lending Library
- Play Sessions & Playgroups
- Training for Professionals & Parents

The National Lekotek Center, provides an array of services to improve the lives of children with special needs through the utilization of toys and play. It features libraries of toys, adaptive equipment, electronic materials, and books for families to borrow.

National Multiple Sclerosis Society – Panhandle Division

6222 Canyon Rd. Amarillo TX

806-468-7500 txp@nmss.org

Workshops, awareness, equipment, and support for families and patients with Multiple Sclerosis

National Organization for Rare Disorders (NORD)

Toll Free 800.999.6673 <https://rarediseases.org>

- Available Nationwide
- Clearinghouse of Information
- Education & Advocacy
- Patient Assistance Services

Provides a clearinghouse of literature on rare disorders and offers networking, support, and education to families with children having similar disorders.

Provides advocacy and support to providers

Impact Futures!

We provide awareness and leadership toward education of professionals, parents, youth, and community members regarding substance abuse prevention, intervention and treatment in the Texas Panhandle. The ultimate mission of Impact Futures is to ensure a healthier community by building assets and protective factors in the community.

Email: info@impactfutures.org

Call: 806-326-1339 Fax: 806-354-5086

Lefleur Transportation

Available for medical transport, covered by Medicaid (in Amarillo and surrounding areas with appointment)

900 S. Nelson

806-576-3495 or 800-844-0046 <https://www.lefleur.net>

Panhandle Assessment Center

A nonprofit corporation that provides emergency shelter and foster placement for abused or abandoned children in Child Protective Services (CPS) custody.

Phone: (806) 335-9138 Fax: (806) 335-3038

Panhandle Council for the Deaf

Offers certified sign language interpreters and has an equipment demonstration room for specialized telecommunication devices for anyone with difficulty using a telephone.

Mark Sturkie, Director Pcd.mark@amaonline.com

1300 Wallace Road

Amarillo, Texas 79106

806-359-1506 V/TTY 806-359-7755 Fax

Panhandle Independent Living Center

Offers advocacy, peer counseling, independent living skills training, and information/referral to individuals with disabilities. Operates Youth Encountering Success for teens with disabilities and Parents Encouraging Parents group.

1118 S. Taylor St.

Amarillo, TX 79101

374-1400, 374-2774 TDD

Panhandle Mamas

A chapter of Mothers against Methamphetamine – strives to reduce methamphetamine use in the Texas Panhandle through community action, focuses on drug use prevention, awareness, and education
3405 Western suite 204 Amarillo TX 79105
806-331-6068 or 337-1700 or toll free (888)892-2273

PASO – Panhandle Aids Support Organization

1501 SW 10th Amarillo TX 79101 PO Box 2582
806-372-1050 or 806-388-4879

Panhandleaso.org

Case management, referrals, financial aid, and education for patients and families with AIDS

Personal Care Services (PCS)

Canyon 806.655.7151 Lubbock 806.791.7502 Toll Free 888.2076.0702
www.dshs.texas.gov/Caseman/PCS.shtm

- Physical or mental disability and/or health problem
- Medicaid Eligibility
- Children under the age of 20
- Physician Statement Required

PCS is a Medicaid benefit that helps clients with everyday tasks. These tasks are called activities of daily living (ADLs) and instrumental activities of daily living (IADLs) such as: bathing, eating, going to the toilet, dressing, walking, laundry, light housework & fixing meals

The Pavilion – NWTH

806-354-1810

Treatment of mental health and psychiatric disorders

Pregnancy/Counseling/Treatment and Infancy needs

CARENET Crisis Center 6709 Woodward 806-354-2244

CARENET Pregnancy center Amarillo 706 Polk 806-350-7854

CARENET Pregnancy center Canyon 1712 2nd Ave. Canyon 806-655-2240

Saint Jude Hospitals for Children

www.stjude.org

Seven locations

888-226-4343 or 866-278-5833

Treatment, support and aftercare for children with childhood physical defects, cancers, blood disorders, and other life-threatening disorders

Second Chance Foundation Amarillo

806.212.7645 www.secondchanceama.org

- Grant Funds
- Individuals with a TX ID or TX Drivers License
- Requires equipment/services in order to be independent
- Must have exhausted all other resources

Provides grants for a wide array of needs to individuals who have a disability. The Second Chance Foundation assists those with disabilities, giving them the opportunity to lead more active and productive lives. Our goal is to extend a helping hand ... to give a second chance at life.

Shriners Hospital

Houston 713.797.1616 Toll Free 800.853.1240

Galveston 409.770.6600 Toll Free 888.215.3109

www.shrinershospitalsforchildren.org

Children who need orthopedic, burn, or cleft palate services, (orthopedic conditions, burns, spinal cord injuries, and cleft lip and palate) are eligible for care at Shriners Hospitals for Children and receive all services regardless of the patients' ability to pay.

Scottish Rite Hospital

Tsrhc.org

2222 Wellborn St. Dallas TX 75219

214-559-5000 or 800-421-1121

Treatment, education, research and support for children with orthopedic, blood disorders, infectious and inflammatory diseases and neurological disorders

Special Olympics Texas, Area 16

112 W 8th Ave Suite 341 Amarillo TX 79101

806-374-7171

Provides year round training and competition in Olympic type sports for children 8 and older with intellectual disabilities.

Specialized Telecommunications Assistance Program (STAP)

Lubbock 806.795.5433 ext. 121 www.liferun.org

- Available Statewide
- Low-Income Individuals
- Provides Economic Equipment

STAP is a voucher program that provides financial assistance to Texans with disabilities that interfere with access to the telephone networks for the purchase of specialized assistive equipment or services. STAP services are available to any Texan with a disability of any kind. LIFE/ RUN's STAP Specialist will identify, certify, and assist consumers in applying for specialized telecommunications devices in the Texas Pan-handle and South Plains Region.

Sudden Infant Death Syndrome Support and Education

4325 Omaha St. Amarillo TX 79106

806-355-1548

sidshq@charm.net

Support and education for families and friends that have experienced SIDS

Susan G Komen West Texas

1655 Main St. Suite 203 Lubbock TX 79401 806-698-1900 [info@](mailto:info@komenwesttexas.org)

komenwesttexas.org

Amarillo Office Location: 9645 Amarillo Blvd. Amarillo, TX 79159

Komen's National Breast Cancer Helpline

to speak to someone about breast health and breast cancer concerns, please call 1-877-GOKOMEN (1-877-465-6636)

Supplemental Security Income (SSI) Amarillo 877.803.6318 Lubbock

866.467.0460 www.ssa.gov

- Available Statewide , Based on Income and Resources, Provides Medicaid coverage and monthly income assistance to eligible individuals who meet the criteria in the areas of disability, citizenship, finances, and resources

Texas Council for Developmental Disabilities

6201 E. Oltorf, Suite 600

Austin TX 78741-7509

(512) 437-5432 or (800) 262-0334

Tcdd.texas.gov/side-by-side-get-involved

Texas Department of Insurance

Toll Free 800.578.4677 www.tdi.state.tx.us

- Available Statewide
- Information & Advocacy

Assists families including parents of children with disabilities with problems they encounter with their insurance company

Texas Panhandle Centers (TPC) Respite Services

Amarillo 806.351.3212 www.texaspanhandlecenters.org/

- Must Have Intellectual Disabilities (IQ below 70) or Related Condition
- All Ages Accepted
- Must Complete Screening/Intake Process
- Medicaid, Private Insurance, or Sliding Scale Fees Apply

Services include: on-site facility respite program, short term respite services, and 24 hour per day placement designed to provide relief to consumers and their families

Texas Panhandle Suicide Prevention Coalition

Local crisis line – Texas Panhandle Area 806-359-6999

National 800-273-8255

panhandlesuicideprevention@gmail.com

Survivors of Suicide support group 806-358-1347

Works to reduce the incidence of suicide through public education and awareness and offers support to the families surviving suicide through community collaboration and education.

Texas State Library's Talking Book Program

Austin 512.463.5458 Toll Free 800.252.9605

www.tsl.texas.gov/tbp/gstarted.html

- Books & Magazines in Large Print, Braille, or Tape
- Special Equipment
- Quarterly Newsletter

Provide free library service to Texans of all ages who cannot read print materials due to visual, physical, or permanent disability. Our books & magazines are available in different formats, cassette, in recording, writing in relief & large print. Best of all, books are delivered right to your door & you can return by mail free of charge.

Texas Technology Access Program (TTAP)

Toll Free 800.828.7839 www.techaccess.edb.utexas.edu

Amarillo/Located at Specialized Therapy Service 806.468.9400

- Demonstration on the different types of tools
- Loan Program - Tools or Grants
- Recycle & Reuse Program

Assistant Technology is a tool or service used by individuals with disabilities to help improve their quality of life and increase their independence. The TTAP Program works to improve access, advocacy, and awareness of assistive technology to meet the needs of Texans with disabilities

Texas Tech Health Center Amarillo

1400 S. Coulter Amarillo TX 79106

Family Medicine – 806-414-9559

OB/Gyn - 806-414-9013

Pediatrics – 806-414-9800

Internal Medicine – 806-414-9100

Surgery – 806-414-9558

Psychiatry (1400 Wallace Blvd.) 806-414-9970

<https://www.ttuhs.edu/amarillo/>

Texas Workforce Center

Youth program connects people ages 14 to 21, including those with disabilities, with work experiences and training for basic skills.

1206 W. Seventh Ave. Amarillo, TX 79103

372-5521, ext. 1626

Turn Center

provides occupational and physical therapy to children with disabilities at their schools, as well as an outpatient clinic and some free clinics.

1250 Wallace Blvd. Amarillo, TX 79106

806-353-3596 <https://www.turncenter.org>

Uniting Parents, Coalition of Health Services Inc.

A parent case management program for families of children with chronic illnesses and/or disabilities in the upper 32 counties of Texas. Provides information, education, training, referrals, networking and support.

301 S. Polk St., Ste. 740 Amarillo, TX 79101

(806) 337-1700 or (888) 892-2273

Unitingparents.cohs.org

Vocational Rehabilitation Program

Amarillo 806.351.3878 Toll Free 800.628.5115

Lubbock 806.783.2930 Toll Free 800.687.7010 Austin 800.687.7032

www.twc.state.tx.us/partners/vocational-rehabilitation-providers-resources

- Eligibility is based on individuals needs.
- Texas Resident

- Rehabilitation Services & Independent Living Services

Vocational Rehabilitation (VR) program helps people with disabilities prepare for, find, and keep jobs. Services are individualized and may include counseling, training, medical treatment, assistive devices, job placement assistance, and other services. There must be the presence of a physical or mental disability that results in a substantial impediment to employment.

Quick Reference Online Resources –

U.S. Department of Education Office of Special Education and Rehabilitative Services www2.ed.gov/about/offices/list/ose/index.html

Texas Education Agency www.tea.texas.gov

Individuals with Disabilities Education Act information www.ideapractices.org

West Texas A&M University www.wtamu.edu

Amarillo College www.actx.edu

Texas Tech University Health Sciences Center www.ttuhs.edu

Addiction Center www.addictioncenter.com/rehabs/texas

Alcohol Awareness Council www.alcohol.org

Americans with Disabilities Act www.ada.gov

The Arc of the United States www.thearc.org

Autism Society of America www.autism-society.org

Cerebral Palsy Group – Information and Education Resource

cerebralpalsygroup.com

Cornucopia of Disability Information codi.tamucc.edu/children.html

Developmental Delay Resources www.devdelay.org

Disability Resources Inc. Texas Resource Directory www.disabilityrightstx.org

Health and Human Services Commission (HHSC) Office of Mental Health

Coordination: www.mentalhealthtx.org

Online Resources Parenting

Parenting help <http://www.parentinginformation.org/> (English)

<http://www.informacionparapadres.org/> (Spanish Version)

Autism Parenting Magazine- <https://www.autismparentingmagazine.com/>

Help and Hope Parenting skills and support, videos also

www.youtube.com/TexasDFPS. [facebook.com/4MyKid](https://www.facebook.com/4MyKid)

www.HelpandHope.org

Local Quick Reference Phone Contact Information

Accolade Home Health Care - Amarillo 806-352-3900

Accolade Home Health Care - Dumas 806-934-2000

ADVO Companies, Inc. 806.342.0600

Amarillo ABA 806.367.9358

Amerigroup 800.600.4441

Angels of Care Pediatric Home Health 806.353.2700

Angel Community Services, LLC 877.227.1077

ASCI Day Program—TX Panhandle Centers 806.383.1253

Baptist St. Anthony's Health System 806.212.2000

Bethesda Ministry Center 806.381.0361

Caprock Home Care 806.463.7051

Castro County Hospital District 806.647.2191

Catholic Charities 806.376.4571

Children's Medical Center of Dallas 844.424.4537

City of Amarillo 806.378.3000

City of Lubbock 806.775.3000

Childress Regional Medical Center 940.937.9100

Coalition of Health Services, Inc. 806.337.1700

Collingsworth General Hospital 806.447.2521

Community Options of Amarillo 806.379.6901

Coon Memorial Hospital 806.244.4571

Cornerstone Outreach 806.381.2131

DynaVox Technologies 800.344.1778

Epic Health Services 806.353.2101

Family Support Services 806.342.2500

FirstCare Health Plans 806.584.5311

Fresh Start of Monroe, Inc. Amarillo 806.803.9337 Lubbock 806.745.9326

Golden Plains Community Hospital 806.467.5700

Hansford County Hospital District 806.659.2535

Haven Health Clinics 806.322.3599

Hemphill County Hospital 806.323.6422

Hereford Regional Medical Center 806.364.2141

Hightech Rehab Solutions 210.698.9377

High Plains Children's Home - Pa & Megan's Place 806.622.2272

Lubbock Adult Education Center 806.281.5750

Lubbock Community Services for the Deaf 806.795.2345

Lubbock Family Guidance & Outreach Center 806.747.5577

Local Quick Reference Phone Contact Information (Cont.)

Lubbock South Plains Area Agency on Aging/ Information Referral Contact Center-211
Option 1 806.687.0940
Managed Care Center Prevention Resource Center Amarillo 806.331.2723
Lubbock 806.780.8300
Moore County Hospital District 806.935.7171
National Home Health Care 806.379.7311
Northwest Texas Healthcare System 806.354.1000
Ochiltree General Hospital 806.435.3606
Open Arms Therapy 806.244.5838
Open Road Mobility 806.353.2747
Parmer Medical Center 806.250.2754
Progressive Steps Rehabilitation - Amarillo 806.468.7611
Progressive Steps Rehabilitation- Borger 806.274.9856
Progressive Steps Rehabilitation - Lubbock 806.796.1774
ResCare Services 806.356.8416
Specialized Therapy Services 806.468.9400
Superior Health Plan 844.664.2257
Swisher Memorial Hospital District 806.995.3581
Texas Attorney General-Child Support Division 806.252.8014
Teaching and Mentoring Community 806.763.4187
The Hope and Healing Place 806.371.8998
Therapy 2000 806.553.7780
Touch of CLASS 806.467.1700
Turn Center 806.353.3596
Unique Individuals Day Care 806.322.7444
United Way 806.376.6359

National and Local Quick Reference Phone Numbers & Web Addresses

7 Star Therapeutic Riding Center 806.355.4773 www.7starhorsetherapy.org/
Aging and Disability Resource Centers 800.642.6008 www.prpc.cog.tx.us/Programs/Aging/default.html
Adult Protective Services Hotline 800. 647.7418 www.dfps.state.tx.us
Americans with Disabilities Act 800.514.0301 www.ada.gov
American Cancer Society 800.227.2345 www.cancer.org
Arthritis Foundation 800.442.6653 www.arthritis.org/texas
Autism Society of America 800.328.8476 www.autism-society.org
Brain Injury Association of Texas 800.444.6443 www.biausa.org/
Texas Corporate Angel Network (CAN) 866.328.1313 www.corpangelnetwork.org
Children with Hyperactivity and Attention Deficit Disorder (CHADD) 800.233.4050 www.chadd.com Coalition of Texans with Disabilities 512.478.3366 www.cotwd.org
Council for Learning Disabilities 913.491.1011 www.cldinternational.org
Crisis Hotline (TPC) 800.692.4039 www.texaspanhandlecenters.org/
Cystic Fibrosis Foundation 800.344.4823 www.cff.org
Family Voices 888.835.5669 www.familyvoices.org
Foster Care and Adoption Inquiry Line 800.233.3405 www.dfps.state.tx.us/Adoption and Foster Care/children in our care.asp
Got Transition 202.223.1500 www.gottransition.org
Horse Play at Mesquite Ranch 806.356.7457 www.horseplayatmesquiteranch.com/
Immunization Shot Line 888.963.7111 www.dshs.state.tx.us/immunize/default.shtm
International Dyslexia Association Dallas Branch 972.233.9107 x222 www.Dyslexiaida.org
Learning Disabilities Association of Texas www.ldat.org
Lupus Foundation of America - Lone Star Chapter 866.205.2369 www.lupus.org/lonestar
Mission Amarillo 806.322.2654 www.missionamarillo.org
Morgan's Wonderland 877.495.5888 www.morganswonderland.com
National Alliance for the Mental Illness (NAMI) 800.950.6264 www.nami.org
National AIDS Hot Line www.thebody.com
PACER Center 800.537.2237 www.pacer.org/directions.asp
PALS Developmental Center 806.771.7257 www.palsdc.com

National and Local Quick Reference Phone Numbers & Web Addresses (Cont.)

Panhandle Children's Foundation 806.935.5598 www.panhandlechildrensfoundation.org/
Refuge Services 806.748.7202 www.refugeservices.org/
Speak-Up Texas 877.325.8789 www.speakuptexas.com
Spina Bifida Association 800.621.3141 www.spinabifidaassociation.org
Texas Council for Developmental Disabilities 800.262.0334 www.tcdd.texas.gov
Texas Day Care Information 800.862.5252 www.dfps.state.tx.us/child_care/search_texas_child_care
Texas Department for the Deaf and Hard of Hearing 800.628.5115 www.hhsc.state.tx.us/dhhs/index.shtml
Texas Department of Housing and Community Affairs 800.525.0657 www.tdhca.state.tx.us
Texas Department of Protective and Regulatory Services Child Abuse & Neglect Hotline 800.252.5400 www.dfps.state.tx.us
Texas Education Agency Parent Information line 800.252.9668 <http://tea.texas.gov/Curriculum and Instructional Programs/ Special Education/>
Texas Hands and Voices 936.463.8948 www.txhandsandvoices.org
Texas Health Steps Client Helpline 877.847.8377 www.txhealthsteps.com/cms
TexasLawHelp.org www.texaslawhelp.org
Texas Parent to Parent 866.896.6001 www.txp2p.org
Texas Runaway Hotline (Peer Counseling) 800.989.6884 www.dfps.state.tx.us
Texas Tech Therapeutic Riding Center 806.742.2805 www.depts.ttu.edu/afs/ttrc/
Think College www.thinkcollege.net
United Cerebral Palsy 800.872.5827 www.ucp.org
United Healthcare Children's Foundation 1.855.MY.UHCCF 1.855.698.4223 www.uhccf.org/ Wrightslaw www.wrightslaw.com

Special Needs and Educational Camps and Recreational Services

Camp Agape - Montezuma, New Mexico 806.881.8106 www.campagapeamarillo.com/
El Porvenir Christian Camp is for students 10 and older who have intellectual disabilities and are ambulatory and capable of basic self-help skills.. Registration fee.
Camp Agape—Talon Point Channing, TX 806.881.8106 www.campagapeamarillo.com/
Camp Agape at Talon Point is a free camp for adults with disabilities.
Camp Teen Agape at the Point - free camp for 13 to 20 year olds with a disability and their families.
Camp Junior Agape at the point - free camp for 3 to 12 year olds with a disability and their families.

Camp Alpie

An overnight camp for children with or recovering from cancer with availability for siblings and family. Medical supervision provided. Parents' Camp at same time. Held at Ceta Canyon Retreat Center. Contact at: 301 S. Polk PO Box 3819 Amarillo, TX 79116
806.359.7434 <http://www.campalpie.org>

Camp Aurora Dallas 817.332.7110 ext. 6110 Lubbock 806.794.0691

www.diabetes.org/in-my-community/diabetes-camp/camps/arora.html
Diabetes Day Camp is a week-long for children with diabetes, ages 6 to 12. Sponsored by Diabetes Association, Inc.

Camp Broncho 682.885.4048 www.cookchildrens.org/ForPatientsFamilies/Programs/Camps/CampBroncho/Pages/default.aspx Camp Broncho is a week-long camp for children ages 7-12 who have mild or severe asthma. Camp Broncho provides asthma education & management skills along with promoting self-care, self-image, & independence for children with asthma sponsored by Cook Children's Hospital.

C.A.M.P. (Children's Association for Maximum Potential) Center Point, TX 830.634.2267 www.cookchildrens.org/ForPatientsFamilies/Programs/Camps/campcamp/Pages/default.aspx Residential camping sessions are available for people with disabilities, ages 5 to 21, and their siblings.

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Camp Challenge - Belton 254.702.7296 www.campchallenge.org
This camp is for older academic students ages 12-16 to explore a variety of intensive mental & physical recreational challenges within a supportive environment. All participants must have the physical & social ability to participate in the intense & demanding program. Each student participating in Camp Challenge remains at TSVI until the final ceremony & reception are over.

Camp Courage 682.885.5872
www.cookchildrens.org/ForPatientsFamilies/Programs/Camps/campcourage/Pages/default.aspx
This camp is for sibling of patients with a chronic illness or a life changing injury. There are two camps; a day camp for siblings ages 6-12 & a week-end retreat for those ages 13-18.

Camp El Tesoro - Fort Worth, TX 817.831.2111 www.campfirefw.org
This camp is for children with mild physical and mental disabilities, grades 1 to 12. It is sponsored by Camp Fire USA First Texas Council in Fort Worth.

Camp MDA - Meridian, TX 888.548.9716 www.cookchildrens.org/ForPatientsFamilies/Programs/Camps/campmda/Pages/default.aspx
Camp MDA is for children ages 7-17 with Muscular Dystrophy. For a whole week during the summer, kids & teen can experience new things & meet other kids with MD.

Camp Neuron - located at the Texas Lions Camp in Kerrville, TX 888.548.9716 www.cookchildrens.org/ForPatientsFamilies/Programs/Camps/campmda/Pages/default.aspx
Camp Neuron is for young people ages 8-14 with epilepsy. Children & teens with epilepsy can feel accepted, understood, & unafraid. They will explore nature, learn new skills, try new activities & make new friends.

Camp New Day -806-414-9796 www.dfhp.org
This camp held at Ceta Glen provides fun activities and support to children with Type 1 Diabetes. Children also learn skills to care for their diabetes.

Camp Sanguinity - Fort Worth, TX 682.885.7989 www.cookchildrens.org/ForPatientsFamilies/Programs/Camps/campmda/Pages/default.aspx
Camp for children with cancer, ages 6 to 16. Sponsored by Cook Children's Medical Center, Fort Worth, TX

Camp Summit, Inc. - Argyle, TX 972.484.8900 www.campsummittx.org
Camp Summit provides a residential camping experience for children, youth and adults with disabilities in the Dallas area.

Camp Sweeney - Gainesville, TX 940.665.2011 www.campsweeney.org
Camp Sweeney is provided for children and youth with diabetes, ages 6 to 18 who live near Gainesville, TX.

Camp TLC - Meridian, TX 972.238.8755 www.cookchildrens.org/ForPatientsFamilies/Programs/Camps/camptlc/Pages/default.aspx
Camp TLC is held in early June for children & teens ages 8-15 with Spina Bifida. Children get self-esteem that comes from the fun & independence of summer camp.

Camp X-Treme - Burton, TX 713.797.5997 www.campxtreme.com
This camp is for children 8-21 years with physical disabilities. Camp X-Treme is held at Camp for All in the Houston area.

Kamp Kaleidoscope - Anna, TX 888.548.9716 www.cookchildrens.org/ForPatientsFamilies/Programs/Camps/kampkaleidoscope/Pages/default.aspx
This camp is open to teens, ages 15-19, with a primary diagnosis of epilepsy. Kamp Kaleidoscope is usually the 2nd or 3rd week in July.

Muscular Dystrophy Association Summer Camp
Amarillo 806.359.3141 Lubbock 806.793.5632 www.mdausa.org
Youngsters ages 6-21 who are affected by any of the 40 plus neuromuscular diseases in MDA's program and who are registered with MDA are eligible to apply. Applications are considered on a "first come, first served" basis. There is no cost to families to send their children to camp. Application forms are available at your local MDA office.

NF Family Camp - Burton, TX 972.868.7943 www.texasnf.org/camp
This camp is for families who have a child with Neurofibromatosis. NF Camp is for every member of the family, including parents, patients, siblings, extended family & caregivers.

SKY Camp - Amarillo, TX 806.372.7696 Toll Free 800.572.6365 www.gentivahospicefoundation.org/?nd=b_camps
Camp for students who have experienced a recent death or loss. Ages, 7- 17. Held at Ceta Canyon the last week-end in June. This camp cannot accommodate physical disabilities.

Special Friends Camp - Panfork Baptist Church Contact: Joburta Helms at 806.681.9734
Camp for individuals ages 14 & up who are diagnosed with intellectual disabilities and who have self-help skills. Camps begin the second week in June

Sea Camp - Galveston, TX 409.740.4525 www.tamug.edu/seacamp
Marine adventure camp for children with disabilities ages 10-18 years. Call to discuss your child's needs with staff at Texas A & M University in Galveston.

Spike 'n' Wave Camp Toll Free 888.548.9716 www.eftx.org/camp.html
This camp in Houston is for children with epilepsy, ages 8 to 14 and it is sponsored by the Epilepsy Foundation.

Special Olympics Texas
Amarillo 806.374.7171 Lubbock 806.788.1540 Toll Free 800.876.5646 www.specialolympicstexas.org
Offers year-round training and competition in a variety of Olympic type sports for children and adults with intellectual disabilities. Competition is open to anyone ages eight and up. The Young Athletes Program begins at age 2.

Summer Work Experience and Empowerment Program Project SWEEP
Amarillo 806.351.3870 Lubbock 806.783.2930 Toll Free 800.687.7010 www.hhsc.state.tx.us
High school graduates who are visually impaired from Abilene, Amarillo, Midland/Odessa, Wichita Falls, and Lubbock area are eligible. Students are housed at Texas Tech and receive job skills training.

Texas Asthma Camp - Tyler, TX 903.877.7000 www.texasasthmacamp.com
This one week camp in June is for children with asthma, ages 7-14. There is a cost for this camp but scholarships are available.

Texas Elks Camp - Gonzales, TX 830.875.2425 www.texaselkscamp.org
Children ages 7-15 with special needs must function independently. Financial aid available. Six different sessions starting in June until first of August.

Texas Lions Camps
Kerrville, TX
830.896.8500 www.lionscamp.com
Free summer camps for children ages 4-12 with physical disabilities, type 1 diabetes, Down Syndrome and cancer. Call your local Lions Club for dates and applications. Transportation available in some areas.

Texas Special Needs Camps and Programs 877.242.9330 www.kidscamps.com/camps/texas-specialneeds-camps.camp
This is a website that includes camps from across Texas for children with disabilities. Go to the website to do searches based on disabilities, different areas of Texas and interest.

Adult and Senior Care Organizations and Facilities
Accolade Home Care
6300 I-40 W. Amarillo TX 79106 806-352-3900

Amarillo Home Care Services
Physical Therapy
2200 SW 7th Ave Amarillo, TX 806-331-5194

Amarillo Multiservice Center
3108 S Fillmore St, Amarillo, TX, 79110 806-374-7199
Adult Day Care

Amarillo Senior Citizens Association
Non-Profit Organization
1217 S. Tyler St. Amarillo, TX · (806) 374-5500
Amarilloseniortcitizens.com

Apria Healthcare

Home healthcare service
2001 S. Coulter Amarillo TX 79106 800-453-2060

Area Agency on Aging – The PRPC

www.theprpc.org/programs/aging
415 Southwest 8th Ave. P.O. Box 9257 Amarillo, TX 79105 806-372-3381

Arbor Nursing Home

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