TAVR LEADS TO A NEW Beginning

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Ana Turner, MD, helps homeless individuals deal with mental illnesses.
I want to highlight one of our outstanding leaders for the recognition he has received from our community. Dean Cocchi was named an Ultimate CFO by the Jacksonville Business Journal, an honor that is well-deserved. Dean took over as our chief financial officer and vice president of finance in March 2018. Anyone who knows him understands just how passionate he is about UF Health and how dedicated he is to our financial health. We are fortunate to have him as a member of our leadership team. In addition to Dean, I would like to congratulate Beth McCague, member of the UF Health Jacksonville board of directors and chief financial officer of the Jacksonville Port Authority, who was also named an Ultimate CFO.

Every employee has a personal responsibility to learn about the organization — from the services we offer to practice locations to recent awards and accomplishments, to name a few. There are many resources available, including newsletters, the Bridge, A Few Minutes with Us videos, websites (UFHealthjax.org and hscj.ufl.edu), social media channels, Friday Around Campus emails, Communication Boards and campuswide emails from senior leaders. The more you know, the better prepared you will be as an ambassador for our organization.

Our Communications and Marketing department won several national awards this year for various marketing and promotional campaigns. Additionally, they continue to increase our presence online, improving our website content and social media engagement. The team recently produced a series of videos for Mother’s Day and Father’s Day that featured parents and their adult children who work or volunteer at UF Health Jacksonville, including Judith Villamor and daughter Alyssa Villamor; Fanya DeJesus, daughter Brandy Florvil and son Brandon DeJesus; Martha Mears and daughter Amanda Robertson; Erta Livingston and daughter Ertrice Livingston; Kurt Auwaerter and daughter Emily Auwaerter.

Acknowledging Ambassadors

To ensure the privacy and security of patients’ information, UF Health has developed written policies and procedures addressing access, use and disclosure of protected health information. UF Health Jacksonville employees should only view patient information in order to carry out job-related duties. It is not permitted to look at the medical record of family, friends, co-workers, celebrities or your own unless there is a professional need to know.

When accessing a patient’s medical record for work-related reasons, the Minimum Necessary Standard must be followed. The Minimum Necessary Standard requires that only the minimum amount of information be used or disclosed for the purpose needed. For example, if a 60-year-old woman recently had foot surgery but historically received medical care at UF Health Jacksonville, it would not be appropriate to access, release or view her entire medical record to get information for a billing question related to the foot surgery.

Certain federal and state laws require the use of hardware, software and/or procedural mechanisms that record and examine activity in medical information systems. UF Health Jacksonville uses role-based access control in Epic to reduce the regulatory risk of inappropriate access of protected health information and data exposure.

To help maintain patient privacy and confidentiality, follow these guidelines:

- Abide to the Minimum Necessary Standard and only access, use and/or disclose the minimum necessary amount of patient information to complete the job.
- Do not access medical records of family, friends, co-workers or any other patient unless there is professional need to know.
- Log off and lock a computer whenever leaving your workspace.
- Only view patient medical records in order to carry out work-related duties.
The week before Thanksgiving, residential remodeler Freeman Mann found himself repeatedly gasping for air, each day worse than the one before. Co-workers encouraged him to see a doctor, but he refused. That was until a friend stopped by Mann’s worksite to check on him, and shortness of breath nearly kept him from reaching her car.

“I was sitting on the front steps of the jobsite, and by the time I got to her car 25 feet away, I was hanging onto it,” Mann said, shaking his head. Desperation could be heard in his Southern accent as the memories replayed. “Man, I couldn’t get no wind.”

Acquiescing to his friend’s urgent pleas, Mann went to UF Health North. It’s a good thing he complied.

“When he was admitted, his heart was very weak and he had fluid in the lungs,” said Andres Pineda, MD, a UF Health interventional cardiologist. “He was very sick when we met him.”

Normal heart function is between 55% and 65%. Pineda said Mann’s tests reported only 10% function, which is in the danger zone.

“After a couple of days, they transferred me to the main hospital,” Mann said. “I told them, ‘Guess I’m not going home for Thanksgiving.’”

He was right. It took two weeks at UF Health Jacksonville to build enough strength to walk out. However, the journey was far from over.

“They didn’t forget about me,” Mann said as his hazel eyes lit up with appreciation. “I didn’t have insurance, but that didn’t matter. They checked up on me.”

Pineda prescribed Mann medications and ordered he rest at home in preparation for a heart procedure. In the interim, Mann obtained insurance, his heart function increased to a safe level for the procedure and a date was scheduled.

OPTING FOR TAVR

Transcatheter aortic valve replacement, or TAVR, a procedure less invasive than open heart surgery to replace a narrowed aortic valve, is traditionally performed on older patients. Pineda said two key reasons prompted cardiologists to select TAVR as the best option for the 56-year-old.

“We typically use this on patients who are 70, but Mr. Mann was born with bicuspid aortic valve, and when he got to us, he was so sick,” Pineda said. The congenital abnormality is common. However, in Mann’s case, he developed stenosis.

“Instead of having three leaflets in the heart valve, he was born with two,” Pineda explained. “Also, his heart valve was severely calcified and narrowed. Once you have that, there is significant pressure that the heart muscle needs to work against to get the blood out to the rest of the body.”

Had Mann known the signs to look for, he could have gotten help sooner.

“I was sleeping with six pillows stacked up,” he said. “I quit smoking 18 months ago, but it got harder to breathe.”

“That’s typical in patients with congestive heart failure,” Pineda said. “Severe fatigue, swelling of the legs, chest pain or pressure, fainting episodes and shortness of breath when they are walking or lying flat. All of those are signs and symptoms of heart disease.”

Fortunately for Mann, he made it in time. Any longer and permanent damage is always a risk. After a month at home, he returned to UF Health Jacksonville and was cleared for the procedure.

“I went under for surgery at 2 p.m., woke up at about 9:30 the next morning and the nurse told me, ‘You’ve got to get up and move around,’” Mann said as his eyes widened. He then popped his head forward.

“Can you believe it? The next day,” he said, throwing a hand in the air, “I was going home. I was tickled to death.”

Life is quite different now for him. The sturdy-built, hardworking man talks about not taking life for granted, and says he’s ready to get back to work. His six-pillow stack is now a comfortable two, and he recently became a great-uncle.

“Mr. Mann is close to normal at 45% to 50% heart function,” a smiling Pineda said. “It is possible, if he complies with his medications and follow-up, he could completely heal. His prognosis is good. You can live a normal life with 50%.”

Pineda added a warning.

“A lot of people believe their symptoms are due to age, smoking or inactivity,” he said. “When something is not right, get checked.”

Freeman Mann, who’s lived in the same neighborhood his whole life, knows not to take his health for granted. “Twenty-two of us grew up here,” he said while standing at his front door and pointing down the street. “Only three of us are left.”

Cardiology patient has renewed sense of hope after successful heart procedure.
It’s a hot summer afternoon and as Ana Turner, MD, steps onto the pavement she notices looming rain clouds. Meanwhile, Chris is sitting in his usual spot in front of a beautiful new mural in downtown Jacksonville.

“Are you coming to the shelter tonight, Chris?” It looks like it’s going to rain,” Turner asks. Chris reluctantly nods in response and accepts the bagged lunch that Turner brought him. While opening the bagged lunch, Chris tells a little bit about himself to the University of Florida medical student joining Turner on this particular outing. He eventually declines a ride to the shelter and stays in his spot.

Since Turner met Chris a few months ago, he has moved so little that there is a black mark on the wall framing his seat. Turner is determined to keep Chris, a man who likely is experiencing severe mental illness in the form of schizophrenia, engaged and connected with medical services.

As a psychiatrist with UF Health Jacksonville, Turner spends part of her week as a consultant liaison psychiatrist at the hospital, working with medical students and residents. The rest of her week is made up of clinic hours at the I.M. Sulzbacher Center and on the streets of Jacksonville, practicing street psychiatry for patients like Chris and any others she meets.

For more than 20 years, UF Health Psychiatry has partnered with Sulzbacher, a comprehensive service provider for the area’s homeless population. Turner staffs an on-site psychiatry clinic to complete new evaluations, conduct follow-up visits and meet medication needs for patients.

Turner works hand-in-hand with the team at the Sulzbacher Homeless Outreach Project Expansion, or HOPE, to connect with potential new patients. After Turner’s outreach with HOPE, residents and medical students take rotations each week to meet homeless patients where they are, including under bridges, in city parks and on the streets.

“The HOPE Team represents the core of our partnership with Sulzbacher — seeking out the most vulnerable and ensuring they receive medical assistance,” said Colleen Bell, MD, the medical director of Behavioral Health for Sulzbacher who oversees the HOPE team programs. “We take time to get to know each one of our patients so we can pinpoint their needs and provide a comprehensive treatment approach.”

In street psychiatry, standard evaluations and treatment occur wherever possible in order to deliver critical care to this at-risk population.

“Every day is so different; there is nothing typical from one day to the next,” said Turner. Turner says that, unfortunately, many of the people she meets have a negative view of the health care system and medical providers. Many people with mental illnesses believe they have been treated poorly and forced into medical care against their will. She feels that a large part of the team’s role is to build rapport and provide connections to social services.

“Almost 1% of the homeless population we see has severe psychiatric illness. This is an incredibly high percentage when you compare it to the 4% of the general population,” said Turner. “Society often has a notion that homeless people are lazy or addicted to substances, but it’s usually a complex web of issues that leads people to end up on the streets.”

Her team helps treat severe forms of mental illnesses like schizophrenia. After an initial consultation, Turner can prescribe necessary medication, which can be picked up by patients or delivered by case managers. If applicable, the team supplies long-acting medications so patients don’t have to worry about missing daily doses or staying compliant with their medical regimen. The team works to collect as much patient information as possible to help document the care path.

Oftentimes, patients will stop the HOPE van and flag down case managers to request an appointment time with Bell or Turner. In her two years practicing street psychiatry in Jacksonville, Turner has seen patients receive the medical care they need and successfully return back to society. This past year alone, the HOPE outreach program has provided care for more than 1,200 new clients and nearly 1,400 returning patients.

To help even more people, UF Health expanded its partnership with Sulzbacher this year. Sulzbacher recently opened a new center for women and children, making it the first trauma-informed daycare in the city. UF Health child psychiatrist Shirley Alleyne, MD, is on-site helping at-risk children and their families, while teaching the next generation of doctors about trauma and its impact on childhood development.

And after several months of making excellent care accessible to Chris, he no longer sits in his lonesome spot in downtown. Instead, he is residing at the Sulzbacher shelter and actively participating in psychiatric care. He works closely with his case managers to obtain stable income and shelter, and gives the biggest smile to anyone who asks how his day is going.
PHOTO SUBMISSION REQUIREMENTS

We welcome photos that are taken or submitted by employees. Photos should be at least 3 megabytes (3MB) in image size to be published. Please try to take or submit photos that are clear (camera is held very still); not backlit (flash is used and/or light source is not behind the subject); and framed correctly (feet are not cut off and/or subject is not shown too far away). Employees are encouraged to arrange photography with the Media Center before an event to ensure quality. Direct questions to openlines@jax.ufl.edu or call 244.9750.

Visit OpenLines.UFHealthJax.org to find current and past issues of Open Lines.