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Emergency Medicine ... Trauma Medicine ... Disaster Planning ... Emergency Medicine ...



Dr. James Roach

Emergency Departments Find That Whole Blood Can Be a Lifeline for Trauma Patients

BY JAMES ROACH, DO, FACEP

Managing trauma patients with uncontrolled bleeding is a complicated challenge for healthcare providers, and trauma patients in hemorrhagic shock face high mortality rates.

Trauma is the leading cause of death for patients up to age 45, according to the American Association for the Surgery of Trauma, and among trauma patients, uncontrolled hemorrhage is the number one cause of preventable death. Broward Health continues to see an increase in trauma patients in our Emergency Departments.

At Broward Health, overall blunt injuries (such as motor vehicle crashes, motorcycle crashes, pedestrian accidents, falls, etc.) were up 13 percent in 2022 compared to 2021. Penetrating trauma injuries, such as shootings and stabbings, have also increased.

In the face of these challenges, Broward Health is working with our Emergency Medical Services (EMS) on an innovative program to improve outcomes for trauma patients. EMS teams have been trained and equipped to administer whole blood to trauma patients who are hemorrhaging –

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Dr. Robert Flood: Steering Nicklaus Children's to New Heights in Pediatric Emergency Medicine

BY DANIEL CASCIATO

Dr. Robert Flood, a stalwart in the field of pediatric emergency medicine, has seen the landscape evolve in his career spanning over three decades. Today, as the head of emergency medicine for Nicklaus Children's Health System in South Florida, he oversees one of the largest pediatric ERs in the country.

"Our volume has more than doubled in the last two and a half decades," Flood says. "We registered 102,000 patients in 2022, making us the largest pediatric volume ER in Florida and one of the largest in the country."

Dr. Flood's journey began in South Florida, where he trained and worked at Jackson Memorial Hospital before taking up roles at South Miami Hospital, Baptist Hospital, Boston Children's Hospital, Temple Children's Hospital, and Cardinal Glennon Children's Hospital in St. Louis, Missouri. His varied experiences have provided him with a unique perspective on emergency medicine, a perspective he's brought back to South Florida with him.

When asked what attracted him to Nicklaus Children's, he shares, "It's the opportunity to provide high quality and efficient health care to a population in need."

He emphasizes the hospital's growth and affiliations as key to addressing health care disparities. "Pediatric emergency department patient populations tend to be close to 70% Medicaid," he explains. "When serving at a children's hospital, you're taking care of a population that really benefits from access to good doctors and quality care."



Dr. Robert Flood

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Cleveland Clinic's Approach to Emergency Medicine

BY AISHA SUBHANI, DO

How has Cleveland Clinic's approach to emergency medicine evolved, and what sets it apart?

We opened the new and expanded emergency department in Weston just before the pandemic. The reason for the expansion was the high volume of patients, and naturally so, because the surrounding communities have grown. We have seen a tremendous increase in patients coming by private transportation and by ambulance. Now we have a high-capacity emergency department that can serve those patients. We are seeing a month-by-month increase in volume. Second, as the hospital has grown with the opening of the new bed tower, we can meet the needs of patients requiring acute care. Greater than 80 percent of the hospital's in-patient volume comes through the ER. What we offer is advanced cardiac care, and we are a primary stroke center that can provide advanced care for stroke patients, with wonderful outcomes. We also manage patients with serious infections such as sepsis and other life-threatening illnesses.

For some patients, coming to the ED is a way to make that initial connection with Cleveland Clinic. We have a triage system so patients are assessed early. We can see the critical patients immediately, and minor care patients are treated through our Fast



Dr. Aisha Subhani

Continued on page 16



Dr. Nicholas Namias

Ryder Trauma Center at the Ready

BY BARBARA R. FALLON

When we think of a traumatic injury or illness, we assume there is a trained team of around-the-clock doctors and nurses who will help treat victims. We assume there is specialized pre-hospital transportation like a helicopter to get patients to the care they need quickly; however, unless you've had the unfortunate need for a trauma center, those assumptions probably originate from TV, movies, or stories from others.

In fact, according to Nicholas Namias, MD, MBA, FACS, FCCM, trauma surgeon and medical director at Ryder Trauma Center at Jackson Memorial, you can assume all of the above *plus* a comprehensive continuum of trauma care. Ryder Trauma is home to the Miami Burn Center, which provides world-class burn treatments through advanced reconstructive techniques. The center also features critical care beds, six dedicated trauma ORs, specialized intensive care units, and a rehabilitation gym – all staffed by multidisciplinary teams to help accelerate rehabilitation at every stage of trauma recovery.

According to Dr. Namias, there are two valid philosophies of care among trauma experts—"stay and play" (relay resuscitation procedures while in the field prior to transport) or "scoop and run" (immediately transport and communicate with first responders while enroute) to describe pre-hospital care.

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Publisher's Note



The Top 5 Reasons That Preparing for Hurricane Season Is Like Christmas:

5. You are redecorating your house, aka putting shutters and/or boards on the windows and all the doors.
4. Digging around in the garage to find all the boxes you haven't used in a year, to find the generator, camping gear, flashlights, etc.
3. Shopping in crowded stores where the hottest commodity is all gone
2. Out of state phone calls from friends and family
- And the number 1 reason ... at some point you just might have a tree in your house!

But seriously, we've heard it all before, right? It's easy to become complacent, rationalizing that we've been through it before, that we're pros, that we've got it covered. Funny thing about memories — they fade, and the hardest parts often seem easier than they really were.

Just ask the Hurricane Ian survivors from less than a year ago, preparation can sometimes mean the difference between life and death. And even if the predicted dangerous weather doesn't pan out in your area of Florida ... the domino effects on our service chains for food and power can be devastating. Remember the record rainfall in Broward County from less than 2 months ago, the effect on fuel storage at the Broward port was felt in gas tanks all over our state.

So the 2023 hurricane season, which began on June 1, could prove to be a bust, but a little preparation could buy (in addition to those cans of tuna) a lot of peace of mind and safety.

Charles Felix



You can reach Charles Felix at
Charles@southfloridahospitalnews.com

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Malpractice Insurance EXPERT ADVICE

Why Consent to Settle Clauses Are So Important

BY VANESSA ORR



Matt Gracey

While ‘Consent to Settle’ clauses in malpractice insurance policies are rarely discussed, these little-known endorsements that are part of the language of the policy are actually one of the contract’s most important parts. Consent to Settle lays out the terms of the policy, outlining how a settlement offer or settlement provisions will be handled by the insured and by the insurance company.

“Until about 10 years ago in Florida, by law the malpractice insurance companies couldn’t give an insured the right to consent to settle. It was illegal because of politics,” explained Matt Gracey, Managing Director, Risk Strategies / Danna-Gracey. “That law was changed, and a number of standard market malpractice insurance companies in Florida offering malpractice insurance coverage have now amended their policies to include various Consent to Settle provisions.”

There are, however, a wide variety of Consent to Settle clauses found in malpractice insurance policies. On the more favorable side is “pure consent language,” which means that the insurance company will not settle any claim against the insured without their permission to do so. On the flip side, a “hammer clause” says that if the insured doesn’t consent to the settlement that the insurance company advises them to make, then the insured must pay all future defense costs, and sometimes any settlement above what the insurance company originally recommended.

“Hammer clauses are very unfavorable because an insurance company can demand a case be settled even if it has no merits,” said Gracey. “Some insurance companies are financially fragile, so they don’t want to spend the money to defend doctors. They’d much rather settle the case and save the defense costs or the risk of having a very large trial verdict.

“However, in order to protect their reputations, most insured doctors don’t want anything other than pure or nearly pure Consent to Settle clauses in their malpractice insurance policies,” he added.

In addition to hammer clauses, there are other ways that doctors can lose consent authority. These can include language in the contract about what happens if the doctor’s license is suspended, if he or she dies or is declared incompetent, if they move out of state, or even if they are no longer insured with the company that is handling the case. There may also be board approval language in the policy that says that if the insurance company board or review panel decides that they want to consent and the doctor doesn’t, they can force the doctor to consent.

“It can even be as vague as to say that if they deem a doctor to be unreasonable in withholding their consent, the doctor loses consent authority,” said Gracey. “There are a huge variety of ways in which insurance companies limit doctors’ abilities to consent or not consent to a settlement.”

In fact, one of the most common complaints - besides price - that doctors have is that insurance companies settle cases that are defensible.

“Most doctors want their cases vigorously defended; in the vast majority of cases, there may be little to no liability, but just an attempt by patients and plaintiffs’ attorneys to hope the company settles instead of going to a costly jury trial,” said Gracey.

Standard admitted companies most often have the best Consent to Settle clauses, whereas excess and surplus lines policies generally have the worst, notes Gracey, adding that the clause can be found in the definitions section of an insurance policy or in the policy language.

“Like everything surrounding malpractice insurance, we advise doctors to find an expert who specializes in these policies so that they can get good advice and ask the right questions,” said Gracey.

For more information, contact Matt Gracey at (800) 966-2120 or visit www.dannagracey.com.

VITAS® Healthcare Earns National Recognition for High-Quality Hospice Care

Six VITAS Healthcare hospice service areas have earned national recognition for their commitment to quality care through the National Hospice and Palliative Care Organization's (NHPCO) Quality Connections program. Structured around four fundamental pillars, the program recognizes hospice and palliative care providers that demonstrate a commitment to quality and continuous improvement. The VITAS service areas recognized for their efforts to improve patient care and family satisfaction, as well as their commitment to staff education and training, include Chicago, IL, Citrus County, FL, Connecticut, Houston, TX, Philadelphia, PA and San Gabriel, CA.



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Dr. Jason Hechtman is a surgeon and breast specialist with Tampa General's Cancer Institute, which is **nationally recognized** by *U.S. News & World Report* and the Commission on Cancer (CoC) for excellent care. Utilizing cutting-edge treatments and advanced surgical interventions, Dr. Hechtman provides the best medical care while ensuring patients feel beautiful and confident with the results. And for those needing complex care, Dr. Hechtman works with Tampa General's health ambassadors to seamlessly coordinate care and to follow up.

For a consultation with Dr. Hechtman, please call (561) 739-4TGH (4844).



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Tampa General Hospital Bridges the Gap to Complex Cancer Care

When Palm Beach County and Treasure Coast residents need specialized cancer treatments, they now enjoy a seamless connection to the TGH Cancer Institute

Palm Beach Gardens resident Arthur “Steve” Barnes has been battling various types of skin cancer since 1981. His 42-year journey has taken him to dermatologists, radiation oncologists and medical oncologists, and last year, it took him to Tampa General Hospital (TGH).

“Most of my cancer has been pretty easy to treat — basal cell carcinoma and even squamous cell. But about three or four years ago, it started to get aggressive. It got complex,” Barnes explained. “I’ve been so blessed to have doctors who cooperate with or work at TGH.”

Barnes’ local dermatologist and surgeon referred him to Dr. Abraham Schwarzberg, a Palm Beach County medical oncologist who serves as chief of the TGH Cancer Institute, executive vice president of Network Development, and vice president of Clinical and Translational Research.

“There are a lot of things about TGH that are unique and important, as well as hard to appreciate until you need a certain level of care,” said Schwarzberg. “There are wonderful physicians and pieces of the cancer treatment puzzle in Palm Beach County, but the lack of a unified, academic backbone limits access to translational research, clinical work and new drug development. Our relationship with TGH and the University of South Florida has been invaluable for our patients.”



Steve Barnes and Dr. Tapan Padhya greeting a guest at Tampa General Hospital's recent community event in Jupiter.

Dr. Schwarzberg referred Barnes to Dr. Tapan Padhya, chief of the TGH Ear, Nose & Throat Institute, and professor and chairman for the Department of Otolaryngology — Head and Neck Surgery at USF Health Morsani College of Medicine. Padhya performed a surgical intervention on Barnes in Tampa within one month of first seeing him.

“Dr. Padhya saved all the nerves in my face and removed all the cancer because he and Dr. Schwarzberg were so on top of everything,” Barnes said. “I was worried I was going to come out looking like Frankenstein, so it’s really amazing I look as much like Brad Pitt as I do now.”

East Coast patients who need a trans-

fer to TGH enjoy a seamless transition to Tampa through the hospital’s Health Ambassador Program, which helps schedule appointments, submit paperwork, arrange hotel and travel accommodations, and coordinate follow-up care back home. “This is the experience that we offer our patients on the East Coast of Florida,” explained Padhya. “The home team of doctors in Palm Beach County establishes the initial trust with the patient and provides the ongoing care 364 days of the year, and then I come in for the surgical event. But it’s a continuum of care. The TGH network has flourished and bridged the gap across the state.”

Barnes credits his successful outcome to the entire medical team, but also, his family. His wife, daughter and son participated in his telehealth visits and encouraged him throughout the process.

“My family and prayer warriors pushed me to keep going when it got discouraging. My wife hugged me when I needed it during the battles with chemo and radiation. They prayed for me and for the doctors to do a good job,” said Barnes. “And I can’t say enough about how wonderful the medical staff was. They treated me like I was their grandfather or father. There’s something that Theodore Roosevelt once said that could be a theme for this hospital: ‘No one cares how much you know until they know how much you care.’ TGH really cared about my case.”

Patients like Barnes now have access to the complex care they need in the environment where they need it. “The continuity and integration is so valuable because we don’t have that in our backyard,” Schwarzberg added. “But now we have it as an extension, and patients can come back home to heal.”

For more information, please visit TGH.org/ThePalmBeaches or call (561) 739-4TGH.

The Best Defense Is a Strong Offense ...

It is hard to believe that we have traveled around the sun once since we last met. That comes out to approximately 31,557,600 miles, to put it into perspective, a number just 16% greater than our current National Debt.

I am honored and humbled to have served as President of the Dade County Medical Association. This year has been challenging, instructional, enlightening, and fulfilling. I have had the privilege of meeting many individuals from all walks of life who either directly or indirectly influence the delivery of healthcare both in our County as well as at the State level. I want to thank all Dade County physicians for allowing me this privilege. I assure you that the success of any leader is not solely the result of his or her effort but rather the result of those who came before and the team with whom they work. I would like to thank the members of the Executive Committee and the Board of Directors, Fraser Cobb, Angel Bosch, Desiree Santana, Betty Elma, and all the other individuals, too numerous to name, who have assisted me throughout the year. I would especially like to thank my wife, parents, brother, sons, daughter-in-law, and particularly my two granddaughters, Anita and Monica, as well as close friends who have supported me through this journey.

As in any endeavor, we have had wins and losses; however, we established the Physician Wellness Program; we made a donation to the Lee County Medical Association to assist the physicians impacted by Hurricane Ian; we traveled to Tallahassee and in one and a half days met with twenty-four Legislators as well as with their Aides advocating for physicians and patients; using print and social media we provided education as well as disseminated our position on important healthcare issues which affect physicians and patients; and in the 4th Annual Medical Student and Resident Research Competition, participation nearly doubled. I believe we were successful in representing physicians as well as the interest of patients at the County level as well as at the State level.

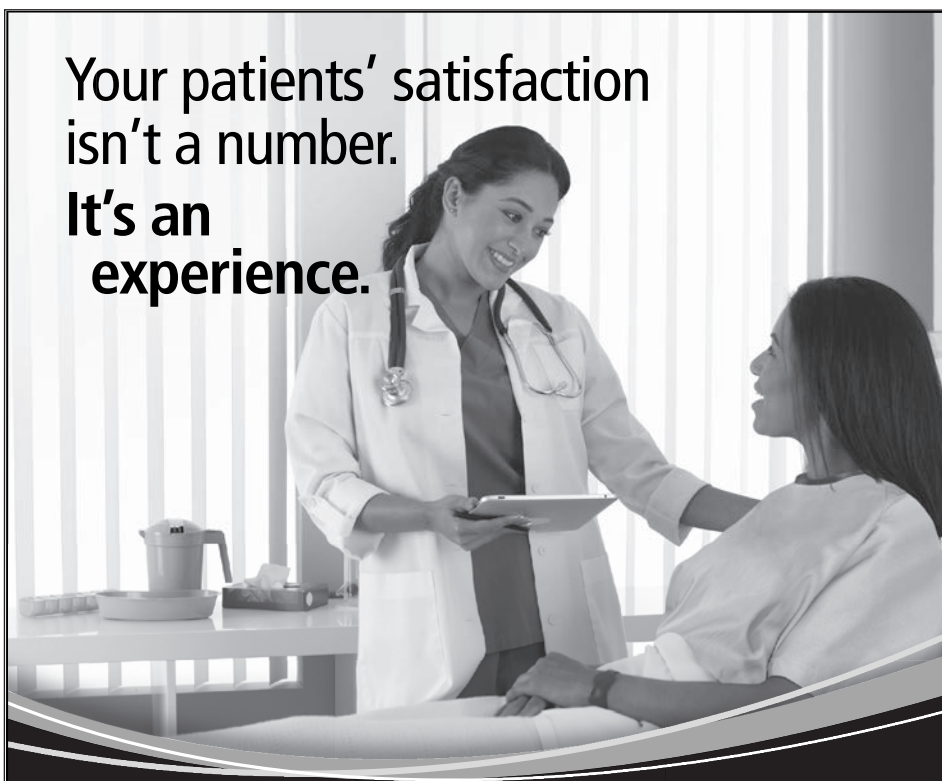
The battle continues since there will always be forces trying to weaken our resolve. Organized Medicine must continue to repair the bridges, reinforce our individual resolve, and continue to educate the public, never forgetting that the best defense is a strong offense. I am sure that my successor, as well as all of those who have helped me throughout this year, will continue the good fight, defending and protecting physicians in the practice of Medicine for the benefit of patients. I am also confident that in the end, we will always succeed if we address every issue using ethical and moral principles as our compass. God Speed.



BY RAFAEL J. FERNANDEZ, JR., MD

Dr. By Rafael J. Fernandez, Jr., is President of the Dade County Medical Association.

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A message from our President

The Healthcare Workforce: Cost, Retention, Recruitment, and Training

Mid-May and we are already experiencing what is seemingly early heat and humidity with the possibility of a weather disturbance over the Bahamas developing into a tropical depression...what the heck! As much as the heat and possible storm affect us, we can handle it. What I am not as sure about is our ability to handle healthcare workforce shortages that appear to be a constant thorn in our side for now and for years to come.

Come and join us on June 15th at the Signature Grand for our 17th Annual Healthcare Summit that will look at the issues surrounding our healthcare Workforce. Go to our website (www.SFHHA.com) and click on the "Events" tab or look for our event ad in this issue of South Florida Hospital News and Healthcare Report.

Healthcare workforce development is crucial for maintaining a robust and skilled healthcare workforce, which is essential for delivering quality patient care and addressing the healthcare needs of the population. Whether enough is happening to support healthcare workforce development depends on how much effort governments, healthcare organizations, educational institutions, and other stakeholders are putting forth to make this a perennial priority.

Here are some of the common strategies and initiatives that support healthcare



Jaime Caldwell

workforce development that we will discuss at our conference:

Training and education: Providing comprehensive and accessible training programs, continuing education opportunities, and skill development initiatives for healthcare professionals.

Recruitment and retention: Implementing strategies to attract and retain healthcare professionals, such as competitive compensation packages, professional development opportunities, and supportive work environments.

Collaboration and partnerships: Facilitating collaborations between healthcare organizations, educational institutions, and government agencies to share resources, expertise, and best practices in healthcare workforce development.

Scholarships and financial incentives: Offering scholarships, grants, loan forgiveness programs, or other financial incentives to encourage individuals to pursue healthcare careers or practice in underserved areas.

Telehealth and technology integration: Leveraging telehealth and other technological advancements to expand access to healthcare services and enhance healthcare workforce efficiency.

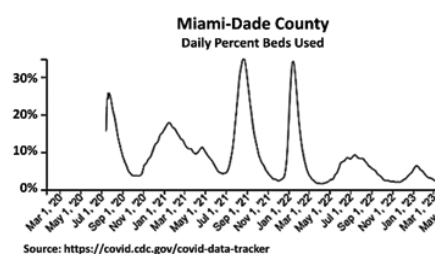
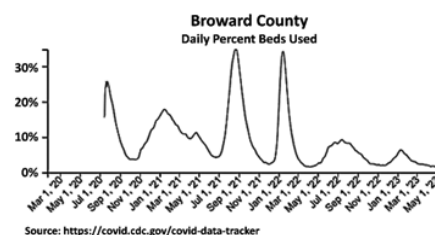
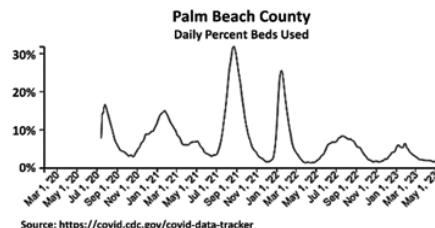
Research and data-driven decision-making: Conducting research on healthcare workforce needs, trends, and challenges to inform policy and decision-making, and ensuring that workforce planning is aligned with the evolving healthcare landscape.

Diversity and inclusion: Promoting diversity and inclusion in the healthcare workforce to ensure representation from different backgrounds and perspectives, which can enhance cultural competence and improve patient outcomes.

I am looking forward to seeing all of you on June 15th. You can sponsor/register today by going to our website.

The Cost of COVID-19 Vaccines Amidst Changes in CDC Guidelines and Release of the Updated (Bivalent) Booster Dose

The great news is South Florida hospitals are no longer overwhelmed with COVID-19 (COVID) cases. Staffed inpatient beds by patients with confirmed COVID is about 1.6% across Palm Beach, Broward and Miami-Dade counties for the seven days concluding on May 18, 2023.¹



It took time, but no doubt the public health effort eventually protected all Florida population demographics.

- To date, 95% of the 65+ population received at least one dose; 94.3% completed the primary series (two vaccinations two weeks apart) but this increases to 98.6% among recipients "with a valid county of residence."²

- For the total Florida population, 87.2% received at least one COVID vaccination, and 73.5% completed the primary series.³

- Seniors are most likely to seek bivalent protection (30%). Overall, only 11.5% of Florida's population has sought the newest booster.⁴ This is a concern since the data show less interest among Floridians in updating their vaccination protection.

Protection against all COVID strains comes at a high cost. Nationally, over the \$30 billion spent so far on vaccines.⁵ "The federal government has purchased 1.2 billion doses of Pfizer and Moderna COVID-19 vaccines combined, at a cost of \$25.3 billion, or a weighted average purchase price of \$20.69 per dose."⁶ Current vaccines are more

expensive.

The Kaiser Family Foundation estimates recent federal government expenditures are on average at \$28.89 per vaccine dose. The Pfizer offering is more expensive (\$30.48) than the Moderna (\$25.36) cost per dose. Compared to the initial federal acquisition cost, the Pfizer price is up 56% versus Moderna that increased their price by 73%.⁷ In total, the U.S. has purchased 171 million doses of the bivalent booster at a cost of \$4.9 billion.⁸ Starting January 1, 2024, the federal government will not pay for COVID vaccinations; CMS will likely set the "payment rate for administering COVID vaccines to align with the payment rate for administering other Part B preventive vaccines (\$30 per dose).⁹

Adding to the vaccination cost, is administration of the antiviral pill Paxlovid. Designated for mild to moderate COVID, the treatment costs \$530 per dose.¹⁰

The CDC simplified the COVID-19 vaccine recommendations (4/19/2023) for people at higher risk who need the protection from additional COVID-19 vaccine doses. New guidelines provide "flexibility for healthcare providers to administer additional doses to immunocompromised patients as needed."¹¹

Guidance now allows "additional updated (bivalent)¹² vaccine dose for adults ages 65 years and older and additional doses for people who are immunocompromised." The updated bivalent mRNA COVID vaccine is recommended for individuals six years and older regardless of monovalent vaccine dosing status. "Individuals ages six years and older who have already received an updated mRNA vaccine do not need to take any action unless they are 65 years or older or immunocompromised. For young children, multiple doses continue to be recommended and will vary by age, vaccine, and which vaccines were previously received."¹³ These new guidelines are concurrent with the World Health Organizations' proclamation that "COVID-19 is no longer a global health emergency."¹⁴ The US target date for the emergency declaration expiration is May 11, 2023.



BY RICHARD KLASS

Richard Klass, President, 2CY, Inc., can be reached at rklass@2cy4u.com.

1 [cms.gov](https://www.cms.gov)

2 Ibid

3 Ibid

4 Ibid

5 This includes vaccines that have been authorized for use in the United States (vaccines from Pfizer, Moderna, J&J, and Novavax) and others that either did not make it past the clinical trial phase or for which manufacturers have not sought authorization (vaccines from Merck/IAVI, Sanofi/GlaxoSmithKline and Astra-Zeneca).

6 [kff.org](https://www.kff.org)

7 Ibid.

8 Ibid.

9 [cms.gov](https://www.cms.gov)

10 [Foxbusiness.com](https://www.foxbusiness.com)

11 CDC Newsroom 1

12 Bivalent vaccines protect against both the Omicron subvariants BA.4 and BA.5 and the original SARS-CoV-2 virus. Related boosters are manufactured by both Pfizer-BioNTech and Moderna. Monovalent (original) mRNA COVID-19 vaccines are no longer recommended for use in the United States.

13 CDC Newsroom

14 [cnn.com](https://www.cnn.com)

Strengthening the Nursing Community: A Look into the Nursing Consortium of Florida

BY DANIEL CASCIATO

In the face of challenges such as nursing shortages and the need for enhanced collaboration, the Nursing Consortium of Florida has emerged as a pivotal force in addressing these issues and strengthening the nursing community.

Founded in 1997 as the South Florida Nursing Shortage Consortium, the organization has grown to include 74 member organizations, including hospitals, schools of nursing, nurse staffing agencies, and providers of hospice services. Guided by a mission to promote collaboration and address opportunities for strengthening nursing services, the Consortium focuses on critical areas. In addition, it implements signature programs to support its goals.

Formation and Evolution

The roots of the Nursing Consortium of Florida can be traced back to nursing's response to the aftermath of Hurricane Andrew in 1992. Ralph Egües, Jr., Executive Director of the Consortium, highlighted this origin and adds, "Led by the faculty of the University of Miami's School of Nursing, many nurse leaders from hospitals and schools of nursing throughout South Florida met and collaborated for the first time. That experience gave eventual rise to the South Florida Nursing Shortage Consortium in 1997."

In the decades since, the association has grown and evolved, and in early 2022 it became the Nursing Consortium of Florida.

Membership and Focus

The Nursing Consortium of Florida currently boasts 74 organizational members, including hospitals, accredited schools of nursing, nurse staffing agencies, and providers of hospice services. These member organizations and their employees benefit from collaborative opportunities and



Ralph Egües, Jr.



Jean Seaver

participation in various Consortium committees. The Consortium addresses its primary focus areas by convening committees of member employees. Current committees include Advocacy, Community Engagement, Conference Planning, Recruitment & Retention, and Youth Initiatives. Additionally, the Consortium manages a centralized placement system that facilitates the scheduling of clinical experiences for student nurses and allied health professions students.

Signature Programs

The Consortium's signature programs—"Day in the Life of a Nurse™" and CCPS the web-based system for managing student nurse clinical experiences—have significantly contributed to nursing education and career exploration.

The "Day in the Life of a Nurse™" program, established in 1999, offers middle and high school students a unique opportunity to gain insight into the nursing profession.

"For more than 20 years Day in the Life of a Nurse™ has provided middle and high school students with a one-day peek at the world of nursing. Students learn about the many career opportunities within the nursing profession through facility tours, presentations, a shadowing experience, and small group interaction with nurses or nursing students," Egües explains. "During the pandemic, Day in the Life of a Nurse™

was transformed into a two-week long virtual experience for students and teachers in remote locations and now also includes interactive modules for teachers to use in a classroom setting. The virtual Day in the Life of a Nurse™ increased our reach five-fold, so we've continued to offer it even after resuming the in-person experiences."

Additionally, addressing the challenges faced by nursing schools and hospitals, Egües highlights the impact of the web-based Centralized Clinical Placement System (CCPS), adding, "The CCPS addresses the needs of nursing schools and hospitals seeking a uniform easy-to-use system for scheduling nursing student clinical experiences. Today CCPS links more than 120 Florida hospitals and schools of nursing and helps to maximize the use of available clinical space."

These innovative programs demonstrate the Consortium's commitment to providing practical experiences and efficient systems that contribute to the growth and development of nursing professionals.

Addressing Challenges and Ensuring Quality Care

The COVID-19 pandemic exacerbated the nursing shortage in South Florida and created new challenges for the profession. Jean Seaver, board president of the Nursing Consortium of Florida, acknowledges these challenges, emphasizing the need for innovative solutions and collaboration.

"The pandemic experience caused or exacerbated multiple fractures along an already fragile and under-resourced nurse pipeline," she says. "New initiatives are needed to better engage prospective nursing students, to more fully staff nursing schools, to improve the quality of nursing student clinical experiences, to restructure onboarding programs, to develop more collaborative models of nursing care, to better resource the nurse manager role, and to adopt greater scheduling flexibility."

Building a Stronger Future

"Our youth outreach programs have had an impact in bringing the nursing profession into better focus for middle and high school students and their teachers and parents," says Egües. He also highlights the collaborative culture among member organizations, stating, "We've long fostered a vision that in good times and bad, we get to better together. Our association has grown significantly the last few years because nurse leaders in neighboring counties saw the value of the work underway at the Consortium and the benefit of participating in it."

Seaver agrees, "The collaboration between academia and practice makes us stronger in understanding the needs and improving the education, onboarding of new nurses, and practice of nursing. As the Consortium grows, so does our influence in shaping nursing for the future health-care needs of our community."

Conclusion


Egües adds that a number of the interventions they envisioned to deal with the current challenges are already being piloted at member organizations.

"We're also increasingly engaged with funders and community leaders who wish to better understand the nursing shortage challenges and invest in helpful solutions that can make a difference. This too is an important function of the Consortium," he notes. According to Seaver, the ease of communication and collaboration between the academic and practice partners only helps to build better programs to support the nursing profession.

"Best practices are shared and help augment what each member is doing. The collective efforts make a difference in our community," she says. "Our goal is ever better healthcare, and great clinical outcomes and patient satisfaction cannot be achieved without great nursing."


For more information, visit nursingconsortium.us.

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Let's Connect:
ACHE of South Florida Spotlight

ACHE of South Florida
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ACHE Spotlight: Ashley Chacko

BY LOIS THOMSON

Ashley Chacko began her career at Cleveland Clinic Florida, advancing from an Office Coordinator position in Neurology to the Director of Executive Administration for the Cleveland Clinic Florida region when she left 8 years later. She left to join Healthcare Outcomes Performance Company (HOPCo), the recognized leader in comprehensive musculoskeletal care delivery, management, and value creation. "HOPCo's market transformation strategies and musculoskeletal platforms are disruptive, drive stakeholder alignment, and truly change how MSK care is delivered," Chacko explained.



Ashley Chacko

once we are able to do that, the patients are the ones who benefit." Chacko said the ultimate driver is the patients, to help improve the quality of healthcare that's rendered for them. "We are constantly asking ourselves, 'How do we do that, how do we lower the cost, make it more accessible? How can we deliver consistent, high-value, evidence-based MSK care?'"

Chacko is the Vice President of Market Intelligence and Strategic Planning at HOPCo. Her team translates data to drive strategic decision-making and improves HOPCo's understanding of market opportunities to drive actionable initiatives. "We identify and prioritize business development opportunities, develop growth strategies, and execute tactics for our health system, insurance, and practice partners, and identify and assess markets for HOPCo's future growth.

"Specifically, we look at markets and identify ones that are best suited for HOPCo to enter; we then identify where the growth opportunities exist, determine how we can achieve those growth goals, and create a strategy to transform those markets in a synergistic way for our partners. We aim for full market transformation, so we work with the physician groups, health systems, and payors within the market – our focus is to align all of the stakeholders." Chacko continued, "Stakeholder alignment allows standardized delivery of care that drives quality outcomes, patient safety, satisfaction, and reduced costs.

"Our ultimate goal is to elevate the standard of care delivered in a market, and

Chacko has been a member of American College of Healthcare Executives (ACHE) since 2018. She is currently on the 2023 Board as Network Chair-elect. "There is no denying the power a strong professional network can have over your career success," Chacko stated. "When students graduate from school, they have the foundational knowledge, but don't necessarily have the opportunity to network with healthcare executives. Networking provides access to job opportunities, professional connections, career advice, new ideas, and valuable information that helps with career and personal growth. The reason that I have been able to grow in my career is because people saw my potential and gave me a chance to advance, and I strongly believe it is my responsibility as a healthcare leader to do the same for others."

With that in mind, Chacko said she would absolutely encourage people to join ACHE. "There is so much value in it – from exchanging ideas with fellow members to potentially opening doors to new opportunities. Regardless of the stage of your career, ACHE provides lifelong learning through various programs and experiences to participate in such as face-to-face local and regional programs and virtual webinars.

"ACHE members are part of an extraordinary community of healthcare leaders. As we continue to connect, learn, and lead, we have an opportunity to work together to truly innovate and transform the way we deliver healthcare."

When It Comes to Patient Care, Check Your Enthusiasm Levels

I think the office I work out of is on its 3rd or 4th coffee maker. Either they are not building them like they used to, or my peers are over-working the device into submission. Regardless, last week I went into the breakroom for a cup of joe, only to find it wasn't working. I announced that I was making a Starbucks run and offered to buy others something if they wanted it. It was 6:55 a.m. and I was overdue for my daily dose of caffeine.



BY JAY JUFFRE

I pulled up to the drive-thru speaker and was greeted with an enthusiastic "Good morning!!! How can I help you today?" The young man's voice continued with energy throughout the ordering process. I was thinking, 'this kid gets it'. His excitement is part of the reason there is a long line around the building and a desire to pay a little bit more for a morning cup of coffee. As I pulled around to the window, a young lady greeted me to complete the transaction. She was equally energetic and had an ear-to-ear smile that was contagious. I want to point out that these two individuals were in their late teens, maybe their early 20's. How does this compare to how patients and their families are greeted when they interact with your organization? Over the years I, and probably you, have seen a bell curve ranging from extraordinarily welcoming to cold as ice. Take time to assess your team in all aspects of their interaction with patients. From phone calls about appointment reminders, to greetings when they enter the building and even as they are wrapping up a stay or visit. It does not need to be over the top like the two baristas referenced above, but it should be warm and personable. Remember nothing great was ever achieved without enthusiasm. If you want great scores and tons of referrals, inject some enthusiasm into your team's interactions.

Jay Juffre is Executive Vice President, ImageFIRST. For more information on ImageFIRST, call 1-800-932-7472 or visit www.imagefirst.com.



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HOW HEALTHY IS YOUR MED MAL POLICY?

It's no longer just a matter of signs hinting at a hardening market. Indisputable evidence is now at the forefront. Malpractice rates are going up across the board. Weaker malpractice carriers are being placed into receivership or sold. Juries in Florida are making shockingly high awards. And this is only the beginning.

ISN'T IT TIME YOUR MED MAL POLICY GOT A CHECKUP?

Risk Strategies will perform a no-obligation comprehensive review of your current malpractice coverage. Few doctors and administrators have an in-depth knowledge of their coverage or insurer and may not be asking all the right questions. For instance, do you know the following about your coverage:

- Are the policy exclusions outlined and clearly defined?
- Do you have full or just limited rights to consent to any lawsuit settlement?
- Is defense coverage offered outside or inside the limits of liability?
- What are the "tail" provisions upon termination of the policy?
- How is your corporation, professional association or other entity covered?

These are just a few of the questions you should be asking in this volatile market. It's not too late for a no-obligation medical malpractice insurance review, just contact Risk Strategies at **800.966.2120** or matt@dannagracey.com.

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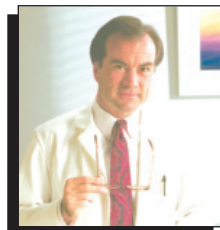


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What Every Healthcare Employer & Employee Needs to Know About Employment Law

As a healthcare employer or employee, it's important to understand the various laws and regulations that govern employment practices. Employment law aims to protect the rights of workers and prevent discrimination, harassment, and unfair treatment in the workplace. Here are some key areas that every healthcare employer and employee should know about.



BY BEN ASSAD MIRZA,
ESQ., LLM, MPHA

ing the birth or adoption of a child, caring for a family member with a serious health condition, or the employee's own serious health condition. Employers should have a clear policy on how to request and take advantage of FMLA leave.

5. Occupational Safety and Health

Healthcare employees face specific safety and health hazards in the

1. Employment Contracts

It is important to have all employed Physicians under contract, for there is a lot that is riding on them. For example:

- Should a physician be able to moonlight, while working fulltime?
- Should a physician have the obligation of keeping business processes confidential?
- Should a physician be able to work for a competitor?
- Who has the ultimate obligation to bill properly?

Employers should provide written employment contracts that outline the terms and conditions of employment, including job responsibilities, compensation, benefits, working hours, and termination procedures. Employees should carefully review and understand the terms before signing.

2. Whistleblower Protection

Employees who report illegal activities, fraud, or safety violations in good faith are protected by whistleblower laws. Employers should have policies in place to address whistleblower complaints and ensure non-retaliation against employees who report concerns.

3. Anti-Discrimination Laws

State and federal laws prohibit discrimination against employees based on race, gender, age, religion, national origin, or disability. Healthcare employers should ensure that their hiring practices and workplace policies do not discriminate against any protected class. Employees who experience discrimination should report it immediately to their employer or to the appropriate agency.

4. Family and Medical Leave

The Family and Medical Leave Act (FMLA) requires covered employers to provide eligible employees up to 12 weeks of unpaid leave per year for certain family or medical reasons, includ-

workplace. Employers have a duty to provide their employees with a safe working environment. The Occupational Safety and Health Administration (OSHA) sets forth specific regulations for the healthcare industry, including standards for exposure to bloodborne pathogens, hazardous waste, and workplace violence.

6. Employee Privacy and Confidentiality

Healthcare employees have access to sensitive patient information, so it's essential to maintain patient confidentiality. Employers should develop policies and procedures to protect patient privacy and ensure that employees understand the importance of maintaining confidentiality. Employers must also comply with the Health Insurance Portability and Accountability Act (HIPAA) privacy and security rules.

Healthcare employers and employees must be aware of their rights and responsibilities under various employment laws. Maintaining compliance with these laws is not only a legal obligation but also contributes to a positive work environment for all members of the healthcare team. Consultation with an employment law attorney or professional is a valuable resource for staying up to date on changes in employment law.

Join us for a Webinar on: What Every Healthcare Employer & Employee Needs to Know about Employment Law.

Date/Time: 6:30 p.m. (EST) on
Tuesday, June 20, 2023

Please click this link and register for the free Legal Webinar:

<https://us02web.zoom.us/j/8121212121>

If you have any questions, contact Ben Mirza, Mirza|Healthcare Law Partners, at cell/text (954)445-5503, or email BAM@MirzaHealthLaw.com.

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www.southfloridahospitalnews.com

Six Steps to Successful Healthcare System Selection and Implementation

Healthcare System Selection and Pre-Implementation Process

Digital enablement is critical for healthcare organizations seeking better operational performance and patient engagement. Success in today's challenging environment requires optimizing healthcare technology solutions such as Electronic Health Record (EHR) systems and practice management (PM) systems to offset the headwinds of labor shortages, rising costs, migration of care, and increased competition.



BY ALFREDO CEPERO

Whether seeking new healthcare solutions to replace outdated technology, support growth, or enable physicians and nurses to prioritize patient care, BDO brings proven experience and actionable insights to guide healthcare organizations through the vendor system selection and pre-implementation readiness. Below outlines the most effective and efficient way for healthcare organizations to streamline their process.

Target Systems Selection to Specific Provider Needs

Step 1. Facilitate In-Depth Discovery of Current Systems

Asking the right questions to the right stakeholders provides an accurate assessment of where you are today and better informs where you want to go.

- Glean input from key stakeholders

Step 2. Identify Unique Needs and Functionality Gaps

A comprehensive, objective acknowledgement of system shortcomings enables identification of must-have features and what is required to obtain the right solution.

- Perform gap analysis
- Envision your future

state

- Assess your organization's change readiness
- Formulate the functional system requirements

Step 3. Execute a Targeted RFP Process

Framing appropriate questions and applying vendor market knowledge ensures only qualifying systems are reviewed and considered.

- Craft your RFP according to your custom needs
- Field responses from potential vendors
- Narrow the list of potential vendors

Holistically Prepare for Implementation

Step 4. Conduct Product Demonstrations and Finalize Your Cost

Analysis

Ensure day in the life scenarios align with identified requirements and the desired future state.

- Invite select vendors to give product demonstrations
- Update the total cost of ownership analysis
- Complete the final analysis

Outcome: Select New Vendor Solution

The new solution should:

- Fulfill your need for enhanced patient and clinician experience, modernized quality care, operating efficiency, and cost savings
- Support your organization's long-term vision
- Optimize your clinicians' ability to work at the top of their license

Step 5. Perform a Deep Dive Assessment of the Current State

BDO's pre-implementation strategy guides organizations in establishing clear expectations and standards for transforming Access, Clinical and Revenue Cycle workflows. This allows our clients to realize the full value of system investment at implementation, thus reducing the need for immediate optimization efforts.

- Conduct a formalized, comprehensive gap analysis of the current state vs. the new solution
- Prepare for the new technology

- Close operational gaps where feasible prior to system implementation

Step 6. Commence Transition Management

A best practices approach to new system implementation involves empowering stakeholders in key focus areas across the organization.

- Assess your governance structure
- Implement the needed project management and change management strategies
- Implement a thoughtful communications strategy
- Develop readiness plans for various work groups across your organization

Get Started with a Dedicated Partner

Customizing the latest healthcare system technology to the unique needs and vision of your organization can improve efficiency, reduce costs, and enhance clinical outcomes. Without it, your organization is at risk of losing ground to competitors.

Alfredo Cepero, Assurance Market Leader, BDO, can be reached at (305) 420-8006 or acepero@bdo.com.

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Alfredo Cepero, Assurance Market Leader (305) 420-8006 / acepero@bdo.com
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Hurricane Preparedness: Hospitals Protecting Lives in Times of Crisis

In the face of natural hazards like hurricanes, hospitals play a pivotal role in safeguarding the health and well-being of communities. However, the impact of these powerful storms can be devastating if healthcare facilities are ill-prepared. To mitigate the risks and ensure the continuity of critical medical services, it is essential for hospitals to prioritize comprehensive hurricane preparedness. This article delves into the importance of proactive planning, resource management, infrastructure resilience, and community engagement to effectively handle hurricanes and protect lives during these challenging times.

1. Protecting Patients and Staff: During a hurricane, hospitals become crucial hubs for emergency medical care, making patient and staff safety the utmost priority. Adequate hurricane preparedness enables hospitals to evacuate patients, secure critical equipment, and ensure the well-being of healthcare personnel. Establishing comprehensive evacuation plans, training staff for emergency scenarios, and stockpiling essential supplies are essential steps to protect lives in times of crisis. In some instances, hospital leaders have underestimated the complexity and challenges associated with evacuating a hospital.



BY ATTILA J. HERTELENDY, PHD

Comprehensive and realistic drills should be part of every healthcare organization's strategic planning. Tabletop exercises are insufficient to simulate a full scale evacuation.

2. Maintaining Continuity of Care: Hurricane preparedness is vital to maintain the continuity of healthcare services. By fortifying their infrastructure against potential damages and disruptions, hospitals can continue providing

medical care amidst the chaos caused by hurricanes. Ensuring backup power generators, maintaining fuel reserves, and establishing communication channels are key aspects of maintaining uninterrupted care. Additionally, developing partnerships with neighboring hospitals and healthcare providers can facilitate patient transfers and resource sharing during emergencies. There are lessons to be learned from emergency management and the fire service in this regard. Most emergency response organizations have a pre-signed mutual aid pact with neighboring response agencies to provide resources and aid during situations where a jurisdiction's resources may become overwhelmed. Hospitals should preplan for the worst and consider mutual aid compacts to strengthen overall resilience.

3. Safeguarding Critical Medical Equipment: Hospitals rely on various life-sustaining medical equipment and technologies. Adequate hurricane preparedness includes securing and protecting these critical assets from damage or loss. Implementing preventive measures such as equipment elevation, waterproofing, and creating storage plans can help safeguard vital resources. Regular maintenance and testing of backup power systems are crucial to ensure that life-saving equipment remains operational during power outages.


4. Infrastructure Resilience and Redundancy: Building resilient infrastructure is paramount to ensure hospitals can withstand the impact of hurricanes. Designing and retrofitting healthcare facilities to withstand strong winds, flooding, and other potential hazards can reduce damage and minimize downtime. Implementing structural reinforcements, flood-proofing measures, and utilizing resilient building materials are key strategies to enhance infrastructure resilience. Additionally, establishing redundant systems for critical services like power, water, and HVAC (heating, ventilation, and air conditioning) can minimize disruptions and provide a safe environment for patients and staff.

5. Community Engagement and Education: Effective hurricane preparedness extends beyond hospitals' walls and involves community engagement and edu-

cation. Hospitals should actively participate in community awareness campaigns, educating residents about hurricane risks, evacuation procedures, and the importance of early medical intervention. Collaborating with local emergency management agencies, schools, and community organizations can foster a culture of preparedness and resilience. Engaging in drills and exercises with local stakeholders can help hospitals identify potential gaps and refine their emergency response plans.

Conclusion: Hurricane preparedness is not just a recommendation but a moral obligation for hospitals. By prioritizing proactive planning, resource management, infrastructure resilience, and community engagement, hospitals can safeguard lives and maintain essential healthcare services during hurricanes. Recognizing the unique challenges posed by these hazards, healthcare facilities must invest in preparedness measures to protect patients, staff, and critical medical equipment. By doing so, hospitals can fulfill their vital role as beacons of hope and healing, even in the face of adversity.

Dr. Hertelendy is President and CEO of Great White Emergency Management Solutions, a company specializing in disaster preparedness, response and sustainability solutions. He is also Assistant Professor, College of Business, Florida International University & Adjunct Associate Professor, Mailman School of Public Health, Columbia University.



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South University: A Special Emphasis on Emergency Medical Training

Physician Assistants/Associates (PAs) are highly skilled healthcare professionals who receive comprehensive education in generalist medicine using the medical model. This education includes didactic class time and clinical rotations, which enables the graduates of this program to practice in various specialties, such as family medicine, surgery, and emergency medicine. In the ever-evolving field of emergency medicine,

PAs must possess a broad understanding of multiple specialties, along with specialized training in acute care. The curriculum of the South University West Palm Beach PA Program stands as a prime example of how educational institutions are adapting to meet the evolving needs of the healthcare industry.

One of the program's unique strengths is that it places a special emphasis on emergency medicine training. We offer a 4-credit class focused solely on this field, providing students with medical knowledge, critical thinking skills, and diagnostic abilities to handle any situation. We also provide training in various diagnostic modalities, such as point-of-care ultrasonography, as well as procedural training, including suturing, central line



BY SONDRA NANTES, MMSC, PA-C
AND MAX BENLULU, MPAP, PA-C

insertion, and incision and drainage techniques.

This course ensures that students are competent in all aspects of medicine, including diagnosis, treatment, and disposition.

Our program's curriculum highlights the importance of Point-of-Care Ultrasound (POCUS) in emergency medicine. POCUS has become an essential tool for healthcare professionals in emergency medicine, providing real-time imaging of internal structures for rapid diagnosis and treatment. Training in

POCUS includes a Focused Assessment with Sonography in Trauma (FAST) examination during trauma evaluation, ultrasound guided IV placement, bedside ultrasound for acute urinary retention, evaluation of fluid status, as well as general bedside ultrasound skill for abscess evaluation and abdominal pain.

One student's testimonial speaks to the quality of education and its positive impact on their clinical rotations. "Upon entering my emergency medicine rotation, I felt a profound sense of confidence, enthusiasm, and extensive readiness.

The comprehensive education received at South University equipped me with all the essential tools to surpass expectations within the emergency room setting. Not only was I instilled with clinical aptitude and medical knowledge during my didactic training in emergency medicine, but I was also instilled with a deep sense of empathy, respect, and invaluable tips and techniques that rendered my experience in the ER exceptionally ful-

filling. I express my deepest gratitude to South University for fostering my growth as both a proficient clinician and a compassionate individual, both during my didactic education and throughout my immersive five-week rotation in the emergency room."

The curriculum is constantly evolving to meet the needs of the healthcare industry, ensuring that students are up to date with the latest advancements in emergency medicine. As a result, students are excelling in their clinical rotations after their didactic education and are well prepared to provide high-quality care to patients in the Emergency Department.

Overall, the South University's West Palm Beach PA Program's emphasis on emergency medicine training along with its evolving curriculum is providing students with the skills and knowledge necessary to become proficient and compassionate healthcare providers.

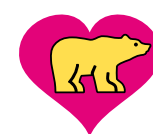
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All of us at Nicklaus Children's extend our heartfelt thanks to the emergency professionals, doctors, nurses, and EMTs who dedicate their lives to keeping our community safe and healthy. Your tireless passion and commitment to your calling inspire us all. We celebrate you this Emergency Medical Services week, and always.



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STARS Program at Golisano Children's Hospital Launches

Southwest Florida first responders have joined together with Golisano Children's Hospital to bring the Special Needs Tracking and Awareness Response System (STARS)—a program that saves lives by accelerating emergency medical care for children with complex medical conditions—to Southwest Florida.

STARS was recently implemented at Golisano Children's Hospital of Southwest Florida. The program began in Lee County and quickly expanded into Charlotte and Collier counties, with an extension into Hendry County currently underway.

The benefit to pediatric patients is that everyone involved in their care from 911 dispatch to first responders to hospital staff is well prepared every step of the way and knows exactly what the patient needs and when they need it. This is particularly useful in helping emergency responders treat patients with rare and complex medical problems not often encountered.

When a child with complex medical needs is enrolled in STARS by a referral from their physician or via Golisano Children's Hospital, they are assigned a number. When they need emergency medical care, the person who calls 911 will give dispatch the child's STARS number. Dispatch then communicates the patient's emergency care plan to the first responders running the call. Once the team arrives to care for the child, they will already know the child's baseline condition and be ready to administer care right away. Golisano Children's Hospital will also be alerted that the child is on the way and be ready to quickly provide treatment. The STARS program saves valuable time in these critical encounters when seconds often matter the most.

Cover Story: Emergency Departments Find That Whole Blood Can Be a Lifeline for Trauma Patients

Continued from page 1

before they arrive at the hospital.

The Broward Sheriff's Office Air Rescue was the first in the state of Florida to establish whole blood transfusion protocol.

Currently, most EMS teams around the nation use only isotonic IV fluids to treat hemorrhaging patients until arrival at the hospital for a blood transfusion. However, whole blood transfusion may be a better approach to treating hemorrhaging trauma patients.

Whole blood is natural blood that is unseparated, meaning that it contains all the components of blood (red blood cells, white blood cells, platelets and plasma).

This is different than a blood transfusion in a hospital, where a pint of donated blood is usually separated out into components. For example, a cancer patient may receive platelet transfusions, while an anemic patient might get red blood cells.

The U.S. Armed Forces have used whole blood transfusions for years to save lives in combat, but civilian use by EMS is new. Evidence in peer-reviewed medical journals suggests that whole blood may be a better option than IV fluids during pre-hospital trauma care, and that it can improve chances of survival.

Our EMS does an amazing job in the pre-hospital setting by getting to patients quickly, stabi-

lizing them and bringing them to our ERs. One of our goals is to take their expertise and leverage that because EMS clinicians are a key part of our care team. For instance, EMS always plays a crucial role in treating patients with heart attacks or strokes where every minute counts.

However, historically, EMS has been limited in how they could help trauma patients. To exacerbate this situation, care may be inevitably delayed because rescue workers must first extricate a bleeding patient from a vehicle.

It is heartbreaking to hear a paramedic describe how demoralizing it is to watch a hemorrhaging patient deteriorate while waiting to be extricated after a car crash. In contrast, a paramedic recently shared a success story where they provided a life-saving transfusion to a patient who was bleeding internally while trapped in a vehicle. Currently, the EMS supplies the whole blood, but we are working on creating a system where the hospital could provide the blood in the future.

Our hope is that whole blood will empower EMS to provide the best possible care to trauma patients before they even arrive at the Emergency Department.

Dr. James Roach is Chief Medical Officer at Broward Health Medical Center and the District Chief of Emergency Medicine.

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Health Care District of Palm Beach County Recognizes Its Team of Trauma Professionals



Since 1988, the Health Care District of Palm Beach County continues to play an instrumental role in Palm Beach County's Trauma System with our two Trauma Hawk helicopters, Trauma Agency quality assurance program and our unique trauma payment model.

May was Trauma Awareness month and the Health Care District celebrated and recognized the many professionals within the county's integrated Trauma System: the Health Care District's Trauma Hawk and Trauma Agency teams, the county's two Level 1 Trauma Centers at St. Mary's and Delray Medical Centers, as well as Palm Beach County Fire Rescue and other countywide EMS providers who have responded to nearly 100,000 trauma missions over the past 32 years.

In 2022, the Trauma System treated more than 5,600 Palm Beach County residents and visitors, which increased by 300 patients from 2021. The most common type of traumatic injury in Palm Beach County is falls, followed by motor vehicle crashes. In 2022, the Trauma Hawk flight team safely transported 621 patients from the scene and between hospitals.

"There are few programs that stand

out like Trauma Hawk and our capabilities," said Jay Mazzone, the Health Care District's Director of Aeromedical Transportation. "The level of care and professionalism that our crews offer to patients easily fly above the rest. We are on the cutting edge of performance, technology and procedures and are continually searching for ways to improve further.

Trauma Hawk is an asset to Palm Beach County in a way that many may never understand, and hopefully will not have to, but those who have been saved by our crews and services will attest to the value and care that we offer."

The Trauma Agency conducts educational outreach in the community including student driver safety demonstrations and "Stop the Bleed" training. The Health Care District is in the process of developing a comprehensive, countywide falls prevention program that will launch this fall. This program will consist of numerous awareness initiatives to educate the public about falls as the leading cause of traumatic injury in our community and will implement evidence-based tools with the goal of reducing the number of falls, with a special focus on our senior population.

SALUTE TO EMERGENCY PROFESSIONALS

LAKESIDE MEDICAL CENTER

Luis M. Perezalonso, MD, FACEP



Dr. Luis M. Perezalonso is the Emergency Department Medical Director and Chief of Staff at the Health Care District's acute-care teaching hospital, Lakeside Medical Center. He is also an attending emergency medicine physician at Jupiter Medical Center. Previously, he was the Medical Director at North Shore Medical Center in Miami and Assistant Medical Director at St. Mary's Medical Center in West Palm Beach. He served as a clinical instructor for the Lakeside Medical Center's Family Medicine Residency Program and for emergency medicine students at several universities.

Dr. Perezalonso attended Ross University School of Medicine in Dominica, West Indies and completed his emergency medicine residency at the University of Puerto Rico in San Juan. He is a member of the Florida College of Emergency Physicians and American College of Emergency Physicians. Dr. Perezalonso is a Fellow of the American Board of Emergency Medicine. He is fluent in English and Spanish.

Michael Duncan, RN, CEN



Michael Duncan, RN, CEN, is a charge nurse in the emergency department at Lakeside Medical Center in Belle Glade where he oversees and guides a team of nurses and cares for patients ranging in age from neonate to geriatric. Previously, he worked as a registered nurse in the emergency departments at Lakeside Medical Center and Wellington Regional Medical Center before his promotion. He started his nursing career as a registered nurse in the telemetry department at Bethesda Medical Center West.

Duncan worked as a vice president for a plumbing contractor company in West Palm Beach for almost 30 years before pursuing his career change into nursing. He received his Associate of Science in Nursing from Palm Beach State College in Lake Worth, FL and is currently pursuing his Bachelor of Science in Nursing. Duncan is certified in basic life support (BLS), advanced cardiac life support (ACLS) and pediatric advanced life support (PALS).

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Indian River County Hospital District – located in Vero Beach, Florida – is seeking a new Executive Director. Offering a competitive salary range and a fully paid benefits plan with paid time off and generous holidays. The primary function of the Executive Director is to ensure that the vision, mission and strategies of the District are conducted in accordance with the Special Act and policies established by the Board of Trustees.

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Cover Story: Cleveland Clinic's Approach to Emergency Medicine

Continued from page 1

Track area. Post COVID, we are seeing a resurgence of patients wanting to have the care they need. We maximize our space, making sure they are bedded as soon as possible. We are working on having an ED observation unit for patients who do not need to be admitted but need prolonged attention and medical care. In the ED, we can address their medical concern immediately and arrange appropriate follow up. The goal is to expedite the care and treatment they need. We are starting a point of service initiative, so our patients that are discharged through the ED can obtain the appropriate follow-up they need with either primary care or a specialist in a timely manner. It's an important convenience for our patients and a huge boost for the community and the patients we are serving.

Any other partnerships or collaborations that you have established in the different communities you serve to enhance emergency medical care and improve health outcomes?

Education is a key element. Cleveland Clinic has been working with organizations such as the American Heart Association for many years, and we just participated in the annual Heart Walk. Through organizations like the AHA, we educate people about risk factors that lead to strokes and heart disease as well as signs and symptoms of these life-threatening illnesses. Many times, stroke patients come to the hospital through their own private transport, not recognizing the potential severity of their clinical signs and symptoms. They may not know they could be experiencing a stroke, so education is key.

We work with associations to stress the importance of screening exams and testing, so that patients can be proactive about their health. We also collaborate with local emergency medical services and the Broward Sheriff's Office. We have pre-hospital measures to improve outcomes, for sepsis, stroke and heart attacks, so we are prepared to address critically ill patients immediately when they are brought in by EMS. Our cardiology and neurology teams are on standby so when we get the call of a potential stroke or heart attack, we activate our teams and literally wait for them at the door. Cancer education and awareness are also key. We see many cancer patients presenting to the ED from complications related to cancer.

Looking ahead, what are some of the future initiatives for the ER departments at Cleveland Clinic?

The vast majority of patients we see in the emergency department are discharged. This means we must facilitate follow-up care immediately. We recently launched a Care at Home program at Cleveland Clinic Indian River Hospital, and we will launch that program in Weston as well. This program provides supportive care at home. We will identify patients through the ED who can resume long-term care at home and avoid lengthy hospital admissions. In the future, we hope to utilize telemedicine and virtual options to pre-screen patients that are being assessed by EMS. This is the future of medicine, and we hope to be at the forefront of providing world-class care to our patients in the safest and most effective means possible.

Dr. Aisha Subhani is Chair, Department of Emergency Medicine, Cleveland Clinic Weston Hospital.

Cover Story: Dr. Robert Flood: Steering Nicklaus Children's to New Heights in Pediatric Emergency Medicine

Continued from page 1

With a growing population and health system, Dr. Flood believes Nicklaus Children's is perfectly poised to make a significant impact. He stresses access as the key to addressing health care disparities. "We have the most experienced pediatric emergency physicians in the region. We have many of the best sub-specialists in the region. So when you take the quality and add on efficiency and respect, then you can really address the health care disparities on a regional level."

He is also proud of the recent advancements the health system has made in emergency medical care for children. "We have diagnostic ultrasound capabilities 24 hours a day, which is unheard of in our field of pediatric emergency medicine."

In the past year, the hospital has also implemented point of care ultrasound services and purchased two new ultrasound machines. This technology allows for quicker diagnoses and more proficient procedures.

Another significant advancement is the introduction of video-assisted intubation devices, which improve safety and efficiency when a patient requires a tube to be placed in their airway due to respiratory failure. Nicklaus Children's has also started using cloud technology for sharing radiology images, allowing doctors at Nicklaus to access, in real time, radiology studies performed elsewhere in the region.

With these advancements in technology, Nicklaus Children's Hospital is leading the way in providing innovative and timely care. However, the organization also understands that technology alone cannot solve all challenges in pediatric care. This recognition has led to a strategic shift toward forming collaborative partnerships to enhance the health system's reach and effectiveness.

The hospital has established partnerships with several health care organizations to enhance emergency medical care and improve health outcomes for children. The collaborations with

Baptist Health System and Jupiter Medical Center, among others, are part of a concerted effort to provide the highest access point and efficient access to quality care for children. Dr. Flood oversees pediatric emergency clinicians providing care at both Baptist Hospital and Homestead Hospital as well as the Mastroianni Family Pediatric Emergency Department at Jupiter Medical Center.

As for the future goals and initiatives of the emergency medicine department at Nicklaus Children's, Dr. Flood addressed the importance of the patient journey. "For us, it's really about creating that ideal experience once they're here," he says. The strategy involves streamlining the process to make it as efficient as possible, eliminating non-value-added steps, and ensuring that the families feel valued throughout the process."

Dr. Flood's enthusiasm for the future of Nicklaus Children's is palpable. "I think it's an exciting time for Nicklaus Children's," he concludes. "As we evolve in medicine to more of an accountable care organization model, Nicklaus Children's is uniquely situated to address that from a population basis rather than just a small community hospital basis." With quality people, top-notch specialists, and a supportive administration, it seems Nicklaus Children's is poised to continue making strides in pediatric healthcare in the region.

It's clear that Dr. Flood's commitment to providing the highest quality care to every patient, combined with his drive to utilize advancements in technology, positions Nicklaus Children's as a leader in pediatric emergency medicine. With leaders like Dr. Flood at the helm, there's no doubt that the hospital is dedicated to improving health care access and quality for all children in South Florida and beyond.

For more information, visit www.nicklaushealth.org.

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Cover Story: Ryder Trauma Center at the Ready

Continued from page 1

“Typically, we follow the latter because while we maintain communications with first responders during patient transport, we have every subspecialty onsite ready for immediate assessment and treatment initiation with assessment beginning on the helipad directly above and only a short elevator ride away from the Trauma Resuscitation Unit,” he explained.

Experience shows rapid assessment and management of trauma care is directly related to immediate initiation of life-saving procedures and improved patient outcomes. At Ryder Trauma, there is no need to waste minutes calling in specialists for spine, brain, or any internal trauma injury because all subspecialties are on-site 24 hours a day, seven days a week. The six trauma operating suites are designed to accommodate simultaneous care from trauma orthopedic teams, neurosurgeons, anesthesiologists, surgeons, and nurses to reduce operating room time. The convenient proximity of advanced diagnostic modalities is designed to provide critical assessment information to the trauma team quickly and efficiently.

“Obviously, Ryder Trauma’s speed to care relies on prompt ground and air transport and immediate assessment and resuscitation implementation. Our sheer size and volumes, high severity levels, research, and experience puts us at the top of a small fraternity of trauma centers across the nation,” Dr. Namias explained.

Dr. Namias described the spirit of trauma specialists. “Most of us were hit – like a lightning bolt – early in our careers, with the desire to do the most good in potentially fatal patient dilemmas. We’ve trained in the busiest of trauma centers and gathered the expertise to feel absolutely confident that we are able to fix what sometimes seems incurable,” he explained. “Integral to care and education are our trauma fellows who see the unimaginable almost every day. The sheer volume and high injury severity give them significant training in brain, chest, and abdominal injuries, as well as multi-system trauma to gain the critical hands-on experience of saving lives.”

Ryder Trauma staff regularly present and participate in national and international conferences to share experiences and learn about the constant medical innovations on the horizon.

The experienced trauma team also includes anesthesiologists who are the world’s leading experts on securing and protecting the injured patient’s airway and breathing as soon as patients enter the Ryder Trauma Center, while trauma social workers and counseling services

are on hand to help families cope. Physical and occupational therapists are intricately involved in rehabilitation from Day 1, and metabolic experts and dietitians monitor calorie and protein nutrition intake for patients in the most critical moments.

Trauma support and design aspects that may seem like simple, inconsequential things to the layman are critical to survival, like:

- Temperature monitoring, warm airflow and rapid infusion warming devices, because trauma patients are particularly susceptible to cooler temperatures due to blood loss.
- Twenty-five trauma-focused beds, trauma intensive care unit (TICU), five of which are dedicated to critically injured burn victims, in addition to an 18-bed intermediate care unit for trauma patients.
- Tele-monitoring in ICU to reduce risk of infection while maintaining constant contact with patients and educational monitoring for fellows.
- Center for Bloodless Medicine and Surgery for patients whose personal beliefs prohibit blood transfusions.

Community and Medical Education Contributions

While all this is proof of lifesaving capabilities in trauma care, Ryder Trauma doesn’t stop there. Trauma Fellowship programs have increased the number of national and international experts who train in hands-on trauma resuscitation here, and Ryder Trauma is the nation’s only trauma surgical sustainment program for the U.S. Army. Also, proactive education of children, teens, and seniors in trauma prevention includes gun violence interruption programs where youthful offenders come on-site to see the consequences of gun injuries to patients and their families. It has tallied some of the lowest repeat offenders rates and fosters safe communities.

“Many of the same faces who opened the trauma center more than 30 years ago are there today and that intense commitment is a testament to the good that we do for the community, one patient at a time, and to the world through the generations of trauma care providers who have learned their profession at the center,” Dr. Namias said. “Too often we deliver the worst news of someone’s life; but the miracles we make when we save a life makes it all worth it.”

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HEALTHCARE REAL ESTATE, CONSTRUCTION, DESIGN & FACILITY PLANNING

Delray Medical Center Unveils First Floor Tower Expansion

Delray Medical Center announces a procedural suite expansion project on its first-floor surgical tower, aimed at enhancing capabilities and elevating the patient experience. With a total investment of approximately \$13 million, the expansion encompasses three operating rooms, private prep and recovery rooms, an advanced endoscopy suite, a designated post-anesthesia care unit (PACU), and the introduction of a third CT scanner.

This expansion project at Delray Medical Center signifies a significant leap forward in delivering exceptional surgical care, prioritizing outpatient services, and facilitating quick, minimally invasive procedures. Initially, the expanded facilities will offer services in urology, gastrointestinal (GI), and general surgery, with future plans to incorporate orthopedics. This ambulatory surgery center model is designed to streamline processes and ensure patients receive efficient, high-quality care.

"The expansion of our first-floor tower marks a milestone for Delray Medical Center and demonstrates our commitment to providing the best possible care to our patients," said Daniel Listi, CEO of Delray Medical Center. "By investing in technology and dedicated facilities, we are enhancing the patient experience, reducing wait times, and improving surgical outcomes."

The three new operating rooms are equipped with some of the latest advancements in surgical technology, allowing surgeons to perform procedures with unparalleled precision and efficiency. Additionally, the addition of the most advanced CT scanner available further enhances Delray Medical Center's diagnostic capabilities, especially in cardiac imaging, ensuring accurate, timely and comprehensive diagnoses.

The expansion also emphasizes patient comfort and privacy. The private pre-operative rooms provide a tranquil environment for patients to prepare for their procedures, while the PACU ensures seamless care and monitoring following surgery. Every effort has been made to create an environment that prioritizes patient well-being and ease of access.



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Reduce, Reuse, Renovate

"Reduce, reuse, and renovate" can be valuable principles to apply in medical construction projects. By incorporating these concepts, you can enhance sustainability, minimize waste, and optimize the use of resources.

However, long before the planning and construction process begins, adapting to changing demographics, identification of patient needs, and incorporating the relevant technologies and treatment approaches must be defined so that we may design efficient and cost-effective medical buildings.

Changing demographics have a significant impact on healthcare design and construction trends, requiring healthcare providers to adapt their services to meet the evolving needs of diverse populations. Here are some key considerations



BY CHARLES A. MICHELSON, AIA, ACHA, LEED AP

that impact design:

Aging Population: The aging population is increasing globally, leading to a higher demand for geriatric care, long-term care, and specialized services for age-related conditions such as dementia and chronic diseases. Facilities need to respond to enhance their capacity to provide geriatric care and provide programs that promote healthy aging, preventative care, and supportive services for older adults.

Technology Adoption: Changing healthcare design trends often coincide with technological advancements. Healthcare organizations should embrace technology and digital solutions to improve healthcare delivery, remote monitoring, telemedicine, and patient

engagement. This can help overcome barriers such as distance, transportation issues, and limited access to specialized care. Technology changes the dynamic of the design of our medical facilities.

Chronic Disease Management: With shifting demographics, the prevalence of chronic diseases such as diabetes, cardiovascular diseases, and obesity increases. Healthcare providers should prioritize preventative care, health promotion, and chronic disease management programs to address the unique needs and the design of spaces established for preventative care.

Mental Health and Well-Being: Current trends are identifying increased mental health needs, including increased demand for mental health services, addressing the cultural stigma around mental health, and providing specialized care for vulnerable populations. Healthcare organizations should prioritize mental health services and integrate mental health into primary care settings

and/or their own specialized facilities.

By understanding the needs of our community, we can evaluate saving construction dollars for medical facilities by considering adaptive Reuse. Consider renovating existing buildings or repurposing spaces instead of constructing new ones. This means that, instead of demolishing an entire facility and rebuilding, focus on targeted renovations to improve energy efficiency, enhance patient comfort, and meet updated regulatory requirements.

It's important to note that while cost optimization is essential, it should not jeopardize patient safety, regulatory compliance, or the long-term functionality of the healthcare facility. Engaging experienced professionals who understand the unique requirements of healthcare construction can help strike the right balance between cost savings and quality.

Charles Michelson is President of Saltz Michelson Architects. For more information, visit www.saltzmichelson.com.



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Hospitals Are Built to Care for People, But Caring for a Facility's Infrastructure Is Also Critical

When urgently arriving at a hospital, no one wants to think about where to park or whether it's safe. With the recent flooding in South Florida, garages have been riddled with structural cracks causing leaks inside the garage, deteriorated caulking and pools of water lingering on the floor. Parking garages are unrelentingly used and continuously exposed to the outdoor elements, but that's



BY DANIEL L. HELMICK, PE

even more reason to ensure that hospitals and medical facilities invest in high-quality parking structures and regular maintenance to ensure their long-term health.

Now with the start of hurricane season, it's even more important for hospitals and medical centers to consider the overall condition of their parking garages and make sure that the necessary preventative maintenance is in place to reduce long-term costly repairs and ensure user safety and functionality. Preventative maintenance is always less expensive than being forced to take corrective action.

Preventative maintenance is key.

To keep structures in good working condition to withstand the weight of vehicles and inclement weather, such as high wind speeds and excessive rain, it's important to invest in a preventative maintenance program.

Make sure to choose a parking structure expert for the job and not just a handyman. High-end design build companies with extensive background building precast parking structures, like FINFROCK, are the best choice. The company's preventative maintenance program is designed to increase the longevity of a parking structure and includes annual inspections. If

major structural deficiencies are found, a structural audit will be done by a qualified engineer. In general, audits should be done every three to four years and at shorter intervals for garages older than 10 years. Cleaning and restoring of structural, architectural and mechanical components such as drainage, joint sealants, architectural metals, access control systems, HVAC systems and life safety and security systems are also included.

Unfortunately, if a parking structure has been neglected too long it may be too late for minor repairs. When major repairs are required, or a complete rebuild is the better choice, hospitals and medical facilities should choose a knowledgeable builder for the job who will serve as a trusted business partner.

Design-build companies help to cut costs.

Since time is often one of the greatest integers in any financial equation, choosing a fully integrated design-build company that understands how to maximize the efficiency of a parking structure and complete it in record time is always the wisest decision. Hiring one company to do the job from start to finish also means that there is a single source of responsibility for any changes to the project.

Companies like ours, who have erected more than 300 precast parking structures across the country, offer in-house design, manufacturing and construction services under one roof, which lowers the overall construction costs while ensuring that the parking garage is both functional and aesthetic.

Design-build companies who routinely design and build parking garages under-

stand the process and often have years of experience allowing them to identify what works and what doesn't to ensure a durable, low maintenance structure with reduced lifecycle costs. Because of this expertise, they can price and prepare orders early in the design development process with absolute cost certainty using an integrated cost-estimation system.

Time, waste and disruption can further be reduced when a modular construction method is used to build a parking garage, which reduces the construction costs associated with transportation, storage and waste. The modular construction process begins off-site with the manufacturing of all the precast concrete components. Once complete, the building pieces are transported to the construction site where they are stacked and assembled in a Lego-like fashion for efficient project completion.

Design-build experts offer better design choices for the future.

Once the decision has been made to build or rebuild a parking structure, planning for longevity should be top of mind. Not only is the quality of the new parking garage important, but hospitals and medical facilities will want to consider all the new available technology. Providing in-depth information and competitive pricing on these features is where a well-versed design-build company can really shine.

New parking guidance systems and sensors can indicate when space is or is not

available on certain parking levels, making parking in an emergency faster and more efficient for patients and visitors who are in a hurry. Access control, security, revenue collection, charging stations and photovoltaic panels are also innovative new features to consider that streamline the parking experience and even generate additional revenue for a hospital or medical center.

Parking facilities that include environmentally friendly options can also promote cost-savings and long-term value. FINFROCK, for example, has installed solar roof panels on some parking garages to provide power to buildings and offset energy costs. The company also works with clients to integrate energy efficient LED lighting that often leads to a reduction in energy costs and substantial tax credits.

The long-term health of a parking garage should weigh heavily on any hospital and medical facility that seeks to provide the highest quality patient experience.

A strong design-build partner is the ideal business partner to provide quality structural maintenance, safe repairs and state-of-the-art parking garages at a reasonable cost.

Daniel L. Helmick, PE, Executive Vice President, Project Development at FINFROCK, can be reached at dhelmick@finfrock.com.

Lee Health University Highlands Outpatient Center Opens



Lee Health is pleased to announce the opening of the Lee Health University Highlands Outpatient Center.

The 20,820-square-foot building, which is near the intersection of Ben Hill Griffin Parkway and Grande Oaks Boulevard in Estero, provides access to high-quality, full spectrum family medicine care, outpatient imaging and lab services, and an adult rehabilitation center.

Multiple clinical services are co-located into one comprehensive service facility. The first floor includes a physical therapy clinic, lab draw station, and diagnostic imaging services, including X-rays, ultrasounds, DEXA bone scans, mammograms, and more. The second floor is home to family medicine and includes 16 exam rooms and a procedure room.



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HEALTHCARE REAL ESTATE

PAM Health to Open 42-Bed Inpatient Rehabilitation Hospital in Partnership with Jupiter Medical Center



PAM Health announced that it will soon open a state-of-the-art, 42-bed inpatient rehabilitation hospital in Jupiter, FL, to serve the greater Palm Beach and Martin County areas. PAM Health Rehabilitation Hospital of Jupiter is a joint venture with Jupiter Medical Center.

The 50,000-square-foot, two-story hospital, representing more than \$25 million in capital investment in Jupiter and the surrounding communities, will be PAM Health's fourth hospital in Florida. The company operates PAM Health Specialty Hospital of Sarasota, PAM Health Specialty Hospital of Jacksonville, and PAM Health Rehabilitation Hospital of Tavares, all post-acute care hospitals serving critically ill patients with complex medical conditions.

The new hospital will feature a physician-led team of rehabilitation experts focused on a common goal of increasing patient strength and endurance and improving quality of life for patients who have experienced stroke, brain injury, neurological disease and deficits, amputations, pulmonary disease, orthopedic conditions, spinal cord injury, and other medically complex conditions.

Collaborating with PAM Health to develop the hospital are Rendina Healthcare Real Estate, which is headquartered in Jupiter, and Astrea Development. Both are recognized leaders in the industry.

Building the hospital created approximately 160 construction jobs. When fully operational, it will support more than 125 permanent jobs.

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South Floridians Honored for Healing Spirit, Leadership

Five local individuals and an organization were recently honored by the Memorial and Joe DiMaggio Children's Hospital Foundations at the 23rd Circle of Friends luncheon at the Signature Grand in Davie.

Dr. Paula Eckardt, Italia Folleco, Dr. Randy Katz, Dr. Holly Neville, and Craig Zinn were named "Spirit of Healing" award winners for professional excellence, community service, and a commitment to Memorial Healthcare System. The contributions of The Taft Foundation were recognized with the "Waside Philanthropic Leadership" award.



Scott Wester, Dr. Randy Katz, Brett Rose

Paula Eckardt, M.D., is currently medical director of Memorial's Ryan White Clinic, which provides services for people living with HIV/AIDS, and whose multidisciplinary team helps ensure that patients have access to medications, mental health services and case management services in addition to their medical care. With her leadership, Memorial was a real leader managing a hospital system during a pandemic. She has a true passion for caring and treating at-risk patients and then helping patients stay in care, take their medications, manage their conditions and get better.

Italia Folleco is a member and chair of Joe DiMaggio Children's Hospital's Patient and Family Advisory Council. Ms. Folleco's daughter, at age nine, learned that she had osteosarcoma, a rare and aggressive childhood bone cancer, and passed away in 2007 from complications of her cancer treatment. Ms. Folleco and her family have worked ever since to keep Daniella's legacy alive.

Randy Katz, D.O., FACEP, is the District Medical Director of Emergency Medicine at Memorial Healthcare System, and believes he's in a unique position to benefit the patients and families he serves. Dr. Katz spearheaded a proactive 2020 initiative to confront COVID-19 in nursing homes and established an outreach plan offering critical services to nearly 60 unaffiliated facilities throughout south Broward County.

Holly Neville, M.D., is a pediatric general surgeon, chief of pediatric surgery at Joe DiMaggio Children's Hospital and Associate Chief Medical Officer for Memorial Healthcare System. Dr. Neville is also Program Director of the General Surgery Residency Program in Graduate Medical Education. She is making a tangible difference in children's lives daily. She serves on the education and wellness committee for the American Pediatric Surgical Association (APSA), and, as a certified coach, co-founded and leads the ASPA Coaching Program.

Craig Zinn is an entrepreneur that has spent four decades in the automotive industry. The Craig Zinn Automotive Group operates in South Florida and is made up of Toyota of Hollywood, Lexus of Pembroke Pines, Lexus of North Miami, Acura of Pembroke Pines, and Subaru of Pembroke Pines. As a generous supporter of Joe DiMaggio Children's Hospital, Mr. Zinn has created an endowment to underwrite costs associated with the Animal Assisted Therapy program at the children's hospital. Additionally, Subaru of Pembroke Pines and its "Share the Love" campaign provided funding that was part of the capital campaign for the expansion of the pediatric facility.

The Value of Transparency and Open Communication

BY DANIEL CASCIATO

Building strong partnerships begins with clear communication and collaboration. These two activities are the most important factors to gain and build solid, positive working relationships. One company that understands this well is HIMpros, a leading niche healthcare staffing firm based in West Florida.



Betsy Johnson

What are the key principles of partnership?

According to Betsy Johnson, Founder & CEO of HIMpros, "The key principles of a partnership are being open, creating trust and a full understanding of the shared goals and values, along with regular transparent communication."

In a true partnership, respect is present, and power is shared. Success is measured by actively listening and effectively working together to provide a solution for a common goal or specific challenge. "You must be able to understand and work with a diverse group of organizations and move strategically together to collaborate and achieve results," she adds.

Johnson and her team are focused on their commitment of transparency, communication, quality, and consistent reporting practices that add value and help improve outcomes. HIMpros considers this relationship as a strategic partnership.

"We have always maintained solid relationships with our business partners," says Johnson. "I know this sounds old-fashioned, but it is easier to help a friend than a stranger, because you know their style, understand their business and you care about the results and outcomes."

What drives HIMpros to be transparent?

It came from listening to client struggles over the years and realizing there is a better way. It became obvious to Johnson that leading with her core values was not only being true to herself, but true to the commitment that she made to her community when she started HIMpros.

"We are committed to being transparent about our charges and what it will take to get the work done on time," she explains. "There are no hidden agendas or underlying motivations. We are truly here to help."

HIMpros recognizes the need to adapt and embrace change as the healthcare landscape evolves. Johnson acknowledges the growing influence of artificial intelligence in the healthcare staffing arena yet insists that maintaining personal connections and relationships remains top priority in a tight-knit community like health information and registry healthcare staffing.

Through their dedication to effective communication and collaboration, Johnson says that HIMpros will continue to contribute to the success of healthcare organizations and help to ensure the delivery of high-quality data which supports the best available patient care and outcomes.

"Isn't that why we are all here?" says Johnson.

For more information on HIMpros, please visit www.thehimpros.com.

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Mount Sinai Medical Center Named Level III Maternal Care Verified Facility by The Joint Commission

The Joint Commission's Maternal Levels of Care (MLC) Verification program, offered in collaboration with the American College of Obstetricians and Gynecologists (ACOG), has named Mount Sinai Medical Center a Level III maternal care verified facility.

As the only Level III facility in South Florida, Mount Sinai Medical Center has demonstrated it can care for complex maternal medical conditions, obstetrical complications, and fetal conditions.

The MLC Verification program provides an objective assessment of a facility's capabilities and verifies that a hospital has the expertise, equipment, and resources in place for a patient's specific needs and risk level. When complications arise, verification also confirms hospitals have agreements in place so the mother can be transferred to a higher-level facility with the appropriate level of care.

Dr. Dipen J. Parekh Receives 2023 Sushruta Award

Dipen Parekh, M.D., founding director of the Desai Sethi Urology Institute at the University of Miami Miller School of Medicine, has been awarded the Sushruta Award by the Indian American Urological Association (IAUA) for his contributions to the field of urology.

Dr. Parekh was honored for his strong leadership as the chief operating officer of UHealth – University of Miami Health System and as the founding director of the Desai Sethi Urology Institute. Among his many accomplishments, he has supported female hires in a male-dominated field, recruited top minds in urology and other fields such as biomedical engineering and advanced innovations to improve patient care and urology research. He also focuses on training the next generation of urologists who will continue the institute's mission of advancing the prevention, diagnosis and treatment of urological diseases.



Dr. Dipen J. Parekh with Dr. Anurag K. Das, President of the IAUA

Rheumatologist Dr. Yesenia Santiago-Casas Joins Holy Cross Medical Group

Rheumatologist Yesenia Santiago-Casas, M.D., FACP, FACR, has joined the Holy Cross Medical Group.

Dr. Santiago-Casas, who has been treating patients in Broward County since 2013, was most recently a rheumatology consultant at Broward Health Medical Center in Fort Lauderdale, Westside Regional Hospital in Plantation and Memorial Regional Hospital in Hollywood and Integral Rheumatology and Immunology Specialists in Plantation where she was also active in research as a sub-investigator. She is a member of the Florida Medical Association, Florida Society of Rheumatology, American College of Rheumatology, Puerto Rico Rheumatology Association, Colegio de Médicos y Cirujanos de Puerto Rico and the American College of Physicians.

Prior to relocating to Florida, Dr. Santiago-Casas was a rheumatology consultant at Cardiovascular Hospital in San Juan, Puerto Rico, an assistant professor of medicine, division of rheumatology at the University of Puerto Rico School of Medicine in San Juan and a faculty member at University District Hospital in San Juan and Dr. Frederico Trilla University Hospital in Carolina, Puerto Rico.

Dr. Santiago-Casas completed her internal medicine residency and rheumatology fellowship in the Division of Rheumatology, Allergy and Immunology at the University of Puerto Rico Medical Sciences Campus in San Juan, where she also was Chief Resident in the Internal Medicine Program and served as an assistant professor of medicine.



Dr. Yesenia Santiago-Casas

Dr. Stephen Unger Awarded the Distinguished Service Award by SAGES

Dr. Stephen Unger, one of the longest-tenured surgeons at Mount Sinai (practicing general and vascular surgery), was recently awarded the "Distinguished Service Award" given by SAGES: the Society of Gastrointestinal and Endoscopic Surgeons. Dr. Unger also chaired a panel discussion on managing the treatment of the gall bladder at the recent SAGES meeting in Montreal Canada.

He is currently serving a three-year term as president of the SAGES Education and Research Foundation.



Dr. Stephen Unger

HCA Florida JFK North Hospital Names William Jackson Jr., MD, as Assistant Chief Medical Officer

HCA Florida JFK North Hospital has added William Jackson Jr., M.D., MBA, as Assistant Chief Medical Officer where he will assist in the management of all clinical functions at the 280-bed acute care West Palm Beach hospital.

An accomplished, results-oriented physician executive with more than two decades in the field, Dr. Jackson previously served as President and Chief Executive Officer for Erlanger Health System. He also served as the company's Executive Vice President and Chief Medical Officer responsible for quality and safety, physician services, and inpatient and outpatient care delivery. Dr. Jackson received his medical degree from the Tulane University School of Medicine in New Orleans. He completed his post-graduate training at Walter Reed Army Medical Center and earned his MBA at the University of Virginia Darden School of Business. He is board certified in both Internal Medicine and Critical Care Medicine and is a Fellow of both the American College of Physicians and the American College of Chest Physicians.



Dr. William Jackson Jr.



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Florida Legislature Prioritizes Health Care

Following three years of an upending pandemic, Florida hospitals received incredible support from the Florida Legislature in the just-concluded legislative session. Thanks to strong advocacy from the health care community, lawmakers passed a number of bills that will stabilize the health care system, invest in essential services, increase access to coverage, and make Florida a national health care leader. While some of these bills are pending signature by Governor DeSantis, they represent a significant win for Florida health care.



BY MARY MAYHEW

After years of legislative proposals to cut Medicaid hospital reimbursement for care provided to vulnerable Floridians, not only did the budgets not include any proposed cuts, the legislature actually proposed and approved \$270 million in additional funding for hospitals to care for Medicaid enrollees. A significant portion of this funding is dedicated to care for children, who comprise the majority of Medicaid enrollees. Complex pediatric care and specialty children's hospitals will receive a boost in funding. Additionally, the Legislature continued to provide support for and to authorize again the Hospital Directed Payment Program

(DPP) that provides \$1.4 billion in additional federal Medicaid funding through the use of regional intergovernmental transfers from hospital assessments and contributions to help close some of the gap between Medicaid reimbursement and the cost of caring for Medicaid enrollees. This program must still be annually approved by CMS. Florida is currently awaiting approval of DPP for year three of the program.

Recognizing the critical foundation that health care access plays in the health of Florida's children and in their future educational attainment, the Legislature also passed legislation to increase eligibility for the Children's Health Insurance Program (this program is largely federally funded with a 72% federal matching rate). Income eligibility for the decades-old Children's Health Insurance Program, known as KidCare in Florida, will increase from 200 percent of the federal poverty level to 300 percent, or \$90,000, for a family of four.

Through focused advocacy by the FHA, the Legislature appropriated \$10 million for the Rural Hospital Capital Improvement Program. Although created in 1999, the program has not been funded since 2008. With this new funding, the program can once again support rural hospitals with grants to acquire, repair,

improve, and upgrade their systems, facilities, or equipment and help them continue to care for their communities.

Another critical investment is in the behavioral health system. The Legislature continues to improve financial support for community-based behavioral health care services for children and adults to increase timely access to care. In this recent budget, the Legislature increased the Department of Children and Families' community mental health budget by 47 percent, including \$156 million in block grant funding for community-based mental health services.

Given the magnitude of the healthcare workforce challenges nationally and in Florida, the Legislature again prioritized several pieces of legislation to protect and strengthen the workforce. First, House Bill 825 enhances penalties for anyone assaulting a hospital employee or volunteer anywhere in the facility. This bill sends a strong, unequivocal message that violence against health care workers will not be tolerated.

Second, stand-alone legislation and the state budget make two investments in affordable housing for health care workers and help them to deepen roots in their local community where they work. One is \$100 million in renewed funding for the Hometown Heroes Housing Program, which helps law enforcement officers, first responders, nurses, and others who dedicate themselves to serving their

communities with a first-time home purchase. The program already has provided more than \$89.6 million to more than 6,000 qualifying individuals to help with down payments and closing costs for home purchases. Registered nurses are the second highest group of individuals receiving this loan benefit, with the top group being veterans. The second piece is Senate Bill 102, the Live Local Act, which provides more than \$700 million for affordable community housing.

The Legislature invested in an additional aspect of the workforce by appropriating funding to increase the number of nurses and physicians who practice in Florida. Florida faces a projected shortage of nearly 60,000 nurses and 18,000 physicians by 2035. The new funding includes renewed appropriations of \$125 million for nursing education and a new funding for graduate medical education that, among other things, will support a new Slots for Doctors Program.

With more than 1,000 individuals a day moving to Florida and many over the age of 65, Florida needs a strong, robust health care system ready to meet health care needs today and into the future. The investments and priorities of the governor and Legislature will help hospitals better serve their patients and communities and create a healthy Florida for all.

Mary Mayhew is President and CEO, Florida Hospital Association.

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Around the Region... Around

HCA Florida Kendall Hospital Welcomes Ben Harris as New Chief Executive Officer



Ben Harris

HCA Florida Kendall Hospital is pleased to announce the promotion of Ben Harris to Chief Executive Officer for HCA Florida Kendall Hospital.

Ben has spent the last three and a half years at HCA Florida Woodmont Hospital, serving as the Chief Executive Officer for the 271-bed facility. Under Ben's leadership, HCA Florida Woodmont Hospital has elevated its culture, colleague and physician engagement, patient experience and quality outcomes. Colleague engagement increased to number one within the HCA East Florida Division and remains the sixth highest ranked facility in all of HCA Healthcare, resulting in increased retention and reduced nursing turnover. Similarly, physician engagement improved from the 27th to the 99th percentile, making Woodmont the number one facility in the Division and second enterprise-wide.

Ben has served in many HCA Healthcare leadership roles over the past 12 years, including Chief Operating Officer at Medical City Las Colinas and Vice President of Business Development at Medical City Plano. Before HCA Healthcare, Ben served eight years on the Plano City Council in Texas.

Ben earned a bachelor's degree in government from the University of Texas and his master's in business administration from Dallas Baptist University.

Cleveland Clinic Appoints Vickie Eaton Johnson as First Chief Community Officer



Vickie Eaton Johnson

Cleveland Clinic announced the appointment of Vickie Eaton Johnson as the global health system's inaugural Chief Community Officer.

Johnson joined Cleveland Clinic in 2014 as senior director of Government and Community Relations. Prior to joining Cleveland Clinic, Johnson was executive director of the Fairfax Renaissance Development Corp. from 1997-2014. She also served in the City of Cleveland's Department of Community Development.

Johnson earned a bachelor's degree in political science from Baldwin Wallace College, and a master's degree in public administration from Cleveland State University's Maxine Goodman Levin College of Urban Affairs. Currently, she is pursuing a Ph.D. in urban studies and public affairs, also from Cleveland State. She expects to complete that degree later this year.



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WHAT'S NEW...WHAT'S NEW...WHAT'S NEW...

Lee Health Celebrates the Opening of the Newer, Larger Dunbar Medical Office with Expanded Health Care Services



Pastor Charles Ross, Next Level Church, and Kris Fay cut the ribbon at Dunbar Medical Office

Lee Health is pleased to announce the opening of the new permanent Dunbar Medical Office. The new space is in the building that will house the future downtown location of Next Level Church at 3637 Dr. Martin Luther King Jr. Blvd. in Fort Myers. It's located just three blocks from the longstanding office that was destroyed by Hurricane Ian. The new location is much larger than the original and includes expanded care offerings. In addition to adult health care services, the new Dunbar Medical Office now offers services for children, including vision and hearing tests. There is also nutrition counseling and pharmaceutical advising available.

"We are committed to caring for our community. Establishing a new, permanent location for the Dunbar clinic was extremely important to us because we want to make sure Dunbar residents have access to high-quality care and medical services in their own neighborhood," said Kris Fay, chief officer of community based care. "The clinic's expanded services will cover children and adults, providing care for the entire family and helping to ensure a healthy community." The new location will have four more exam rooms for a total of 10 and providers will be able to see more patients.

Boca Raton's Keeping the Promise Capital Campaign Celebrates the Coslov's \$1 Million Gift



Michael and Debra Coslov

Michael and Debra Coslov have made a \$1 million gift to Keeping the Promise...The Campaign for Boca Raton Regional Hospital. The gift will be acknowledged with the naming of the third-floor reception area in the Cooperman Medical Arts Pavilion in honor of the Coslovs. Michael Coslov is the former Chairman and CEO of Tube City IMS in Glassport, PA, the largest provider of outsourced industrial services to steel mills in North America. The organization provides mill services at 84 customer sites in 13 countries and their global raw material procurement network spans five continents. He is credited with strategically transforming the organization, which he purchased from his brothers in 1987, from a \$60 million a year scrap processor to a \$3 billion provider of high quality, value-added outsourced steel services, becoming the largest provider in North America.

In addition to Boca Raton Regional Hospital, the Coslovs are involved with many other not-for-profits and charities, including being a Board Member of Penn Medicine, Board Member and Finance Chairman of Franklin Institute, Board Chairman of Philadelphia Red Cross, Board Member of Allied Jewish Appeal and Campaign Chairman, Chairman of Israel Emergency Fund, and Board Member and Building Campaign Chairman Temple Beth Hillel – to name a few.

Cleveland Clinic Indian River Hospital's May Pops Event Strikes a Chord Raising Nearly \$500K to Enhance Patient Care



(l-r) Cleveland Clinic Florida supporters Tony and Sally Woodruff, Pat and Carol Welsh, Warren and Ginny Schwerin attended the event

Cleveland Clinic supporters gathered with good friends for a good cause to support the 32nd annual May Pops spring concert featuring the Brevard Symphony Orchestra. With more than 600 guests in attendance, the end-of-year event was held at the Windsor polo field in Vero Beach and raised nearly \$500k to benefit Cleveland Clinic Indian River Hospital priorities. Special thanks went to Presenting Sponsors Marlynn and Bill Scully; VIP Hospitality Sponsors Mrs. Herman F. Becker and Chris and Keena Clifford; and Broadway Sponsors Bob Williams and Karen Katen. The evening commenced with remarks by Indian River Hospital Interim President David Peter, MD, MBA, who thanked guests for their unwavering commitment to elevating medical care for residents of Indian River County. He also celebrated longtime Chairman Tony Woodruff and his wife, Sally, for their extraordinary service and leadership over the years. Mr. Woodruff will be stepping down as Chairman this year and transitioning to the role of Chairman Emeritus.

May Pops was inspired by longtime supporters Dick and Helen Post, who had the idea of creating "an end-of-season celebration to support the hospital, with good friends, good music and good food for a good cause." Since his passing in 2013, each year guests are invited to pay tribute to Mr. Post and his flair for signature neckwear by wearing a bow tie to the event. All proceeds from May Pops will help advance technology, enhance facilities and elevate patient care at Cleveland Clinic Indian River Hospital.



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