

Magical Rebirth

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Did you ever see the *Harry Potter* movie with the exploding bird? The phoenix? Sometimes I think that is what is happening in medicine: we get to that point where we explode, and then from the ashes a magical rebirth occurs. To some extent, no matter where you are on healthcare reform, you are bound to feel like an explosion has occurred, and we hope a magical rebirth is about to happen.

I am relatively new to Tallahassee. I was recruited from Albert Einstein College of Medicine to come and teach at the “nation’s newest medical school.” It was an exciting opportunity, and part of what enticed me to come was my clinical assignment: Neighborhood Health Service.

NHS and I are a natural fit. I did my residency at a Federally Qualified Health Center in the Bronx, and took my first clinical job at Jacobi Medical Center—the public hospital system of New York City. There we saw everyone, and more than 50% of my patients were uninsured. When I heard of NHS, I was thrilled that I would be able to continue my work serving the poorest of all Americans. In a way, I feel that this is exactly what I was meant to do—and I am thrilled to work there.

In 2009 I was invited to be the medical director of NHS. I never expected or sought such an honor; NHS needed TLC (Trust, Loyalty, and most importantly Commitment). FSU College of Medicine was generous and agreed to allow me to be medical director half time, and teach the other half. NHS was equally generous, and allowed me to teach half the time.

Working with the underserved has its challenges. Difficult social problems plague virtually all of them. It seems that when poverty strikes, economic difficulties are only the beginnings of the problems. In my first months, I had a few housekeeping things to do, and a lot of learning. I learned about the history of NHS, which really was amazing. It started in the basement of a church, taking care of the same people we do now, about once a week, but practice was limited to hypertension and diabetes. Today, NHS generates over 12,000 encounters a year, and still 94% of our clients are uninsured with virtually 100% living at 200% of the poverty

line or below. I learned of the sacrifices of the great leaders that came before: Dr. Jernigan, Dr. Mathews, Dr. Sumlar, Dr. Baker, Dr. Sampson, Inzalea McGlockton, Patrick Wiggins and others. Their vision has kept NHS alive and true to our mission. I witnessed altruism and selflessness in action as Dr. Bivens, Dr. Smith, and Dr. Drake gave time every month for decades, trying to make a difference for our patients. Our colleagues in optometry at CHP have also been volunteering for decades providing eye care, as well as glaucoma care to myriads of our patients. Dr. Kessler and Dr. Tucker have also served for many years, helping our patients to get the orthopedic help that they needed. Dr. Chuckawala and Dr. Sara gave countless hours of psychiatric care to our patients. Their examples have moved me and have motivated me to find better ways to serve. They have also taught me, for, without exception, they were willing to share their expertise with me, so that I could provide better care, and work as best as I could so that they would not require specialty services. There are also hundreds of volunteers who work with our patients throughout the WeCare network. Without them, the work of the volunteers and employees could not be complete. As I grow into this position, I have learned that WeCare is a miracle; a precious resource that must be protected. Our NHS staff, current providers and our volunteers have done an outstanding job in helping to protect that resource, making sure that we did not overwhelm the system. After all, an overwhelmed system is like the phoenix—it too will explode.

A few months ago we were headed for the explosion. After decades of meaningful service, our Dermatologist (Dr. Bivens) and our Cardiologist (Dr. Smith) were no longer able to continue at NHS. When I learned how much they had given, how long they had been with us, and how committed they were decades into their retirement, I was speechless. How could NHS ever show its gratitude, or the gratitude of the thousands whom they served? I didn’t have a clue how, but one thing was certain, I needed to honor their work by continuing it.

After consultation with my colleagues at the FSU College of Medicine, I began to ask for help. Initially, it was just to get someone to honor Dr. Bivens work. Dr. Earl Stoddard, con-