

# **UCSF** Department of Medicine **ZUCKERBERG** SAN FRANCISCO GENERAL

## Celebrating Latinx Heritage Month and Our Extraordinary Colleagues

From September 15 to October 15, we celebrate Latinx Heritage Month. We are fortunate to have many Latinx faculty, staff, and trainees at ZSFG who bring their diverse gifts, cultural strengths, and deep commitment to our missions of clinical care, education, and research. We are proud to highlight the work of a few Latinx members in our community.

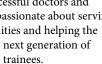
#### Connie Calderón-Jensen **Helping Students Shine**

"The best part of my work is seeing students succeed," said Connie Calderón-Jensen, MA, Associate Director of the UCSF Latinx Center of Excellence (LCOE).

While the Latinx population is the fastestgrowing group in California, there is a shortage of more than 50,000 Latinx physicians with the linguistic and cultural background to care for this community. The LCOE works to increase the number of Latinx physicians and physicians from medically, economically, or educationally disadvantaged communities. Its programs support undergraduates, medical students, residents, and early career faculty on their journey to becoming successful doctors and leaders. Participants are passionate about serving patients in their communities and helping the

next generation of

"Most of our students come from lowunderresourced high schools," said Ms. Calderón-Jensen. The LCOE's programs provide extensive support, including



income families and



introducing students at San Francisco State University, Fresno State University, and UC Merced to the MCAT, giving them a glimpse of life on a hospital ward, and providing feedback on their medical school application essays.

"Sometimes students aren't sure if they should include entry-level job experience in their application, but we encourage them to talk about how it shows they were able to work and help their families economically while also doing well in school," said Ms. Calderón-Jensen. "Those jobs also teach them about community, being a leader, and dealing with conflict – all important things for being a good physician. It's not part of our culture to toot our own horns, so helping students write essays that demonstrate their grit, brilliance, and how they've overcome challenges is really important."

LCOE also helps participants gain confidence asking questions in group settings, teaches them how to network at conferences, and provides mentorship and career advising. While the center focuses on medicine, it encourages them to pursue whatever health profession is the best fit. "Students find there are a lot of options within healthcare, and some decide that becoming a nurse or physician assistant is a better fit," said Ms. Calderón-Jensen. "We're proud to help them reach whatever goals they have."

Ms. Calderón-Jensen works closely with LCOE Director and Professor of Medicine Alicia Fernandez, MD, providing reporting and ensuring compliance with regulations set by the Health Resources and Services Administration (HRSA), the program's main funder. She also hires and supervises the LCOE's administrative team members.



Connie Calderón-Jensen, MA







Ms. Calderón-Jensen grew up in a working-class community in Los Angeles, the daughter of Mexican immigrants who valued education and ensured that all six of their children attended college. After graduating from UC San Diego, taking advantage of study-abroad opportunities to live in Italy, Togo, and Hungary, she earned her master's degree in international policy studies and Spanish from the Monterey Institute of International Studies. Her entire career has focused on pathway programs that recruit and help first-generation college and graduate students thrive, including at Caltech, UC Berkeley, UCSF, and UC-wide through the UC Office of the President.

One challenge is when students say educators at other institutions told them they would never get into medical school. "It can be gut-wrenching to hear how common that still is," said Ms. Calderón-Jensen. "When students hear those messages, it sticks with them. It's our job to make it unstick and show them that there are other professionals who believe in them 100 percent."

Those struggles make the eventual successes all the sweeter. "I worked with one student in a post-baccalaureate program and attended her white coat ceremony at UCSF," said Ms. Calderón-Jensen. "She's since completed her residency at UCSF Fresno and gotten into fellowship – and I

just returned from her wedding.... Our students are incredibly committed, not only to their own education, but to helping the next generation. That's something we're really proud of."

#### Dr. Veronica Manzo The Importance of Family

"One of my first encounters with the healthcare system was serving as the translator for family members who got free healthcare at the UC Davis clinic," said Veronica Manzo, MD, MS, Assistant Professor in the ZSFG Division of Hospital Medicine



Veronica Manzo, MD, MS

and the daughter of migrant farmworkers who immigrated from Mexico. "That planted a seed for wanting to pursue a career in medicine so I could provide care to Spanish-speaking patients and deliver care to those who are most underserved."

Aspiring to become the first doctor in her family, she sought out colleagues, mentors, and sponsors to help her navigate an unfamiliar system. While a college student at Harvard, a friend mentioned that he was going to participate

in a summer research program. "When I said that sounded interesting, he said, 'Yes, research is important for medical school applications," Dr. Manzo recalled. "I had no idea." The next year, she applied for the same research program, met important research mentors, and secured a research stipend to cover her living expenses. She went on to earn her medical degree and master's degree in epidemiology and clinical research at Stanford before completing her internal medicine residency and chief residency at UCSF.

As a faculty member and UCSF Bridges coach for medical students, she helps trainees navigate similar challenges. "Some students and residents have obligations that their colleagues don't, such as paying for school while also sending money home to help support their family," said Dr. Manzo. "Also, in Latino culture, family is huge. It can be helpful to talk with family members who don't know what medical training involves, letting them know you may miss important family events or have less time to mentor younger siblings, and how you wish things were different."

As a hospitalist, Dr. Manzo admits patients to the hospital, cares for hospitalized patients directly, and supervises teams of medical students and residents. She estimates that about one-third of her patients are primarily Spanish-speaking, and being bilingual and bicultural helps her connect with them.

"Because of what my family experienced when my grandparents faced challenging medical decisions, I have a better understanding of navigating goals of care discussions when a patient has a large family," said Dr. Manzo. "I advise trainees to go into family meetings with an open mind. Instead of trying to get an answer, facilitate a discussion that centers on the patient. A great way to unify the family is asking them to share what the patient cares about, what brings them joy, and what they don't like. Together, they can paint a picture of who the person is and their values. That helps shape the best decisions moving forward."

The nuances matter in these discussions. "The Spanish word for hospice, 'hospicio,' has very different connotations, based on where you're from," said Dr. Manzo. "Some people think it means you literally do nothing, rather than actively managing patients' symptoms and care towards the end of life. San Francisco General can be a challenging place to work, because you have patients who are both medically and socially



The UCSF Latinx Center of Excellence (LCOE) team





Veronica Manzo (left) at Diversity Matters Orientation with first-year medical student group

complex. I'm so grateful to partner with our palliative care team on these discussions." Dr. Manzo is inspired by her colleagues and excited to cultivate a diverse workforce. "No matter what field they choose, Latinx healthcare professionals are very much needed, especially here in California," she said. "If they speak Spanish, it can lead to better relationships and care for our Spanish-speaking patients.... All our providers and staff are so dedicated, and our nurses go that extra mile to ensure we deliver the best care possible. I'm so thankful for the community of care at the General. Serving a large Spanish-speaking population is a gift, and getting to share with trainees how to work with our vulnerable patients is something I find very rewarding."

#### Maria Solorzano Building Community, with Heart

Like Dr. Manzo, Maria Solorzano is also the child of Mexican immigrants who accompanied her parents to medical appointments and served as their interpreter.

So when she saw an opportunity to become an interpreter at a community clinic while a UC Davis college student, she leapt at the chance.

"There weren't a lot of Hispanic college students, and I always wanted to represent my community and give back," said Ms. Solorzano, now the Program Coordinator for the Addiction Care Team (ACT). "I really enjoyed translating for Spanish-speaking patients during appointments, translating educational materials for them, and also being the person in the room they could connect to."

Her cultural background gave her insight into patients' lives. "As Hispanics, we value health, and day to day we use a lot of teas and herbal remedies," said Ms. Solorzano. "But we also have a lot of habits that aren't healthy. For example, diabetes is so prevalent in our community. Being an immigrant community, we don't always have

access to healthy food because it's expensive and we often don't have time outside of our job to cook. Also, people who migrate here are blown away by how much bigger the portions are. In the clinic, I saw a prediabetic patient whose whole family



Maria Solorzano

changed their lives around to have healthier habits, and he was so happy to get healthy."

After graduating from college, she worked as a care coordinator at La Clínica de la Raza in Oakland, then became a patient care coordinator in the ZSFG Division of Hospital Medicine before joining the ACT. "All my jobs have been at places which serve a lot of Hispanic patients," said Ms. Solorzano. "My culture has been a driver and led me to work here."

In her current position, she is the point person for most administrative responsibilities for ACT, helping out with operations, HR, IT, and much more. She also supports educational and training efforts, helps hire and onboard new staff, and assists with scheduling providers, staff, and visitors. "I like working with patients, but also really enjoy the administrative and organizational side," she said.

The multidisciplinary ACT provides compassionate, expert substance use services to patients in the hospital and the Emergency Department. They also work closely with the community, including through the Program for Education in Drugs and Alcohol for Latinx (PEDAL); that program trains community health workers called promotores who connect Latinx patients with medical, social, and economic resources to address substance use disorders.

"In immigrant communities, some people use drugs or alcohol as a coping mechanism to deal with the pain of being homeless or being here alone, far from their families," said Ms. Solorzano. "It's not the healthiest, but people do what they can to survive. Sometimes you have to get deep into the culture to understand why people do what they do. What I value about my team is that we don't judge people; patients are not just their use disorder. People have a story, and we see them for who they are."

Ms. Solorzano finds great strength in her cultural roots. "As Hispanics, we're very empathetic and community-oriented," she said. "If something is happening to someone, we run to help them. Our hearts are behind every move we make, and we build community wherever we go. We defend people we don't even know, and stand up against injustice. Those are things I implement every day at my job. I'm really proud of being Hispanic – we bring a lot of good qualities to health care, and to this country."



#### Dr. Gabriel Ortiz 'Our Diversity is our Strength'



Gabriel Ortiz, MD, PhD

"My mom was my inspiration for going into medicine," said Gabriel (Gabe) Ortiz, MD, PhD, Professor in the ZSFG Division of Hospital Medicine and Chief Medical Officer for ZSFG. Growing up poor in Jamaica, Queens, Dr. Ortiz witnessed his mother's difficulties accessing

care while battling breast cancer and still learning English. "I was thinking of becoming a veterinarian, but my mom said, 'If you're going to be a doctor, be a doctor for people," recalled Dr. Ortiz.

He earned bachelor's and master's degrees in molecular biophysics and biochemistry from Yale University, then a medical degree and PhD in human cellular immunology from the Tri-Institutional MD-PhD Program jointly administered by Weill Cornell Medicine, Rockefeller University, and Memorial Sloan Kettering Cancer Center's Sloan Kettering Institute.

Throughout his journey, he has been inspired by his family, who immigrated from Puerto Rico and the Dominican Republic. "They imparted the importance of working hard, supporting each other, and being proud of our culture," said Dr. Ortiz. "That's fueled my passion for addressing health disparities, uplifting diverse perspectives, and leading with compassion, respect, and understanding. Our diversity is our strength."

He completed his internal medicine residency, chief residency, and infectious diseases fellowship at UCSF before joining the faculty in 2012. In his current role, Dr. Ortiz oversees clinical operations, including acute care, skilled nursing facility, dialysis units, outpatient specialty care clinics, and the Department of Care Coordination. He also sets vision and strategy for meeting community needs, and partners with leaders across the San Francisco Health Network.

Dr. Ortiz applies his scientific and analytical skills to improving healthcare operations. "Especially at ZSFG, our patients and our community are our 'why," he said. "I ask team members, 'What would it be like for you or your loved one to experience care at our organization?"

In a challenging environment with cuts to Medi-Cal and the city budget, he and his colleagues lead quality improvement initiatives to support continued access to care. For example, even when the Emergency Department is full, ZSFG now stations physicians there who can see patients quickly and initiate workups. They have introduced self-scheduling tools in specialty care clinics so patients can book appointment times that work for their schedule, and also allow lastminute cancellation slots to be offered to other patients.

"Access really depends on flow through our healthcare system and ensuring we're as efficient as possible while delivering high-quality care," said Dr. Ortiz. He helps oversee collaborations with Laguna Honda and the Redwoods 4A skilled nursing facility; discharging patients who no longer require hospitalization to their next place of healing makes those beds available to others who need acute care.

Dr. Ortiz always centers patients' voices in their care plans; for example, the care team problemsolves if a patient is unhoused and needs to take a water pill that requires them to have frequent access to a bathroom. "With my Latino patients, it's a moment of pride when I walk in and see relief in their faces, knowing they can communicate with me and feel understood and supported," he said. "It's important to be sensitive to the needs of our different communities when they come to us at their most vulnerable."

Just like his own family members support each other through hard times, Dr. Ortiz brings that same spirit to ZSFG. "My work family is extremely important to me, and we mentor, coach, and inspire each other," he said. "And just like there are sometimes conflicts in big families, navigating those together in our work family can bring us closer together.... We have such talented staff and teams, and as a leader, it's extremely fulfilling to support their incredible work."

-Elizabeth Chur

Editors: Neil Powe, Leonard Telesca, Ali Cunningham

### **SPOTLIGHT**

- Mandana Khalili, MD has been appointed as the new director of faculty development for UCSF's Graduate Education and Postdoctoral Affairs. In this role, Dr. Khalili will lead GEPA's Faculty Development Initiative, which strives to ensure that our faculty members have the training, tools, community, and time they need to meet their mentoring responsibilities.
- Priya Shete, MD has been appointed as a Co-Director of the UCSF Center for Tuberculosis
- The Division of Hospital Medicine team has recently moved from 6A to Building 10, Suite 1260, where they are now joined by the Palliative Care team, which relocated from 4H2. The Addiction Care Team has transitioned from 6A to Building 20, Suite 2200.
  - Moves of this size bring both exciting opportunities and the challenges of change. We want to acknowledge the effort it took from everyone—staff, leadership, and support teams alike—to plan, pack, adapt, and settle into new spaces. Thank you!
- ICYMI: Neil Powe wrote a ZSFG Update for the October DOMinews. Read the update here.



