Hertzberg Fellowship Program Continues to Innovate Educational Opportunities, Grow Workforce

The Lilian and Benjamin Hertzberg Palliative Care Institute of the Brookdale Department of Geriatrics and Palliative Medicine is deeply committed to producing the next generation of medical leaders in geriatrics and palliative medicine. To that end, the Hertzberg Institute has created the nation’s largest postgraduate fellowship training program to prepare physicians with the requisite knowledge and skills to improve the quality of care of those living with serious illness. It has built a reputation for advancements in education and innovations in care and trained one in five palliative medicine specialists in the country.

What distinguishes the Hertzberg Institute’s robust program from other fellowships is its diversity of core experiences, its electives in specialized areas of palliative care, and its focus on creating clinical, education, and research leaders. Applicants can choose from five innovative training programs. The Hertzberg Institute offers a one-year clinical training program in palliative medicine (the fourth in the nation); a two-year integrated training program in geriatric and palliative medicine (the first in the nation); a joint oncology palliative medicine fellowship (the first in the nation); a mid-career fellowship that allows physicians-in-practice to complete palliative care training part-time at their own pace and while maintaining their current job (the second in the nation); and our newest one-of-a-kind program, the two-year LEAP (Learn, Educate, Advocate, and Promote) into Geriatrics and Palliative Care Leadership Fellowship. The LEAP Fellowship provides trainees with the vision, skills, and expertise necessary to become future health system leaders, hospital executives, and change agents.

As part of their training, fellows have the opportunity to take electives in specialized areas of palliative care that are of clinical interest to them. These areas of specialization include both sites of care (such as the intensive care unit or emergency department) and specific disease states (such as heart failure, liver disease, and substance use disorders).

A priority for the Hertzberg Institute is looking at the fellowship leadership program through the lens of diversity, equity, and inclusion. That means thinking about who needs access to palliative care services in communities where palliative care may not have been as firmly established while growing and supporting a workforce that can practice in places where there is high need.

Led by our Vice Chair of Education, Helen Fernandez, MD, MSHS, the fellowship leadership team includes newly appointed directors Mollie A. Biewald, MD, Vanessa Rodriguez, MD, and Kinga Kiszko, DO. Drs. Fernandez, Biewald, Rodriguez, and Bharani are graduates of the Brookdale Department fellowship programs.
“We aim to train academic leaders who can transform care for seriously ill patients and their families through their clinical care, teaching, and research.”
Anup S. Bharani, MD
Associate Fellowship Program Director, Hospice and Palliative Medicine; Assistant Professor, Geriatrics and Palliative Medicine

“We train strong academic physicians to become leaders in the field, to develop programs, and assume leadership roles early in their careers. Our goal is to train leaders who can continue to grow and advocate for the field across the United States and internationally.”
Vanessa Rodriguez, MD
Fellowship Program Director, Geriatrics; Associate Professor, Geriatrics and Palliative Medicine, and Medical Education

“One strength of this program is the incredible diversity of training that the fellows receive. They experience every model of palliative care—inpatient, outpatient, at-home, hospice, and nursing home settings—and we will continue to diversify the experiences that fellows are exposed to as more palliative care delivery models are developed.”
Mollie A. Biewald, MD
Fellowship Program Director, Hospice and Palliative Medicine; Associate Professor, Geriatrics and Palliative Medicine

“We foster an enriching academic and clinical experience to enhance fellows’ knowledge of the needs of seriously ill older adults. We hope to attract physicians from myriad specialty and subspecialty backgrounds through our diverse clinical and scholarly opportunities.”
Kinga Kiszko, DO, Associate Fellowship Program Director, Geriatrics; Assistant Professor, Geriatrics and Palliative Medicine

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Palliative Care Teams Embedded in Intensive Care Units
Improve Quality of Care and Outcomes for Seriously Ill Patients

As part of its ongoing effort to improve access to palliative care for critically ill patients, the Brookdale Department of Geriatrics and Palliative Medicine has embedded a dedicated palliative care team into all of Mount Sinai Health System’s intensive care units (ICUs). Led by Ankita Mehta, MD, Assistant Professor of Geriatrics and Palliative Medicine at Icahn Mount Sinai and newly appointed Director of Palliative Care for Mount Sinai Health System Critical Care Units, this initiative greatly improves patients’ symptom relief and family support for the most seriously and critically ill. Now, all ICU patients throughout the Mount Sinai Health System will have access to the added layer of support that palliative care provides.

A dedicated team consisting of a palliative medicine physician, nurse practitioner, fellow, and, as needed, a social worker and/or chaplain, works closely with the ICU team. The team sees every patient within 48 hours of ICU admission; makes recommendations for treatment of distressing symptoms, supports families, caregivers, and loved ones; and helps facilitate communication among the many medical specialists that critically ill patients so often need. In a very short time, the collaboration between critical care and palliative care has increased patient and family satisfaction, enhanced comfort, reduced the amount of time patients spend in the ICU, and increased the likelihood that patients will return home instead of being discharged to another facility. These outcomes, published by Dr. Mehta and her colleagues in the Journal of Pain and Symptom Management, clearly demonstrate the value of integrating palliative care into critical care.

“Mount Sinai pioneered this collaboration between palliative and critical care and is now investing in it and scaling it across our Health System,” says Dr. Mehta. “Our early results at The Mount Sinai Hospital demonstrated significant impact. I am thrilled that we are expanding our services to all critically ill patients and caregivers.”

Provider Spotlight: Ankita Mehta, MD
Director of Palliative Care for Mount Sinai Health System Critical Care Units

As a physician, Ankita Mehta, MD, was drawn to patients with serious illness. One reason she finds this work so rewarding is because she and her colleagues are able to provide support to patients as well as their loved ones. “I think there’s something very special about trying to help people during the hardest time of their lives and making the best of a difficult situation,” she says.

Dr. Mehta received her training in palliative care as a fellow within the Brookdale Department and joined the faculty as an assistant professor upon completion of the program. She recently assumed the newly created position of Director of Palliative Care for Mount Sinai Health System Critical Care Units and is responsible for directing palliative care in intensive care units (ICUs) systemwide.

“I think it’s crucial for critically ill patients to have access to palliative care,” she says. “Patients in the ICU have the greatest immediate need, so this gives me the opportunity to have an impact where it really matters.”

Dr. Mehta received her medical training in Philadelphia. She attended medical school at the Drexel University College of Medicine and completed her residency in internal medicine at Thomas Jefferson University Hospitals.
A team of researchers from the Brookdale Department of Geriatrics and Palliative Medicine is leading a five-year study that examines the challenges faced by patients with Alzheimer’s disease and related dementias and their families over the lifetime of the disease.

The $12.2 million study, in collaboration with the University of California, San Francisco and funded by the National Institute on Aging, uses data from the National Health and Aging Trends Study (NHATS) and the Health and Retirement Study (HRS) to create a picture of the medical, social, and financial issues faced by people with dementia and their caregivers.

“We believe this is the first study to employ population-based data to examine a wide range of factors known to influence the quality of life and death for persons with dementia,” says Melissa Aldridge, PhD, MBA, Professor of Geriatrics and Palliative Medicine and Vice Chair for Research. “Our goal is to inform clinical and policy interventions and improve health care for dementia patients and their families,” says Dr. Aldridge, who is one of the study’s co-investigators along with Claire Ankuda, MD, MPH, Associate Professor of Geriatrics and Palliative Medicine.

The project is led by R. Sean Morrison, MD, the Ellen and Howard C. Katz Chair of the Brookdale Department of Geriatrics and Palliative Medicine, along with Kenneth Covinsky, MD, MPH, from the University of California, San Francisco.