



Hospice and Palliative Medicine Fellowship Program Capital Hospice

Fellowship Director

J. Cameron Muir, MD

Vice President for Medical Services, Capital Hospice
President, Capital Palliative Care Consultants

Associate Fellowship Directors

Jessica Heintz, MD, Home Care

Carlos Gomez, MD, PhD, Research

Brian Murphy, MD, Inpatient Services

Hank Willner, MD

Jennifer Moore, MD, Community Based and Long Term Care

Mary W. Baylor, MSN, RN, Curriculum and Interdisciplinary Team

Capital Palliative Care Consultants

Francine Higgs-Shipman, MD

Matt Irwin, MD Brenda Kiessling, MD

Tom Sullivan, MD Jeffrey Waldman, MD

Overview:

Hospice and palliative care employs an interdisciplinary team approach for the aggressive treatment of individuals with progressive, advanced illness and support for their families. The goal of care is to achieve and sustain the highest quality of life by providing expert pain and symptom management and psychosocial and spiritual support to ameliorate suffering.

Accredited by the American Board of Hospice and Palliative Medicine as one of only 3 community-hospice-based programs in the country, the Hospice and Palliative Medicine Fellowship at Capital Hospice trains physicians in the many aspects of the practice of palliative medicine. The elements of an academic training program are already well developed at Capital Hospice and have been in place for 25 years. Capital Hospice has a demonstrable track record of:

- excellent clinical care for patients and their families confronting life-limiting illness
- a strong teaching mission reaching out to all health care professionals, volunteers, and members of the community
- a commitment to advancing our understanding of symptom control and emotional and spiritual support for patients, their families, and health care providers, through rigorous research

In addition, systems for the delivery of palliative care as well as policy and advocacy will be addressed.

Background:

Palliative Medicine has been recognized and accredited as a medical specialty in the United Kingdom since 1987. It is also a recognized medical specialty in Australia, New Zealand, and Canada. In the United States, however, we have been slower to develop an appreciation for the unique clinical skills of symptom assessment and management, and the provision of comprehensive support for families in distress resulting from advanced disease. The American Academy of Hospice and Palliative Medicine (AAHPM) has worked to develop a certification examination in Hospice and Palliative Medicine, which has led to the credentialing of nearly 1,000 physicians since 1999. While there were only 5 fellowship programs in the U.S. in 1996, there are now over 20. There are only a handful of fellowships run by community-based hospices and Capital Hospice demonstrates its excellence as a training program in its recognition by the AAHPM.

Although not yet recognized as a medical specialty by the American Board of Medical Specialties, there is a growing understanding in the U.S. that Palliative Medicine is an important area of medical expertise. One of the critical steps in becoming a specialty is to have a body of clinical experts running post-graduate fellowship training programs. Work by the American Board of Hospice and Palliative Medicine (ABHPM), in conjunction with the U.S. fellowship programs, is likely to result in Hospice and Palliative Medicine becoming an accredited medical specialty in the U.S. Establishment of a Hospice and Palliative Medicine Fellowship at Capital Hospice is helping us to reach this important goal.

Capital Hospice is recognized nationally as a model for interdisciplinary palliative care, as well as a local and national educational resource. The clinical components of its program include a Medicare-certified hospice serving patients and families in Washington D.C. and the surrounding areas in Maryland and Virginia. Patients are cared for in their primary place of residence (home, nursing home, or assisted living facility). Patients requiring acute symptom management or intensive psychosocial support can be cared for in the Halquist Memorial Inpatient Center, our free-standing, 15-bed, acute care unit.

Educational and informational resources include Capital Hospice's Institute for Education and Leadership, Point of Hope Grief Counseling Center, and Capital Palliative Care Consultants. Capital Hospice provides an excellent learning experience for nearly 100 medical trainees each year. Elective rotations are in place for medical students, residents, and Fellows at the medical centers in the region (George Washington University Medical Center, Georgetown University Medical School, Washington Veterans Administration Hospital, Howard University Health Care System, University of Maryland, and Johns Hopkins University School of Medicine). The interdisciplinary clinical and educational environment at Capital Hospice is evidenced by clinical electives offered for the disciplines of nursing, social work, and pastoral care. We enjoy close relationships with the palliative care community in metropolitan Washington and elective rotations are available for the palliative care fellow at The National Institutes of Health, Georgetown University, George Washington University, and the Veterans Administration Hospital.

Expectations:

Hospice and Palliative Medicine Fellows gain expertise in the field through all aspects of the program: by clinical experience through patient care, by teaching others about the elements of palliative care, and by being involved in research to enhance our understanding of the field.

Fellows are expected to:

- commit to a minimum of six months of clinical service
- be involved with hospice consultation
- provide inpatient care on the acute care unit
- provide home hospice care
- follow patients longitudinally in weekly palliative care clinic

Fellows will be involved with the palliative care consultation services as they are developed in regional nursing homes, hospitals, and clinics.

Fellows also will become an educational resource for hospice and palliative care and are expected to:

- participate in EPEC (Education for Physicians on End of life Care) training
- give lectures on various aspects of hospice and palliative care in conjunction with our staff
- attend monthly meetings of Medical Services
- participate in ethics consultations and quality improvement projects
- coordinate monthly Journal Club

Capital Hospice has been involved in a number of research projects from clinical trial protocols and quality improvement studies in symptom control and quality of life, and assessment and measurement of educational outcomes. Each Fellow will be expected to participate in the research aspects of the program, ideally generating one independent research project during the fellowship.

Qualifications:

The Hospice and Palliative Medicine Fellowship requires a minimum one-year commitment for physicians who are interested in a career in clinical practice which includes, or is focused on, Hospice and Palliative Medicine. Additional funding will be sought for subsequent years of training for Fellows who wish to pursue focused research in Hospice and Palliative Medicine. Candidates must be board certified/eligible in Internal Medicine (or any Internal Medicine specialty), Family Practice, Psychiatry, Physical Medicine and Rehabilitation, or Anesthesiology. Consideration would be given to other board certified/eligible disciplines, depending on the candidate's professional goals.

Outcomes:

The Hospice and Palliative Medicine Fellowship trains physicians to become expert in the clinical, educational, and research aspects of the field of Hospice and Palliative Medicine. With this training, we anticipate that our fellows will be an integral component of the advancement of the field as:

- clinical experts in symptom management and psychosocial support for patients with advanced illness, and their families
- change agents through educational efforts within the profession and the community regarding quality palliative and hospice care
- catalysts for the improvement of our understanding of symptom control and family support through skilled research