

## 2014 Fellow in Leadership Awards



AQA Fellow in Leadership Orientation participants. Left to right: AQA Executive Director Richard L. Byyny, MD; Fellow Joshua Hartzell, MD; Fellow Monica Vela, MD; Fellow Nathan Goldstein, MD; AQA Leadership Committee member Page Morahan, PhD; AQA President John Tooker, MD, MBA; Leadership Program Administrator Debbie Lancaster.

Leadership has long been a core value of Alpha Omega Alpha Honor Medical Society and is one of its criteria for membership. Because of their unique knowledge in medicine and their understanding of medicine's core professional values, physicians are ideally suited to serve as leaders in these areas. Their professional experiences in serving and caring for people and working with teams in the health professions provide a solid foundation for leadership. AQA believes that the best and most sustainable leadership for medicine must be grounded in the professional values of integrity and honesty, loyalty and duty, respect and care, service, and communication.

The AQA Fellow in Leadership Award recognizes and supports further development of outstanding leaders exemplifying the qualities of leading from within, the society's professional values, and the concepts of servant leadership.

The five essential components of the AQA Fellow in Leadership Award are: 1) self-examination, the "inward journey," leading from within; 2) a structured curriculum focused on topics related to leadership, including an understanding of the relationship between leadership and management; 3) mentors and mentoring; 4) experiential learning to broaden the perspective and understanding of leadership as it relates to

medicine and health care; 5) team-based learning and developing communities of practice.

We are pleased to announce the 2014 AQA Fellows in Leadership, each of whom received a \$25,000 award to be used for further development as future leaders:

- **Nathan E. Goldstein, MD**—Interim Director, Palliative Care Program, Mount Sinai-Beth Israel Hospital
- **Lieutenant Colonel Joshua D. Hartzell, MD**—Associate Program Director, Internal Medicine Residency, Assistant Chief of Graduate Medical Education, Army Intern Director, Walter Reed National Military Medical Center
- **Monica Vela, MD**—Associate Professor of Medicine and Associate Dean for Multicultural Affairs, University of Chicago Pritzker School of Medicine

Fellows and members of the AQA Board of Directors Committee on Leadership met in Hanover, New Hampshire for a two-day orientation meeting on July 8-9, 2014, in which fellows were helped to think more deeply about their projects and their leadership opportunities. Following the orientation meeting, fellows and some committee members attended the Geisel School of Medicine leadership course, The Science and Practice of Leading Yourself.



**Nathan E. Goldstein, MD**  
**Associate Professor of Medicine,**  
**Icahn School of Medicine at**  
**Mount Sinai**

Dr. Goldstein (AΩA, Mount Sinai School of Medicine, 1998) is an Associate Professor in the Brookdale Department of Geriatrics and Palliative Medicine at the Icahn School of Medicine at Mount Sinai. His areas of expertise include pain in older adults, palliative care, and the use of advanced technologies for patients near the end of life. Dr.

Goldstein is a clinician investigator whose work examines ways to improve patient-physician communication in patients with advanced heart failure. He has published both on his research as well as on a broad range of communication issues in palliative medicine in both general medicine and specialty journals. He lectures extensively across the country on palliative care.

Dr. Goldstein is an attending physician on Mount Sinai's inpatient palliative care consult service, and is a clinician researcher at the James J. Peters Veterans Affairs Medical Center in Bronx New York. He was recently promoted to the position of Interim Director of the Palliative Care Program at Mount Sinai-Beth Israel Hospital. He graduated magna cum laude with a BA in Biology from Carleton College in Northfield, Minnesota, where he was elected to Phi Beta Kappa, and attended the Mount Sinai School of Medicine, where he was elected to Alpha Omega Alpha. He completed his training in internal medicine at the Mount Sinai Medical Center, followed by health services research training in the Robert Wood Johnson Clinical Scholars Program at the Yale University School of Medicine. He then returned to Mount Sinai to complete a clinical geriatrics fellowship, and subsequently joined the faculty in 2004.

**Leading and Redesigning an Academic Palliative Medicine Program**—Palliative care is interdisciplinary care that aims to relieve suffering and improve the quality of life for patients and their families; it is provided at the same time as life-sustaining or curative treatments. As a palliative care physician and geriatrician in the Brookdale Department of Geriatrics and Palliative Medicine at the Icahn School of Medicine at Mount Sinai, I am deeply dedicated to providing high-quality palliative care for patients and their families. I have recently been appointed the Director of the Palliative Care Program at Mount Sinai-Beth Israel, an 856-bed teaching hospital founded in 1889 on Manhattan's Lower East Side. My new appointment is a result of a recent merger of hospital systems and the staffing changes associated with the

addition of Beth Israel to the Mount Sinai Health System. In this position, I am charged with redesigning the organizational structure of the division, creating a strategic plan and business case for the new service, and developing metrics to track the quality of care delivered by the palliative care team. I will use the AΩA award to develop skills to help me lead this new division through this period of change and transition. I will be reporting directly to the president of the hospital as well as to the director of the palliative care institute for the Mount Sinai Health System. In addition to being mentored by both of these individuals, I will undertake a program of formal coursework and work with an executive health care coach.



**Joshua Hartzell, MD**  
**Associate Program Director,**  
**Internal Medicine Residency**  
**Assistant Chief of Graduate**  
**Medical Education**  
**Army Intern Director, Walter Reed**  
**National Military Medical Center**

Lieutenant Colonel Hartzell (AΩA, Uniformed Services University of the Health Sciences, 2001) was born and raised in Pennsylvania and then went to Duquesne University where he was one of the Distinguished Military Graduates of the Army ROTC program. Dr. Hartzell then attended the Uniformed Services University of the Health Sciences School of Medicine (USUHS). Following medical school, Dr. Hartzell went to Walter Reed Army Medical Center for his residency in Internal Medicine. He was selected as Chief Resident and served in that position until starting his Infectious Diseases Fellowship in 2006. He is currently board certified in Internal Medicine and Infectious Diseases and holds the Certificate of Knowledge in Clinical Tropical Medicine and Travelers' Health from the American Society of Tropical Medicine and Hygiene. He is a graduate of the Stanford Faculty Development Facilitator Course. Dr. Hartzell currently serves as the Associate Program Director for the Internal Medicine Residency, Assistant Chief of Graduate Medical Education (GME), and Army Intern Director at Walter Reed National Military Medical Center (WRNMMC). Dr. Hartzell's current interests include mentorship, teaching, and leader development.

Dr. Hartzell has thirty-six peer reviewed publications, four letters to the editor, one book chapter, and eighteen abstracts. Dr. Hartzell has been an invited speaker or guest lecturer twenty times at different regional, national, and international venues. Dr. Hartzell has served as a reviewer for nineteen

different scientific journals including *Clinical Infectious Diseases* and *Lancet Infectious Diseases*. He currently holds the rank of associate professor at USUHS.

**Moving Beyond Accidental Leadership: A Leadership Curriculum Proposal**—Few medical schools and GME programs including the military provide explicit training on the knowledge, skills, and attitudes necessary to be an effective physician leader. Rather, most leaders develop through what has been called “accidental leadership.” I propose to create a leadership curriculum for the Graduate Medical Education Programs at WRNMMC and beyond. Instilling these concepts and skills into physicians during residency or earlier will create better leaders and develop a cadre of physicians who are more likely to pursue careers in leadership or, at a minimum, to be more adept at handling the day-to-day leadership moments faced by physicians. I am fortunate to have a team of leaders who are supportive of this proposal and will be providing personal mentoring throughout the year. The leadership and vision of Colonel Michael Nelson (Director of Education, Training, and Research at WRNMMC), Colonel Cliff Yu (Chief of GME at WRNMMC), Arthur Kellermann (Dean of USUHS), Lieutenant General (Retired) Eric Schoemaker (former Army Surgeon General, current Scholar-in-Residence and Distinguished Professor of Military and Emergency Medicine at USUHS), and Colonel Pat O’Malley (AΩA councilor at USUHS) have been instrumental in creating momentum for this project. Just as important has been the response of the trainees, who are eager to solidify their skills as leaders. As medical educators and leaders, we must continually evolve and make it a priority to develop the next generation of leaders. The goal of our team is to create a curriculum that enhances the leadership skills of a generation of military physicians.



**Monica Vela, MD**  
**Associate Professor of Medicine and Associate Dean for Multicultural Affairs, University of Chicago Pritzker School of Medicine**

Dr. Vela (AΩA, University of Chicago, 2003) received her MD degree in 1993 at the University of Chicago Pritzker School of Medicine, completed internship in a dual Internal Medicine and Pediatrics program there, and completed residency in Internal Medicine at the

University of Chicago in 1996. She provides primary care for patients at the Primary Care Group of University of Chicago

Medicine (UCM). She has taught the nationally recognized course, Health Disparities: Advocacy and Equity since 2006. She directs a summer enrichment program for under-represented minority students and also directs the Minority Visiting Clerkship program for visiting senior students. She has served as the Associate Vice Chair for Diversity within the Department of Medicine at the University of Chicago Medicine since 2006 and as the Associate Dean for Multicultural Affairs at the Pritzker School of Medicine since 2011. In 2011, she was awarded the American College of Physicians’ National Award for Diversity and Access to Care, and in 2014 she was awarded the Society of General Internal Medicine’s Nickens Award for Diversity and Minority Health.

**Promoting Diversity in the U.S. Physician Population**—Promoting the diversity of the U.S. physician population is an important step in addressing health and health care disparities for minority and underserved populations. Multiple studies have shown that under-represented minority (URM) physicians are more likely to provide care for minority, underserved, and indigent populations. Under-representation of minority medical students is problematic because medical students value diversity in their classmates, and diversity improves all students’ academic experiences and their abilities to work with patients from differing backgrounds. Medical schools vie for the same limited number of qualified minority premedical students. Medical schools have responded to this challenge by developing a pipeline of students supported by a variety of summer enrichment experiences.

The lack of published studies on existing programs significantly limits the ability for others to reproduce successful pipeline elements and to share process measures. No studies exist that review the practices of these unpublished programs for curricular content, teaching modalities, or assessment practices. My project has two specific aims:

- To develop and deliver a survey of the minority medical students across the United States to understand a) how many of them participated in pipeline programs, and b) explore which intervention practices have impacted either their admission to medical school or their success in navigating medical school.

- To develop and deliver in-depth interviews of pipeline program directors at U.S. medical schools in an effort to explore the types and scope of pipeline program interventions within academic centers and the perceived barriers to and facilitators of the interventions’ success. We will explore: a) those interventions that address the assets believed to promote minority student success in the process of applying to and succeeding in medical school, and b) the tools and instruments being used to assess pipeline intervention strategies.