

MGH INSTITUTE OF HEALTH PROFESSIONS

A MAGAZINE FOR ALUMNI AND FRIENDS OF THE BOSTON GRADUATE SCHOOL FOUNDED BY MASSACHUSETTS GENERAL HOSPITAL



A Transformational Gift

**The IHP welcomes the new Tedy's Team
Center of Excellence in Stroke Recovery**

Research Leads to
Saving 20,000 Lives

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New Programs Aim to
Impact Healthcare

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Research Continues
to Improve Lives

PAGE 25



Support the IHP Aphasia Center

In 2004, as a result of a stroke, I lost my ability to communicate and comprehend written or spoken language clearly and fully. I have Aphasia and Apraxia. I joined the IHP Aphasia Center in 2007 to continue improving my abilities. The physical damage to my brain is permanent and my efforts to improve are lifelong. I have come a long way since Day 1, when I could not utter nor understand a word, and there is still a long way to go.

I am not only a client but a donor of the Center. My journey would not be nearly as steady and strong as it has been without the efforts, support, dedication, and compassion of the IHP Aphasia Center faculty, staff, and students. There is a magical mix that happens between the staff, students, and clients that just brings out the best in everyone.

ANTHONY SPIRITO



Pictured: Carolyn Fernberg, SLP '23, and Aphasia Center client, Anthony Spirito

The IHP's Aphasia Center provides:

- Long-term stroke and brain injury rehabilitation
- A community of people who have aphasia and their caregivers all coming together and share their life experiences, challenges, and successes
- An opportunity for IHP students in speech-language pathology to provide diagnostic and therapy services to adults with aphasia, under the supervision of licensed speech-language pathologists

Your donation, along with many others, will create an endowment to support the Center's operations, those with aphasia and their caregivers, and continue providing IHP students with an educational experience that is unmatched:

giving.mghihp.edu/aphasia_center

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The Challenges Facing Healthcare: The IHP's Role

These last three years have not been easy for healthcare delivery. The challenges we face today started in March of 2020 with the onset of Covid-19. Hospitals became overcrowded with COVID patients who often required long hospital stays. Surgeries were canceled. Elective procedures were postponed. Hospital finances strained under the weight of providing pandemic-related care.

While many businesses have returned to a sense of normalcy, that hasn't been the case for healthcare. Today, hospitals, nursing homes, and ambulatory care clinics continue to face extraordinary challenges. Because COVID has not fully abated and there are still peaks in new cases, hospitals remain overcrowded with patients who are seriously ill. Emergency rooms are congested with patients waiting longer times for an inpatient bed. And if that ER patient needs to then go to a nursing home, that's problematic. Those ready to be discharged can't leave because there are no beds in nursing homes available to discharge people who are unable to go directly to their homes.

While the causes to these healthcare challenges are many, one of the most significant is the shortage of health care professionals.

The shortage is real and is being felt across the country. According to the Bureau of Labor Statistics, the need for therapists is growing significantly due to an aging population and increase in chronic illnesses. Nurse practitioners and physician assistants are the fastest-growing jobs in healthcare, while the need for registered nurses continues to

outpace supply. Without a robust supply of healthcare professionals, our hospitals, nursing homes, and other healthcare agencies will never get past the staffing challenges they have faced over the last three years.

This is where the IHP comes in. Our school's mission is to prepare the healthcare leaders of tomorrow. Our academic programs graduate more than 600 healthcare leaders each year who add to and replenish the healthcare workforce. Our quality educational experiences are preparing graduates to make an immediate impact. We are working to build stronger relationships with Massachusetts General Hospital and Mass General Brigham to be their workforce pipeline for the future. Strengthening relationships and creating new scholarships are part of the path to advance mutual benefit between our organizations.

While many businesses have returned to a sense of normalcy, that hasn't been the case for healthcare. Today, hospitals, nursing homes, and ambulatory care clinics continue to face extraordinary challenges.

We are thrilled with the addition of the Tedy's Team Center of Excellence in Stroke Recovery to the MGH Institute portfolio. Tedy Bruschi and his wife, Heidi, invested in the IHP because of the excellence they saw in the stroke



Paula Milone-Nuzzo,
President and John Hilton
Knowles Professor

research and clinical programs and accompanying student clinical education experiences provided in the Sanders IMPACT Practice Center. We can't thank them enough for their support.

As you read the stories in this magazine, you will see the many contributions our alumni are making to healthcare. You will read about how our faculty are changing policy to improve access to speech therapy. You will learn about how our researchers are paving the way for innovations in clinical practice. It's all part of the excellence for which the IHP is known.

The IHP is an important part of the solution for improving healthcare for the future—from workforce development to research innovation to policy advocacy. I invite you join us on our journey to improve healthcare for all.

FIVE QUESTIONS

Peter Brown, Chair, President's Council

Peter Brown has been Chair of the MGH Institute's President's Council since it was launched in 2020. A former award-winning television news executive and chief of staff to the president and CEO of Partners HealthCare (now Mass General Brigham), where he worked directly with its senior leadership, he is principal of Peter Brown Communications. Brown, who has emceed several of the Institute's annual fundraisers, also sits on the board of several Boston-area nonprofits.

1 What was the reasoning behind creating the President's Council?

Peter Brown: The Institute has always had a very active and involved Board of Trustees, and its leadership has been instrumental in helping advance the IHP's mission. But President Paula Milone-Nuzzo and other school leaders thought the idea of adding more outside expertise could further support her role, so the President's Council was formed. Our work serves as a bridge between Paula, the Board, and the Institute's students, faculty, researchers, and staff, as well as the community at large in Greater Boston and beyond.

2 How did the school go about developing the Council?

PB: The idea was to bring together a group of experts from a wide range of backgrounds, people who were knowledgeable in their field who could look at the school through a different lens. We have members who work in health-care, insurance, energy, pharmaceuticals, hospitality, communications, and business, to name a few. Plus, there are Council members who have been involved with the Institute for years, even decades, so it's a nice mix of creativity and ideas. I know I can speak for the Council when I say it's been a remarkable journey for us. We have heard from students who share their stories of achievement; we have listened to

researchers who have inspired us through the myriad ways they are improving the lives of patients; we have engaged with faculty who share their innovations in teaching to bring the very latest educational tools to the classroom.

3 How does the Council support the IHP?

PB: We're focused on how we can spread the story of the IHP and all its remarkable work, whether it be its teaching of the next generation of healthcare professionals or its incredible research advancements. Our role is to be goodwill ambassadors and to assist Paula when she calls upon us or to proactively engage with her on ways to shine a spotlight on the school and its mission. While the Institute's visibility is constantly improving, there's still a lot of folks who have never heard of the IHP, and the Council sees its job as changing that.

4 What outcomes have the Council seen so far?

PB: We're starting to see more financial contributions. Our fundraiser last fall [Ed. Note: See story, page 30] produced more donations than we've had in several years. An increase in donations can help provide additional funding for student scholarships. That's extremely important if we want to enroll the best and brightest who can take their learnings from the IHP and turn them into a career that will make a difference in the lives of patients. As a side note, I was surprised to learn that eight out of ten students are in need of financial assistance. It is so important that the IHP be able to offer that assistance.

5 What are the Council's goals for 2023 and beyond?

PB: We will continue our work with Paula and Institute leadership to help extend the story of this wonderful



institution and those of its students, faculty, researchers, and staff. We will continue to build on our partnership with Board of Trustees Chair Jeanette Ives Erickson, who has been a collaborative and cherished advisor to the Council. We look forward to the new year with hope and optimism as the Council continues to dedicate itself to the IHP's commitment to making a difference in the care of our patients today and for generations to come.

President's Council

Peter Brown, Chair
Stanley W. Ashley, MD
E. Lorraine Baugh
Colleen Boyce
May Chin
Alison Geffin
Tim Golden
Robert McCall
Oz Mondejar
Joe Nolan
Wendy Nowokunski
Eric Papachristos
Daniel Serfaty
Mark Silva
Catherine Smythe, MSW LICSW
Thaddeus Thompson
John Wright, MD



Board of Trustees Adds Four Members

BY JOHN SHAW

The Board of Trustees has four new members. Three are new to the MGH Institute, while the fourth is a long-time member who returns after an absence.

“Our new board members have joined us because they believe in the IHP’s mission,” said Board Chair Jeanette Ives Erickson. “We are grateful to them and look forward to working with them.”

Patricia Palacios brings extensive experience in regulatory matters in several industries, including higher education. A rising star in the legal world since 2014 who recently was selected by DCA Live for inclusion in its list of emerging women leaders in private practice, she plans to focus on the Institute’s efforts to have a campus that reflects the country’s increasingly multiracial population.

“As a woman of color, I’m particularly interested in ensuring that there’s a diverse student body, faculty, and leadership at the school,” said Palacios, whose family originally is from Cuba. “I am deeply passionate about education and healthcare because both are critical components for the success of any community.”

Julien Pham has over 15 years of leadership experience in clinical settings and in emerging medical innovation companies. A physician who formerly worked at Brigham and Women’s Hospital and was a faculty member at Harvard Medical School, Pham is the founder and managing partner at 3CC | Third Culture Capital, a venture capital firm.

“When we want to innovate in healthcare, it’s not just about the people who can make important decisions about



Kyle Rabbitt, Patricia Palacios, and Julien Pham are the Board’s new members. They were joined by Trish Joyce, who returned after an absence.

capital allocation for the health system,” said Pham, who has a passion for diversity, equity, and inclusion. “I’m excited to see how the organization can go to the next frontier, not only training highly qualified healthcare professionals but teaching them to think a little bit differently outside the box to truly improve patient care and outcomes.”

Kyle Rabbitt will focus on strengthening the partnership between RSM and the Institute that began in 2020, when the multinational accounting firm’s charitable foundation gave a three-year grant to the school’s Speech and Language Literacy (SAiL) Lab to launch Raising Educational Achievement in Charlestown (REACH), an educational program for students in grades 1–3 at Harvard-Kent Elementary School.

“I want to utilize my years of experience to assist the Institute’s strategic direction and support its development efforts,” said Rabbitt, a member of RSM’s Transaction Advisory Healthcare team, where he has experience with M&A

transactions in many healthcare industries. He also has a personal connection with the IHP: His fiancée, Dr. Kristen Andrew, received her Doctor of Physical Therapy degree in 2013 and works in Mass General’s Department of Physical Therapy.

Trish Joyce, a nine-year veteran of the board, returns after taking a required one-year break. The daughter of Dr. Charles A. Sanders, one of the Institute’s founders, Joyce has a long-time relationship with the school. “I welcome the opportunity to be back on the board,” she said. “The IHP is very special to my father, and I am honored to be able to continue his legacy.”

That legacy includes the Charles A. and Ann Sanders IMPACT Practice Center, where students provide more than \$1 million in free care annually to people who have exhausted their insurance benefits, and the Charles and Ann Sanders Interprofessional Scholarship, which is awarded to several students each year.

Dr. Rosemary Caron Is Named Inaugural Dean for School of Healthcare Leadership

BY SEAN HENNESSEY

The School of Healthcare Leadership has hired its founding dean.

Rosemary Caron, PhD, MPH, professor of Health Management & Policy at the University of New Hampshire, comes to the MGH Institute with 25 years of professional experience in academic leadership and public health practice.

During the past 17 years at UNH, Dr. Caron excelled in academic leadership roles, including as director of its Master's in Public Health program, director of Undergraduate Studies, and chair of the Department of Health Management and Policy. She also served as adjunct associate professor of pediatrics at Dartmouth College's Geisel School of Medicine. A leading voice in building healthier communities, Caron was a public health practitioner before entering academia.

"Dr. Caron is a distinguished leader in the field of healthcare leadership with a proven track record of success and accomplishments," said IHP President Dr. Paula Milone-Nuzzo. "We began our School of Healthcare Leadership to help fill a growing need to produce a new generation of leaders, and we cannot think of a better person to lead those efforts."

Caron earned degrees from Dartmouth Medical School (PhD in Pharmacology/Toxicology), Boston University (Master of Public Health), and Regis College (BA in Chemistry), and completed a post-doctoral fellowship at the Harvard T.H. Chan School of Public Health.

"Coming to the MGH Institute, where you can lead cutting-edge academic programs and prepare a healthcare



Dr. Caron has spent the past 17 years in leadership positions at the University of New Hampshire.

workforce, all in a clinical environment, is the best of both worlds," said Caron, who will begin full time at the Institute on July 1. "The School of Healthcare Leadership is well poised to be the premier national entity offering inter-professional education, experiential learning, academic excellence, community engagement, and life-long learning opportunities to health professions leaders and educators who are addressing complex problems in a dynamic healthcare environment."

"I want to make a difference—no matter how large or small—to improve the overall quality of healthcare."

— SHL DEAN DR. ROSEMARY CARON

The MGH Institute launched the new school last spring along with two new degree programs: a Master of Health Administration and a Master of Science in Healthcare Data Analytics. The school and its degree programs are an expansion of the Institute's academic profile and its response to the growing demand among all segments of healthcare for increased training in leadership, health equity, and big data. The School of Healthcare Leadership joins the MGH Institute's School of Nursing and School of Health and Rehabilitation Sciences.

"Dr. Caron is a talented, experienced, and character-driven leader who will advance the academic mission of the IHP," said Dr. Reamer Bushardt, provost and vice president for academic affairs. "Dr. Caron has distinguished herself as a capable higher education administrator and has built numerous successful academic programs throughout her career, but, more importantly, she has consistently shown passion and commitment in helping others—faculty, staff, and students—realize their full potential."

"I want to make a difference—no matter how large or small—to improve the overall quality of healthcare," said Caron. "In my 25 years of professional experience in academic leadership and public health practice, I have examined the components of health systems that comprise a successful model to deliver care, and it begins with the educational preparation of those responsible for delivering care. Making a difference in improving patient care is what it's all about—it's why we're here. I look forward to the challenge."

Former Presidents Recognized for Leadership

BY JOHN SHAW

A new Presidents' Hall has been created at 1 Constitution Wharf to recognize the MGH Institute's two presidents who served prior to current President Dr. Paula Milone-Nuzzo: Ann Caldwell (1997–2007) and Dr. Janis P. Bellack (2007–2017).

During a fall semester ceremony where the new portraits of Caldwell and Bellack were unveiled, Milone-Nuzzo said the building will soon be the new 7,000 square-foot, state-of-the art home for the school's growing research initiative that currently has a total research portfolio of \$36 million.

"We're so honored to be in this space and I'm so excited that we will be able to enjoy it for a long time," said Milone-Nuzzo, who thanked Board of Trustee member Jim Canfield and Chief Operating Officer Denis Stratford for their efforts to secure the 12-year lease.

Jeanette Ives Erickson, chair of the MGH Institute's Board of Trustees, praised Caldwell's work in raising \$4.4 million, which included a \$2 million gift



Board Chair Jeanette Ives Erickson (second from left) smiles after unveiling portraits in the new Presidents' Hall. Also celebrating are (l-r) Trustee Jim Canfield, President Paula Milone-Nuzzo, and Chief Operating Officer Denis Stratford.

from the Catherine Filene Shouse Foundation to purchase Building 36, and began the creation of a campus 25 years after Institute's 1977 founding. "Ann convinced leaders at the time that the IHP should remain an important part of Massachusetts General Hospital, because there was an effort to send the IHP to Harvard or Simmons or someplace else," said Ives Erickson.

Ives Erickson said Bellack's accomplishments included hiring the IHP's first

provost and academic vice president, overseeing a doubling of the student population, renewing its focus on interprofessional education, and creating a robust research environment. "Jan's work on launching an interprofessional environment for learning and clinical practice will be what I believe distinguishes us," Ives Erickson said. "Jan took to heart the Institute of Medicine report that said we should not be training in silos and she made it an absolute reality."

Investment in Research and Academic Programs Continued During Fiscal Year 2022

BY JOHN SHAW

The MGH Institute continued to significantly invest in research and academic activities during Fiscal Year 2022.

The IHP's research initiative gained new records in several categories. The total value of active grants grew 40% to \$36 million, active grants rose 30% to 60, dedicated research centers and labs for grant-funded scholars surged 87% to 15, and faculty publications jumped 68% to 168.

The Institute created the School of Healthcare Leadership, and added new master's programs in data analytics and healthcare administration. However, a delay in approval from the Department of Higher Education hampered the Institute's ability to market and recruit students.

A \$1.4 million non-cash accelerated depreciation expense from one building was a major contributor to a negative operating loss of \$0.4 million as of September 30, 2022. The income from operations before the one-time,

unbudgeted accelerated depreciation entry for Building 79/96 was \$1 million.

The Institute's balance sheet reflects higher liquidity and a strong balance among asset classes. Total assets were \$168 million, which included \$17 million in cash and short-term investments; the endowment reached \$47 million; and property and equipment was valued at \$25 million.

Over the past five years, the Institute's key financial metrics have been on the upswing, as the chart below indicates.

	FY 2018	FY 2022	Growth
Revenues	\$58 million	\$70 million	21%
Financial Aid	\$6 million	\$8 million	33%
Endowment	\$43 million	\$47 million	9%
Total Assets	\$113 million	\$168 million	49%
Total Net Assets	\$82 million	\$98 million	20%

With New Scholarships, Bond Between Mass General and Institute Strengthened

BY SEAN HENNESSEY

Massachusetts General Hospital and the MGH Institute's School of Nursing are strengthening the foundation of their workforce pipeline.

This semester, three \$10,000 scholarships will be awarded to high-performing Bachelor of Science in Nursing students who are beginning their final semester.

The students will then complete their final immersion experience at Mass General, graduate in May, and begin a two-year position there. This is the first time the hospital has tied a working commitment to its scholarships.

"It's a win-win for Mass General and for the IHP," said SON Dean Dr. Kenneth R. White. "These students will have a guaranteed job when they graduate. It helps the student, it helps the school, and it helps the nursing profession, which is in the midst of a drastic nursing shortage."

"We always prioritize IHP students for clinical placements," said Dr. Debbie Burke, the hospital's chief nurse and senior vice president for patient care. "Our IHP students are really important to us. We need a pipeline of clinical staff nurses, and when they get out of school, we want them to come and work here."

Giving priority to nursing students from underrepresented communities will also help the hospital with its goal of employing a more diverse workforce. Currently, just over 13% of nurses at MGH are considered diverse.

"We already know we have a smart and talented group of IHP students to begin with—that's a given," said Burke. "The question then becomes, 'How do we create a pipeline that helps us meet our goals, too?' We really work hard at trying



Dr. Debbie Burke (left), Chief Nurse and Senior VP for Patient Care at MGH, and Dr. Ken White, Dean of the School of Nursing, expect the scholarships to help fill the hospital's workforce pipeline.

to increase the diversity of our workforce and our leadership. This is a way to be deliberate and intentional. One day, maybe we won't have to be so deliberate."

The guarantee of a job at one of the world's most respected hospitals is one significant benefit; the \$10,000 in tuition savings is another.

"Students come out of school with a significant burden of loans, and that's part of the attrition issue," said White. "This is another important way to address attrition and support early career nurses."

Burke told the recent cohort of BSN graduates to let her know if they didn't already have a job. She will have the same message for this year's graduates.

"Listen, MGH is not an easy work environment. It's really highly acute and busy," Burke noted. "But with this plan for the students having their final

semester with us, it won't feel like a first date when they're coming here to work after graduating. We need to ask: 'What can we do during the school year that could make this a better experience for those students?' Then it's up to us to make it a good work environment so that they want to stay after the two years."

While the scholarships represent a financial lifeline, they signify something bigger: an evolution of the collaboration between Mass General Hospital and the graduate school it founded in 1977.

"The nursing profession and the workforce demands are so different now," said White. "And the times are pushing both of us toward each other."

Added Burke: "We have a really nice relationship. Making sure that we're prioritizing these students is just another way for us to tighten that relationship."

New Website Opens to an Improved Virtual Front Door for Institute

BY SEAN HENNESSEY

The MGH Institute's new website promises to provide a more engaging virtual front door with a better user experience, appealing visuals, and information that's easier to find.

"One of the things I have a passion for is organizing content and making it easier for people to use," said Rachel Renaux, senior web content and strategy manager, who implemented many of the technical aspects of the site redesign. "I think we've accomplished that with this website because the navigation and architecture is restructured in a hierarchical way."

"This website will allow the IHP to tell more of its story, what our core values

and mission are, what we do, and what we offer," added Jorge Sanchez de Lozada, director of technology and web services.

Appealing to prospective students is a significant focus of the website design. To that end, a program finder—which the IHP website has never had before—has been implemented. And the timing for the new website was fortuitous, coming as the school recently launched the School of Healthcare Leadership and several post-professional degrees.

Sections with enhanced capabilities include a directory with faculty profiles and audience-specific pages targeted to alumni, donors, stakeholders, Sanders IMPACT Practice Center clients, staff, and faculty.



The new website is meant to provide a more appealing virtual front door with a better user experience, appealing visuals, and information that is easier to find.

Designed and developed by digital agency Primacy, the website also implements a new color scheme that is more in line with other affiliates in the Mass General Brigham system. The IHP logo, formerly teal and grey, is now a solid navy blue, although teal continues to be prominent throughout the site.

Navigating the Graduate School Application Process

BY JOHN SHAW

When Jacob Maruna decided he wanted to go back to school to become a physician assistant, he figured he could take a few prerequisites, fill out some applications, and start a graduate program in a couple of years.

He quickly discovered it wasn't that simple.

"I thought I had developed a great process of what I needed to do," said Maruna, a clinical research coordinator at the Yawkey Center for Outpatient Care at Massachusetts General Hospital. "It was a good thing Gail helped me."

"Gail" is Dr. Gail Samdperil, a long-time academic advisor and former associate dean at Sacred Heart University. She launched a pilot project last summer to assist students in the MGH Institute's Online Prerequisites for the Health

Sciences program navigate their way through the graduate school application labyrinth. The brainchild of Dr. Kim Mace, the program's director who knew Samdperil from Sacred Heart, the free resource has proven to be quite popular.

Samdperil said that because many students are several years removed from receiving their last degree, adding two or three online courses a semester on top of their jobs can be a major juggling act.

For Maruna, being mentored meant discussing a timeline of when to complete tasks such as getting letters of recommendation, certifications, volunteer experience, and clinical exposure, as well as learning to focus on strengths when writing his personal statement.



Jacob Maruna is one of several online prerequisites students who have been helped by a new mentorship initiative.

While the prerequisite courses can be used to apply to any graduate program, including medical school, Samdperil noted all the students with whom she has met intend to apply to the Institute.

BSN Program Reaches Its Highest Ranking

BY JOHN SHAW

The accelerated Bachelor of Science in Nursing program achieved its highest ranking to date from *U.S. News & World Report* in the publication's recent Best Bachelor of Science in Nursing Programs list.

Now 51st in the nation, up from 58th in 2021, it is tied as the second-highest ranked nursing program in both Massachusetts and New England.

"We have worked really hard to show the incredible work that our students, faculty, and alumni are doing in the classroom, through their research, and in clinical settings," said School of Nursing Dean Dr. Kenneth R. White. "The *U.S. News* recognition affirms our program's commitment to being an institution that prepares exceptional nurses of the future."

White cited the Institute's 149-year history of nursing education, academic and practice partnerships with Mass General Brigham, and institutional commitment to faculty and student scholarship as key components of the degree's climb in the national rankings.

"When you look at the rigor of our program, the clinical placements resulting from it, and our outstanding faculty, this ranking confirms what we've known for a while now," said White, who noted that a part-time BSN program was recently added to help fill the country's nursing shortage. "Our graduates are among the best, and our program continues to have an upward trajectory."

"Not only do our graduates provide top-tier patient care," said Dr. Rebecca Hill, associate dean of prelicensure



Dr. Rebecca Hill is associate dean of prelicensure programs.

programs, "but they do so at nationally and internationally ranked healthcare facilities within and outside of the Mass General Brigham system."

President Named to Top 100 List

BY SEAN HENNESSEY

President Paula Milone-Nuzzo was named to the Top 100 Women-Led Businesses in Massachusetts list by the Women's Edge and its partner, *The Boston Globe*.

"We have a great organization, we have lots of connections with our parent organizations, Massachusetts General Hospital and Mass General Brigham, and it's a school where all of our employees can realize their full potential," said Dr. Milone-Nuzzo.

Factors that went into the evaluation included revenue, operating budget, governing board makeup, innovative projects, and workplace and management diversity. One-third of the IHP's upper management is female, while 44% of its Board of Trustees are women, as is 80% of its workforce. On the diversity side,

15% of its workforce and 12% of the trustees are made up of women of color.

It is the first time an IHP president has been named to this list, and it comes just after the five-year anniversary of Milone-Nuzzo's presidency. During that time, the Institute has added a new School of Healthcare Leadership, launched nine new degree programs, and has seen a 42% improvement in endowment and a 62% rise in total net assets.

Milone-Nuzzo joined four other MGB leaders on the list: Anne Klibanski, president and chief executive officer of Mass General Brigham; Denise Schepici, president and chief executive officer of Martha's Vineyard Hospital; Lynn A. Stofer, president and chief executive officer of Mass General Brigham



President Paula Milone-Nuzzo and Trustee Jim Canfield attended the event in which the IHP was included in the list for the first time.

Community Physicians; and Marcela G. del Carmen, president of Massachusetts General Physicians Organization and executive vice president of Mass General Brigham.

Research Leads to 20,000 Lives Saved

BY JOHN SHAW

The goal of healthcare research is to improve people's lives. For Dr. Suzie Kardong-Edgren, research she co-conducted on CPR training has led to saving the lives of an estimated 20,000 people, according to the National League of Nursing.

An associate professor in the Institute's Health Professions Education program, Kardong-Edgren and Duke University School of Nursing Professor Dr. Marilyn Oermann conducted research testing and validating the Resuscitation Quality Improvement (RQI) system that has dramatically changed how CPR is taught to nursing students. "It's really something to see research put into practice and have it make such an immediate impact," said Kardong-Edgren.

RQI, which launched in 2015, was co-developed by Laerdal Medical, a medical simulation and resuscitation training company, and the American Heart Association. According to the National League of Nursing, more than 2,400 hospitals and 2 million nurses globally are using the digital resuscitation education programs.

Recently, the NLN and Laerdal recognized Kardong-Edgren and Oermann for their research.

A dozen nursing schools were also recognized by the NLN for being the first to implement the RQI system with their students. The MGH Institute's School of Nursing is evaluating the most appropriate way to integrate it into the curriculum, according to Dean Dr. Kenneth R. White.

Kardong-Edgren and Oermann's research documented that although nursing students begin school CPR-certified, most could not compress the



During the recognition of her research, Suzie Kardong-Edgren (center) is flanked by (L-R) Rose Patterson of Laerdal Medical, NLN Chair Kathleen Poindexter, IHP doctoral student Rosemary Samia, and NLN President and CEO Beverly Malone.

manikin chest deeply enough to make a human heart beat and were poorly trained in bag-valve-mask ventilation, she said. In addition, they found that even a highly trained and experienced instructor could not tell with the naked eye if someone was compressing the chest well enough to make a human heart pump.

"What we've known for a long time is that how we teach CPR isn't that good because we teach it too quickly; the minute you walk out the door, you probably still won't be able to do CPR correctly," she said. "We wanted to change that."

What Kardong-Edgren and Oermann found from several multi-site studies they conducted is that it is far more effective to have brief CPR training sessions over four consecutive days, using high-fidelity manikins that provide real-time feedback, with 10-minute refreshers every three months. The most common recertification practice

currently used is a two- to eight-hour course every two years.

Kardong-Edgren was a newly minted PhD working at the University of Texas in Arlington when she first became involved in CPR training. Her associate dean happened to also work at the American Heart Association and asked her to study the effectiveness of CPR. This led to four consecutive studies of Advanced Cardiovascular Life Support and CPR that tested earlier forms of the RQI.

A chance meeting between an AHA scientist and the U.S. Air Force led to a repurposing of an algorithm the Air Force had developed to keep fighter pilots' skills fresh via a simulator, rather than flying their very expensive jets. The scientist wanted to see how repurposing the algorithm for CPR training would work. Kardong-Edgren and Oermann conducted more studies and, sure enough, a new way of teaching the life-saving technique was born.

SLP Alum and Faculty Help Change State Law for First-Year Graduates

BY KATE CHANEY

For years, Massachusetts carried the dubious distinction of being the only state to consider it fraud for trained and qualified speech language pathologists to bill insurance companies during their first year of practice, known as their clinical fellowship. Thanks to the efforts of a MGH Institute alum and two faculty members, that all changed recently when House Bill 5094: An Act Providing for Provisional Licensure for Speech-Language Pathologists was signed into law.

Barbara Wilson Arboleda, MS-SLP '01, who works at Beth Israel Deaconess; Lisa Moran, assistant director of external clinical education; and Jenn Mackey, director of clinical education, teamed up with Massachusetts Speech-Language Hearing Association (MSHA) lobbyists to guide the bill's passage.

It will directly impact current clinical fellows who, prior to this change, were unable to bill insurance for their services despite the American Speech-Language-Hearing Association considering them to be qualified professionals.

How It Started

That a law like this is even necessary might surprise most; the limitations on first-year SLPs certainly stunned those within the SLP field more than a decade ago.

In 2010, Wilson Arboleda was hiring for a staff SLP position in private practice when she discovered that neither Medicare nor private insurance would reimburse for the services provided by an SLP in their clinical fellow year because they had not been licensed before completing that first year.



(L-R): Lisa Moran, Barbara Wilson Arboleda, MS-SLP '01, and Jenn Mackey—all members of the IHP community—were instrumental in a bill that will allow new SLPs to charge insurance companies for their services.

She reached out to her state representative, Paul McMurtry, and quickly learned that while there was a groundswell of legislation in some states establishing provisional licensure for speech-language pathologists, Massachusetts was not among them.

Eventually, Wilson Arboleda connected the Massachusetts SLP organization with Moran and Mackey, both of whom have been heavily involved with it since then.

"I knew it was time for me to stop complaining and act," Mackey said. "MSHA had been working so hard for a decade. Our lobbyists, as well as the Massachusetts General Hospital Office of Government Affairs, were excellent guides in this bill's advocacy."

The Bill's Impact

The lack of provisional licensure has had a ripple effect on students, organizations, schools, hospitals, universities, and the general population of Massachusetts.

"To me, this situation felt patently unfair," Wilson Arboleda said. "We were

driven to give these students the opportunities they needed to have the careers they deserved. Ultimately, as employers, we also suffered, missing out on great candidates because of insurance issues and, as a result, not being able to provide the best care possible."

For students, job opportunities will expand during their first year of work, directly impacting their options and paths thereafter. For organizations, schools, and hospitals hiring SLPs, the process will be simpler and viable candidates more numerous. Universities will no longer have to prepare students to navigate these challenges post-grad, and anyone seeking SLP services will be able to find providers more easily because of a more robust workforce.

Looking ahead, Mackey sees more steps to take in widening opportunities for students. "We want to do an interstate compact, which would allow SLPs to be licensed in multiple states," she said. "It's a long journey, but we want others to get involved."

Nursing Dean Makes Mark on AAN Presidency

BY CAROLYN BARRETT

More than halfway through his tenure as president of the American Academy of Nursing (AAN), School of Nursing Dean Dr. Kenneth R. White is making his mark on the organization.

Since White became the AAN's president last year, it has strengthened its position as a policy organization. It has hosted policy dialogues on topics ranging from the pediatric mental health crisis to the quality of care provided in nursing homes, signed on to numerous amicus briefs with partner organizations on pressing issues from maternal health to gender-affirming care, and published a position statement on firearm safety and violence prevention.

“We’re really diversifying our Fellows and showing that if you make an impact on nursing, especially in terms of health equity, you belong here. This is no longer just for academics.”

— DR. KENNETH A. WHITE,
SCHOOL OF NURSING DEAN

“The academy’s mission is driven by our passion for better health for all. One way to accomplish that is by continuously advocating for policies that put equitable population health first,” said White.

The AAN serves the public by advancing health policy and practice through the generation, synthesis, and dissemination of nursing knowledge.

What White considers his most important focus has been redeveloping a sense of community and connection among academy Fellows. Established in 1973 to provide talented, early-career health science scholars in nursing with the opportunity to experience and participate in evidence-based healthcare or public health, the AAN’s fellowship program is composed of nurses in practice, nurse administrators, nurse lawyers, and nurse economists to reflect the profession as it is today. Academy Fellows are inducted into the organization for their extraordinary contributions to improve health locally and globally.

“So many new inductees come up to me and say, ‘I don’t always believe I deserve to be here,’” he said, after welcoming one of the AAN’s largest and most diverse classes in 2022. “I’ve spent a lot of time cultivating a sense of belonging within the academy.

“We have nurses who started their own businesses who are innovators and entrepreneurs,” he continued. “We have nurse researchers who are not part of an academic setting but part of a hospital or health system, so we’re really diversifying our Fellows and showing that if you make an impact on nursing, especially in terms of health equity, you belong here. This is no longer just for academics.”

As White heads into 2023 and completing his two-year term, he’s excited to begin the celebration phase of a three-year arc established by the AAN’s board of directors during his tenure.

“As we looked at a way to mark 50 years of the academy, we wanted to take our time marking the milestone, so we came up with three phases,” he said. “2022 was



Dr. Kenneth R. White has continued the AAN's mission to provide better health for all.

our year of reflection. As we head into 2023, we begin our year of celebration. In 2024, the academy will look to invent a new future.”

White emphasized that while the organization has much to celebrate, it was important to stop and reflect first. “In our history, there have been missteps,” he says. “We had to have a real reckoning.”

White says it was important to consider the AAN’s history and reckon with some of its failings, especially in terms of the way it has treated nurses of color in the past. As a part of that reckoning, White and AAN leadership brought in a consultant to make sure that the Fellow selection process was unbiased and reflective of the diversity that exists within the patients and communities that nurses serve.

IHP Hosts Course to Promote Access to Contraception in Massachusetts

BY JOHN SHAW

The MGH Institute is playing a key role in a new Massachusetts campaign to raise awareness of a law that provides birth control benefits at no cost to eligible patients.

Because of the joint accreditation status of the IHP's Department of Continuing Professional Development, the school partnered with the state's Department of Public Health (DHP) and the Reproductive Equity Now Foundation (REN) to develop and launch an online, asynchronous course to train and educate prescribers and pharmacists to ensure they share information about the law with other health professionals and patients. The course provides physicians, pharmacists, nurse practitioners, and physician assistants with 2.5 continuing education unit hours and is funded by the DPH.

The goal is to raise awareness of the Act Relative to Advancing Contraceptive Coverage and Economic Security in our State (ACCESS), which requires

“We’re really trying to eliminate every single barrier possible and move away from a contraception parity realm to a contraception equity realm—and to treat contraception like you would treat any other medication.”

– SARAH LEE DAY, LAWYER AND JUSTICE EQUITY FELLOW AT REN



The artwork on the course's page reflects the inclusiveness of the campaign.

state-regulated insurance carriers to provide all FDA-approved contraceptive methods with no copay. Under the 2017 law, eligible Massachusetts residents can receive at no cost a year's worth of birth control (after a three-month trial) as well as emergency contraception, also known as the morning-after pill.

“One of the Institute's missions is to support interprofessional education that impacts patients in a positive way,” said Dr. Susan Farrell, who recently departed as director of the CPD department.

“So for us to be able to partner with an external group who shares our vision of what we're trying to create, it has to be one of the most successful partnerships we've had.”

Jill Clark, director of the DPH's Division of Child/Adolescent Health and Reproductive Health, said, “We wanted to make sure that we were working with a trusted source of provider education capable of reaching a wide audience. And so that was why it was so important for us to work with the Institute.”

According to a recent market research study, 86 percent of eligible individuals surveyed were interested in receiving a 12-month supply of birth control at one time, but only half were aware of the option. Previously, patients had to return to their provider every three months to renew their prescription.

The ACCESS law has taken on increased importance in the aftermath of the U.S. Supreme Court's decision to overturn *Roe v. Wade*, which had guaranteed the right to an abortion.

Discussions to create the course began prior to last June's ruling, which is mitigated in Massachusetts because of a bill signed into law in July that protects access to reproductive healthcare services, including abortion and gender-affirming care, from out-of-state legal action.

According to Sarah Lee Day, a lawyer and justice equity fellow at REN, the initial push to create the law began when the Affordable Care Act came under threat. While ACCESS was passed in 2017, the state now has the funds to implement it.

“We want to continue to make sure that people who don't want to be pregnant stay not pregnant, because of people's concerns about accessing abortion services,” said Day. “We're really trying to eliminate every single barrier possible and move away from a contraception parity realm to a contraception equity realm and treat contraception like you would treat any other medication.”

To learn more, visit:

<https://learnmore.mghihp.edu/access>

Mass General Brigham Looks to IHP to Help Fill Mental Health Workforce

BY SEAN HENNESSEY

Bridging the healthcare gap means more than educating enough qualified nurses, occupational therapists, and physician assistants. There's also a need for these providers to acquire mental health expertise, a fact Mass General Brigham recognized with the recent rollout of its Behavioral Health Grant initiative that supports developing a larger behavioral health workforce statewide.

To help mitigate the problem, New England's largest care provider set aside \$15 million to help build up the behavioral health workforce. The IHP's nursing, occupational therapy, and physician assistant departments have received funds to develop programs to educate a new generation of mental health professionals.

"We're grateful MGB recognizes that the IHP can help increase the pipeline of behavioral health workers," said President Paula Milone-Nuzzo. "There's a tremendous need, and the IHP is poised to help bridge this gap and help improve the lives of many more people."

Nursing

The School of Nursing is working on two initiatives:

- Developing an evidence-based, asynchronous online preparation course for registered nurses interested in pursuing ANCC certification in Psychiatric–Mental Health Nursing.
- Expanding its post-master's Certificate of Advanced Study program for nurse practitioners interested in an additional advanced practice certification in psychiatric-mental health.

"The pandemic has highlighted problems with mental healthcare in America, but they have been present for a very long time," said Assistant Professor Dr. Susan Stevens, who has played a key role in



Adjunct Instructor Meghan Dolan, right, talking with a physician assistant studies student. Through funds from MGB's Behavioral Health Grant, the PA program has developed an accelerated mental health certificate.

developing the IHP's psychiatric nursing specialty curriculum.

Occupational Therapy

The OT Department is developing the following academic and clinical partnerships:

- An incentivized mental health student clinical placement model, with stipends to students and supervisors, to increase capacity for full-time training in mental health practice settings. These include several MGB affiliates as well as other community settings, such as the Home for Little Wanderers.
- A continuing professional development offering for OTs in mental health with an emphasis on evidence-based recovery models.
- A faculty-led, student pro-bono telehealth support group focused on community reintegration. Currently, the IHP is partnering with OTs at Salem Hospital's Partial Hospitalization Program.

"We are supporting a variety of populations, including adults and transition-age youth and adolescents who experience significant gaps in mental healthcare delivery," said OT Chair Dr. Regina Doherty.

Physician Assistant Studies

The PA program has developed an accelerated Mental Health Certificate to provide new graduates and practicing PAs with advanced training in psychiatric care.

PAs will earn 50 continuing medical education credits throughout the 12-week, self-paced module, which will prepare them to sit for the NCCPA Certificate of Additional Qualification Exam in Psychiatry.

"This furthers our goal to increase the number of PAs providing direct mental health services," said Acting Chair and Assistant Professor Joshua Merson.

While it's early in the process, given the initiative's three-to-five-year horizon, Joy Rosen, vice president of behavioral mental health for Mass General Brigham and senior vice president at Massachusetts General Hospital, is counting on the IHP and other institutions to help build the workforce of mental health professionals in all facets of care.

"We wanted to address the major problem that we're facing in behavioral health—a workforce shortage in all different role groups," she said.

Stickhandling Homework and Hockey Pucks

BY JOHN SHAW

For the past three years, Sammy Davis has lived the occupational therapy profession's credo of being balanced.

By day, she's been a student in the MGH Institute's entry-level Doctor of Occupational Therapy program. On nights and weekends, she's traded her books for skates as a member of the Boston Pride professional women's hockey team.

"We tell our patients to live a balanced life, so that's what I've been trying to do," said Davis, a forward on the Premier Hockey Federation squad.

Juggling classes, external fieldwork, gym workouts, evening practices, and weekends of games—often hundreds of miles away—have been a challenge since she started at the IHP in 2020. But thanks to her classmates and professors, she's been able to stickhandle through both responsibilities.

"We tell our patients to live a balanced life, so that's what I've been trying to do,"

— SAMMY DAVIS, OTD '23

"I wanted everyone to hold me accountable. I told my classmates to say something if I'm not doing what I'm supposed to be doing, and my teachers understood that I'm going to work hard to get everything done and not expect anything less from me," said the Pembroke native. "It's been a challenge some days, I have to admit, but it's been a great experience."

It was during her sophomore season as the captain of the Boston University women's hockey team that she first



Thanks to her classmates and professors, Sammy Davis, OTD '23 been able to simultaneously pursue her degree and a professional hockey career.

learned about occupational therapy, albeit in a painful way.

"I got hit by a puck and my finger just kind of exploded, so I had to go to a hand surgeon and then I was referred to a certified hand specialist who also was an occupational therapist," she recalled. "She was making splints for my glove, and I thought, 'This is so cool.' So I began exploring OT, and I really liked the idea of the whole profession and how they look at things holistically and client centered."

In 2019, she earned a bachelor's degree in behavioral health at BU and stayed another year to complete a master's degree in special education while simultaneously finishing her college hockey career. (She was redshirted her junior year due to a hip injury; Division 1 players have five years to complete four seasons of sports.) Her Terriers record included scoring with 142 points in 147 games, making the 2019 Hockey East All-Star team, and being inducted into the Women's Beanpot Hall of Fame.

Davis was accepted to the MGH Institute in the spring of 2020, around the same time the pro hockey league was holding its draft. As much as she wanted to turn professional, she decided that remaining in Boston to study was her top priority. The Pride, scheduled to pick last, traded for the first pick to draft her as their top choice.

Davis, who has scored more than a dozen goals and collected more than 25 points in her career, was named to the 2022 All-Star Showcase. The Pride have won the league's Isobel Cup championship for the past two years and are in the mix for a three-peat this spring.

Next fall, she plans on playing hockey while leaving open the door to begin her OT career. "I can't believe that I'm graduating in May," said Davis, who also is working in OT Assistant Professor Ariel Schwartz's Partnership Lab and volunteering to help individuals with disabilities at Waypoint Adventure. "But I'm really lucky to have options to be able to do the two things I love."

New Programs Aim to Impact Healthcare

BY KATE CHANEY

The Institute's newest programs—the Master of Science in Healthcare Data Analytics and the Master of Healthcare Administration—will give graduates almost unlimited career opportunities.

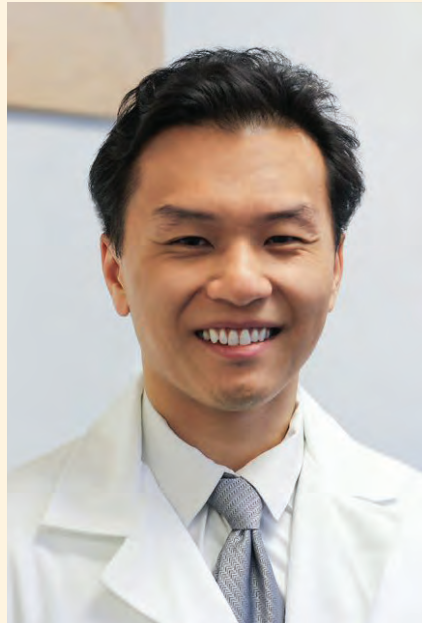
Shuhan He, director of the data analytics program, says it's important to promote an awareness of the role of data in healthcare.

“Data is often thought of as a separate field than healthcare, but in my view, they are the same,” Dr. He said. “Every aspect of the healthcare profession, from clinical care to delivering healthy food in a cafeteria to managing emergency room wait times, relies on data. If you want to deliver the best care possible and operate more efficiently as a healthcare entity, you need to make data-informed decisions.”

A practicing emergency medicine physician at Massachusetts General Hospital, He has published research on using technology to improve the supply chain of personal protective equipment and accessibility of health-related websites. He also is the director of growth for MGH's Center for Innovation in Digital Health Care, an instructor at Harvard Medical School, and founder and executive chair of ConductScience.

“Healthcare professionals often assume that data science is too technical for them or that they don't have the right skillset,” He said. “This is not the case.”

The program gives professionals the skills they need to utilize data for problem solving and to improve clinical practice and healthcare systems. It integrates data analytics strategies, machine learning and AI technologies, data literacy, data mining, analysis, and visualization.



Dr. Shuhan He (left) and Dr. LaToya Trowers Bell are directors of the masters' programs in healthcare data analytics and healthcare administration, respectively.

The applications of data science are so broad that continued clinical care, hospital administration, medical technology development, research, and even big tech are all possible career paths.

Dr. LaToya Trowers Bell, the inaugural director of the healthcare administration program, agrees that healthcare encompasses more than people may assume.

“Healthcare administrators conduct important work behind the scenes, making important large-scale decisions while working to ensure the long-term success of the healthcare facility,” said Bell, who previously was an assistant professor of Health Policy & Management in the School of Public Health at SUNY Downstate Medical Center.

“In the field of patient care, healthcare administrators are intimately familiar with the regulatory framework. They develop policies and procedures that impact every aspect of patient care.”

The MHA program is comprised of 36 credits over five semesters that includes

field and immersion experiences and offers a unique human-centered leadership focus.

“It is important to have knowledge of justice, equity, inclusion, and diversity (JEDI) to understand how to develop policies that promote health equity and build inclusive programs,” she said. “Having the Institute's JEDI initiative integrated with the MHA program is really important.”

The healthcare administration field is projected to grow by over 30% by 2029. “It provides numerous opportunities for career advancement and growth as one gains firsthand experience and knowledge in leadership,” Bell noted. Careers include practice managers, program managers, outpatient directors, long-term care administrators, human resources, and finance executives as well as chief operating officers, chief quality officers, and CEOs.

Go to <https://www.mghihp.edu/healthcare-leadership> to learn more about the two programs.

JEDI Fellows Program Continues to Expand

BY JOHN SHAW

Months before the 2020 murder of George Floyd, and the Black Lives Matter movement made nationwide headlines, the MGH Institute had recognized an increased level of student activism around racial injustice issues and wanted to tap into that passion.

In July 2019, the newly created Office of Justice, Equity, Diversity, and Inclusion piloted the JEDI Fellows program to raise awareness of these issues throughout the IHP community and develop student leadership opportunities. Now, after more than three years, the scope of its influence has been wide-ranging—and continues to grow.

“The JEDI Fellows program represents the possibility of transformation in our healthcare system by equipping and preparing future healthcare professionals to intentionally engage in deep conversations about anti-oppression and giving them tools for leading with justice and equity in their practice and workplaces beyond the IHP,” said Jammy Torres-Millet, the former associate director for social justice education & student engagement. “They learn skills and experiences that are essential for any healthcare provider to engage with in order to provide culturally humble and respectful care.”

Since 2019, more than 20 students have served as paid Fellows. Each receives JEDI leadership development opportunities and mentorship to co-develop, pilot, and facilitate workshops and programs across campus.

Recent events include an Asian American Pacific Islanders (AAPI) Identifying Student Space, social justice programming, and workshops including the new “Leading with Justice” dialogue series, a BIPOC community meet-and-greet, and the Department of Communication



Fellows (L-R) Arianna Bayangos, OTD '24, Katie McColgan, OTD '25, and Tiffany Tsang, OTD '25 led an Asian American Pacific Islanders student space event, one of many programs presented during the year.

Sciences and Disorders’ info meet-and-greet. Fellows also sit on the School of Health and Rehabilitation Sciences’ Anti-Oppression Task Force and a new School of Nursing JEDI Collaborative.

In addition, Fellows host monthly JEDI programming for academic programs and the greater IHP community, including weekly on-campus and virtual office hours, and engage with a JEDI curriculum to further support their leadership development and growth. Concepts and frameworks covered include critical race theory, restorative justice, rest as resistance, and social determinants of health, intersectionality, and power.

The Fellows are embedded into the Institute’s academic programs, working with faculty and staff to address equity issues including curricula that often inadequately address how to care for patients who are often marginalized and minoritized. Significant progress in several programs has been made to update case studies, assign new class readings, and integrate JEDI core competencies.

Additionally, they have been involved in community-building efforts such as a session on community agreements during the Department of Physical

Therapy’s retreat for first-year students and the Department of Communication Sciences and Disorders’ new student orientation.

“The CSD department has really benefited from our work with the JEDI Fellows program,” said Lesley Maxwell, associate chair in the CSD Department. “Faculty and students developed a set of shared value statements and community agreements to use as we work together to integrate our values of justice, equity, diversity, and inclusion into everything that we do.”

This year, the Fellows are collaborating with student clubs and the Student Government Association, providing curriculum audit support, creating a shared JEDI learning document/tool, facilitating dialogue with faculty around comfort with teaching JEDI content, hosting informal student-centered JEDI dialogue spaces and a conference presentation, and co-facilitating community-building sessions and JEDI workshops.

They will continue to serve on the School of Health and Rehabilitation Sciences Anti-Oppression and School of Nursing JEDI Curriculum task forces and participate with the nursing school’s JEDI Collaborative.



A Transformational Gift

**Tedy's Team Center of Excellence in Stroke Recovery
promises to improve care, advance clinical
education, spark new research efforts, and publicize
the early warning signs of stroke**

BY ALYSSA HAYWOODE
CONTRIBUTING WRITER

When

Tedy and Heidi Bruschi entered the lobby of the MGH Institute's Dr. Charles A. and Ann Sanders IMPACT Practice Center for the first time, they were impressed. Even more than they had expected to be.

The former New England Patriots linebacker and three-time Super Bowl champion and his wife saw IHP students greeting clients who were receiving pro-bono occupational, physical, or speech-language pathology care long after their insurance coverage had expired. Upon embarking on a tour of the center led by director Rachel Pittmann, they saw the full range of its activities—everything from a model kitchen where occupational therapy patients learn to use adaptive devices like an automatic can opener, to a control room where faculty oversee speech-language pathology students working with aphasia clients to help improve their communication skills, to an adult gym where physical therapy students were putting clients through various rehabilitation drills to help regain lost strength.

“You can come here and you're not only getting your rehabilitation, but you're also helping students in their education, which is so valuable,” says Tedy Bruschi as he marveled at all they were taking in. “I'm just blown away. It's so valuable, and I'm glad we're a part of it.”



Tedy Bruschi returned to the Patriots in October 2005, just months after he had a stroke.

What they're part of is a new collaboration between the MGH Institute and Tedy's Team™, the couple's charity organization dedicated to raising money for stroke and heart disease research, education, awareness, and survivor assistance. From this charity came a \$1 million donation to create the Tedy's Team Center of Excellence in Stroke Recovery, a game-changing gift that promises to improve stroke care, advance clinical education, spark new research efforts, and increase community outreach to publicize the early warning signs of stroke.

“I'd never heard of a place like this, where you can come and get free care,” says Tedy Bruschi. “I hear from stroke survivors all the time that their insurance ran out. Patients who come here are getting the rehabilitation they need and they're helping with students' education. Everybody will win at the center.”

“If you're a patient who needs these services,” adds Heidi Bruschi, “this is a wonderful place to be.”

Thanks to their gift, it's only going to get better.



It was February 2005, and Tedy Bruschi was still basking in the glow of Boston's traditional duck boat parade after the Patriots had won their third Super Bowl in four years. The former sixth-round pick in the 1996 NFL draft, Tedy was 31 years old, in the prime of both his personal and football lives. But he was having an exceptionally bad headache that just wouldn't go away.

“I had been living as the wife of an NFL player for many years at that point,” Heidi Bruschi recalls, “so watching Tedy be in pain and have a severe headache was not unusual. The

symptoms were different, but at that time we weren't aware of what the signs of a stroke looked like, especially for someone at such a young age."

Days later, physical therapist Anne McCarthy Jacobson was working at Spaulding Rehabilitation Hospital when she glanced at the news and saw Bruschi leaving Massachusetts General Hospital, where he'd gone through three days of testing and observation. Bruschi smiled and waved to the small crowd that had gathered outside. He didn't respond to questions.

Dr. McCarthy Jacobson, a long-time assistant professor of physical therapy at the Institute and a graduate of its doctoral program, didn't know that Bruschi was experiencing vision issues. But she noticed coordination issues by how he moved. Like everyone else, she hoped he'd be doing better soon and went about her life.

Days later, however, she received a surprising phone call: Would she be willing to evaluate Bruschi? That began a healthcare relationship—and a close friendship—that would lead to the Bruschis' transformational gift to the Institute 18 years later.

"I didn't think of him as Tedy Bruschi, the football player," McCarthy Jacobson recalls. "I thought of him as Tedy Bruschi, my patient and client, who had a stroke which was a devastating thing that happened to him."

Working with Bruschi was easy because the Patriots player was used to being coached and eager to learn about what he needed to do to recover. In no time, they developed a smooth rapport that continued during months of therapy. Bruschi steadily improved. He improved more than perhaps he could have imagined—so much that he started to think he might be able to go beyond living a normal life. And when he was ready to talk about possibly returning to playing football, the first people—the only people—he spoke to were his wife and his physical therapist.

"I didn't think of him as Tedy Bruschi, the football player. I thought of him as Tedy Bruschi, my patient and client, who had a stroke which was a devastating thing that happened to him."

— DR. ANNE MCCARTHY JACOBSON, ASSISTANT PROFESSOR OF PHYSICAL THERAPY



Tedy Bruschi and IHP assistant professor of physical therapy Anne McCarthy Jacobson, shown at a 2010 health expo, have created a strong professional and personal bond over the years.

"Getting that honest feedback from Anne was a huge part of me deciding to put my helmet back on and crash into other people again," Bruschi says.

Defying all odds and surprising both his teammates and his fans, he returned to the field in late October, eight months after his stroke, and played the rest of the year, receiving the league's Comeback Player of the Year award in the process. Remarkably, Bruschi would end up playing four more seasons, completing a 211-game career, and being voted into the New England Patriots' Hall of Fame.

His return to the gridiron, along with his later work as an NFL analyst for ESPN and as a consultant for the University of Arizona's football team, has made him a symbol for what's possible after a stroke.

While Bruschi was receiving world-class healthcare from McCarthy Jacobson and others at Spaulding, privacy was harder to come by—TV news trucks and reporters were constantly camped outside his house. Speculation flew that his stroke might have been caused by performance-enhancing drugs. The true cause was a hole in Bruschi's heart, a condition shared by an astonishing 25 to 30 percent of the population, according to the American Heart Association.

The public's fervent interest was annoying and sometimes infuriating. But it led to a decision whose ripple effect continues to this day.

"We decided to embrace the attention," Heidi Bruschi says. "That was part of the healing process."

Adds Tedy Bruschi, “I got to the point where I could say, ‘This is who I am. I’m a stroke survivor.’ Sometimes people talk to me and they won’t use the word ‘stroke.’ They act like it’s a bad word, but I go ahead and use it.”

Going public included working with the American Stroke Association to create Tedy’s Team, which supports runners who compete in road races around the country—including the Boston Marathon—to raise funds for the cause. The charity has taken in more than \$8 million to date while promoting awareness about stroke.

To educate the community, Tedy’s Team promotes the acronym **BE FAST**:

- Balance difficulties
- Eyesight changes
- Face drooping
- Arm weakness
- Speech difficulties
- Time to call 911

This quick assessment and action are essential for helping the 800,000 people in the United States who have strokes each year. While these are not the only signs of stroke, they are the most prominent signs that people should be aware of.

In 2019, Tedy’s Team launched the Comeback Assistance Program to help survivors, the same year Bruschi had a second, smaller stroke. This time, the Bruschis knew the symptoms and got medical help quickly. Bruschi also called McCarthy Jacobson to let her know he was okay; they’d kept in frequent touch over the years, and he’d known she would be worried.



One thing the Bruschis had always remembered was McCarthy Jacobson being on the Institute’s faculty. So when they talked about wanting to increase their efforts to assist stroke survivors, they reached out to the school to see if a partnership to advance rehabilitation could work.

“The original thought was that Tedy’s Team was going to fund the Aphasia Center,” President Paula Milone-Nuzzo says. “But when they found out about the physical therapy and occupational therapy centers, they came back to us and said, ‘How can we help you knit these clinical centers together in meaningful ways for stroke recovery?’”

The new center will build on and enhance the integrated rehabilitation work being done by the IHP’s Marjorie K. Ionta Physical Therapy Center, the Aphasia Center, and the Tabor/Connor Occupational Therapy Center.

Its goals will be to create a future model of stroke rehabilitation by fast-tracking evidence-based research into the care of stroke



Runners who have participated with Tedy’s Team have helped raise millions of dollars to support stroke awareness.

survivors; provide both innovative and compassionate care for patients; improve clinical education for IHP students; spark new interdisciplinary research; and engage the larger community in stroke care and prevention.

“This kind of interprofessional work is what we’re known for. It’s in our DNA,” Milone-Nuzzo explains. “And we’re already deeply engaged in the community. We’re in schools. We’re in nursing homes. We’re in the Kennedy Center [a nearby nonprofit that serves families]. As we move forward, we want to build a broad-based community of scholars from other institutions—from Mass General Brigham, from Harvard, from MIT—who will help us understand stroke recovery in broader and more effective terms.”

“We chose to partner with the IHP because we wanted to continue stroke care,” says Tedy Bruschi. “There’s always the part in rehabilitation where the insurance companies have their own little view and opinion of when it should end. But it’s a process that can last years, so to partner with the IHP is so special because it’s free. We are helping extend the rehabilitation process, which is going to help so many people.

“Compassionate care is a priority here,” he continues. “If you’ve chosen this profession and your life journey is to help people get better, the one thing you need to have is compassion. And that’s why it’s still close to us. All of the people who work here are so special because they have what is a big part of the center—compassion.”

“The Bruschis’ gift is transformational,” Dr. Reamer Bushardt, the IHP’s provost and vice president for academic affairs, says, “but his reputation, passion, endorsement, and support will help even more.”



IMPACT Practice Center director Rachel Pittmann (far left) and assistant professor of physical therapy Jane Baldwin (2nd from left) discuss with Tedy and Heidi Bruschi how stroke clients are assisted.

The Bruschis and the IHP hope this collaboration will inspire the public to learn more, especially since strokes are the fifth-leading cause of death in the United States, according to the American Stroke Association. The good news: An estimated 80 percent of strokes are preventable.

“If we can understand the common denominators in strokes and in people who have been really successful with their stroke rehabilitation, we can share this with clinicians and help them understand the value of intervention approaches,” Bushardt says. “But we won’t know the answers until patients and families share their experiences with us. We have to have a partnership with the community, which I think is great because that’s what Tedy’s Team does.”



The Center also will have a research component. As Dr. Nara Gavini, the IHP’s associate provost for research, explains, thousands of research papers are written on strokes each year, creating a traffic jam of knowledge. “Normally, only about 14 percent of the research that’s done reaches the clinic, and that process takes 17 years to get to patients,” he says. “Progress is extremely slow.”

While most stroke research historically has focused on the genetics and mechanics of strokes, the center plans to take a different approach. “We’ll be doing research that can be brought into the clinic more quickly,” Gavini notes. “We’re going to look at common data elements. We’re going to ask research questions such as, ‘How can we make sure that patients are self-motivated and can take care of themselves?’ We want to understand more about the role

of caregivers, like Heidi Bruschi, who play a major role in patients’ recovery.”

It’s widely understood that stroke rehabilitation cannot be solved by one discipline alone, so Gavini envisions collaborations among IHP faculty and staff in physical therapy, occupational therapy, nursing, and speech pathology. Research papers won’t be lost in the crowd or ignored; they’ll be shared with clinicians who can apply their findings with clients.



If there’s one word that encapsulates the Bruschis’ reasoning, it’s “team.” To prevent strokes, to help patients recover from them, to learn more, to make progress: It all takes a team. Which is exactly what the Bruschis discovered when they went public 18 years ago.

“We both come from athletic backgrounds in college,” says Heidi Bruschi, who was on the national championship softball team and played volleyball at the University of Arizona, where she and Tedy met. “We were both part of teams. That’s one of the reasons we started Tedy’s Team, because we wanted that experience of sharing with our runners. We were going to be a team.”

Tedy Bruschi adds, “Our motto at Tedy’s Team is ‘We survive, we run.’ Another motto could be, ‘You are not alone.’”

The Bruschis weren’t alone when Tedy received a second chance at life, and they’re counting on Tedy’s Team Center of Excellence in Stroke Recovery to provide stroke survivors the same opportunities.

As Heidi Bruschi says, “We can’t wait to get started and see where this partnership takes the field of stroke recovery.” ■

STORIES BY SEAN HENNESSEY

**DR. MARZIYE ESHGHI AND
DR. JORDAN GREEN**

New Research Establishes Rate of ALS Speech Decline

It's an unfortunate reality that some patients with amyotrophic lateral sclerosis (ALS) will lose their ability to speak—the only question is when. Now, thanks to research led by Dr. Marziye Eshghi and Dr. Jordan Green of the Speech and Feeding Disorders Lab, it is possible to estimate how quickly that may occur based on a patient's clinical and demographic characteristics.

Dr. Eshghi is the lead author of “Rate of Speech Decline in Individuals with Amyotrophic Lateral Sclerosis,” published in *Scientific Reports*, which provides the first look at the speed of ALS progression.

“Given the importance of speech in everybody's life, one of the first questions that people with ALS have and neurologists and speech pathologists have is: ‘How far away are we until the loss of speech?’” said Eshghi, an assistant professor of speech-language pathology. “We've never been able to provide an estimate, but now we have some understanding of that. It's really about providing appropriate counseling and helping some ALS patients who may need to seek solutions for communication such as the application of augmentative and alternative communication devices.”

The research looked at 166 ALS patients from the United States and Canada and utilized two data points from the same people, making this, according to



“It's really about providing appropriate counseling and helping some ALS patients who may need to seek solutions for communication such as the application of augmentative and alternative communication devices.”

– DR. MARZIYE ESHGHI

Eshghi, the largest longitudinal scale study on this topic.

Study participants read a list of computer-generated random sentences called a Sentence Intelligibility Test, and measures of speaking rate (number of words per minute) and intelligibility (the percentage of words that were understandable) were computed from their speech samples.

Researchers have long known that patients with bulbar-onset ALS will lose their functional speech earlier than those with spinal-onset ALS, but they had yet to quantify the rate of speech decline. In the paper, the researchers determined that while between 60% and 70% of individuals with bulbar-onset ALS will lose their functional speech about three

years after symptoms begin, the majority of individuals with spinal-onset ALS will retain their functional speech more than five years beyond the start of symptoms. The study also revealed that among various demographic and clinical factors (e.g., sex, age at disease onset, and site of onset), the part of the body first affected by ALS is the main influential factor in the rate of speech decline.

“Our findings provide valuable information about speech decline in ALS,” said Eshghi. “The research is not only helpful for patients and caregivers, but also for neurologists and speech-language pathologists who are involved in the clinical management of ALS and who are evaluating the functional changes in patients' speech performance.” ■

DR. TERESA KIMBERLEY

FDA-Approved Tech Offers Stroke Patients New Hope

Every hour, nearly 100 Americans experience a stroke, and for most, a long and difficult road to partial recovery will follow. Occupational, physical, and speech-language therapy can help, but a patient's rehabilitative progress often reaches a plateau.

Now, there's new hope, and Dr. Teresa Kimberley, director of the Brain Recovery Lab, has played a key role.

An FDA-approved, drug-free approach—a brain stimulation device connected to the vagus nerve that's paired with rehabilitation therapy—may improve hand and arm function by 200% to 300% above previous levels. This pairing helps the brain create or strengthen new neural pathways, such as building a bridge to bypass a damaged area.

This breakthrough in stroke therapy is happening thanks to the collaborative efforts of Mass General Brigham's research and clinical institutions.

Kimberley developed the rehabilitation protocol the FDA says is necessary to pair with the groundbreaking technology called the Vivistim Paired VNS System. The system employs vagus nerve stimulation (VNS) during rehabilitation therapy to improve upper extremity motor function. Research shows that a stroke survivor will only see significant progress if the rehabilitation and technology are used together.

"This is a watershed moment for rehabilitation science," said Kimberley. "This is the first time that brain stimulation combined with rehabilitation therapy for stroke is available for patients

beyond a research study. It has strong potential to improve hand function. It is very exciting."

The first step for this new therapy took place in late August when the first patient on the East Coast had the small Vivistim device placed around the vagus nerve in his neck, under the skin of his upper left chest area, during an outpatient procedure at Massachusetts General Hospital. The procedure was performed by Dr. Ziv Williams, a neurosurgeon at Mass General and faculty in the program in neuroscience at Harvard Medical School, under care directed by Dr.

David Lin, a neurologist who is faculty at the Center for Neurotechnology and Neurorecovery and director of the Mass General Neurorecovery Clinic.

The patient, 40-year-old David Sullivan of Concord, suffered a stroke in 2020, leaving him with aphasia and limited use of his left arm, hand, leg, and foot. Two years of physical therapy, occupational therapy, and speech therapy hadn't enabled him to do the daily activities he desired, so he jumped at the opportunity to begin paired VNS therapy.

"It's definitely exciting to be involved with this kind of cutting-edge technology," said Sullivan, a father of two young girls. "I've tried everything these past two years and have left no stone unturned. The fact this is so new makes me a little anxious, but I know I'm in good hands. Knowing the device and intense rehabilitation give me a good chance to regain more hand and arm movement is a wonderful thing."

"This is an exciting development in stroke rehabilitation," said Dr. Lin. "The fact that this new treatment pairs device-based neural stimulation with rehabilitation provides a new paradigm for neurologically based therapies in stroke recovery. As a clinician, I find it very rewarding to see a therapy that has been based on decades of fundamental neuroscience now be translated to help patients with stroke."

Sullivan is currently undergoing outpatient rehabilitation at Spaulding Rehabilitation Hospital.

When used in conjunction with in-clinic rehabilitation therapy, the Vivistim system can help increase neuroplasticity for survivors of ischemic stroke so that their brain relearns how to perform daily activities that were routine prior to their stroke.

Vivistim is manufactured by MicroTransponder, a global medical device company.

How It Works

While VNS has been an extensively researched treatment option for epilepsy and depression, this is its first application in rehabilitation therapy.

"When you stimulate the vagus nerve, the brain is firing more than it would on its own," explained Kimberley. "The VNS enhances neurotransmitter release to help create connections, or pathways, that are critical in getting the brain to perform a specific function, like picking up a pen. The VNS appears to give the brain a way to lay down these pathways permanently. If patients keep using these pathways, while reinforcing with therapy and home practice, these abilities will remain and get stronger."

The promise of increased functionality is based on a two-year clinical trial Kimberley and others on the Mass General Center for Neurotechnology and Neurorecovery (CNTR) team recently finished, the results of which were published in *The Lancet*. "The translation of novel research, from concept through clinical trials to clinical practice, is central to our mission at CNTR," said Lin.

The clinical studies have shown that after in-clinic therapy, the Vivistim therapy increases hand and arm function by two to three times as compared to rehabilitation therapy alone.

That improved movement is what Sullivan is banking on. Since losing



“To see the progress we’ve made, to see a patient who will soon enjoy the benefits of the technology and rehabilitation, makes it all worth it. This is going to change the lives of so many patients, and that’s what research is all about, isn’t it?” - DR. TERESA KIMBERLEY

partial functionality on his left side, the southpaw hasn’t been able to write, throw a ball with his children, ride a bike, golf, or play his guitar. He desperately wants those abilities back, along with the chance to go back to work as a software sales operations director.

“I’ve got some interests that motivate me, for sure,” said Sullivan. “I’m already doing OT, PT, and speech therapy anyway, but the promise of this new approach—the device combined with the rehabilitation—gives me hope.”

For Kimberley, years of effort have finally paid off. She researched VNS for a decade, had a long-standing scientific

consultation relationship with the company developing the technology, brought the trial to MGH, was the principal investigator running the trial, built the team to implement it, was senior author on the *Lancet* paper, and is now helping Mass General bring this as a clinical offering to its patients.

“I can’t tell you how many hours I have put into this through the years,” she said. “To see the progress we’ve made, to see a patient who will soon enjoy the benefits of the technology and rehabilitation, makes it all worth it. This is going to change the lives of so many patients, and that’s what research is all about, isn’t it?” ■

DR. STEPHEN WECHSLER

Link Between Cancer-Related Fatigue and Imbalance Discovered

Imbalance and risk of falling is a common side effect for breast cancer survivors. For years, it was presumed that peripheral neuropathy—nerve damage caused by chemotherapy—was the primary reason.

Now, new research led by Dr. Stephen Wechsler, a post-doctoral research fellow in the Cancer Rehabilitation (CaRe) Lab, points to another factor: fatigue.

The research, representing the first quantified association between imbalance and cancer-related fatigue, was recently published in *Rehabilitation Oncology*. Wechsler, a 2022 graduate of the PhD in Rehabilitation Sciences program, was the lead author.

“We know that survivors who are fatigued report more frequent falls, but we didn’t know to what extent cancer-related fatigue contributed to changes in balance after cancer treatment,” said Wechsler. “We didn’t know the contribution of fatigue toward imbalance relative to that of chemotherapy-induced peripheral neuropathy. Now we have a much better idea.”

Wechsler’s team tested 43 breast cancer survivors at the IHP’s Biomotion Capture Lab and had them perform functional tests to assess balance. Women with more severe cases of cancer-related fatigue demonstrated more front-to-back swaying when they were standing still. Cancer-related fatigue accounted for about 10% of the variance in postural sway, compared to 1% accounted for by chemotherapy-induced peripheral neuropathy.

Following the static standing balance test, the women, who on average were three and a half years removed from their last chemotherapy treatment, performed an exercise to tire their legs. Then they were asked to perform a sit-to-stand test, a key measure of physical functioning and a predictor of the risk of falling. Women with more fatigue changed their technique when they stood up, using a stabilization strategy in which they didn't lean forward to generate momentum as much as those with less fatigue. This strategy has also been observed among elderly fallers and is indicative of reduced balance. In this instance, tests revealed that cancer-related fatigue accounted for nearly 7% of the change in postural sway, more than double compared to chemotherapy-induced peripheral neuropathy.

Wechsler and his team say this finding could translate to survivors with cancer-related fatigue having problems performing fatiguing tasks in everyday life including walking long distances, using stairs, exercising, or performing yard work—all of which could increase the risk of someone losing their balance and falling.

“As clinicians, we're often only considering peripheral neuropathy as a primary risk factor for imbalance,” said Wechsler. “These numbers justify adding cancer-related fatigue as another factor. We need to consider multi-dimensional impacts of cancer-related fatigue, and that includes its impact on balance.”

Wechsler worked with an interprofessional team composed of Dr. Janet Kneiss, a former assistant professor of physical therapy and a 2014 Doctor of Physical Therapy graduate; Benjamin Adams, an assistant professor of physical therapy; and former School of Nursing professor Dr. Lisa Wood Magee.



“We know that survivors who are fatigued report more frequent falls, but we didn't know to what extent cancer-related fatigue contributed to changes in balance after cancer treatment. Now we have a much better idea.”

– DR. STEPHEN WECHSLER

Now that these first-of-their-kind findings put fatigue on the radar, Wechsler said, the next steps are determining how to treat imbalance related to cancer-related fatigue.

The researchers believe exercise could be a key piece toward improving patients' balance and reducing their chance of falling, writing that patients with cancer-related fatigue after treatment

“may benefit from balance-related education regarding safety and coping or compensatory strategies.”

“Fatigue is one of the most common side effects of cancer treatment and most survivors will experience it to some degree,” Wechsler said. “Now that we know it can impact balance, we need to be able to screen for that and intervene while they are recovering.” ■

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Annual Fundraiser Focuses on Work with Mass General to Bridge Healthcare Gap

BY JOHN SHAW



IHP Board Chair Dr. Jeanette Ives Erickson and MGH President Dr. David F.M. Brown discussed a wide range of topics, including strengthening the bond between the two institutions.

The effects of the COVID-19 pandemic continue to wreak havoc on the health-care industry. Stress, trauma, burnout, and patients' increased behavioral and health challenges have led to an exodus of healthcare workers that shows no signs of ending. But through interprofessional education and new programs focused on leadership, the MGH Institute continues to work on reversing this trend.

Those topics were front and center during "The IHP Today: Bridging the Health Care Gap," the school's annual fall fundraiser held in September on campus for the first time in three years. The event, which raised more than \$300,000 for student scholarships, was highlighted by a discussion between Dr. Jeanette Ives Erickson, chair of the Institute's Board of Trustees and chief nurse emerita at Massachusetts General Hospital, and Dr. David F.M. Brown, the hospital's president.

Ives Erickson and Brown, close colleagues who worked together for several years at Mass General, touched upon several topics during their wide-ranging conversation. It included discussing how the hospital is dealing with a shortage of healthcare workers—Brown said there's a nationwide nursing shortage of 30%, with other professions also experiencing serious declines—his growing relationship with IHP President Paula Milone-Nuzzo in strengthening the bond between the two institutions, the school's emphasis on providing care for local residents as part of students' education, and the school's commitment to justice, equity, diversity, and inclusion.

"MGH is incredibly proud of the IHP and really proud to be associated with it in such a close way," said Brown, who also noted the large number of students with clinical placements at the hospital and throughout the Mass General Brigham system, as well as the over

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700 alumni employed at Mass General. “This is an example of where an integrated health system can really help because there’s enormous clinical opportunity across two large agencies and three specialty hospitals and seven community hospitals all within reach. We are thrilled with the leadership and with the incredible talent that is produced here and rejuvenating our workforce. So working together to keep this school vibrant and successful is important.”

Brown praised the Institute’s recent emphasis on launching degree programs focused on healthcare leadership and administration, saying they will produce clinicians who can draw on their clinical experience and be well-positioned to become change agents in care settings as well as in the political spectrum.

Brenda Castillo Jiminian, a member of the Class of 2024 Master of Science in Nursing program, is a recipient of the Charles and Ann Sanders Interprofessional Scholarship. She gave a moving talk about her journey to the United States when she moved from the Dominican Republic to Hartford, CT at the age of 9. “Coming from a developing country, I grew up watching how the lack of healthcare, in addition to environmental factors, affected children the most,” she said.

“Being able to receive this scholarship means I have an open door and an opportunity to achieve my dreams and help decrease the gap in healthcare,” she told the audience, noting that after graduating she hopes to open her own practice in a disadvantaged community to provide accessible care.

“The mission of the IHP is educating our future healthcare professionals to instill in them the highest standards and to nurture their passion and compassion,” said Peter Brown, chair of the school’s President’s Council. “And hearing from Brenda, it sounds like we’re in very good hands.” ■

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First Health Professions Education PhD Graduates Make an Immediate Impact

BY JOHN SHAW

When the PhD in Health Professions Education degree was launched in 2019, the program's goals for healthcare professionals included helping them grow skills in developing and implementing educational research, designing programs, leading change and innovation, and contributing to interprofessional education—all with the ultimate goal of improving health outcomes.

Judging by the first four graduates—Dr. Maura Polansky, Dr. Cynthia Mosher, Dr. Brittany (Alex) Morton, and Dr. Dawn Wawersik—the results are exactly what department chair Roger Edwards had envisioned.

“They’re utilizing their doctoral research and training to make meaningful contributions to the field of health professions education and advancing their careers,” said Dr. Edwards.

For Polansky, her current position as a visiting adjunct associate professor in the Department of Medical Education at the University of Illinois, Chicago, is just the latest in a long line of positions at prestigious universities that include the George Washington University School of Medicine and Health Sciences, and the University of Texas MD Anderson Cancer Center. She also recently completed a six-month visiting scholar appointment at the Institute.

A physician assistant, Polansky had known of the Institute’s master’s degree in simulation-based education but had been unfamiliar with the school’s focus on interprofessional education, which aligns closely with her own teaching and research interests. “I have developed a more critical perspective on educational innovation and scholarship that I am now applying to my teaching, research, and service,” she said.



Dr. Dawn Wawersik, Dr. Maura Polansky, Dr. Cynthia Mosher, and Dr. Alex Morton are the first four graduates of the PhD in Health Professions Education program.

Mosher is the part-time assistant course director and simulation educator for the IHP’s health professions master’s program at the College of Medicine at Alfaisal University in Saudi Arabia. It’s a bit of a homecoming for Mosher, as she graduated from there in 2017 with a medical degree.

“Coming from a work environment that focuses on the physician, it was refreshing and eye-opening to work with and learn from a range of individuals with different professional backgrounds,” said Mosher, a nurse practitioner who also continues as an assistant director and simulation director at Alfaisal. “My IHP education has served as a platform for me to carry forward what I learned to put into practice in my work here in Saudi Arabia and in working with others from around the globe.”

Morton was already deeply entrenched in simulation-based health professions education as an educational specialist at Oxford Medical Simulation. It was while she and Mosher were completing their master’s in healthcare simulation at the

University of Alabama at Birmingham that she heard about the Institute’s doctoral program offering a simulation-based education track, which she said was the only one with this area of focus.

The head of the Nursing Simulation Program at Henry Ford College in Dearborn, MI, Wawersik described herself as someone who thinks outside the box. It is a trait she said is not always appreciated, but it was embraced by her classmates and faculty. “That’s my innovative and creative side that will help move my field forward through scholarly work and innovation,” said the nurse practitioner.

Wawersik also pointed to the program’s allowance of time to produce publication-quality research papers while completing projects throughout the program.

“This was very helpful to experience the painstaking process of publishing first-hand with experienced faculty guiding me,” she said, adding that she now helps other faculty at Henry Ford pursue their research.

Class Notes

Class Notes are compiled through a variety of sources, including information sent in by alumni, hospital publications within Mass General Brigham and beyond, and public information released by various organizations.

Communication Sciences and Disorders

Liz Crawford Brooks, MS-SLP '00, was a guest on the podcast “Learning Leadership Society,” along with IHP professor and SAiL Lab Director Dr. Tiffany Hogan. They discussed what post-pandemic research is showing about learning loss, the implementation of laws or policies around evidence-based instruction, and the importance of addressing learning loss.

Kate Radville, MS-SLP '08 (and current PhD in Rehabilitation Sciences student), received the 2022 Student Research Grant in Early Childhood Language Development from the ASHFoundation. Radville will use her \$2,000 grant for “The Effects of a Caregiver Training on Developmental Language Disorder.”

Julie Segovia, MS-SLP '16, is second author on “I Woke Up to Science: Teacher Narratives of Growth in a Culturally Sustaining Preschool STEM Program,” published in the *Journal of Applied Developmental Psychology*. Segovia is vice president of research, policy, and learning at HopeWell in Dedham, MA, and a doctoral candidate at Tufts University.

Jaime Tirrell Hassey, MS-SLP '17, a pediatric outpatient SLP at the MGH Chelsea Health Center, is the author of “Time Trials: Ethnographic Interviewing Within Healthcare Time Constraints,” published in the *ASHA Leader Live*.

Jenny Traver, MS-SLP '17, received the ASHA Distinguished Early Career Professional certificate for making an impact in the areas of leadership, volunteerism, and advocacy. She is owner of Cognitive SLP, a private practice in Arlington, MA.

Based on his master’s thesis and his work as a graduate research assistant at the MGH Voice Center, **Jeremy Wolfberg, MS-SLP '22**, presented “Rehabilitation Treatment Specification for Voice Therapy (RTSS-Voice): Direct Application to Everyday Clinical Care for Patients With Muscle Tension Dysphonia” at the 2022 Fall Voice Conference in San Francisco.

Dietetics

Jill Castle, MS-DI '95, is the host of “The Nourishing Child” podcast, which discusses how to approach child nutrition and provide growing bodies the nutrition they need.

Nursing

Virginia Capasso, NU-CAS '94, clinical nurse specialist in the Nursing and Patient Care Services Office of Quality and Safety at Mass General Hospital, was named co-chair of the Research Committee for the National Pressure Injury Advisory Panel.

Sarah Dolan Looby, MS-NU '00, clinical research investigator in Mass General’s Metabolism Unit and Yvonne L. Munn Center for Nursing Research, and an associate professor of medicine at Harvard Medical School, received the A. Clifford Barger Mentoring Award from Harvard’s Office for Diversity Inclusion and Community Partnership.

Ann Mooney, MS-NU '00, has been named vice president of clinical research for Panoramic Health’s new clinical research division that will focus on treatments for patients with kidney disease.

Rosemary Byrne, MS-NU '05, writes, “Hello! I am very excited to report that I am first author on a paper that was published last month, titled ‘Referral Patterns and Gaps in Financial Coverage Hinder Appropriate Treatment of Sudden Sensorineural Hearing Loss (SSNHL) With Hyperbaric Oxygen Therapy (HBOT)’ in the *Journal of Otolaryngology and Rhinology Research*. I have been the clinical director of a hyperbaric practice in Randolph, MA, for the past 14 years and am interested in advancing the use and awareness of HBOT to improve patient outcomes.”

Maile Moore, MS-NU '06, a pediatric NP in the department of neurology at Boston Children’s Hospital in Waltham, was interviewed in the *Fatherly* article “Morning Cartoons and the ‘False Sunrise’ Problem.”



Mimi O'Donnell, DNP '09, a former clinical assistant professor of nursing at the IHP from 2013-2019, passed away on August 23. She spent more than four decades working at Massachusetts General Hospital.

Diana Page, MS-NU '09, is the author of “4 Things You Think Will Cure Your Nurse Burnout (But They Won’t)” on Nurse.org. To combat burnout, she runs her own Resilient Nurse Roadmap Mentorship program on selfcarecatalyst.com.

Shelly Beckley, MS-NU '11, authored “Understanding the BRCA Gene Mutation and Options You Can Pursue” in the *Daily Herald* (Chicago). She is a radiation oncology nurse at the University of Colorado Anschutz Medical Campus, and clinical operations manager at startup Gabbi, which aims to eradicate late-stage breast cancer.

Francesca Villanueva, MS-NU '13, who works at the Brockton Neighborhood Health Center, was interviewed by Boston NPR station WBUR for “With ‘Fentanyl Everywhere’ and Black Deaths Soaring, Advocates in Brockton Test Ways to Save Lives” while she was visiting a homeless tent encampment

Tiffany Vassell, BSN '14, a labor and delivery nurse at Cambridge Health Alliance, received the 2022 Image of the Professional Nurse Award from the Massachusetts Nursing Association and was named a 2022 Ten Outstanding Young Leaders honoree by the Boston Chamber of Commerce. She also co-authored *Preparation for a Hospital Birth*.

Based on her experiences providing critical distinctive services to women struggling with severe issues of infertility and creating protocols with doctors over the last seven years, **Disha Mistri, MS-NU '15**, CEO of OM Fertility in San Diego, presented “How Midwives/NPs/PAs Can Bridge the Gap in Fertility Care” at the San Diego Birth Center.

Jessica LaFleche, MS-NU '17, director of health services at Bay Path University in Longmeadow, MA, was interviewed by Boston NPR station WBUR for “As College Students Return to Campus, They’ll Find New Abortion Care Options.”

Escel Stanghellini, DNP '18, was named the executive director of quality for Martha Vineyard Hospital.

Jessica Blasikiewicz, BSN '20, received a DAISY award from Massachusetts General Hospital.

Joshua Corpuz, MS-NU '22, and **Kathy Simmonds, MS-NU '93**, co-authored “Empowering the Nurse Practitioner with the Reproductive Justice Framework” in *Journal for Nurse Practitioners*.

Occupational Therapy

Baothy Huynh, OTD '19 (and current PhD in Rehabilitation Sciences student), received the Stroke Interdisciplinary Special Interest Group's Early Career Poster Award from the American Congress of Rehabilitation Medicine for her poster, "Sensitivity to Change and Responsiveness of the Fugl-Meyer Assessment: Upper Extremity in Individuals with Moderate to Severe Acute Stroke."

Anna Do, OTD '21, is the first author of "Examining the Relationship Between Race and Ethnicity and Depression in Older Adults with Low Vision" in *Topics for Geriatric Rehabilitation*. OT Professor Diane Smith is a co-author of the paper.

Ashley Juniper, OTD '21, is first author of "Self-Perceived ADL/IADL Function Is Influenced by Residual Neurological Impairment, Aphasia, and Anxiety" published in the *Canadian Journal of Occupational Therapy*.

Rehabilitation Science

Katherine Marks Hartigan, MS-SLP '15, PhD '21, is a co-author of "Ambulatory Monitoring of Subglottal Pressure Estimated from Neck-Surface Vibration in Individuals with and Without Voice Disorders" in *Applied Sciences Journal*. She also is the recipient of a 2022 Speech Science Grant from the ASH Foundation. She will research "Concurrent Validity of an Automated Acoustic Outcome Measure for Adductor Laryngeal Dystonia" with the \$10,000 award.

Kaila Stipancic, PhD '21, is the recipient of a 2022 New Investigators Research Grant from the ASH Foundation. She will research "Effects of Speaker and Listener Characteristics on the Minimally Detectable Change of Speech Intelligibility: Dysarthria Etiology, Speech Severity, and Listener Experience" with the \$10,000 award.

Laura Toles, PhD '21, is the recipient of a 2022 New Investigators Research Grant from the ASH Foundation. She will research "Defining Clinically Important Differences in Cepstral and Spectral Measures in Individuals with and Without Phonotrauma" with the \$10,000 award.

Stephen Wechsler, PhD '22, is the lead author on "Persistent Cancer-Related Fatigue After Breast Cancer Treatment Predicts Postural Sway and Post-Exertional Changes in Sit-to-Stand Strategy" in *Rehabilitation Oncology*.



A Voice for Good

Amy Maguire, MS-SLP '12, has developed and implemented a new way of providing speech pathology services for adult brain tumor patients who have surgery at Massachusetts General Hospital. This clinical pathway monitors and addresses cognitive challenges for brain tumor patients as they move through initial diagnosis and treatment across inpatient and outpatient settings.

"In order to return to society, return to work, and be happy, patients need to regain their reading and writing abilities," Maguire said.

She created Mass General's SLP brain tumor team, which includes two other IHP graduates, Nate Somes, MS-SLP '20 and Sarah Steele, MS-SLP '12. They work with clinicians from the Neurosurgery, Neuro-Oncology, Radiation Oncology, Neuropsychology, Neuroradiology, and Intra-operative Neuromonitoring departments.

This type of neurosurgery/neuro-oncology-focused care is rare, Maguire noted, since much of the speech-pathology literature is focused on stroke, TBI, and neurodegenerative cases.

Her work includes specialized assessment, education, and support of patients undergoing awake craniotomy with speech-language mapping.

As well as working full-time, Maguire is enrolled in the Institute's PhD in Rehabilitation Sciences program. Her goal is to expand and augment assessment and treatment for adults who have a variety of conditions impacting brain function and speech, reading, and writing.

Physical Therapy

Melinda Lee Adam, MS-PT '91, DPT '14, passed away on September 18. According to her obituary, the Gloucester, MA, resident had been director of rehabilitation and sports medicine for Beth Israel Lahey Health and had been instrumental in developing a physical therapy program at the Cape Ann (MA) YMCA.

Laura Plummer, DPT '03, chair of the IHP's Department of Physical Therapy, graduated from the APTA Fellowship in Higher Education Leadership program.

John Mark White, DPT '06, authored "Mechanobiologically Oriented Rehabilitation of a Complex, Comminuted, Displaced Acetabular Fracture in a 70-Year-Old Medically Complicated Patient: A Case Report" in *JOSPT Cases*, published by the *Journal of Orthopaedic & Sports Physical Therapy*.

Jason Kart, DPT '08, owner of Core Physical Therapy in Chicago, IL since 2012, has started the podcast "Around the Treatment Table w/ Jason the PT."

Gary Schindler, DPT '10, graduated from the APTA Fellowship in Higher Education Leadership program.

Jennifer Stone, DPT '11, is a co-author of "Healing Trauma with Interprofessional Collaboration and Trauma-Informed Perinatal Care: A Qualitative Case Study" in *Birth: Issues in Perinatal Care*.

Colleen Brough, DPT '14, director of Columbia RunLab at Columbia University's Vagelos College of Physicians and Surgeons, was interviewed in "How Glute Activation Drills Can Make Your Run Better" published by *Breathing Labs*.

Veronica Asence, DPT '17, who specializes in pelvic health at Lahey Hospital & Medical Center in Burlington, MA, was interviewed for "The Emotional Effects of OAB" published by WebMD.

Ashley Mahan, DPT '19, was promoted to director of pelvic health for Peak Physical Therapy & Sports Performance, based on the Massachusetts South Shore.

Kamaria Washington, DPT '21, opened Pelvic Noire Physical Therapy & Wellness, which was profiled in the *Detroit Free Press*. The center focuses on pregnancy and postpartum pelvic floor physical therapy.

We invite you to submit your news and photos to alumni@mghihp.edu, or at www.mghihp.edu/alumni.

Trials, Tribulations, and Triumphs

I eagerly open the email.

“We regret to inform you that...”

Another rejection. After dedicating two years to this research article, finding a journal to accept my work feels close to impossible. I share my qualms with my faculty advisors, who simply respond, “This is all part of the process. All you can do is try again.”

Revise, reword, resubmit. The process feels unnerving, an unending attempt to share my findings with the academic community. As I continue to perfect my work, I find myself writing and rewriting, dissecting comments from reviewers whose names I cannot put with a face. At first, I find myself agreeing with any and all critiques; however, with each rejected submission, I learn that I can only use this feedback as a guideline for finding my own voice as a researcher.

The imposter syndrome sinks in. *Who am I—a new OTD graduate—to publish my work as a first author? What experience do I even have? Why should my expertise be trusted?* I push the self-talk aside and persist, finding no use for negativity in my productivity. Instead, I shift my mindset and reflect. I re-step into the shoes of a budding student: earnest to learn and absorb all the trials, tribulations, and triumphs of becoming an occupational therapist. *Remember why you did this in the first place?* My mind finds its way back to its creative roots in a poem I wrote while at the IHP:

*Guiding, teaching, meeting
clients at disruption,
trusting me to help them
see, walk, dance, and
learn to live again.*

*We often take for granted
the independence in
washing our faces,*



*holding our spoon,
driving a car,
walking in sunshine,
embracing our loved ones...*

*And in isolation I see the need
to move forward with uncertainty.*

*Hands to heal,
Eyes to seek,
Feet to find,
A mind to mend,
A heart to feel—*

*I am being here for you.
I am belonging to a profession,
I am becoming an OT.*

In moments of self-doubt, I often return to personal writings and reminders of my calling to become an OT. They remind me that my identity, experience, and expertise are enough to make my voice heard, as long as I act with confidence, credibility, and compassion.

Revise, reword, resubmit. My mind wanders to the trajectory of my future career. Perhaps, after submitting this article, I will graduate and then advance my learning in clinical practice by completing a neuro-rehabilitation

fellowship. After gaining that experience, I foresee continuing research in a PhD program. All the while, I can continue my passions of writing, playing guitar, and spending quality time with loved ones.

Another email. My apprehension rises.

“Congratulations! We would like to accept your research article to our journal...”

Disbelief and excitement override my nervous system. My effort, uncertainty, and persistence have coalesced into this moment. Although trials may result in tribulations, triumph can be found with acceptance of the fear of failure.

Since receiving acceptance as a published first author in 2021, I have graduated from the IHP, completed a neuro-rehabilitation fellowship at Casa Colina Hospital in Pomona, California, and begun coursework in a PhD program in Rehabilitation and Movement Science at Azusa Pacific University. I also continue my passion for the arts by integrating music and dance therapy in intervention for clients with post-acute brain injury.

Reflecting on my time at the IHP, I recognize the correlations between my dreams as a student and the trajectory of my professional career. With support and feedback from my faculty and peers, both then and now, I realize that it truly takes a community to build an individual from a student to an occupational therapist. Through every misstep and mistake, I was always told to keep going with my end vision in sight. As I continue my career, I know that the fear of failure will never hold me back. It will only propel me forward.

Please email alumni@mghihp.edu if you are interested in sharing your first-person story with the IHP community.



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2023 Alumni Award Nominations Now Being Accepted!

Deadline: Friday, March 17, 2023

The Bette Ann Harris '83 Distinguished Alumni Award and the Emerging Leader Alumni Award recognize and honor the impact our alumni are making in the areas of healthcare, leadership, and education. To learn more about each of the awards and to submit a nomination, please visit

<https://www.mghihp.edu/alumni/awards-honors>

Pictured: Naseem Chatiwala DPT '07, MSPT '04, 2022 Bette Ann Harris Distinguished Alumni Award recipient, with President Paula Milone-Nuzzo





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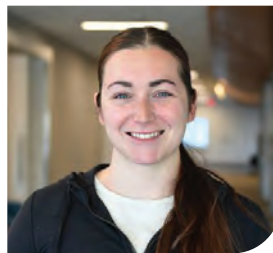
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Team IHP Is On the Run in 2023



MURPHY



COMBIAS

Cailin Murphy, MS-SLP '23, and Emily Combias, BSN '22, are running the 2023 Boston Marathon on April 17 for Team IHP.

Cailin is running in memory of her father, who battled brain cancer and aphasia post-surgery. She will be fundraising in support of the IHP's Aphasia Center. Emily is running to support a newly established endowed scholarship for BSN students.

More than \$150,00 has been raised since 2011 by students and alumni to support the IHP.

To help Cailin and Emily meet their fundraising goals, please visit:

<https://www.mghihp.edu/boston-marathon-runners>