In 1977, leaders at Massachusetts General Hospital saw a future that few others could. Dramatic change was coming, and it would involve a new type of health care professional.

MGH, a pioneer in medical and nursing education 100 years earlier, again made a bold choice. It would create a graduate school in health sciences, one of the first in the country founded by a teaching hospital.

More than three decades later, the MGH Institute of Health Professions remains a unique and innovative graduate school, integrating rigorous academics with clinical practice to prepare students for leadership roles in nursing, physical therapy, speech-language pathology, and radiologic technology.

We invite you, through these pages, to take a closer look at this vision, which continues to set the standard in health sciences.

We invite you inside the MGH Institute.
The Vision to Lead

MGH saw enormous change coming, driven in part by promising new technologies and the growing demand for skilled clinicians who could master them.

Back in the late 1970s, new words began to appear in the nation’s vocabulary, terms like “managed care” and “HMO.” Meanwhile, health care itself was undergoing profound change, as new technologies were propelling nurses to take their skills beyond their traditional bedside role.

These weren’t the only changes coming to health care.

Leadership at Massachusetts General Hospital, initiated by Dr. John Knowles and continued by Dr. Charles Sanders, recognized early on that a new type of health care professional would be needed, one steeped in science, prepared in evidence-based care, skilled in clinical techniques, knowledgeable about research, and possessing the tools and leadership skills to practice autonomously while also operating as a vital part of the larger health care team.

MGH made a bold decision. It would leverage its reputation as a renowned academic teaching hospital for Harvard Medical School to launch a graduate school for the health sciences, one of the first such institutions in the country.

More than three decades later, with outstanding programs in Nursing, Physical Therapy, Communication Sciences and Disorders, and Medical Imaging, the MGH Institute of Health Professions sits at the forefront of health professions education.

The quality is evident in the feedback from our numerous clinical education sites that our students are consistently better prepared than their peers from other programs. The range of jobs that students are able to land upon graduation is further evidence of their high level of preparation.

You can see it in alumni such as Sarah Ward CSD ’95, founder of the Center for Executive Function Skill Development and past president of the Brain Injury Association of Massachusetts. She is typical of so many of the 3,500 graduates who lead in their respective fields and use their skills to work with nonprofit organizations, start companies, or serve on presidential advisory boards and national commissions.

You can see in it the Institute’s newest leader, President Janis P. Bellack, PhD, RN, FAAN, who in just two years has moved the graduate school to a new level of prominence across Partners HealthCare, Eastern Massachusetts and beyond. Overseeing adoption of a new mission and vision statement, a campus expansion of nearly thirty percent, and reorganization of four academic programs into two new Schools are all visible indicators of changes that are helping the MGH Institute become a global leader in health professions education.
You can see it in its world-class faculty, which continues to distinguish itself through teaching innovation while contributing to outstanding research aimed at improving health care.

You can see it in the 700 clinical supervisors and preceptors, many of whom are Institute alumni, who guide students through frontline experiences at more than 600 acute and community health care settings.

You can see it in the expanded clinical simulation labs, which have received funding through the Massachusetts Department of Higher Education to support a grant project of Clinical Assistant Professor Patricia A. Reidy, MS FNP-BC, to allow students interprofessional practice opportunities to meld classroom theory with clinical technique in a simulated home care setting.

And you can see it in the newly renovated Speech, Language, and Literacy Center, which brings clinical assessment, innovative therapies, and cutting-edge technology right into the classroom while delivering much-needed services to children and adults in the Charlestown community.

Yet, true to its founding vision, the MGH Institute is not content to rest on its laurels. As advances in health care allow Americans to live increasingly longer, the demand for highly skilled health care professionals will need to increase exponentially to meet the demands of the largest demographic in the country’s history—the 76 million Baby Boomers who are on the cusp of retirement. And MGH Institute graduates will be on the front lines providing that care.

Of course, these challenges represent the very reason the MGH Institute was created more than three decades ago—to ensure that the next generation of health care leaders and skilled practitioners are ready to deliver high-quality care to those in need.

It is a vision whose time has come.
Administration

**Janis P. Bellack, PhD, RN, FAAN**  
President

Janis P. Bellack became President of the MGH Institute of Health Professions in September, 2007. As President, Dr. Bellack holds an academic appointment as the John Hilton Knowles Professor. Previously, she served for seven years as Vice President for Academic Affairs/Provost and Professor of Nursing and Health Sciences at Massachusetts College of Pharmacy and Health Sciences in Boston. Prior to that, she served as Associate Provost for Education and Professor of Nursing and Health Professions at the Medical University of South Carolina in Charleston.

Dr. Bellack is a senior consultant and member of the National Program Faculty for the Robert Wood Johnson Foundation (RWJF) Executive Nurse Fellows Program, and senior fellow at the University of California, San Francisco Center for the Health Professions.

She currently serves on the RWJF National Advisory Committee for a new program, Evaluating Innovations in Nursing Education, and the City of Boston’s Mayor’s Task Force on Improving Access to Primary Care.

Dr. Bellack is recognized for her work in curriculum development and program evaluation in nursing and the health professions, educational accreditation, interdisciplinary education, and health professions leadership and workforce development. She has received more than $7 million in external funding to support health professions education and workforce development and research, and has directed or co-directed a variety of federal and foundation grants. She has co-authored two editions of a nursing textbook, and has published numerous articles and book chapters in the professional literature. For the past 12 years, Dr. Bellack has served as associate editor of the peer-reviewed Journal of Nursing Education.

Dr. Bellack received her nursing diploma and later a bachelor’s degree in nursing from the University of Virginia, a master’s degree in pediatric nursing from the University of Florida, and a doctoral degree in educational policy studies from the University of Kentucky.

She is a Fellow of the American Academy of Nursing, and has been honored as Outstanding Alumnus of the University of Florida College of Nursing (1998), inducted into the Alumni Hall of Fame at the University of Kentucky (2002), and named the 2007 Distinguished Alumna of the Year by the University of Virginia School of Nursing.

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George E. Thibault, MD
Chairman of the Board

George E. Thibault, MD, who became Chair of the MGH Institute Board of Trustees after eight years as a board member, became the seventh president of the Josiah Macy, Jr. Foundation in January 2008.

After graduating summa cum laude from Georgetown University in 1965 and magna cum laude from Harvard Medical School in 1969, he completed his internship and residency at Massachusetts General Hospital in Medicine and fellowship in Cardiology. After training in Cardiology at the National Heart and Lung Institute in Bethesda, MD, and at Guys Hospital in London, he became Chief Resident in Medicine at MGH.

In 1977, he founded and became the first director of the Medical Practices Evaluation Unit, and was named director of the Medical ICU/CCU at the hospital. In 1978, he became the Director of the Training Program in Internal Medicine and Assistant Chief of the Department of Medicine at MGH.

Dr. Thibault is a Professor of Medicine at Harvard Medical School. He was chosen in 2001 as the first Director of The Academy at HMS, and in 2005 was named the first Daniel D. Federman Professor of Medicine and Medical Education at HMS. Earlier this year, President Barack Obama named him to a commission to nominate the next class of White House Fellows.

Dr. Thibault has been the recipient of numerous awards and honors from Georgetown (Ryan Prize in Philosophy, Alumni Prize, and Cohongaroton Speaker) and Harvard (Alpha Omega Alpha, Henry Asbury Christian Award and Society of Fellows).

He has been a visiting Scholar both at the Institute of Medicine and Harvard’s Kennedy School of Government, and a Visiting Professor of Medicine at many medical schools in the U.S. and abroad.
Innovation and Teaching

What distinguishes an MGH Institute education? It starts with innovation. From the beginning, the Institute has been a leader in developing cutting-edge academic programs to position it at the forefront of change.

With a shortage of nursing faculty forcing many nursing schools around the country to turn away qualified applicants, Massachusetts General Hospital Senior Vice President and Chief Nurse Jeanette Ives Erickson, RN, MS, FAAN, urged the MGH Institute to help address a nationwide shortage of Registered Nurses.

In less than two years, the 14-month Accelerated Bachelor of Science in Nursing degree was launched to meet a growing demand for baccalaureate-prepared nurses.

Likewise, the Doctor of Nursing Practice (DNP) program was created to educate master’s prepared nurses for leadership roles in the increasingly complex management of health care delivery. Launched in 2007, it was one of the first four such programs to be nationally accredited.

And just this fall, after recognizing a need for more advanced learning, the DNP for Nursing Executives (EDNP) was started for chief nursing officers, vice presidents, and other senior nurse leaders.

This comes on top of earlier programmatic innovations, such as the entry-level Doctor of Physical Therapy (DPT) program, one of the first in the country to offer a one-year clinical internship paid by an employer. Similarly, the Medical Imaging program is one of few in the country to offer a post-baccalaureate level education, and this year received an eight-year accreditation—the longest designation available.

This ability to look ahead has also helped the Institute’s reputation among peer institutions. The DPT is ranked 7th in the country—and first in New England—by U.S. News & World Report; ranked 24th is the Master of Science in Speech-Language Pathology, again first in the region; and the direct-entry Master of Science in Nursing is in the top 10% of such programs nationwide.
PROFILE

ELEANOR PUSEY-REID

Master Teacher

Delivering the inaugural address at the Accelerated Bachelor of Science in Nursing pinning ceremony last June, Clinical Assistant Professor Eleanor A. Pusey-Reid, RN, MS, MEd, CCRN, spoke to “The Power of Commitment”.

Born in Panama and educated in Mexico and the United States, Pusey-Reid served in a number of clinical settings after becoming a nurse, but knew all along her passion was teaching. She has taught in locations ranging from Central America to New York to California to Massachusetts, focusing on students from less advantaged backgrounds who often get overlooked in academic settings.

“My philosophy is to work with students and bring them to the level where they need to be,” she says. “I don’t buy into the theory that some kids can’t learn.”

Pusey-Reid’s passionate and supportive teaching style hasn’t changed since she joined the MGH Institute in 2008, but she has adapted it for the program’s students, most of whom are older and have decided to change to a new career in nursing.

“Undergraduate students don’t have the academic qualifications or the maturity like the students here,” she explains. “Sometimes, you had to beg them to study. Institute students understand discipline, so I can focus much more on advanced learning because they have to learn a lot in just 14 months.”

For Pusey-Reid, the Institute’s success is attributable in large part to its teaching philosophy, which stresses clinical mastery and evidence-based learning.

“The Institute encourages faculty to keep current in their clinical setting,” says Pusey-Reid, who maintains her own practice. “This enables faculty to bring the latest techniques and knowledge right into the classroom. That’s a powerful tool for teaching.”
While these innovative programs offer unmatched learning opportunities, it is the Institute’s personalized approach to education that sets us apart. From the moment students walk through our doors, faculty treat them as future colleagues.

It’s commonplace for students to work one-on-one with some of the top health care talent in the country, such as Professor Robert Hillman, PhD, CCC-SLP, whose pioneering work in speech therapy led to stunning breakthroughs in electrolarynx technology, including voice boxes controlled by a person’s own brainwaves.

Or Diane Feeney Mahoney, PhD, ARNP, BC, FGSA, FAAN, whose work in gerontechnology led to her recent induction as a Fellow into the American Academy of Nursing. The Jacques Mohr Professor in Geriatric Nursing, Dr. Mahoney is the only nurse principal investigator for the National Institute on Aging and the National Institute of Nursing Research’s “Resources for Enhancing Alzheimer’s Caregiver Health” project, the largest multi-site interventional study of Alzheimer’s family caregivers.

While the numerous faculty with national reputations enhance the Institute’s prestige, its reputation is cemented in the classroom—in large part because more than 65% of the full-time faculty continue to practice professionally, a much larger proportion than in most other schools. This extensive wealth of practical knowledge provides students with cutting edge knowledge and treatment based upon real-life experiences.

That’s not only innovation, it’s real world learning.
While the Institute can boast of numerous faculty with national reputations, it is in the classroom where its reputation is most renowned—in large part because more than 65% of the full-time faculty continue to practice professionally, a much larger proportion than in most other schools.
From Practice to Mastery

For decades, professional education in health care followed an apprenticeship model. Not so at the MGH Institute.

At the MGH Institute, from the start the emphasis has focused on the acquisition of cutting-edge knowledge and providing evidence-based care in a variety of clinical settings.

With Massachusetts General Hospital as its founder, the Institute has been able to offer its students clinical rotations at the very best sites. It starts with Partners HealthCare affiliates MGH, Brigham & Women’s Hospital, Spaulding Rehabilitation Hospital, and Newton-Wellesley Hospital, and extends to more than 600 other partnerships throughout New England and beyond, including the MGH Charlestown HealthCare Center, Partners Home Care, and the Veterans Health Administration.

Clinical practica for students begins soon after they begin classes—far sooner than at many other schools—allowing immediate application of what they are learning in the classroom. Working with the Institute’s impressive array of clinical partners offers students unparalleled opportunities to perfect their competencies while being exposed to a variety of specialties and diverse patient populations.
Penn currently balances a full course load with a part-time clinical placement job in the medical-surgical unit at Massachusetts General Hospital. Despite little time for anything other than school, he has managed to fit in working 12 hours a week at The New England Organ Bank.

His work at the organ bank is a daily reminder that compassion and empathy are as important skills for a nurse as diagnostic aptitude.

“I’m receiving an incredible foundation with my education here,” adds Penn, “and it really makes me want to become a nurse.”

For an assignment in his History of Nursing Ideas class, Penn picked up his guitar and wrote a tribute to his grandfather who passed away four years ago after battling Parkinson’s disease. Performing the song for a group of nursing alumnæ recently, a misty-eyed alumna approached Penn afterward, gave him a big hug and whispered, “Your song touched me. I lost my husband four years ago. Thank you.” Then she squeezed him a little harder.

“Bompa” by Ian Penn
It’s been three years since I last entered
In this dark, lonely room.
It screams of memories of you following away,
With your eyes closed so tightly you travel back in time,
Until the place that you know you once knew,
Slowly fades away.

When all has gone away and nothing’s left behind,
I will slip into forever,
And even though you may not be listening,
I’m still singing, I’m still singing for you.

It’s been three years since I said hello for the very last time,
Well I wish that I could take it back,
And save it for a rainy day.
In many instances, students don’t have to leave campus to sharpen their practice skills. The Institute recently doubled the size of its Speech, Language and Literacy Center, a state-of-the-art facility where first-year students in Communication Sciences and Disorders see children with speech and reading issues, while professors Marjorie Nicholas, PhD, CCC-SLP, and Eileen Hunsaker, MS, CCC-SLP, guide second-year students in the Aphasia Center with innovative approaches such as the popular Nintendo Wii interactive video game to help adult clients recovering from strokes regain their motor skills.

Innovation allows the Institute to develop more inter-professional experiences, as today’s health care professionals must know how to work effectively as a member of the total health care team.

Likewise, our Home Health Simulation Laboratory—the first of its kind in the region—offers opportunities for both nursing and physical therapy students to learn to care for patients in an environment experts predict will soon become much more common—our homes.

Such innovation allows the Institute to develop more inter-professional experiences, as today’s health care professionals must know how to work effectively as a member of the total health care team.

As new methods appear on the horizon, the Institute will be there to spearhead their development.

Profile

Ian Penn
Committed to Nursing

Advised to consider medical school while a freshman biology major at Gordon College, Ian Penn worked part time as an Emergency Medical Technician to prepare for an anticipated career in medicine.

During his stint as an EMT, Penn began to realize he needed a career in which he could have a more fulfilling impact with patients.

“I spent a lot of time with nurses,” Penn recalls, “and the more I saw how much time and energy they put into their patients, the more I considered that nursing was the career I wanted.”

But first there was a detour teaching marine and environmental science at a youth adventure camp on the West Coast, then an unfulfilling desk job at an engineering firm, before he finally decided to follow his initial instinct. Accepted into the MGH Institute’s 14-month Accelerated Bachelor of Science in Nursing program, where 18 percent of his classmates are men, he knew he made the correct choice the moment he began classes last May.

“The clinical knowledge and real world experience the faculty bring to the classroom is simply amazing,” he says, “and the clinical experiences here can’t be matched.”
LAURA LITTLE

An Emerging Leader

As a freshman at Boston College, Laura Little volunteered at the Franciscan Hospital’s Kennedy Day School, helping disabled students with their physical therapy exercises. She soon discovered they weren’t the only ones learning.

“I benefited just as much as they did,” recalls Little. “I was really struck by how much fun they had working really hard and by the progress they had made by the end of the year.”

By the time she completed her bachelor’s degree in Biology, she knew she wanted to become a physical therapist, a goal which led her to the MGH Institute.

“It’s a terrific program with outstanding faculty,” says Little, who earned her Doctor of Physical Therapy this year. “It’s a very supportive environment where students are encouraged to develop their skills and aim high.”

As a student, Little carved out time to be an active member of the Physical Therapy Club, a peer tutor, and a member of the American Physical Therapy Association of Massachusetts’s legislative committee.

While at the Institute, Little also applied for and won a year-long Albert Schweitzer Fellowship, which assists graduate students in the health professions to dedicate their time and service to helping others. She created and ran an innovative community health initiative called Feelin’ Fit at the Boys and Girls Club of Charlestown in which she worked with young women to promote health behavior changes.

It was no surprise when she received the 2009 Adams Fellow Award upon graduation, which recognizes leadership, service to the profession, and clinical scholarship.

“Dr. Little clearly fits the definition of an emerging leader within our profession,” says Physical Therapy Department Chair Leslie Portney, DPT, PhD, FAPTA, “and we look forward to many more accomplishments as she pursues her professional path.”
Grants

**Evaluation of Expanded Mental Health and Substance Abuse in Massachusetts, 2008-2009**
$16,000 from Massachusetts Department of Public Health School Based Health Center Program and Massachusetts Coalition of School Based Health Centers
Gail Gall, Project Evaluator

**Mother-Infant Intervention for the Prevention of Postpartum Depression and Associated Mother-Infant Relationship Dysfunction, 2009-2012**
$350,000 from Robert Wood Johnson Foundation Nurse Faculty Scholars Grant
Janice Goodman, Principal Investigator

**Efficacy of A Post-Rehabilitation Exercise Intervention in Patients After Hip Fracture, 2007-2012**
$332,000 from RO1 Grant with Health and Disability Research Institute, Boston University
Bette Ann Harris, Principal Investigator, MGH Institute subcontract

**Dissemination of Strong for Life: Train the Trainers, 2007-2010**
$25,000 from Illinois Department of Public Health
Bette Ann Harris, Exercise Trainer and Consultant

**Early Reading First, 2007-2010**
$472,721 from Chelsea Public Schools
Sandra D. Jones, Principal Investigator

**Feeding Decisions by African American and White Surrogate Decision Makers for Nursing Home Residents with Advanced Dementia, 2007-2009**
$120,000 from John A. Hartford Foundation’s Building Academic Geriatric Nursing Capacity Award Program
$5,000 from Frank Morgan Jones Grant
Ruth Palen Lopez, Principal Investigator

**Robotic Nursing Assistant to Hstar Technology company, 2009-2011**
$30,000 from J. Hu PI, U.S. Department of Defense Phase 2 Small Business Investigator Report
Diane Mahoney, Consultant

**Toward understanding Nurse Practitioner prescriptive decision making and response to evidence based prescribing studies, 2008-2009**
$35,000 as a substudy of current PERX project by Elissa Ladd
Diane Mahoney, Co-Investigator

**Nursing Initiative: Simulation Technology in Nursing Education and Practice, 2008-2009**
$48,000 from the Massachusetts Board of Higher Education in form of high fidelity simulation mannequin
Patricia A. Reidy, Daniel Kane, Denis Stratford, Co-Investigators

**Development of SimMan Nursing Scenarios for Home Care Simulation, 2008**
$9,825 from the Massachusetts Board of Higher Education
Patricia A. Reidy, Project Director; Daniel Kane, Deborah Navedo, Judith Ameson, Co-Investigators

**Family Participation in a Delirium Prevention Program for the Older Hospitalized Adult, 2008-2009**
$3,600 from Sigma Theta Tau International Nursing Society Small Research Grant
Deborah Rosenbloom-Brunton, Principal Investigator

**Feasibility of Family Participation in a Delirium Prevention Program for the Older Hospitalized Adult, 2008-2009**
$10,000 from MGH Institute of Health Professions Geriatric Faculty Research Fellowship Award
Deborah Rosenbloom-Brunton, Principal Investigator

**The Updated Ethics and Human Rights in Nursing Practice Survey, 2008-2009**
$10,000 from MGH Institute of Health Professions Faculty Research Fellowship Award
John Twomey, Principal Investigator
"We’re in the early stages of research, but the evidence suggests that supported standing has physiological benefits for these boys, allowing them to be upright more often, and to move with less risk of the falls and fractures once they lose the ability to walk on their own," says Townsend, who also is a clinical associate at Massachusetts General Hospital’s Pediatric Neuromuscular Clinic.

Her research is uncovering other benefits. “Standing allows for better eye contact and more opportunity to engage, which is quite important psychologically,” she notes, “which can improve quality of life for Muscular Dystrophy patients at home, at school and in their communities.

“Understanding how physical factors like supported standing interact with social and emotional health is a valuable part of providing quality care for these boys.”
ELISE TOWNSEND

Improving Children’s Lives

Assistant Professor Elise Townsend, DPT, PhD, PCS, is focused on identifying ways to improve the lives of children with physical disabilities.

“Intervening at an early age is important for maximizing children’s potential,” says Townsend, whose recent publications and presentations have focused on functional recovery in children with Spinal Cord Injury, and the effects of aquatic exercise in children with Cerebral Palsy.

Using a Faculty Research Fellowship Grant she received earlier this year, Townsend has embarked on a study of boys with Muscular Dystrophy.

“While gene therapy research offers promise for future decades, this funding allows me to focus on finding ways to improve boys’ health, function and quality of life until a cure is found,” says Townsend, who joined the faculty in 2005 and became a Pediatric Certified Specialist earlier this year.

Her new study is concentrating on the effects of a rehabilitation method called supported standing, in which boys use powered equipment to help them stand and move about.

DID YOU KNOW?

The first cohort of four physicians completed the Teaching and Learning Certificate with a concentration in health care simulation, a joint initiative with the Harvard Macy Institute and the Center for Medical Simulation in Cambridge.

Inquiries to the Accelerated Bachelor of Science in Nursing program jumped 184% in its second year and applications increased 70%. The number of students rose from 45 to 86 to meet the growing demand to educate new professionals.

Applications to the Doctor of Physical Therapy program have increased 58% since the 2006-07 academic year.

PROFILE

ELISE TOWNSEND

Improving Children’s Lives

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Her new study is concentrating on the effects of a rehabilitation method called supported standing, in which boys use powered equipment to help them stand and move about.
98% of the 2009 Master of Science in Speech-Language Pathology graduates passed the National Licensure Examination on their first attempt, far exceeding the national average of 80%.

2008-2009 Statistics
Averages for new students:
Age: 30
GRE Verbal: 620
GRE Quantitative: 520
GRE Written: 4
Undergrad GPA: 3.36

Additional Information:
Inquiries, total: 6,959
- Entry-Level: 5,413
- Post-Professional: 1,546

Applications: 1,406
- Entry-Level: 1,119
- Post-Professional: 287

Acceptances: 621
- Entry-Level: 465
- Post-Professional: 179

Enrollment: 356
- Entry-Level: 220
- Post-Professional: 134

The Graduate Program in Medical Imaging was reaccredited for the maximum eight year period by the Joint Review Committee on Education in Radiologic Technology.
Overview
In fiscal 2009, a significant downturn in United States and global economic conditions reduced resources that students typically rely on to fund an education and contributed to an Institute shortfall in new student enrollment. As a result, FY09 actual revenue growth and operating results fell short of budget plans.

The Institute took several actions during the year to address revenue shortfalls, including increasing enrollment, tightening controls over faculty and staffing levels, reducing costs and reallocating certain expense budgets to align its resources more effectively with strategic goals.

For 2009, the Institute reported a decrease in net assets from operating activities of $467,000, down from the increase of $301,000 for the previous year. Other changes from nonoperating activities decreased net assets by $4.6 million for 2009 compared to a decline of $564,000 for 2008.

Assets
Total assets decreased by $1.3 million to $62.5 million as of June 2009. The decline is primarily due to investment market value decreases as a result of global economic conditions throughout the year. Additions for new leased administrative space and academic building renovations increased property and equipment assets by $3.5 million.

Liabilities and Net Assets
Total liabilities increased by $3.8 million to $27.9 million as of June 2009. Deferred revenue grew by $1.1 million due to increases in summer term enrollment. Long-term obligations increased by $2.3 million due to a $3.0 million loan for the Institute’s new office space project and scheduled debt payments made during 2009.

Commitments and Contingencies
Net assets increased by $3.8 million to $27.9 million as of June 2009. Deferred revenue grew by $1.1 million due to increases in summer term enrollment. Long-term obligations increased by $2.3 million due to a $3.0 million loan for the Institute’s new office space project and scheduled debt payments made during 2009.

Complete financial statements are available upon request.
### Statement of Activities and Changes In Net Assets: Year Ended June 30, 2009
(with summarized financial information for the year ended June 30, 2008) (in thousands)

#### Operating Revenues

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<td>540</td>
<td></td>
<td>1,200</td>
<td>1,120</td>
</tr>
<tr>
<td>Investment income</td>
<td>432</td>
<td>118</td>
<td></td>
<td>550</td>
<td>807</td>
</tr>
<tr>
<td>Gains used for operations</td>
<td>630</td>
<td>596</td>
<td></td>
<td>1,228</td>
<td>930</td>
</tr>
<tr>
<td>Rental income</td>
<td>85</td>
<td></td>
<td></td>
<td>85</td>
<td>125</td>
</tr>
<tr>
<td>Other revenue</td>
<td>868</td>
<td></td>
<td></td>
<td>868</td>
<td>390</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>1,367</td>
<td>(1,367)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total operating revenues</strong></td>
<td><strong>21,757</strong></td>
<td></td>
<td></td>
<td><strong>21,644</strong></td>
<td><strong>19,718</strong></td>
</tr>
</tbody>
</table>

#### Operating Expenses

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instruction</td>
<td>11,504</td>
<td></td>
<td></td>
<td>11,504</td>
<td>10,673</td>
</tr>
<tr>
<td>Institutional support</td>
<td>4,598</td>
<td></td>
<td></td>
<td>4,598</td>
<td>3,324</td>
</tr>
<tr>
<td>Research</td>
<td>231</td>
<td></td>
<td></td>
<td>231</td>
<td>433</td>
</tr>
<tr>
<td>Student services</td>
<td>1,515</td>
<td></td>
<td></td>
<td>1,515</td>
<td>1,230</td>
</tr>
<tr>
<td>Academic support</td>
<td>3,969</td>
<td></td>
<td></td>
<td>3,969</td>
<td>3,415</td>
</tr>
<tr>
<td>Facilities</td>
<td>294</td>
<td></td>
<td></td>
<td>294</td>
<td>342</td>
</tr>
<tr>
<td><strong>Total operating expenses</strong></td>
<td><strong>22,111</strong></td>
<td></td>
<td></td>
<td><strong>22,111</strong></td>
<td><strong>19,417</strong></td>
</tr>
</tbody>
</table>

**Increase (decrease) in net assets from operating activities**

|                          | 354          | 113                    |                        | (467)  | 301    |

#### Nonoperating Activities

<table>
<thead>
<tr>
<th></th>
<th>310</th>
<th>3,992</th>
<th>55</th>
<th>4,357</th>
<th>1,492</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions used for operations</td>
<td>(660)</td>
<td>(540)</td>
<td></td>
<td>(1,200)</td>
<td>(1,120)</td>
</tr>
<tr>
<td>Net realized gains (losses) on investments</td>
<td>(570)</td>
<td>(352)</td>
<td></td>
<td>(922)</td>
<td>1,002</td>
</tr>
<tr>
<td>Gains used for operations</td>
<td>(630)</td>
<td>(596)</td>
<td></td>
<td>(1,226)</td>
<td>(930)</td>
</tr>
<tr>
<td>Change in net unrealized appreciation on investments</td>
<td>(3,366)</td>
<td>(1,684)</td>
<td></td>
<td>(5,050)</td>
<td>(680)</td>
</tr>
<tr>
<td>Change in interest in the net assets of The Massachusetts General Hospital</td>
<td>-</td>
<td>(43)</td>
<td></td>
<td>(43)</td>
<td>(59)</td>
</tr>
<tr>
<td>Change in investments held in trust</td>
<td>-</td>
<td>(990)</td>
<td>(961)</td>
<td>29</td>
<td>269</td>
</tr>
<tr>
<td>Other</td>
<td>456</td>
<td></td>
<td></td>
<td>456</td>
<td>-</td>
</tr>
<tr>
<td><strong>Increase (decrease) in net assets from nonoperating activities</strong></td>
<td><strong>(4,460)</strong></td>
<td><strong>806</strong></td>
<td><strong>(935)</strong></td>
<td><strong>(4,589)</strong></td>
<td><strong>(564)</strong></td>
</tr>
</tbody>
</table>

**Increase (decrease) in net assets**

|                          | 4,814        | 693                    | (935)                  | 5,056  | (263)  |

**Net assets, beginning of year**

|                          | 21,436       | 7,941                  | 10,284                 | 39,661 | 39,924 |

**Net Assets, end of year**

|                          | $16,622      | $8,634                 | $9,349                 | $34,605 | $39,661 |

### Revenues

Total operating revenues increased by $1.9 million (9.8%) to $21.6 million for 2009. The growth was driven by net tuition and fee revenue increases of $1.2 million due to enrollment growth in the Accelerated BSN and the Physical Therapy programs, growth in other revenue of $478,000 from Medicare reimbursements and other miscellaneous sources and gains used for operations of $296,000.

### Expenses

Total operating expenses increased by $2.7 million (13.9%) to $22.1 million for 2009. Higher costs for salaries and fringe benefits were the primary driver of growth in expenses for instruction, institutional support, student services and academic support as the Institute hired additional faculty to support enrollment growth in its academic programs and strengthened organization structures to advance its fundraising, research and other academic strategic goals. The Institute entered into leases for additional office and administrative space and incurred new rents of $416,000 for this space.
Creating Leaders

The MGH Institute is squarely in the center of two of the nation’s most important issues.

Ask Americans their top three domestic concerns and you’ll hear it clearly: health care, education, and the economy—which puts the MGH Institute squarely in the center of two of the nation’s most important issues.

Health care delivery continues to grow more complex as new research and techniques are introduced almost daily, making it clear that health care will need greater talent and more effective leadership in the years ahead.

The MGH Institute embraces that challenge. Its mission has always been to educate the next generation of health care leaders who can make sound judgments, inspire other practitioners, influence delivery outcomes, and undertake vital new research. Leaders such as:

• 2009 Distinguished Alumni Award recipient Deborah Givens, PT, PhD, DPT, OCS ’90, ’05, a nationally recognized expert on spinal biomechanics and associate professor at Ohio State University, whose work is offering hope to those with spinal injuries;

• Associate Professor Pamela Hook, PhD, who as president of the Massachusetts Branch of the International Dyslexia Association, is leading the charge to eliminate the stigma of a learning condition that might otherwise prevent millions of children from reaching their full potential; and

• Clinical Assistant Professor Sheila Davis, DNP, RN, APN-BC, FAAN ’97, ’08, recently named a Carl Wilkens Fellow who is working with the internationally renowned Genocide Intervention Network; Dr. Davis is the sole voice representing 12 million nurses worldwide.
Our commitment to leadership also includes looking beyond Boston and past America’s borders to determine where and how we can assist others in their quest to improve health and health care. Professor Inge Corless, PhD, RN, FAAN, has travelled extensively to South Africa to help combat that continent’s AIDS epidemic, including being named an honorary research Fellow at the University of KwaZulu-Natal, and taking students for a first-hand look at the health problems of that country’s people.

And Associate Professor Charles Haynes, EdD, CCC-SLP, developed an informational video for the Center for Child Evaluation and Teaching in Kuwait to help parents and teachers in the Gulf Region overcome a prevalent cultural misconception that children’s learning difficulties are a barrier to their future success.

Given the ongoing debate over the future of health care in the United States, one thing is certain: health care will surely be a focal point for millions of Americans in the foreseeable future. Students, faculty, and graduates of the MGH Institute will continue to be at the center of that debate, helping to influence and shape health care for millions.
Building The Future

As so many of the MGH Institute’s alumni can attest, their graduate education was a defining experience that prepared them for their professional futures, providing them with the skills, knowledge, experience, and relationships to achieve their professional dreams.

An extraordinary education requires resources, and thus, an ever greater focus on philanthropy to maintain and further enhance our position as a premier graduate school in the health professions.

Historically, the Institute has relied primarily upon tuition and fees to meet expenses and to fund growth and innovation. Tuition and fees currently cover 83% of the cost of an Institute degree, with philanthropy, endowment income, and grant funding providing the remainder that funds innovation, scholarship and new initiatives.

Despite the pressures of the recent economic downturn and cognizant of a modest dip in enrollment in fiscal 2008, the Board of Trustees voted an increase in the 2009 financial aid budget while holding tuition to only a 3% increase for the current year—the smallest rise in tuition in 10 years.

To ensure broad access to careers in the health professions, a steady rise in philanthropic support is necessary to ensure the Institute can continue to attract a talented and diverse pool of students.

Fundraising activities, such as the annual Scholarship Gala, raise much-needed funds that have allowed the Institute to increase scholarship awards by more than 30 percent over the past two years.

Recently, the Trustees reaffirmed a commitment to increasing need-based financial aid to ensure a larger number of top students can enroll at the Institute regardless of their financial limitations. Thirty-three percent of scholarships are now need-based. These scholarships are especially important in attracting a more diverse student population who will contribute to improving health care for an increasingly diverse society.

Make no mistake: we’re still far from our goal of ensuring financial aid to every qualified student who demonstrates genuine need.

While we can boast that 69% of our students receive some financial aid, graduates on average are still burdened with nearly $90,000 in cumulative student loan debt—an amount that threatens to make graduate school unavailable to the many who are needed to meet health care workforce needs in the coming decade.

Whether from alumni and donors supporting the Annual Fund, corporate and major donor support of the annual Scholarship Gala, or bequests and planned gifts, the future growth and direction of the MGH Institute depends on our ability to attract increased financial support from an extended community of supporters.

Our graduates receive an outstanding education that allows them to transform their lives professionally and personally. From our alumni, employees, and a growing circle of friends, we are confident that we’ll realize the support needed to continue to provide an exceptional education to future health professionals and, in turn, shape the future of health care for all.
“Relationship building is critical to new moms and babies, and it’s a vital step to ensuring a healthy start for both,” she says. “Supporting the development of the mother-baby relationship is incredibly important.”

Goodman, who maintains her own clinical practice in psychotherapy and psycho-pharmacology, is enthusiastic about how her research, clinical work, and teaching inform and enrich each other.

“Being a clinician makes me a better teacher and it is where my research questions come from,” she says. “Being a teacher keeps me on my toes to be up on the latest in the field. Being a researcher, I stress the importance of both creating and using evidenced-based care to my students.”

In both her teaching and her clinical work, Goodman emphasizes listening, empathy, and understanding. “With an illness like postpartum depression, those skills are sometimes the most important tools we have.”
Targeting Postpartum Depression

A new mother, just days after giving birth, is depressed and disinterested in her newborn. Waves of guilt follow, which only deepens the depression, and a dangerous spiral begins. It’s called postpartum depression, and its debilitating symptoms affect 15 percent of new mothers.

Associate Professor Janice Goodman, PhD, RN, has been studying the illness for years, and was recently named a 2009 recipient of a competitive $350,000 Nurse Faculty Scholars grant from the Robert Wood Johnson Foundation.

“Postpartum depression is very real and serious, and it can be devastating not only for the mother, but for her baby as well,” says Goodman.

“Current treatments for postpartum depression treat mothers in isolation and don’t address the mother-infant relationship, which can lead to child development problems for years to come.”

With the grant, Goodman will study the effects of an integrated treatment for first-time mothers and their infants, which she believes will significantly reduce the risk of postpartum depression and its consequences.

Endowed Funds

Unrestricted
M. George S. Selfridge Fund* Est. 1971 by estate of Annie F. Selfridge $2,140,942
James E. and Mary E. Davis Fund* Est. 1978 by James E. and Mary E. Davis $1,065,374

Institute of Health Professions Endowment Fund Est. 1982 with MGH board-designated funds $5,047,794

Herbert Farnsworth Trust Fund Est. 1983 by estate of Herbert Farnsworth $200,424
Putnam Family Fund Est. 1983 by George Putnam $189,842
Ruth Sleeper Endowment Fund Est. 1993 by gifts in memory of Ruth Sleeper $36,210

Building Endowment Fund Est. 2007 with initial gift from Sumner W. Brown $185,770

General Scholarships
John Hilton Knowles Fellowship Fund Est. 1979 by the Rockefeller Foundation, Edith L. Dabney and the family of John Hilton Knowles, and gifts in memory of John Hilton Knowles $1,912,454

Lucretia Brigham Scholarship Fund* Est. 1982 by Irene M. Newton $11,382

Amelia Peabody Scholarship Fund Est. 1986 by Amelia Peabody Charitable Fund $1,010,079
Sibylla Orth Young Memorial Scholarship Fund* Est. 1987 by estate of Sibylla O. Young $470,336

Starr Foundation Scholarship Fund Est. 1997 by the Starr Foundation $140,077
President’s Scholarship Fund Est. 1999 by gifts in honor of President Ann W. Caldwell $219,469

Morris F. Darling Scholarship Fund Est. 2001 by Nelson J. Darling, Jr. $160,859

Nancy T. Watts Fellowship for Interdisciplinary Studies Est. 2005 with gifts in honor of Dr. Nancy T. Watts $159,210

Lucy A. Burr Scholarship Est. 2006 by Lucy A. Burr $447,266

Connors Family Scholarship Est. 2007 by John M. Connors III and Larisa Connors $179,325

Communication Sciences and Disorders Scholarships
McElwee-Souretis Award Fund Est. 1997 by Matina S. Horner, PhD $111,414

Nursing Scholarships
MGH School of Nursing Graduate Nurse Scholarship Fund* Est. 1984 by estate of Annabella McCrae $7,075

MGH School of Nursing Scholarship Fund* Est. 1959 by gifts in memory of Jessie Stewart $296,237

William C. and Jessie B. Cox Scholarship Fund in Nursing* Est. 1962 by William C. and Jessie B. Cox $731,836

Nancy M. Fraser Memorial Fund* Est. 1963 by Norman S. Fraser $19,467

Olive Lightboll Hunter Scholarship Fund* Est. 1979 by estate of Arnold H. Hunter $26,831

Elizabeth Fundus Scholarship Fund Est. 1980 by estate of Elizabeth B. Fundus $338,096

Virginia Delaware Zahka Nursing Scholarship Fund Est. 1991 by Sumner and Emeline Brown, SON ’59 $396,824

Mary Clapham Endowed Nursing Fund Est. 1995 by Mary D. Clapham $473,071

The Mabel Coffin and Albert Coffin, Jr. Fund Est. 2000 by estate of Margaret A. Coffin $76,803

Christine Bridges Nursing Scholarship Est. 2005 by gifts in memory of Dr. Christine Bridges $55,867

Anson M. and Debra Beard Nursing Scholarship Est. 2006 by Anson M. Beard, Jr. and Debra Beard $194,404

Physical Therapy Scholarships
Adams Scholarship Fund Est. 1986 by Barbara Adams $322,046

Professorships

Henry Knox Sherrill Chair in Ethics Est. 1987 by gifts in memory of Henry Sherrill $224,877
Amelia Peabody Professorship in Nursing Research
Est. 1989 by Amelia Peabody Charitable Fund
$5,242,854

Geriatric Research
Geriatric Educational Endowment Fund
Est. 1988 by an anonymous donor
$254,003

Nursing Education
Training School for Nurses Fund*
Est. 1897 by originators of the Training School for Nurses
$258,661

Training School for Nurses Endowment*
Est. 1924 by the MGH Nurses’ Alumnae Association
$2,670,603

Wetherill Award Fund*
Est. 1936 by E. Stanley Abbot, MD, in memory of Marion Wetherill Abbot and her mother
$12,718

Betty Dumaine Fund*
Est. 1940 by Elizabeth Dumaine, SON ’26
$1,930,352

Delores DeBartolo Lectureship Fund
Est. 1983 by MGH School of Nursing, Class of ’58, March section
$7,667

Library Endowment Fund*
Est. 1983 by MGH Nurses’ Alumnae Association with proceeds from A Centennial Review
$35,982

Jacques Mohr Fund for Research, Curriculum Development or Student Financial Aid in Geriatric Nursing
Est. 1996 by the estate of Jacques Mohr
$253,252

Nursing Prize
Rebecca Colvin Memorial Prize
Est. 1995 by George and Regina Herzlinger
$18,068

Judith A. Fong Nursing Faculty Prize
Est. 2006 by Judith A. Fong, SON ’68, and Richard Bressler
$101,208

Physical Therapy Education
Arthur Antonopoulos Endowment Fund
Est. 1993 by Matina S. Horner, PhD
$44,925

Special Projects in Physical Therapy
Marjorie K. Ionta Fund
Est. 1983 by gifts in honor of Marjorie K. Ionta
$82,756

Current Use Funds
General
Community Project Fund
Est. 2008 and supported by gifts in honor of Professor Karen A. Wolf

Loan
Emergency Loan Fund
Est. 1992 by the Darling Family

Nursing
Stephanie Macaluso Memorial Fund
Est. 1999 and supported by gifts from the Nursing Class of 1988

Jacques Mohr Professorship in Geriatric Nursing Fund
Est. 1997 and supported by gifts from the Jacques Mohr Charitable Trust

Nursing Program Fund
Est. 1956 and supported by gifts from the C. Margaret Browne Trust

Physical Therapy
Nancy Schonheinz Fund
Est. 2001 with gifts in memory of Nancy Schonheinz, PT ’96

Nicholas Mellor Robbins Fund in Physical Therapy
Est. 2006 by Lucy and Peter Robbins and supported by gifts from family and friends

Prizes
Harriet Towle Excellence in Clinical Nursing Practice
Est. 1989 by the nursing faculty, renamed in 2006 in memory of Harriet Towle, a 1910 graduate of the MGH School of Nursing

Mary Mankin Prize
Est. 1992 by Honorary Trustee and Professor Henry J. Mankin and his wife Carole in memory of Dr. Mankin’s mother

Josephine Mangio Keaveney Memorial Nursing Prize
Est. 2003 by Madeline M. Keaveney to honor her mother, Mrs. Josephine E. Keaveney, a 1940 graduate of the MGH School of Nursing

Scholarships
Charles Ely Trust Scholarship Fund
Est. 1985 and supported by gifts from the Charles C. Ely Educational Fund

Melvin Scholarship Fund
Est. 1990 and supported by gifts from the James C. Melvin Trust

Judith A. Fong Nursing Scholarship Fund
Est. 1996 by Judith A. Fong, SON ’68, and Richard Bressler

Mary Hammond Taylor Scholarship Fund
Est. 1999 by Mr. and Mrs. William O. Taylor and supported by gifts from the James R. Hammond 1995 Charitable Trust

Henry Francis Barrows Scholarship Fund
Est. 2003 and supported by gifts from the Fanny B. Reed Trust

*Funds marked with an asterisk are held by Massachusetts General Hospital, with income distributions designated by board vote to benefit the MGH Institute; these assets are not included in the “interest in the net assets of MGH” as recognized under FASB No. 136.
Institute Receives Its Largest Gift

The MGH Institute received a gift of real estate from Richard Bressler and Judith A. Fong, SON ’68, an Institute trustee. Ms. Fong, who graduated from the Institute’s predecessor institution, the Massachusetts General Hospital School of Nursing, is a strong advocate for promoting educational opportunities, especially for women. In 1996 she established and funded the Judith A. Fong Nursing Scholarship to support Institute nursing students who demonstrate clinical excellence in their studies.

“Whether acquired formally or informally, education can level the playing field for even the most disadvantaged individuals,” says Ms. Fong. “Education is a catalyst for change.”

“Richard and Judith have been steadfast champions of the MGH Institute over the years and we are deeply grateful for this supreme vote of confidence in supporting our mission to prepare the very best health care practitioners,” says board of trustees chair George E. Thibault, PhD.

In announcing the gift to faculty and students, President Janis P. Bellack noted the real estate gift is twice the size of the largest gift previously made to the MGH Institute by any individual or foundation. “This remarkable act of philanthropy will help position us for future growth,” says Dr. Bellack.
This list reflects charitable contributions, including pledge payments, received during the fiscal year ending June 30, 2009.

Event tickets are credited less the Fair Market Value of goods and services received by the donor, as defined by the IRS. The MGH Institute makes every effort to verify the accuracy of the donor listings. If you believe a mistake has been made in your listing, please accept our apologies and contact the Office of Institutional Advancement at (617) 726-3141.

**Friend ($100 - $299)**

Jason J. Adour  
Betsy J. Agrimanakis  
Melissa H. Agrimanakis  
Stacey Pappas Albren, CSD '93  
Patrick Alexis, CSD '03  
Dr. Linda C. Andrish and Dr. Russell W. Hereford  
Dr. Jane S. Baldwin  
Janine L. Barron  
Dr. Margaret W. Beal  
Neeta D. Beepath  
Dr. Marianne Beninato, PT '02  
Elena S. Bizounok, NS '04  
Nadine S. Braunstein, DI '84  
Richard Breed  
Jacqueline C. Broekhuysen, NS '95  
William C. Burke, Jr. Insurance Agency  
Janet Callahan, PT '00  
Susan Chambers, CSD '99  
Jessica W. Cheung  
James Clyde  
Dr. Stephen N. Collier  
Sean M. Collins  
Joan W. Corbett, SON '57  
Dr. Inge B. Corless  
Jennifer Cortright  
Constance M. Dahlin, NS '91, '98  
Christopher and Kelli Denn  
Joshua D. Dion, NS '02  
William and Arden Dore  
Dr. Laura R. Dskocil, PT '08  
Joanne and Scott Duggan  
Andrew Dwyer, NS '00, CI '00  
East Coast Associates  
Dr. Amy L. Elrod, PT '00  
Dr. Shawna R. Foley, PT '08  
Jennifer Francese, CSD '05  
Gail B. Gall, NS '97  
Dr. Roya Ghazinouri, PT '99, '06  
Anna Lowe Giger, SON '47  
Dr. Melanie A. Gillar, PT '04  
Victoria J. Gold, SON '65  
Dr. Lisa Griggs, PT '99, '03  
Elaine Au-Yeung Gruber, CSD '02  
Erin M. Hallett  
James and Ellen Harris  
Dr. Charles W. Haynes  
Esther W. Henning, SON '47  
Caroline M. Hewitt, NS '99  
Ingrid and Jonathan Hodgès  
Dr. Thomas Matt Hornsby, PT '04  
Marcia Gold Horowitz, NS '85  
Amber Hosey  
J. Alexander Hoyt, NS '96  
Susan Hull, SON '58  
Joan M. Hunt, NS '97  
Karen C. Ingwerson, NS '86  
James R. Kasinger  
Barbara J. Kaslow, SON '55  
Dr. Aimee B. Klein, PT '02  
Dr. Mary S. Knab, PT '02  
Dr. Catherine S. Lane, PT '04  
Ji Lee, NS '00  
Ching-Chun Lin, PT '04  
Doranne L. Long, PT '88  
Dr. Patricia Lussier-Duyunstee  
Eleanor Lynch, SON '51  
Dr. Diane F. and Mr. Edward J. Mahoney  
Eric R. Marshall  
Dr. Douglas J. Mattson, PT '07  
Lesley A. Maxwell  
Maureen McKay, NS '99  
Dr. Theresa H. Michel, PT '02  
Mary D. Miller, NS '97  
Steven Miller  
Meaghan D. Minzy  
Lincoln and Mary Lou Morison  
Jessica Morrissey  
Karen E. Murtagh, NS '93  
Dr. Deborah D. Navedo  
Dr. Lee Nelson, PT '84, '02  
Dr. Marjorie L. Nicholas  
Dr. Matthew Nippins, PT '05  
Dr. Madeline O'Donnell, NS '94, '09  
Cierra Parker  
Catherine Pirri  
Helene M. Quinn, NS '88  
Mr. and Mrs. Cameron Read  
Patricia Reidy  
Michelle R. Rines, NS '88  
Dr. James Ruetenik, PT '97, '04  
Marcelo S. Sampang, NS '07  
Dr. Richard P. Santeusanio  
Coreen and George Scharfe  
Elizabeth Schneider  
Peter Shepard  
Dr. and Mrs. John M. Siliski  
Katherine R. Sloan  
Dr. Kenneth N. Stevens  
Susan Stich, PT '99  
Dorothy A. Sullivan, NS '86  
Sandra L. Sumner  
Lynda and Peter Surdam  
Kingsley L. Taft and Gillien S. Todd  
Laura Taylor  
Megan Tepper  
Dr. Nancy M. Terres  
Katherine S. Trice  
Esther Tsang  
Althea Wagman-Bolster, CSD '96  
Judy and Steven Wales  
Robert B. Wall, NS '05  
Dr. Michael D. Weber, PT '94, '02  
Pauline A. Wilder, NS '89  
Dr. Heather Wright, PT '04  
Dr. James Zachazewski, PT '03 and  
Mrs. Miriam McKendall  
Dr. Cynthia C. Zadai, PT '02

**Matching Gift Companies**

Josiah Macy, Jr. Foundation  
The Prudential Foundation
Ruth Farrisey Society

The Ruth M. Farrisey, SON ’38 Legacy Society has been established to honor and recognize those who have made a provision for the MGH Institute through a bequest, trust, insurance or retirement policy, or other estate-planning vehicle.

These extraordinary gifts, in any amount, are indicative of the donor’s most important values and provide critical funding for students, faculty, research, and special initiatives.

Benefits to joining the Farrisey Society include listing as a member in publications and on the society’s recognition plaque (members may choose to be listed anonymously if they wish); and invitations to special events hosted on campus.

Miss Farrisey led a distinguished career as a clinician; senior administrator at Massachusetts General Hospital and its Neighborhood Health Centers; advocate for health care access for all; and as a faculty member of the MGH School of Nursing, the Institute’s predecessor institution, and a faculty member at the Institute.

She was known as a visionary advocate for the advanced practice nursing role and a strong leader in the development of collaborative nursing and medical practice. When she passed away in 2007, Ruth M. Farrisey made a generous gift to the MGH Institute through a bequest.

Charter Members
Anonymous
Barbara F. Adams
Sumner W. Brown
C. Margaret Browne
Mr. and Mrs. Francis H. "Hooks" Burr
Ruth M. Farrisey, SON ’38
Judith A. Fong, SON ’68
Victoria Joel Gold, SON ’65
Dr. Bette Ann Harris, PT ’83
Dr. Julian F. Haynes
Dr. Madeline M. Keaveney
Eleanor Lynch, SON ’51
Mr. and Mrs. William O. Taylor
Dr. Nancy T. Watts

Individuals who notify the MGH Institute by June 30, 2010, of inclusion in a bequest or planned giving vehicles will become a Charter Member of the Society.

Contact Kris Anne Hormann, Associate Director of Development, at (617) 643-3928 or khormann@mghihp.edu.
PROFILE

CHRISTINA KANG

Finding Her Voice

Christina Kang dreamed of a career as an opera singer. It’s a tough industry to crack, and even harder to make a decent living.

But she followed her muse and spent more than a decade performing in Los Angeles and Europe while teaching voice, and eventually earned a master’s degree in Vocal Performance from the University of Connecticut.

Kang embraced her musical career, but it was only after she suffered from vocal strain and went through speech therapy that she heard a new calling, one that would allow her to pursue her passion in a completely new way.

“Opera singing involves a very specialized type of voice knowledge, and what I discovered is that many people don’t use their voice and their breathing to speak properly,” explains Kang, a first-year student in the Department of Communication Sciences and Disorders. “In my case, the way I spoke was damaging the way I sang, which was serious enough that I needed therapy. It really opened my eyes. The ability to use my voice training in a different setting is very satisfying.”

The MGH Institute has been a tremendous educational experience for Kang, with the speech-language pathology curriculum broadening her knowledge far beyond voice and singing.

“Learning to work with people with a wide range of communication disorders has been very beneficial,” she says. “I’m being very well prepared for success.”

Besides voice, Kang is also interested in working with aphasia patients who have lost their ability to speak due to stroke. “Spiritually, I find something very uplifting that despite a terrible trauma, we humans still strive to find our voice.”
Boston Turns Out for Scholarship Gala

More than 350 people packed the Grand Ballroom at Boston’s Fairmont Copley Plaza Hotel on October 29 for the third annual Scholarship Gala.

Begun in 2007 to raise scholarship funds for MGH Institute students, the gala generated more than $300,000, pushing the total amount raised for scholarships in 2009 to more than $825,000.

“To achieve this level of support in the current economy is very impressive,” said President Janis P. Bellack. “It’s a strong indication that people value the education we are providing to help alleviate the shortage of health care professionals in nursing and across the health sciences.”

Three $25,000 Diamond Sponsors—CVS MinuteClinic, Massachusetts General Hospital, and Dr. Charles and Mrs. Ann Sanders—each underwrote one scholarship for a currently enrolled student.

Trustee Ari Buchler, senior vice president at Phase Forward, and Dr. Sanders’ daughter, Trish Joyce, co-chaired the gala. Honorary Co-chairs for the evening were Dr. and Mrs. Sanders, and Dr. Julian Haynes. Dr. Sanders oversaw the establishment of the MGH Institute in 1977 while serving as general director of Massachusetts General Hospital; Dr. Haynes was the Institute’s first provost.

The evening’s program included remarks by three featured alumni who exemplified the evening’s theme, “Unlocking the Potential to Transform Care.”

Legendary ad executive and philanthropist Jack Connors, chairman of the board of trustees at Partners HealthCare, was the master of ceremonies for the third consecutive year. The Connors family established a $500,000 scholarship fund at the 2007 Scholarship Gala.
When a family member first suggested to Marty Lamoureux he should consider returning to school to become a radiologic technologist, taking x-rays didn’t immediately come to mind. “My initial reaction was that I wanted to sell them, not work with them,” said the first-year student in the MGH Institute’s Medical Imaging program.

It was his previous successful life in sales—first with AT&T, and more recently selling medical equipment such as defibrillators and cardiac monitors with Royal Philips Electronics—that prompted his initial response. It was his work as a part-time firefighter and EMT near his New Hampshire home that sold him on pursuing a career in health care. “I’ve never been a ‘sit behind the desk’ guy, so being able to blend my interests at the Institute was perfect,” said Lamoureux, this year’s Charles & Ann Sanders Family Scholar. “I love the technology side of health care, and I’ve been helping people as a firefighter for a few years. It’s a good fit.”

Studying at the Institute gives him access to a hands-on education in some of the busiest hospitals in the country. “I like action,” said the former college hockey player. “Being in city hospitals, I get to see a large volume of patients where I can learn as much as I can.”

When Lamoureux discovered the Medical Imaging program’s small class size, plus the fact he would be getting 20 percent more clinical experience than offered at other programs, he was sold. “I had nine kids in my senior class in high school, so I really liked the idea of getting to know the faculty and them getting to know me,” he said. “And the more time I get working with this technology, the better I’ll be.”
Faculty and staff worked diligently over the spring and summer to put two technology enhancements in place in time for the start of the academic year.

First, the administration decided to migrate from the school’s proprietary online course-ware—known as IWare—and selected a well-regarded commercial product for academia, Desire2Learn, to replace IWare in time for the start of classes in September.

Eighty percent of online courses were offered via the new learning platform this fall; the remaining twenty percent will be converted to Desire2Learn by the start of the spring semester in January 2010.

Meanwhile, with the Admissions office fielding fewer requests for printed and mailed application materials—prospective applicants increasingly expect to conduct their graduate school search entirely online—the Institute’s existing Web site was showing its age. Working with Boston-based Interactive Factory, the MGH Institute Web site received a complete makeover this summer.

Drawing on focus groups and interviews with a variety of campus stakeholders, as well as a competitive analysis of competitor schools’ Web sites, a completely new navigational structure was developed to provide a more intuitive way of organizing information online.

The Web site redesign also unveiled an update to the MGH Institute’s official logo. Just as the Web site redesign aimed to give online visitors a visually bolder aesthetic that more accurately captured the student experience and the personality of the campus, the new logo was designed to convey a more academic, less corporate, look.