Earning my Doctor of Nursing Practice degree from MGH Institute of Health Professions gave me a better understanding of how to implement new evidence-based practices that need to happen at the bedside every day.

— Lisa Colombo ’09, DNP, MHA, RN
Chief Nursing Officer,
Lahey Hospital and Medical Center
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President Janis P. Bellack

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Trustee Chair George E. Thibault

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Welcome to this inaugural issue of *MGH Institute of Health Professions Magazine*.

This new publication, which replaces the Graduate newsletter that has been produced for the past 15 years, is an opportunity to showcase the MGH Institute’s advances, and inform our alumni and friends about the exciting and innovative happenings on our campus and beyond.

When I arrived at the Institute in 2007, the student population hovered around 800 and the campus physical footprint consisted solely of the Catherine Filene Shouse Building, where all classrooms, labs, offices, and gathering spaces were located.

Today, the Institute is a dramatically different place. Over the past several years, we have worked collectively and collaboratively with our trustees, faculty, and staff to:

- Launch a number of new programs: Doctor of Nursing Practice, Accelerated Bachelor of Science in Nursing, Master of Science in Health Professions Education, PhD in Rehabilitation Sciences, Doctor of Occupational Therapy, and our newest program, Master of Physician Assistant Studies, which began this May.

- Grow the student population to more than 1,400.

- Enhance the diversity of the student body by 84 percent, thus improving the diversity of the health care workforce.

- Double the number of faculty and staff.

- Expand from one to six buildings in and adjacent to the Charlestown Navy Yard, more than doubling space to nearly 140,000 square feet. Another 9,000 square feet in a seventh building—to house a new Library and Study Commons—will be added this spring.

- Recruit a cadre of funded research faculty and build state-of-the-art facilities to support their research endeavors.

- Grow eightfold, to more than $4 million this year, external grant funding to support research and special academic initiatives.

- Increase sixfold, to nearly $5 million, the amount of scholarship support awarded to students to help defray their educational costs and fulfill their dreams of becoming health care professionals.

- Strengthen our connections with clinical partners in the Partners HealthCare System, of which the Institute is the organization’s only degree-granting affiliate.

- Expand the Institute’s historic emphasis on interprofessional education by redesigning a set of core learning experiences that bring students from our practice-based programs together to learn from, with, and about each other and prepare them to collaborate as members of the health care team.

- Achieve recognition as a “Great College to Work For” by the *Chronicle of Higher Education* for five consecutive years—including being the only school in Boston to be named to its 2014 Honor Roll.

We are proud that we have been educating tomorrow’s health care leaders since our founding in 1977 by a group of MGH leaders and visionaries, and can now count more than 5,900 graduates who are making a difference in the lives of so many. Our sustained commitment to and focus on this special mission has helped make MGH Institute of Health Professions one of the premier health professions schools in the country.

We will continue our commitment to remain in the forefront of health professions education and health care research as we look to our future.

I hope you enjoy reading this first issue, and welcome your comments and ideas for future stories and issues.
George E. Thibault, MD, has been the Chair of the MGH Institute of Health Professions Board of Trustees since 2005, and a member of the board since 1997. He currently is President of the Josiah Macy Jr. Foundation in New York City, an organization dedicated to improving the education of health professionals.

Dr. Thibault held leadership roles in many aspects of undergraduate and graduate medical education at Harvard Medical School and its affiliated hospitals during his career. He also served as Vice President of Clinical Affairs at Partners HealthCare System, Director of the Academy at Harvard Medical School, Chief Medical Officer at Brigham and Women’s Hospital (BWH), and Chief of Medicine at the Harvard-affiliated Brockton/West Roxbury VA Hospital. He was Associate Chief of Medicine and Director of the Internal Medical Residency Program at Massachusetts General Hospital, where he also served as Director of the Medical ICU and was the Founding Director of the Medical Practice Evaluation Unit.

The recipient of numerous awards and honors, Dr. Thibault is a member of the Institute of Medicine of the National Academy of Sciences, and serves on the President’s White House Fellows Commission.

**FIVE QUESTIONS**

**George E. Thibault**

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**1 MGH Institute: You have been a physician your whole career. What led you to become involved in a health professions graduate school?**

**George Thibault:** Throughout my career, I’ve been aware as a physician of the tremendous importance of all the other health professions. Although at that time we didn’t have any formal interprofessional education in medicine, I knew that as both a practicing physician and a teacher of other physicians that we can’t adequately take care of our patients, nor can we adequately teach the next generation, without the input and the insights from the other health professions with whom we work.

I was aware of the MGH Institute because of my years at Massachusetts General Hospital. I had taught cardio-pulmonary resuscitation at the school back when it was in the Ruth Sleeper Hall at MGH. At the time I was asked to join the board, Partners had just been formed. I was Chief Medical Officer at BWH, and it was important that the Institute had a broad reach across the system. I was also interested in learning more about what went on at a graduate school of health professions. So I thought it was a great opportunity for me to become part of an organization that I already knew but wanted to learn more about.

**2 MGH Institute: Do you see the Institute’s role within Partners changing?**

**GT:** I think Partners hospitals are becoming more aware of the school as a great resource. Members of the Institute leadership and faculty are increasingly being asked to serve on committees and to give advice about issues in health professions education that are broadly applicable across the system.

Having the MGH Institute within Partners provides a different way to think about patient care and education than might take place in a stand-alone hospital or stand-alone integrated health care system. The Institute is an important strategic planning resource as Partners continues to think about the important link between patient care and education.

It’s also important to consider the future of health professions education. We don’t think of it just in terms of silos—physician education here, nurse education here, physical therapy education here—but we approach it more broadly about what we should be doing across and among all the health professions.

We’ve always had people from Partners who come to the Institute to advance their careers, take courses, and teach our students. Our graduates often find employment within Partners, and although we know the school will never be the principal source of health professionals for the whole system, within Partners the connections and synergies are very important to our core.

I think the Institute has done a lot to increase its presence and connections in Partners but undoubtedly I think it can do more.
MGH Institute: During your ten years as board chair, what are some of your proudest accomplishments?

GT: The Institute has really matured into a true institution of higher learning that is considered one of the country’s leading health professions educational institutions. I am tremendously proud of how it has managed that growth and that transformation. It is hard for any institution to double its size, to create and grow several new programs, to change its organizational structure and still continue to have the supportive, nurturing environment needed for students and faculty. But the Institute has accomplished this.

And look what we’ve done with research. We have added a very substantial research initiative to the campus in just the past three years. I think it was because of the maturation, growth and financial stability of the Institute that the board was able to say okay, let’s take that on. But all of this growth and change has not sacrificed the quality of education or sacrificed its spirit. The school continues to be outstanding because it is innovative, creative, and truly interprofessional.

MGH Institute: You mention the importance of people. Can you talk about that a little more?

GT: When you really come down to it, what makes an institution special is its people. And I think the Institute has become great and will stay great because of its people. The leadership team, faculty, and staff really believe in the school’s mission—and that isn’t true in all organizations. And the trustees are a wonderful, committed group of leaders who are always thinking about the future of the Institute. So it’s the ability to attract and retain the best people to be a part of the school that is the greatest assurance of our continued success.

You know, with all of the problems facing health care today, I still believe there’s never been a better time to be a health professional. The need for personal care and attention is greater than ever, and the opportunity to apply the technology to relieve suffering and to treat disease is needed more than ever. So the Institute is providing extraordinary career opportunities for people to lead very fulfilling lives in the health professions. And that’s one of the reasons why it is such a special institution.

MGH Institute: What challenges does the MGH Institute face in the coming years?

GT: I think the challenges will be a combination of managing growth, continuing to think strategically, and further improving its financial stability. The health care environment is changing and we need to be looking ahead to what the future needs of health care systems are going to be, so that we design our educational programs to meet those needs. We will be called upon to make necessary changes both in the content of our programs and how they’re delivered and also perhaps in which professions are represented, so that we prepare the right health professionals for the future. The Institute has a history of changing to respond to changing societal needs, and I anticipate it will continue to do so.

“I still believe there’s never been a better time to be a health professional. The need for personal care and attention is greater than ever. The Institute is providing extraordinary career opportunities for people to lead very fulfilling lives in the health professions.”
**Student Study Space to Expand On Campus**

Students will have double the amount of space for on-campus studying when the MGH Institute expands into a seventh building this spring.

The new Library and Study Commons is located on the entire top floor of Building 38, just behind the building that houses the Office of Student Affairs and one street away from the Catherine Filene Shouse main academic building on 1st Avenue. It has 9,000 square feet where students can study and learn in an interprofessional environment. It will feature quiet study areas with tables and comfortable chairs, interactive pods for student teams to collaborate, and a meditation and reflection room.

This new space will also include the community health library book collection, anatomical representations such as model hearts, and other educational materials that cannot be accessed electronically. Institute librarians will be on hand as well to help students access the electronic collection of the Treadwell Library at Massachusetts General Hospital.

“It’s not a student center, but an area that’s student-centered,” says Director of Library and Instructional Design Jessica Bell, who was instrumental in the planning process. “With the Institute’s increased emphasis on interprofessional team-based and hands-on learning, this space will encourage and support those types of peer-to-peer interactions. It will meet many of our students’ needs.”

Over the past nine years, the Institute has expanded from one to seven buildings in and adjacent to the Navy Yard, and doubled enrollment to more than 1,400 full- and part-time students.

While much of this expansion has focused on adding classrooms and offices to house growing numbers of faculty and staff, the need for more student space had become pressing, according to Chief Information and Facilities Officer Denis Stratford.

“It’s been the top issue raised by students in various surveys, so as the school has experienced growth we’ve been working on identifying the right location to address this need,” says Stratford.

And with students increasing their use of multiple electronic devices—often simultaneously—the Commons will include access to the school’s Wi-Fi network and numerous recharging stations.

“The Library and Study Commons provides an important space and resources that will enhance the quality of the student experience, and help assure our students have the resources they need to be successful in their chosen programs,” said President Janis P Bellack. "I’m thrilled we’ve been able to acquire, equip, and staff such a high-quality facility to support our students.”

“With the Institute’s increased emphasis on interprofessional team-based and hands-on learning, the Library and Study Commons will encourage and support those types of peer-to-peer interactions.”
Students, Faculty Weather “Snowmageddon”

First, Flimpy was a 34-year-old male who had a sore throat. Then, he became a 29-year-old pregnant woman with irritated eyes.

Who’s this Flimpy, you might ask? It’s a Muppet that School of Nursing Assistant Professor Jason Lucey used as a patient stand-in to engage his students in impromptu online classes he held in February during the several blizzards that dumped more than nine feet of snow on the region and wreaked havoc on the Institute’s class schedule.

“I figured it would be a fun way using Flimpy to present the details of the cases while engaging the students,” said Rachel Gates ’16, an RN who is pursuing her Master of Science in Nursing degree. “Most importantly, it resulted in an educational lesson about what is appropriate in a SOAP [subjective, objective, assessment, and plan] note and how to write one successfully.”

Other faculty used Google Hangout and Adobe Connect to hold live classes, rescheduled others, shared video of previous lectures, and recorded new talks. They also held additional meetings with students once everyone returned to campus—because losing several days of instruction was not an option.

And best of all, the traditional student mid-semester break in March was able to proceed as scheduled.

DPT Reaccredited for 10 Years

The Commission on Accreditation in Physical Therapy Education (CAPTE) reaccredited the entry-level Doctor of Physical Therapy program for 10 years through 2024, the longest period the national organization will bestow upon a physical therapy program.

The letter informing the DPT program of CAPTE’s action notes, “The program is meeting its mission as evidenced by data that confirm graduates are well prepared for clinical practice and reflect the values and mission of the [Institute] and program. Graduates are reported to be strong, evidence-based generalist practitioners and are well respected in the community.”

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Representatives from CAPTE spent three days visiting the campus last June, speaking with faculty, staff, students, and members of the clinical community. The visit followed an extensive self-study report the department submitted as part of the reaccreditation process.

“We are extremely gratified by the outcome of our reaccreditation process,” says Department of Physical Therapy Chair Pamela Levangie. “It is an affirmation of the excellence of our faculty, our support staff, and our clinical partners who work together to prepare graduates who can provide optimal physical therapy care to their patients every day.”
Jen Leonardo remembers looking forward to getting up at 5:00 a.m. on Saturday mornings to go out for runs with her father.

“He was a big runner his whole life, and he was an early riser, so that’s when we would go,” says Leonardo, who graduated in May with a Bachelor of Science in Nursing degree. “It was a thing the two of us did, and it was great.”

Tragically, those early morning runs did not last. Her father, James Leonardo, passed away in 2009, just weeks after receiving his transitional Doctor of Physical Therapy degree from the MGH Institute.

But several years later, it gave her the drive to run the 2015 Boston Marathon as part of the four-person Team IHP.

“My Dad was a passionate man who lived his life to serve and help others. His dedication, compassion, and perseverance have served as a beacon for me,” says Jen, who finished the 26.2-mile course in 4:31:20. “I ran for him, for the Institute, and for all those who have a desire to make a difference in the world.”

Leonardo ran cross country and track at Austin Preparatory School in Reading, MA, mostly 5K and five-mile races, so tackling her first marathon was a challenge. Then there was trying to train with several feet of snow on the ground this winter, all the while juggling classes and studying, going to her clinical rotation at Brigham and Women’s Hospital, and working as a nursing assistant at Spaulding Rehabilitation Hospital in the Navy Yard. Training with the Massachusetts General Hospital team, as well as a group called Sole Sisters in her hometown of Wilmington, MA, was a big help.

She remembers seeing her father graduate, back when the Institute held Commencement at the Harvard Medical School quad. She graduated with a criminal justice degree from the University of Massachusetts Lowell shortly thereafter. So when her father’s metastatic bone cancer became worse, she took time off to care for him during his last weeks.

Impressed by the nursing care he received, Jen became an emergency medical technician, a job she held for four years. It was during this time that she realized the advocacy and direct-care aspects of nursing would better suit her skills and interests.

“My Dad was a passionate man who lived his life to serve and help others. His dedication, compassion, and perseverance have served as a beacon for me.”

“Running and nursing are tightly connected for me, as you can never fully master either one,” she says. “They require a process that will never fully be satisfied or finished as there is always more to learn, and always more to gain.”

“My Dad was a passionate man who lived his life to serve and help others. His dedication, compassion, and perseverance have served as a beacon for me.”
Even before new students arrived on campus for the start of the 2014–2015 academic year, they were given a reading assignment that would provide a unifying theme and permeate their first year of studies.

The book *Still Alice*, by Lisa Genova, kicked off a yearlong series of programming around the topic “Dementia with Dignity.” The book provides the perspective of a dementia patient and her family’s struggles. A movie based on the book was released in late 2014, with Julianne Moore winning a Best Actress Academy Award for her portrayal.

The school’s Schwartz Center Educational Rounds dealt with the subject, as did the newly named Ann W. Caldwell President’s Lecture: Interprofessional Rounds, which was held in January.

“Having a year-long theme was a very useful way to plan events and reinforce a subject we believe is important,” said Associate Provost Peter Cahn. “It allowed us to be able to build on one topic from a patient’s point of view.”

The effort was developed by the Institute’s Interprofessional Activities Committee, composed of faculty, administration, and students representing all academic disciplines. It was aligned with the Interprofessional Model for Patient and Client-centered Teams, or IMPACT Practice, where students in interprofessional teams collaborate on learning activities and projects throughout their first academic year, providing them with the opportunity to learn with, from, and about each other. (See story, page 11.)

The Caldwell lecture, which more than 300 first- and second-year students attended, featured Greg O’Brien, a local journalist who spoke about how he is dealing with being diagnosed with early-onset Alzheimer’s disease at age 59.

“I want to communicate to others, to speak from the patient’s perspective, to tell the story—to those with the disease, to those who will face this demon someday, to the caregivers, and those who love them,” said O’Brien, who also is the subject of the short documentary film, “A Place Called Pluto,” directed by award-winning filmmaker Steve James. “With proper medical direction, life strategies, faith, and humor, one can prevail, one can live with Alzheimer’s for now.”

“I think this lecture was so fabulous from an educational and an empathetic standpoint, and just very moving,” noted Master of Science in Nursing student Analisa Echeverria. “It was very beneficial for us to see how a patient with Alzheimer’s copes to preserve his dignity, maximize independence, and thrive as much as possible.”

The Schwartz Rounds, which occur twice each semester, continued the theme throughout the year. At each one, a team of two or three students related stories about how they have assisted and learned from patients with dementia during their clinical rotations.

“I thought the mix of clinical discussion and personal experience that came up in both the presentation and the discussion was unique in our training,” said third-year nurse practitioner student Emily Palmer, who along with classmate Jonathan DeWeese presented “End of Life Care for Patients with Dementia” in April. “It was affirming to see colleagues across disciplines engaging in the challenges of dementia care. It really helps break down the ‘silo’ thinking that can be prevalent in health care.”

The other three Schwartz sessions were: “Caring for Patients with Dementia: Overcoming the Stigma”; “Supporting Families and Caregivers of Patients with Dementia”; and “Using Technology and Music to Assist Patients and Clients with Dementia.”
To most people, say the word “marshmallow” and visions of s’mores and campfires come to mind.

For the more than 300 first-year students who participated in the MGH Institute’s third annual Community Day last September, a marshmallow now has a new meaning: interprofessional education.

More than 45 teams of 6–8 students from the Institute’s four direct-entry programs—Master of Science in Nursing, Doctor of Occupational Therapy, Doctor of Physical Therapy, and Master of Science in Speech-Language Pathology, plus the post-professional Master of Science in Physical Therapy—competed in a team-building exercise as each group tried to build the highest free-standing straw tower that could hold a marshmallow at its peak.

Along with the laughter and friendly competition was an introduction to the interprofessional approach to patient care they will receive during their education at the Institute.

“We talked about the challenges we all will face and got a different perspective of what other disciplines look for when treating patients,” said Master of Speech-Language Pathology student Christine Antonio. “It definitely will give me more of an open mind on how to work with other health professionals.”

The exercise launched the year’s Interprofessional Model for Patient and Client-centered Teams curriculum. Better known as IMPACT Practice, the curriculum engages students in a series of courses and activities in which they learn with, from, and about each other throughout their first year.

Classes are designed to help students develop core competencies for interprofessional collaborative practice across the four domains defined by the Interprofessional Education Collaborative (IPEC): Values and Ethics, Interprofessional Communication, Teams/Teamwork, and Roles and Responsibilities.

“It is important to bring students together at the beginning of their education to develop the competencies they’ll need to function effectively as members of collaborative teams both during their education and after they graduate,” said Center for Interprofessional Studies and Innovation Assistant Professor Mary Knab, who coordinates IMPACT Practice.

“When students graduate, we want to make sure they have the skills to lead the changes that will positively impact the systems in which they practice, and with every patient and client they encounter.”

After the team-building exercise and class discussions about how teams function, the student groups scattered to 37 locations in and around Boston to provide community service at non-profits and other organizations. Tasks included preparing meals at the Boston Rescue Mission, Pine Street Inn, and Rosie’s Place; scrubbing boats at Courageous Sailing in the Navy Yard; cleaning the Barbara McInnis House, working with clients at Hearth’s Ruggles Assisted Living and the Haley House; giving a group yoga lesson to grade and high school students; and doing arts and crafts with seniors at the Zelma Lacey House in Charlestown.

“It was a great opportunity for us all to work together and meet other students that we probably wouldn’t have had the chance to interact with otherwise,” said DPT student Shoshana Clark, whose team sorted more than 11,000 pounds of food at the Greater Boston Community Food Bank.

Added nurse practitioner student Jodi Carlton, whose team painted the community room at the Kennedy Center in Charlestown.

“It was a good way to give back to the neighborhood.”
Global Experiences During Winter Break

Two groups of nurse practitioner students spent the 2015 winter break being exposed to global health issues by working with residents in foreign countries.

School of Nursing Professor Mertie Potter traveled with one group to Santo Domingo, Dominican Republic. She was accompanied by Associate Provost Peter Cahn, along with medical staff from Boston Medical Center. This was the third year since 2012 that students have accompanied Potter to the Caribbean country.

Assistant Professor Elissa Ladd led a second group of students to India, where she spent six months during 2011–2012 as a Fulbright Scholar teaching and conducting research at Manipal University.

Students provided such things as basic medical services, nutrition, and child care while working in clinics and hospitals.

“There are certain standards of health care that I had become accustomed to in the United States that were not observed during our postings within the hospital,” wrote India Scholars 2015 member Jacqueline Dall in a post in the Institute’s blog, The Pulse.

“I was left wanting to do so much more for these families,” wrote Dominican Republic Mission Trip member Jennifer Bowen in a post: “I thought to myself, ‘Here I am providing health care to people who lack even the most basic of needs. I am not sure how I can help in the future, but I want to figure something out.’”

View all posts at blog.mghihp.edu.

Connecting Students with Donors—STAT

Speech-Language Pathology student Doris Kisel was one of many students who played IHP Scrabble during “Students Today, Alumni Tomorrow” Day.

Doris Kisel’s path to the MGH Institute may have begun in Texas, but she will complete her academic journey thanks to the generosity of school donors.

Kisel, who graduates in 2015 with a Master of Science in Speech-Language Pathology, took time out of studying for midterms in February to participate in the 3rd annual “Students Today, Alumni Tomorrow” (STAT) Day.

“The Institute was my first choice, and I really wanted to come here because my older brother and sister have dyslexia and I liked the school’s literacy concentration,” says Kisel, who received her undergraduate degree in speech pathology from the University of Texas-Austin before moving to Boston to continue her studies at the Institute. “Getting a scholarship has really helped make it a reality for me.”

Kisel joined scores of other students during the two-day event in late February, penning thank-you cards that will be sent to Institute donors, and playing IHP Scrabble in which they used oversized letters to spell out words such as “Grateful,” “Care,” and “Healing.”

“It’s a great way for students to connect with donors,” explains interim Director of Development Betsy Rigby. “The school is committed to doing everything possible to give people the opportunity to pursue their dreams of becoming health care professionals.”

The Institute awarded $4.48 million in student scholarships during Fiscal Year 2014—an increase of 38 percent over the past three years.
New OT Lab Improves Student Learning

One of the hallmarks of the MGH Institute’s new Doctor of Occupational Therapy (OTD) program is the Center for Participation and Community Reintegration.

The Center, housed in the program’s Functional Living Lab (FLL), is an active-learning area, which includes a kitchen, living room, bedroom, and bathroom. It allows OTD students to seamlessly move from the classroom and immediately put into practice what they have learned without leaving the lab.

In the coming months, students under the supervision of faculty members will begin seeing clients in the Center, where they will provide free specialty services to assist clients of all ages to develop, preserve, or restore health and independence.

“The home-like environment has a cutting-edge video capture process that enables students to view and review activities in the Center from spaces where they are not having direct contact with a client,” says Department Chair Lisa Tabor Connor. “Each student also has an opportunity to try things out for themselves in the FLL. It’s a much better way for students to learn and not worry about making a mistake.”

The OT Center is similar to the Speech, Literacy and Language Center and Aphasia Center in the Department of Communication Sciences and Disorders, and the Physical Therapy Center for Clinical Education and Health Promotion, where students in those two programs each year provide more than $1 million of free care to people who are underinsured or whose insurance benefits have expired.

Disabilities No Joking Matter

Maysoon Zayid may be best known for being a stand-up comic, but it was no joking matter when she discussed the issues and barriers people with disabilities face.

Zayid, who has cerebral palsy, spoke in March at the 6th E. Lorraine Baugh Visiting Faculty Lecture. She began and ended her presentation with portions from her hilarious routine “I’ve Got 99 Problems … Palsy is Just One,” which was the most-watched Ted Talk in 2014. But it was when she got serious that she made the largest impact with the audience of students, faculty, and staff.

“People with disabilities are the largest minority group in the world, and are such a large and diverse segment of society,” she said. “We have so much to bring to the table, but we can’t do it if there are walls preventing us.”

She said the entertainment industry could play a large role in changing people’s perceptions. “If there were more positive images of people with disabilities on TV and in movies, there would be more acceptance and understanding,” said Zayid, who at one time had a recurring spot on the former “Countdown With Keith Olbermann” program.

After her presentation, Zayid participated in a panel discussion with nurse practitioner Manu Thakral ’08, the first wheelchair user to graduate from the Institute; and Wyatt Hall, PhD, a post-doctoral student at the University of Massachusetts Medical Center who is deaf.
Along the Waterfront

Students “Paws” from Studying for Finals

Benjamin Franklin recently visited the MGH Institute.

No, it wasn’t the Revolutionary War-era hero, but a 130-pound Newfoundland who was one of eight therapy dogs on campus this spring. With studying for final exams sure to raise students’ blood pressure and cause anxiety, the canines were brought in during the last day of classes and the beginning of Reading Days to help students take a “paws” from studying.

“This is a great way to get your mind off studying, even if it’s just for a little while,” noted Arielle Angel, a first-year Master of Science in Nursing student. “I’ve got two dogs at home in upstate New York I haven’t seen for awhile, so it’s been fun. It’s definitely relaxing.”

Research has shown that interacting with animals has tangible health benefits, including lowering blood pressure, increasing happiness, and reducing anxiety and stress.

Students, both in groups and individually, took time over three days to interact with the dogs, which ranged from the small (Bernie the Jack Russell Terrier; toy poodles Bella and Marshall) to the large (two 150-pound Bull Mastiffs sisters, Morgan and Olive; Elise the Black Lab; a Bernese Mountain dog named Campbell; plus the aforementioned Ben Franklin).

While therapy dogs typically visit hospitals and elderly resident homes, academic support counselors Mike Boutin and Steve Ciesielski thought it would be beneficial to let the dogs in, or rather, on campus.

“We wanted to see how students would react, and I can say that it’s been nothing but positive,” said Boutin, as he watched several students hanging out with Morgan and Olive, the two Mastiffs, in the Shouse Building lobby. “We’d like to bring them back again.”

Alanna Hulbard was glad to hear that. “They should do this every semester.”

“They should do it every week!” fellow first-year SLP student Christina Yu added. “Every week would be good.”

DNP Program Moves Online

Flexibility to study on one’s own time, while engaging with top-notch faculty and fellow students is key for busy nurse leaders. That’s why the MGH Institute has transitioned its Doctor of Nursing Practice (DNP) program to an online format.

“Our previous hybrid format proved challenging for many nurses who were simultaneously trying to juggle a full-time career, family life, and their graduate studies,” says School of Nursing Interim Dean Linda Andrist. “The online format addresses that issue, and allows students to focus on their studies at times that best meet their individual needs.”

The DNP for Advanced Practice Nurses and DNP for Nurse Executives are exclusively online, while the RN-DNP program (DNP for Registered Nurses) continues a hybrid formula in which students take on-campus classes during the first four semesters before completing their studies online.

“Nurses in our DNP program are experts in clinical practice and nursing leadership,” says program Coordinator, Professor Ruth Palan Lopez. “They gain the skills to analyze outcomes and data to influence policy and improve practice.”

Linda Kelly, nursing director for ambulatory gynecology at Massachusetts General Hospital, says the online format has allowed her to continue working full time while pursuing her degree. Kelly has used the Institute’s state-of-the-art technology to simultaneously work with her faculty committee in Boston while collecting data for her capstone project in Shanghai, China.

“One of the driving forces was my interest in interprofessional collaboration with physicians and nurses, and the associated impact on patient care outcomes,” says Kelly. “The DNP program has allowed me to look critically at nursing issues in a scholarly way.”
Haynes Receives Lifetime Award from International Dyslexia Association

Department of Communication Sciences and Disorders Professor Charles Haynes received the Margaret Byrd Rawson Lifetime Achievement Award from the International Dyslexia Association (IDA) for his contributions to the field.

Haynes is only the 16th person to receive the annual award, which honors the work of the late Margaret Byrd Rawson, an international expert who spent more than 70 years treating reading disorders.

Haynes joins 15 other people who have been recognized by the IDA since 1998 for exemplifying Rawson’s compassion, leadership, commitment to excellence, and advocacy for people with dyslexia, plus whose work is nationally recognized as furthering the organization's mission.

Haynes has a comprehensive history with the IDA: he served as board vice president for ten years, during which time he chaired or co-chaired three international conferences; established an IDA Global Partners system that has established linkages among a network of organizations serving children and adults with dyslexia; chaired the association’s nominating committee; and helped recruit Global Partners representatives to IDA’s board, which led to many international conferences and research collaborations.

He has been principal or co-principal investigator on over $1,100,000 in grant projects at the Institute and more than $2,550,000 of externally funded studies in the Middle East, where he is a senior advisor at King Abdulaziz University in Saudi Arabia for a five-year language and literacy test development project in Arabic.

In 2013, Haynes was inducted into the International Academy of Researchers in Learning Disabilities. In 2012, he received the Nancy T. Watts Award for Excellence in Teaching—the highest prize given to an MGH Institute faculty member. He has taught at the Institute since 1992.

Simmonds Named Jonas Health Policy Scholar

School of Nursing Assistant Professor Katherine Simmonds was one of just six nurses named as inaugural Jonas Health Policy Scholars by the American Academy of Nursing (AAN).

Simmonds will work with leading nursing experts to further her goal of building nurses’ capacity to provide comprehensive and high quality sexual and reproductive health care.

“I hope to learn more about the challenges that nurses who work in primary care face, contribute to efforts that develop policy solutions, and explore opportunities for advancing the knowledge and skills of these nurses in providing sexual and reproductive health care,” says Simmonds, who received her Master of Science in Nursing from the Institute in 1993, and is currently pursuing her PhD in Nursing at the University of Rhode Island.

She is founder and former director of the Reproductive Options Education Consortium for Nursing, and continues to serve as an advisory member to the group of nursing faculty that works to promote sexual and reproductive health by integrating pregnancy prevention and care in nursing education and practice.

Simonds, who has taught at the IHP since 2000, is coordinator of the School of Nursing’s Women’s Health Nurse Practitioner track.

Jonas Scholars are selected based on evidence of scholarship, including publications, presentations, honors and awards; evidence of leadership experience; and match between the applicant’s interest area and at least one health care issue addressed by the AAN Expert Panels.
It was 2009, and the MGH Institute was looking to the future. The student population was growing, thanks to several programs that recently had been developed and launched, but school leaders knew more could be accomplished. After more than 30 years of producing excellent health care practitioners, they were contemplating something bigger, a new building block that would elevate the Institute’s profile and dramatically change its DNA.

That something was research.
“It was always apparent to the Board of Trustees that to be a first-rate educational institution, to compete for students and faculty on a national level, and to be seen as a leader particularly in a community like Boston, there needed to be a dedicated research component,” says board Chair George Thibault, MD. “Even though we’d always had faculty who were involved in research, we had never really made the financial commitments and the planning needed to create a deliberate strategy.”

What jump started the Institute’s research initiative was a special report commissioned by Director of Research Robert Hillman and Provost and Vice President for Academic Affairs Alex Johnson. Led by MIT professor and former Trustee John Guttag, a group of outside experts spent several months examining the pros and cons of launching a dedicated research initiative. While the 2010 report was generally supportive, it remained unclear if it would be a good investment since academic research programs, at best, are a break-even proposition.

“The Institute was a thriving institution, turning out some of the best health care professionals in the world, and it would have been a reasonable decision to decide that having a strong reputation for educating outstanding health professionals was sufficient,” Guttag says. “It had a culture that worked, but that culture would have to change in significant ways. And if the school tried to build a research program and failed, it would have broken a lot of eggs without producing an omelet.”

Being located in Boston, one of the world’s largest and most renowned research centers, school leaders knew it didn’t make sense to compete head-on with such powerhouses as Harvard and MIT. Instead, they decided to concentrate on a topic that already was integral to its core mission: rehabilitation.

“We had several degrees in the rehabilitation sciences, and a critical mass of faculty with interests and talents already on campus that filled

A strategy was devised to begin the process of attracting acclaimed faculty researchers while simultaneously developing the research facilities they would need for their work.
that niche, plus we recognized that concentrating on rehabilitation was synergistic with work that is taking place in many of the region’s research centers,” explains Thibault. “We knew we couldn’t do research across a wide spectrum. It needed to be focused on the areas where we could have solutions to offer.”

The Trustees in 2011 overwhelmingly approved allocating the necessary financial support for both the research initiative and an accompanying PhD in Rehabilitation Sciences program, which was a critical component of the overall plan. A strategy was devised to begin the process of attracting acclaimed faculty researchers while simultaneously developing the research facilities they would need for their work.

It took less than a year to entice the first researcher. Cancer fatigue syndrome expert Lisa Wood was named Amelia Peabody Chair in Nursing Research and created the Fatigue Research Lab in 2012. She joined Diane Mahoney, Jacques Mohr Professor of Geriatric Nursing Research, who for years had been investigating ways technology can assist dementia patients and their caregivers.

Just a year after Wood’s arrival came a double coup: two of the nation’s eminent speech-language pathology researchers, Jordan Green and Tiffany Hogan, joined the nascent initiative, bringing expertise in ALS, speech motor control, and reading and learning disabilities. Add to that the pioneering students who took a leap of faith to join the fledgling PhD program, along with the creation of top-of-the-line research labs, and suddenly the Institute’s plan was gaining traction—much faster than anyone had anticipated.

The invigorated effort has brought in close to $7.5 million in research grants since 2012—more than the combined amount of awards in the previous several years—and has helped the Institute establish a solid reputation for building and translating knowledge to improve health and quality of life.

The new researchers, along with other faculty, are collaborating with medical researchers at many of Boston’s hospitals within and outside the Partners HealthCare System, and at Harvard, MIT, and other universities.

“People at these institutions don’t choose collaborators to be nice. They choose collaborators who they think can advance their work,” notes Guttag. “The IHP is now playing with the big players.”
It is an exciting time to be involved with communication disorders research, says Jordan Green, because of the myriad technological developments and new approaches that are expected to occur over the next decade.

“There is a critical mass of people from multiple disciplines who are studying these issues,” says Green, a professor of speech-language pathology and director of the Speech and Feeding Disorders Lab. “There is nothing more crucial for a person than having the ability to communicate so it’s heartening that this very important problem is attracting more interest.”

Green is in the center of this burgeoning field. A renowned expert in working with people who have speech disabilities, and feeding and swallowing impairments, he is focused on using predictive data to detect and diagnose neurological impairments that affect speech such as amyotrophic lateral sclerosis (ALS), stroke, childhood apraxia of speech, Parkinson’s disease, and multiple sclerosis.

Take ALS, also known as Lou Gehrig’s Disease. While there is no significant treatment or cure for ALS, Green is using a $2.975 million award from the National Institutes of Health’s Institute on Deafness and Other Communication Disorders to develop ways to detect it much earlier than the 18 months it typically takes for a person to be diagnosed. Combined with dozens of drugs currently being tested in trials, he hopes to significantly increase the time people with ALS can maintain their speech and swallowing functions.

“It has been estimated that by the time it’s determined a person has ALS, they may have lost up to 70 percent of the brain cells that control movement,” he says. “That doesn’t leave much time for the drugs to work.”

Speech-language pathologists have little luck predicting how fast an ALS patient’s communication functions will deteriorate, and typically rely upon their eyes and ears when assessing a patient. So recently, Green began working to develop a 3D facial movement analysis diagnostic system that clinicians can easily use during a routine office visit. Based on Microsoft’s Kinect camera, it could cost as little as $125. “Our intention is to equip clinicians with powerful tools to augment their assessments and provide them with better metrics for the effectiveness of their treatments,” he explains.

Collaborating with Colleagues at Partners HealthCare

Like many other faculty researchers at the Institute, Green is collaborating with several fellow Partners HealthCare affiliates. He is working with Mass General’s ALS Multidisciplinary Clinic, as well as at Brigham and Women’s Hospital, where he and Institute PhD student Bridget Bowler are studying seven face transplant patients. Using movement sensors placed on the face, he is trying to determine their rate of recovery and how much functional movement in speech and swallowing they regain—right down to the millimeter level for all regions of the face.

Another technology he and his colleagues at the University of Toronto, University of Texas-Dallas, and the University of Nebraska have developed is a silent speech interface. Using 3D data, it translates a person’s mouthed word (which in ALS patients is often silent or mumbled, or both) into what the patient intended to say. The software currently can recognize up to 100 words and phrases, with an accuracy rate of up to 98 percent. His team will now try to determine whether the approach is accurate for individuals who have impaired speech movements due to ALS, as a proof of concept. “Once we’ve established that, we can apply it to other populations,” he predicts.
No child should be left behind in the classroom, and Tiffany Hogan is researching ways to make that a reality.

Hogan, director of the Speech and Language (SAiL) Literacy Lab and professor in the Department of Communication Science and Disorders, has spent years studying dyslexia, a condition that prevents a person from reading words accurately. While there are methods to help students overcome this barrier, there’s another learning disability she is studying that has flown under the radar.

“Some children have difficulty comprehending what they read, even though they have accurate word reading. We call them poor comprehenders,” explains Hogan. “Both children with dyslexia and poor comprehenders have difficulty understanding text, but for different reasons. We’re focusing on finding ways to identify and help these two groups of poor readers as early as possible.”

Poor comprehenders can have hidden language impairment, because it’s easy for a child who can decode words accurately to mask the problem, she says. These students can often get lost in the educational system because the assumption is that if they can read words they should be able to understand them unless the subject matter is really difficult.

To combat that, she has developed an early language curriculum to stimulate the underlying language skills at the same time children are learning to read words. “If the issue isn’t caught until third or fourth grade, we’ve missed a critical window to stimulate their language skills,” says Hogan.

One in 13 children has dyslexia or some sort of comprehension impairment, including one in four who have difficulty learning new words. These children, who can learn but have challenges forming their thoughts, are mislabeled both by teachers and parents as being shy or not as smart as they really are. “Children can have problems in word reading or comprehension, and many have both issues,” she says. “We’re trying to isolate the word-reading piece from the language comprehension piece.”

Hogan and her team have been working with hundreds of grade-school children in more than 20 Boston-area schools since coming to the MGH Institute in 2013. Her studies include focusing on assessing students for dyslexia using an innovative, child-friendly computer game that measures a youngster’s ability to remember new information they’ve learned, and how their responses might be related to comprehension difficulties. The long-range plan is to develop custom interventions that will target and address specific learning deficits.

A long-time misconception is that a child with dyslexia has difficulty understanding language. Not necessarily, she cautions. “Some children can understand a story when it is read to them, since their word reading problem has been eliminated when they hear a story instead of read it,” she says. “There is a very powerful difference in how the spoken word is processed from the written word.”

One factor Hogan’s research is starting to identify revolves around a child’s working short-term memory. “We are assessing children’s strengths and weaknesses to determine the best ways to teach them to learn the many new words they encounter every day, which has never been done before,” she says. “If we can correct that problem it should lead to improved lifelong learning.”
Diane Mahoney believes there’s a way for the country to save as much as $1.2 billion annually in health care costs by using technology to keep elderly people with Alzheimer’s disease in their homes longer.

Mahoney, the inaugural Jacques Mohr Professor of Geriatric Nursing Research, and director of gerontechnology research and development, has spent much of her research career studying how to integrate new technologies into everyday care in the home to help reduce the stressors of caring for loved ones. And with the number of Americans with Alzheimer’s projected to triple to 14 million by 2050, the demand for supportive services and more caregivers is only going to become more acute.

“It’s going to be a staggering cost in the future,” says Mahoney, who also is senior scientist at the Massachusetts General Hospital Munn Center for Nursing Research. “We’ve known this has been coming for 40 years, yet our health care system always seems to reach a crisis before caregiving issues get addressed.”

Using a two-year, $452,000 research grant, “Development of a Responsive Emotive Sensing System, or DRESS,” funded by the National Institutes of Health, through the National Institute of Nursing Research, Mahoney is creating a prototype “smart” dresser. The concept is simple but holds great promise: A sensor-based tracking system, linked to an iPad, is installed into an ordinary bureau. The iPad, with input from a special sensor watch worn by the Alzheimer’s patient, uses visual and spoken prompts to help guide people to open each drawer in sequence, choose clothing, and dress eventually.

The system senses and responds to the person’s needs, adjusting the dressing prompts to insure they are not overwhelmed. Caregivers carry a programmed iPod in which they can check on their family member’s progress, or to receive an alert if help is needed.

“Caring for their loved ones is a 24/7 situation, so even a short respite from daily dressing and undressing tasks can help sustain caregivers,” Mahoney says. She notes that a person who remains at home, even for just one additional month, not only would reduce costs nationally but save families thousands of dollars in payments to nursing homes and other assisted living facilities.

In an initial study of whites and African Americans, funded by the Alzheimer’s Association, she discovered that there was a general acceptance but strong reluctance by caregivers to use technology aids. “Technology cannot replace the qualities that make us human,” Mahoney says. “It is not ‘high tech’ versus ‘high touch’ care, but a way to complement and sustain caregivers so they can provide the warmth and nurturing care that technology can’t provide.”

Her recent research is focused primarily on new immigrant and first-generation Mexican-Americans in Arizona. This cohort is embracing the potential of using technology more readily than their white or African-American counterparts.

“They often move into neighborhoods with people who share their cultural values, so they are reluctant to bring in outside help and expect the extended family and close friends to pitch in,” Mahoney says, noting that they fear subsequent generations might lose their caregiving cultural heritage. “They see technology as a way to strengthen connections with their elderly family members, and can use DRESS to aid in their caregiving.”
For the last decade, Lisa Wood has been researching the cause of fatigue in cancer patients. One of the most common side effects from chemotherapy, fatigue greatly reduces quality of life, both during treatment and afterwards.

She is now turning her attention to study how fatigue affects people who have other illnesses besides cancer, such as those who have had strokes, multiple sclerosis, and Lyme disease.

Fatigue is a common and sometimes debilitating symptom in stroke survivors that can delay their recovery. “We know inflammation causes fatigue, and stroke patients have a high level of fatigue, so we thought, ‘Let’s see if fatigue in stroke survivors is also caused by inflammation?’” says Wood, who is director of the Fatigue Research Lab and the school’s Amelia Peabody Professor in Nursing Research. “We’re taking what we’ve learned in the cancer field and we’re applying it to a different clinical setting.”

Along with her colleague, molecular biologist John Wong, she has begun partnering with Spaulding Rehabilitation Hospital, Massachusetts General Hospital, and Massachusetts Eye and Ear Hospital to expand the scope of her research.

This spring, she began collaborating with Dr. Nevena Zubcevik, a physiatrist and co-director of the Dean Center for Treatment, Rehabilitation and Recovery of Tick Borne Illness at Spaulding Rehabilitation. Dr. Zubcevik works with Lyme disease patients, many of whom go on to develop long-term fatigue.

First up is investigating whether yoga can reduce fatigue, musculoskeletal pain, and depression in the 20 percent of Lyme disease patients who experience these long-term symptoms. “Yoga can reduce fatigue and inflammation in breast cancer survivors,” says Wood, “so we want to see to what extent it can help people with chronic Lyme disease symptoms.”

She is collaborating with Dr. Qing-Mei Wang and her team in the Spaulding Stroke Biological Recovery Laboratory, and recently began working with Department of Physical Therapy Assistant Professor Janet Kneiss on understanding whether breast cancer survivors who report persistent fatigue have decreased skeletal muscle function.

Fatigue is one of the most common and debilitating side effects of cancer treatment, and it has a large impact on quality of life, physical functioning, and overall health in cancer survivors. “Fatigue is just one of those nagging things that often doesn’t go away after a person survives cancer,” Wood says, noting it’s not uncommon for breast cancer and childhood leukemia survivors to experience chronic fatigue for as long as 10 years after treatment.

She also is trying to make connections that show breast cancer survivors are different than they were before their illness. They often experience what she calls “chemo fog or chemo brain,” in which they cannot return to their previous level of mental alertness.

“We’re thinking that chronic fatigue in cancer survivors and in survivors of stroke and Lyme disease is being driven by immune dysfunction,” says Wood, one of the country’s leading scholars investigating the molecular origins of cancer treatment-related fatigue. “It’s a black box at the moment but hopefully our research will help us to understand whether this is indeed the case.”
Jarrad Van Stan had been working as a speech-language pathologist in acute care at Christiana Hospital in Delaware for a few years, and had become frustrated that he was unable to get any traction in doing research.

After considering several graduate schools and larger hospitals, he came across an opportunity to work on a grant and become part of the first class of the PhD in Rehabilitation Sciences program at the MGH Institute. What stood out for him was a chance to work with Dr. Robert Hillman, an internationally known researcher in voice disorders.

“I had no training in research, and I had questions I wanted to answer,” says Van Stan. “Once I saw Dr. Hillman was involved, I knew I had to go to the Institute. It was a way to get the best of everything I was looking for.”

Along with colleague Dr. Steven Zeitels, Hillman operates the world-renowned Center for Laryngeal Surgery and Voice Rehabilitation at Massachusetts General Hospital, where he is co-director and research director. The walls lining the center’s 11th floor office in Boston’s Bowdoin Square are filled with pictures of well-known singers and other notable personalities they have helped—Julie Andrews, Stephen Tyler of Aerosmith, and Adele to name just a few.

Hillman is quick to downplay his patients’ star power, saying he’s glad to be part of a team that has helped restore voice and speech to patients who had lost those basic abilities, which includes many more who are not as famous. And while he continues to conduct cutting-edge research, such as using a $2.4 million grant from the National Institute on Deafness and Other Communication Disorders to create a smartphone-based system (dubbed the Voice Health Monitor) to improve diagnosing and treating common voice problems in real time, he is energized by the PhD program he started and currently directs.

“It’s been a great addition to the Institute,” says Hillman, who is the school’s director of research programs, as well as a professor of surgery and speech and hearing bioscience and technology at Harvard Medical School and at the Harvard-MIT Division of Health Sciences. “They are all exceptional students.”

Van Stan has spent the past three years working with Hillman to refine the Voice Health Monitor. “It’s like having a speech-language pathologist in the patient’s pocket,” says Van Stan, who is currently recruiting subjects for his research and will write his dissertation based upon his findings.

A critical part of the PhD program is to pair each student with established scientists. These research mentors come from the Institute, universities such as Harvard and MIT, and several of the area’s top hospitals including Massachusetts General, Brigham and Women’s, and Spaulding. They are very involved with their mentees, meeting and working closely with them on a weekly basis in their respective research environments; many also give lectures in PhD courses taught on the Institute’s campus.

Course-sharing agreements with Harvard Medical School, the Harvard School of Public Health, and other area universities also give students access to advanced classes.

“The PhD program is specifically designed to teach clinically certified practitioners to do interdisciplinary clinical research in rehabilitation,” Hillman says. “There’s a widely acknowledged shortage of scientists to do the kinds of translational and outcomes research that is so critically needed by all of the rehabilitation specialties, and the Institute’s program is addressing that.”
Jennifer Lettsome wants to educate Black and Latino/a youth in the Boston area on how to make safer choices about their sexual behavior.

Lettsome, who will volunteer 200 hours over the next year working with Action for Boston Community Development (ABCD) Health Services, is one of three MGH Institute students who have been named an Albert Schweitzer Fellow for the 2015-2016 academic year.

“As a Black-identified woman, it’s important for me to work in my community because I understand their struggles,” says Lettsome, a second-year Master of Science in Nursing student.

“I’m hoping participants will leave with education on methods for protection, skills on having conversations around sexual health, and community resources so they can maintain their sexual health beyond my program. And I really want to get young men involved, because the onus is often on women to make choices around sexual health.”

The other Fellows are second-year Doctor of Physical Therapy student Kristin M. Smith, and second-year Doctor of Occupational Therapy student Hayley Younkin. A total of 36 Institute students have been named Schweitzer Fellows since the program was launched in 1992.

Lettsome’s program is called “Boss Up,” a term she describes as taking responsibility. She will host safer sex workshops and reach out to her target audience of 18–35 year olds in places such as barber shops, fashion shows, basketball games, and music festivals.

An initial goal will be to work with women and their partners to identify resources for low-cost, confidential HIV/STD testing, as well as counseling services to turn to if they experience intimate partner violence.

Another component of her project is to use a pre-existing ABCD program called Safer is S.E.X.Y. (“Sophisticated Empowered Extraordinary You”) a program for women of color that also sends prevention messages around sexual health. This social media and community outreach campaign is designed to engage non-traditional partners with targeted substance abuse and HIV prevention messages. Lettsome hopes also to send tailored prevention messages around safer sex to young men who follow the program.

“I’ve been inspired and motivated by women of color when I was younger, and want to be that person for others,” says Lettsome, who plans on becoming a women’s health nurse practitioner in underserved communities upon graduating in 2016. “and this project will help me to bring that back to a community I fiercely advocate for.”

Other Fellows’ Projects

Smith will partner with Brooklyn Boulders in Somerville, where she will address the lack of inclusive recreational opportunities for children with disabilities in greater Boston by establishing a youth adaptive climbing program at the indoor rock climbing facility. In addition to encouraging youth attendance at weekly adaptive climbing clinics, her program aims to benefit its participants by reducing isolation, fostering healthy habits and attitudes towards physical activities, developing positive social skills, and building self-confidence.

Younkin will partner with St. Mary’s Bridge Home in Boston’s Dorchester neighborhood, where she will address the mental health needs and social-emotional well being of children who have experienced trauma or witnessed violence and are currently residing in a short-term crisis intervention center in Upham’s Corner. She is developing and implementing a program of social-emotional learning groups based on a trauma-informed approach. The program will assist the Bridge Home in helping these children continue to build resiliency and emotional intelligence so they will feel empowered to develop healthier coping strategies.
Ahmed Advocates on Beacon Hill for Improved Nursing Practice

To Stephanie Ahmed, there’s a solution that will improve overall patient care, greatly reduce the length of time it takes someone to see a medical professional, and promises to save billions of dollars in health care costs in Massachusetts over the next decade.

It’s a bill that would allow advanced practice nurses to work more independently: “An Act to Remove Restrictions on the Licenses of Nurse Practitioners and Certified Registered Nurse Anesthetists as Recommended by the Institute of Medicine and the Federal Trade Commission.”

This is the second year that Ahmed, president of Massachusetts Coalition of Nurse Practitioners, has joined with the Massachusetts Association of Nurse Anesthetists to file the legislation.

“Competency does not change with state boundaries. Either you are competent or you are not,” says Ahmed, a 2008 Doctor of Nursing Practice graduate who is director of ambulatory nursing at Brigham and Women’s Hospital. “This model of oversight doesn’t exist in other disciplines in the state—you don’t see psychiatry overseeing the psychologists, or optometry being overseen by ophthalmologists. These are unnecessary and antiquated restrictions that only occur in nursing.”

The bill, sponsored by Rep. Kay Khan, D-Newton, who is also an advanced practice nurse, would remove the requirement for a physician to retrospectively review prescriptions written by a Nurse Practitioner (NP) or a Certified Registered Nurse Anesthetist (CRNA).

It also would eliminate requirements for written prescriptive practice agreements and time limitations on CRNA prescriptive practice, further update the Nurse Practice Act to reflect that NPs and CRNAs can not only order tests and therapeutics but interpret them in order to best treat the patient, and remove the state Board of Registration in Medicine’s authority over the state Board of Registration in Nursing’s adoption of regulations.

Ahmed contends a new law would greatly benefit patients. According to a 2013 survey of medical offices by the Merritt Hawkins & Associates physician search and consulting firm, new patients in the Boston area wait an average of 66 days—more than three times the national average of 19.5 days—despite the region having the highest per capita of physicians in the country.

Add a recent Rand Corporation study that suggests allowing advanced practice nurses to practice to the full extent of their education would cut health care costs between $4.8–$8.4 billion in Massachusetts over 10 years, and Ahmed believes it’s imperative for the bill to be approved. “It will modernize the statutes for Massachusetts advanced practice nurses and allow NPs and CRNAs to practice to the full extent of their education and training,” she says. “It will improve patient care, and in the end that’s what everyone should be striving for.”

Ahmed, right, confers with Rep. Kay Khan, center, and strategist Gloria Craven in the Hall of Nurses at the Massachusetts State House.

The following abbreviations are used in the Class Note sections: BWH – Brigham and Women’s Hospital; MGH – Massachusetts General Hospital; MGH SON – The former Massachusetts General Hospital Nursing School; NWH – Newton-Wellesley Hospital; NSMC – North Shore Medical Center; SRN – Spaulding Rehabilitation Network.

Communication Sciences and Disorders

Anna Allen ’03 married Jon Caplan in August 2014. She is a third-year student in the IHP’s PhD in Rehabilitation Sciences Program, and is working as a doctoral fellow at Children’s Hospital in Waltham.

Meredith O’Dea ’03 co-presented with fellow CSD faculty Rebecca Inzana, OT faculty Mary Everson, and nursing faculty and alumna Trisha Zeytoonjian ’07 “A Collaborative Interprofessional Clinical Education Model to Improve Compassionate Team-Based Care,” at the Conference for Advancing Compassionate Care Through Interprofessional Education for Collaborative Practice at the Schwartz Center Arnold P. Gold Foundation and Macy Foundation in October 2014. In addition, O’Dea, along with Inzana and fellow CSD faculty Mary Riote, presented, “Utilizing Advanced Simulation and Electronic Health Records in Interprofessional Education” at the 2014 American Speech-Language-Hearing Association annual convention.


Rachel Barrocas ’10 writes that she is a senior speech-language pathologist at St. Mary’s Hospital for Children in Bayside, NY, and loving it. She hopes to return to Boston in the future “should the right opportunity become available.”

Amy Crespi ’10 presented “New Year, New You! Goals for 2015” at the Boston Acquired Brain Injury Support (BABIS) group.

Thomas Shull ’10, who works in the Boston Public Schools, presented a free webinar, “Crowd Funding for the Classroom,” at the MGH Institute in July 2014, where he provided an overview of crowd-funding strategies and resources.
NEW FUND CREATED

Scarborough Receives Krebs Award

Being named the first recipient of the Dr. David Krebs Doctoral Research Fund award holds special meaning for Donna Moxley Scarborough ’97. Not only did the award enable her to present her findings at the Orthopaedic Research Society meeting this spring, but the late Dr. Krebs was one of her mentors.

“This fund is a wonderful way to recognize David’s contributions to the physical therapy and biomechanics professions as well as honor his passion for mentorship and teaching,” says Scarborough, a student in the PhD in Rehabilitation Sciences program whom Krebs taught while she pursued her advanced Master of Science degree in Neurologic Physical Therapy in 1997. “I am so proud to be the first recipient of this award. It is extra special to me.”

The Krebs Fund provides financial assistance for Institute PhD students. It was established by his family and friends to honor his passion for the rehabilitation sciences, after the physical therapist and biomechanist passed away in 2014.

Scarborough worked with Krebs for 11 years in the Massachusetts General Hospital’s Biomotion Laboratory. Together, they conducted numerous research studies that classified and interpreted functional activity movement patterns among persons of various ages and pathology. This research included collaborative studies with MIT, funded by the Center for Integration of Medicine and Innovative Technology (CIMIT), to develop and research wearable technology to assess patients’ balance and movement patterns.

During her 19 years at Mass General, Scarborough has developed a reputation as an innovative leader for using biomechanical analysis to improve athletes’ rehabilitation efforts and return to their sport after an injury. She currently is Director of Sports Performance Research and Analytics with the hospital’s Sports Medicine Service and Department of Orthopaedic Surgery.

As a PhD student at the Institute, Scarborough is focusing on the biomechanics of persons after they have total hip replacements. The Krebs Fund allowed her to present some initial findings looking at the correlation of the acetabulum component (hip socket) orientation and hip stability during functional activities after total hip replacement.

Noting that Krebs originally sparked her interest in studying human movement, she says, “I wanted to do more research and have the opportunity to learn more about how you take on the role of a lead researcher.”

“This fund is a wonderful way to recognize David’s contributions to the physical therapy and biomechanics professions as well as honor his passion for mentorship and teaching.”

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**Erika (Lindberg) Vercollone** ’12 was profiled in the Old Colonial Memorial about her role as working at Cold Spring and Hedge elementary schools in Plymouth.

**Nursing**

**Mary Larkin (MGH SOn) ’76,** a clinical research manager at the MGH Diabetes Research Center, received the 2014 Distinguished Clinical Research Nurse Award from the International Association of Clinical Research Nurses.

**Dorothy Sullivan** ’86, who works at Lahey Clinic, co-wrote chapters in the book Dermatology for Advanced Practice Clinicians.

Karen (Murthagh) North ’93 recently presented the methods of minimizing blood loss associated with diagnostic testing in the cardiac surgery ICU at the Mary Fay Enrichment Awards at BWH, where she works in the Center for Sleep and Wake Disorder.

Virginia Capasso ’94 of MGH recently was appointed a member of the Scientific Committee of the American College of Certified Wound Specialists. She also became licensed by the Massachusetts Board of Registration in Nursing to practice as a clinical nurse specialist, a new licensure category in the state.

Joanne Hughes Empoliti ’95, nursing director at MGH, and Trisha Zeytoonian ’07, clinical nurse specialist at MGH and IHP faculty, presented the poster “Assessing Clinical Learning Needs of Nurses by New Unit Leadership” at the 2014 International Conference of Nursing Knowledge.

Gail Gall ’97 co-presented the poster “Improving Quality and Safety for Diverse Populations: an Innovative Interprofessional Curriculum” at the All Together Better Health VII Conference at the University of Pittsburgh and the National Center for Interprofessional Practice and Education, as well as at the annual meeting of the National Academies of Practice.

Jennifer Derkazarian ’99, ’14, director of advanced practice nursing at Lahey Clinic, received the NP Award for Excellence for service provided to patients and clinical support to other fellow nurses. She also was awarded a research grant from the hospital for her study “Cross Sectional Analysis of the Organizational Climate of Nurse Practitioners (NPs) and Physician Assistants (PAs).”

Ann Fisher ’02 received the 2014 Department of Surgery Clinical Excellence and Professionalism Award for Nursing at NSMC.

Daniel Worrall ’06 has returned to Boston as a nurse practitioner and study clinician with the Ragon Institute, working in HIV and immunology research. He moved from New York City, where he learned High Resolution Anoscopy and worked on multiple studies through the AIDS Malignancy Consortium and Merck. He is looking forward to precepting IHP students in the near future.
Research at the MGH Institute was the theme of the school’s 8th annual Gala last fall.

“Elevating Research, Expanding Knowledge, Enhancing Impact” highlighted how research at the Institute impacts the educational experiences of the school’s 1,400 students.

More than 300 people helped raise over $367,000 at the November 2014 event, held at the Renaissance Boston Waterfront Hotel. The final amount raised included $62,400 pledged by audience members during a live support-a-student auction.

“The scholarships we are able to award each year promote access to a professional education for a broad spectrum of our students who will go on to make exceptional contributions in their fields and touch the lives of many patients and their families and communities,” said President Janis P. Bellack.

Since the first Gala in 2007, more than $2.7 million has been donated to support scholarships at the Institute.

John V. Guttag, PhD, Honorary Trustee and the Dugald C. Jackson Professor of Massachusetts Institute of Technology’s Department of Electrical Engineering and Computer Science, was honored for his efforts to increase the Institute’s focus on research.

Four event sponsors donated $25,000 each to support student scholarships: Sumner Brown, Massachusetts General Hospital, MinuteClinic, and Dr. and Mrs. Charles A. Sanders. Five sponsors donated $10,000 each: Elizabeth “Trish” and Mark S. Joyce; the Knowles Family; MGH Nurses’ Alumnae Association; Putnam Investments; and George and Barbara Thibault.

Two members of the MGH Institute Board of Trustees served as co-chairs for the event: “Trish” Joyce, whose father, Dr. Charles Sanders, was one of the Institute’s founders; and Angelleen Peters-Lewis, PhD, RN, Senior Vice President for Patient Care Services and Chief Nursing Officer at Women & Infants Hospital of Rhode Island.

Other members of the Gala Committee were: Pamela D’Arrigo; Julie Atwood Drake, Faculty Emerita; Margery Eramo, SON ‘57, MGH Nurses’ Alumnae Association; Bette Ann Harris, PT ‘83, ’02, Faculty Emerita; Charles Landry, McCall & Almy; Steven Krichmar, Putnam Investments; Anthony Spirito; and Amy Waggoner, MinuteClinic.

Mary McNeice ’07, who works in the Lahey Clinic’s Hematology/Oncology unit, received the Mary Nolan NP Mentorship Award, which acknowledges acumen in teaching and education.

Christina Kim ’10, a nurse practitioner in the palliative care department at MGH, volunteered at Comfort Zone Camp during a free one-day bereavement program for children, teens and their parents on Cape Cod.

Jennifer Caires Capece ’11 recently welcomed a son, Luca, into her family.

Marianne Ditomassi ’11, executive director of Patient Care Services at MGH, was co-leader of Leadership Exchange and Development (LEAD) at Hamad Medical Corporation in Doha, Qatar.

Nicole Durand ’11 married Matthew Fanning in June 2014. After graduating, she worked in MGH’s thoracic surgery department. Currently, she is working at MetroWest Home Care.

Sarah Oriola ’11 is now a float nurse at NWH.

Deborah Holzman ’12 started her own private practice in Cambridge as a Psychiatric CNS seeing kids, teens, and young adults for psychopharm/med management.

Anne Chang ’13, a staff nurse at SRH, received a Good Catch Award for her work in improving care with a patient.

Angela Morello ’13 works in the Antenatal Testing Unit 5 West at NWH.

Meaghan Nugent ’13 is now a float nurse at NWH.

Julia Lange Kessler ’14 is assistant professor and director of the nurse midwifery/WHNP program at Georgetown University in Washington, DC.

Karla Rodriguez ’14 married Elliot Haney in June 2014, in her hometown of Huntington, NY. Classmates Allison Doppelt ’14 and Cassandra Garcia ’14 attended the nuptials.
ALUMNI PROFILE

ABBOTT NAMED JOURNAL EDITOR

Although J. Haxby Abbott returned to his native New Zealand 16 years ago, his transitional Doctor of Physical Therapy degree from the MGH Institute in 2013, along with practicing in the United States for several years in the 1990s, kept him connected to America.

Abbott now has an even stronger connection to the States. He was recently named the new editor-in-chief for the Virginia-based *Journal of Orthopaedic and Sports Physical Therapy*, one of the profession’s top two journals.

His appointment follows four years as the publication’s associate editor, and six years prior to that as editor at the *New Zealand Journal of Physiotherapy*. In spite of this strong foundation, he credits his time at the Institute as influencing his professional development.

“Earning the DPT was a crucial factor in the development of my career, and the fact that it’s from the MGH Institute carried a lot of weight,” says Abbott. “Early on, I identified writing and editing as an area I wanted to pursue. You can’t pursue that as a new graduate. But it was always in the back of my mind as I moved through my career as a clinician, teacher, and researcher.”

Abbott has had quite the stellar career. He is a research associate professor in the Department of Orthopaedics and Rehabilitation Medicine at the University of Melbourne in Australia on physiotherapy treatments for hip osteoarthritis were published in the *Journal of the American Medical Association* (JAMA). He is currently collaborating on projects with researchers from institutions in New Zealand, Australia, the Netherlands, and the United States.

In 2010, Abbott was awarded a Sir Charles Hercus Health Research Fellowship by the Health Research Council of New Zealand, and in 2012 he received a University of Otago Early Career Award for Distinction in Research. In 2006, he was the first New Zealander to earn a Fellowship from the New Zealand College of Physiotherapy.

He plans to continue researching and teaching while editor of the 35-year-old *JOSPT*, where he will be responsible for its editorial and peer review process to ensure articles are critiqued and assessed by peers or a panel of colleagues.

“I want to ensure that it has the best content, and that requires attracting the best authors,” Abbott says. “It builds on an excellent foundation, is highly relevant, is eagerly consumed by clinical practitioners, and has an exciting future.”

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**PHYSICAL THERAPY**

**Susan Riley ‘89, ’02** recently presented “Specially Certification: Process and Preparation” at the Pediatric Support Group of the Massachusetts chapter of the American Physical Therapy Association.

**Andrea Bonanno ‘98, ’04 and Matthew Nipins ‘05, ’10** led a movement session during a wellness workshop at the MGH Cancer Center’s annual Patient and Family Conference.


**Ann Jampel ’01, Michael Sullivan ’02,** and **Sara Hourihan ’12** were among MGH physical therapists who spoke at a hospital event recognizing PT Month in October 2014.

**Marianne Beninato ‘02, Laura Plummer ‘03,** and **Arlene Fernandes ’12** authored the article “Minimal Clinically Important Difference of the Functional Gait Assessment in Older Adults” in the June 2014 edition of *Physical Therapy* magazine.

**Linda Amslanian ’03,** director of rehabilitation services at BWH, recently received the Mary MacDonald Award for Distinguished Leadership and Service from the American Physical Therapy Association of Massachusetts.

**Richard Katz ’04** presented “Payment Update for Private Practices” at the American Physical Therapy Association Private Practice Section Annual Conference in 2014.

**Tara Orton ’06,** who works as an advanced clinician at the SRN Outpatient Center in Framingham, published the article “Flexible Fitness: Tweak Your Core Stability for Next Year’s Golf Game” in October 2014 in the *Metrowest Daily News*.


**Erica Kinler ’08** married Scott Heling in June 2014 in her hometown of New Orleans. The couple lives in Stoughton, WI, where she works as a staff PT in the outpatient department at a small rural hospital.

**Bert Reid ’08** wrote “Smart Fitness: Rebuilding You—Three Things You Should Know About Foot Orthotics” in *IndependentRI.com*. He is the co-owner of Olympic Physical Therapy and Foot Orthotics, which has five locations in Rhode Island.

**Mary Bourgeois ’09** wrote “Listen, Educate, Treat” about caring for a patient in *MGH Caring Headlines*.

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Victoria J. Gold is committed to providing assistance to educate the next generation of health care professionals and knows the value of investing in the Institute.

Ten years ago, Gold designated a planned gift to the MGH Institute in her will and, with that, became a charter member of the Ruth M. Farrisey, SON ’38 Legacy Society. Members of the Farrisey Society provide critical funding for students, faculty, research, and special initiatives through their planned gifts.

“I donate because I feel it is important to give back so other people can have the opportunity to receive from the Institute the kind of education I received from Massachusetts General Hospital’s School of Nursing,” says the Scotia, NY, resident who spent more than 35 years as a nurse. “I am very grateful the hospital prepared me for a great career, and I want to help other people to access the fine opportunities and the resources that are available today at the Institute.”

The hospital’s nursing school, which closed in 1981 after operating for 108 years, was the MGH Institute’s predecessor institution. The Farrisey Society is named in honor of the 1938 graduate who bequeathed a generous gift to the school after her death in 2007.

Gold’s philanthropy on behalf of the Institute dates back to 1993. She and her 1965 classmate, Ann Derrick, have developed a tradition of giving annual gifts to the MGH Institute at the holidays and to honor one another’s birthdays.

In addition to that support, Gold is one of several alumni and donor members of the Farrisey Society who have named the MGH Institute through a bequest, trust, insurance or retirement policy, or other estate planning vehicle such as a charitable gift annuity.

“All planned gifts, large or small, are vital to advancing MGH Institute of Health Professions’ commitment to improving health and health care through leadership education, research, and community engagement. To learn how you can include the school in your estate plans and join the Farrisey Society, contact Jean-Marie Bonofilio at jbonofilio@mghihp.edu or (617) 726-3141.

Creating a Legacy for Future Health Care Professionals

In memoriam

Janet Kunsuman NS ’96, a nurse practitioner who spent nearly 30 years working in hematology-oncology nursing at Dana-Farber Cancer Institute and Brigham and Women’s Hospital (BWH), died November 3, 2014, after a long battle with cancer. She was 58.

We invite you to submit your news and photos to alumni@mghihp.edu, or at www.mghihp.edu/alumni.
**The Sparkling Path to Communication**

**Just before I started at the MGH Institute, I visited a bioluminescent bay at night.**

The bay was filled with tiny phosphorescent organisms that light up when you disturb them. I pushed my arm through the water, and the water glowed gold—a beautiful sparkling trail. Then the trail disappeared into the darkness. There was no way to hold onto it.

There are people for whom thinking is like swimming in a bay of phosphorescent details. When life stirs the water, details bump into details and they glow. From this, a sparkling trail appears—an answer to a problem, a creative thought, an innovative idea. Too often this trail of thought fades into darkness. The thinker, overwhelmed by detail, struggles to communicate the trail, so the novel concept loses its sparkle and falls back into the sea.

My clients have many sparkling trails, but they have difficulty communicating them. These adolescents and adults are regularly applauded for their passion, creative ideas, and innovative problem solving. They are regularly criticized for their inefficiency, indecisiveness, and difficulty delivering succinct presentations and organized essays.

Language is an agreed-upon code we use to convey meaning. We use it to help us think as well as communicate. In verbal language, we use words to label our thoughts, sentences to string those thoughts together, and a hierarchy of main ideas and details to organize it all.

Using verbal language to create a fully formed thought is not straightforward. Typically, forming an idea is a mix of top-down and bottom-up processing.

My clients are gifted at bottom-up processing; they embrace detail and create new connections that are the roots of meaningful change. Without access to structure, however, this intricate web of rich thinking holds these thinkers at the level of the detail, hindering their communication effectiveness. As a result, some no longer attempt to communicate their ideas; others do, but they run the risk of losing their audience before arriving at their main point.

I believe all people should have the tools necessary to convey their thoughts. I work with my clients to help them discover the organization in their creative ideas by teaching them to gather their ideas, label them, and place them into the system of language. With this increased structure, they can more efficiently and effectively communicate their ideas.

Sixteen years ago, my arm created sparkles in the water that lasted only a moment. I now work to help people hold onto their sparkles. Every day, I have a front-row seat as my clients scoop up their golden details, sort them out, and effectively organize them for delivery. Their glowing trails no longer disappear. They stay. And their sparkle can be shared.

**Using verbal language to create a fully formed approach, where the focus starts with the evidence and then builds supporting points to arrive at the argument. Typically, forming an idea is a mix of top-down and bottom-up processing.**

Using verbal language to communicate thoughts, however, follows more of a unidirectional path. Formal presentations of information typically require top-down delivery of ideas: the topic is stated, the argument is made and supported, and the evidence is provided. Top-down communication aligns with a top-down thought process easily. A bottom-up approach does not align as easily; it is more associative in nature and thus requires that organization be found among the details in order for the content to be shared effectively.

**Using verbal language to create a fully formed thought is not straightforward. Typically, forming an idea is a mix of top-down and bottom-up processing.**

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**Kimberly Stewart ’02, MS, CCC-SLP treats adolescents and adults with high-level language processing difficulty and executive function weakness in her private practice in Concord, MA.**

Interested in writing about an experience for Last Words? Send an email to jshaw@mghihp.edu.
DO YOU REMEMBER
YOUR MOMENT?

Your moment when you knew the IHP was a special place. When you knew you were at your right place?

For me, I remember when I was placed in my first clinical at MGH, White Building-10 General Medicine with my clinical instructor, Courtney Allen Kane, RN. I was nervous because it was my first experience with a patient. Although he was in and out of sleep, our instructor encouraged us to communicate what we were doing. He appeared comforted and kept thanking us for our care. This was the moment I knew I was at the right place. I was anxious to begin nursing school, and IHP has given me all of the resources and education I needed to succeed! This was my IHP moment.

Jenelle Yvonne Del Toro, (BSN ’15)

Make a gift to the IHP.

And share your moment at www.mghihp.edu/moment or on Twitter #myIHPmoment.
Save the Date

LOCAL IMPACT, GLOBAL REACH

9TH ANNUAL Gala

TUESDAY, OCTOBER 27TH
6:00 PM
RENAISSANCE BOSTON WATERFRONT HOTEL

PLEASE VISIT WWW.MGHIHP.EDU/GALA FOR MORE INFORMATION