2013 ANNUAL REPORT

Foundation

Supporting Physicians, Patients, and Communities







Massachusetts Medical Society and Alliance Charitable Foundation

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HISTORY

In May 2000, the Massachusetts Medical Society (MMS) House of Delegates established the MMS and Alliance Charitable Foundation as a supporting organization of the MMS. The Foundation, a not-for-profit 501(c)(3) organization, is a mechanism for consolidating the MMS's charitable giving to the community into one entity, building on the activities of the former MMS Committee on Community Action and the MMS Alliance Charitable and Educational Fund.

MISSION

The mission of the Foundation is to support the charitable and educational activities of the MMS and the MMS Alliance, including, but not limited to, developing and nurturing cooperation between individuals, professions, institutions, and the community to creatively address issues that affect the health, benefit, and welfare of the community.

Cover Photos:

An attentive student in India.

Michael Matergia, international health studies grant recipient, interacting with primary school students in rural Darjeeling, West Bengal, India.

Kiara participates in Girls Inc., of Worcester's Fit Girls Program.

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Massachusetts Medical Society and Alliance Charitable Foundation 860 Winter Street, Waltham, MA 02451-1411 (800) 322-2303, ext. 7044 www.mmsfoundation.org

Message from the Chair

Dear Colleague:

The Massachusetts Medical Society and Alliance Charitable Foundation has worked on behalf of physicians and their families to improve the health and well-being of people across Massachusetts. *We are your Foundation*.

Since its inception, the Foundation has proudly supported physician-led volunteer initiatives that provide free care to uninsured patients and increased access to care for the medically underserved. The community health initiatives we fund target crucial public health issues such as infectious disease, obesity, and domestic violence.

It is a challenging time for the Foundation. Requests for Foundation funding continue to grow, however, continued economic difficulties coupled with 2013's sequestration have resulted in cuts to education, prevention and screening programs, and other vital services in the community. We continue to see increased need, yet there are fewer dollars for organizations and programs that serve our most vulnerable citizens. We remain committed to advancing the availability of accessible, quality health care and furthering the health and wellness of our communities, but we cannot do it alone!

As the charitable voice of physicians, we have the unique ability to address these problems with a medical perspective and a commitment to a healthy community. Please join the Foundation in its mission to improve the health and well-being of our communities. Your tax-deductible contribution will allow us to continue work on your behalf. As always, 100 percent of your contribution will be directed to grant-making activities. *Your donation will never be used to fund overhead or administrative expenses.*

Thank you for your generosity and support. Together, I know we will continue to better the health and lives of people throughout the Commonwealth.

Phenealy

— Vanessa P. Kenealy, JD



As physicians working at the community level, you are keenly aware of the needs that exist where you live and practice. You are encouraged to direct agencies to contact us or visit our website at www.mmsfoundation.org for information on our funding priorities and criteria.

Partnership

At its Annual Meeting in May 2000, the MMS House of Delegates adopted policy that established an educational and service partnership between the MMS and the Albert Schweitzer Fellowship Program (ASFP). Since 2002 the Foundation has been responsible for managing a \$25,000 directed donation for the partnership. Each June, the ASFP submits a grant application to the Foundation, and the directors conduct an independent review and evaluation of the proposal.

The Albert Schweitzer Fellowship received \$25,000 in July 2012 from the Massachusetts Medical Society and Alliance Charitable Foundation to help support medical student fellows in the 2012–2013 Boston Schweitzer Fellows Program. Fellows create and implement 200-hour health-related community service projects to address unmet health needs in local, underserved communities. In addition to their service projects with local community-based agencies, fellows participate in structured leadership development activities throughout the year.

The 2012–2013 Boston Schweitzer fellows submitted their final reports in May. Among the 15 fellows that completed the fellowship, four were medical student fellows supported by the Massachusetts Medical Society and Alliance Charitable Foundation. A summary of their outcomes and achievements follows.

"We are grateful to the MMS and Alliance Charitable Foundation for supporting the work of our fellows to improve the health of individuals in our communities in Massachusetts and for including the Schweitzer Fellowship in the important and inspiring work the Foundation does."

- Devon Reber, MSW, Boston program director

SIMONE ELLIS, Boston University School of Medicine Ellis worked to diversify the next generation of health care leaders by engaging youth in the Roxbury



community to consider careers in the health fields. She developed an afterschool program called Boston University School of Medicine Science Teaching Enrichment Program (BUSM STEP). This program provides programming geared to enhance knowledge of health careers, health disparities, and disease processes. Additional key features of this program include one-on-one mentoring and informational sessions about the college admissions process. This preparation provided the high-school student participants with early exposure to the medical profession and tools they can use to reach their goals. BUSM STEP aims to continue advocating for students from disadvantaged backgrounds who have the academic ability, compassion, and interpersonal skills capable of facing the challenges of promoting health equity of diverse populations.

RAAJ MEHTA, Harvard Medical School

Mehta worked with low-income families to address issues surrounding food allergies and nutrition by facilitating support



groups, developing a series of trainings for Head Start teachers, and by implementing an office-based sugar-sweetened beverage demonstration. In addition, Mehta's project also addressed families' concerns and anxiety associated with food allergies and other nutritional challenges through individualized interviews and through customized plans, which identified safe, healthy, and affordable eating options.

"I loved this fellowship year. . . I developed a strong relationship with The Dimock Center, increased my appreciation for community health centers, and cultivated a passion for primary care. Ultimately, I am convinced that this year has inspired me to pursue a career in med/peds so that I am able to work with children whose illnesses, like food allergy or inflammatory bowel disease, ignore the artificial line that divides medicine and pediatrics." – Raaj Mehta

"Looking back, this fellowship has provided me with a unique opportunity to grow and mature as a leader in service. Beyond anything else, it allowed me to get my feet wet and work directly with the Worcester homeless. Building relationships with these people, who had all endured so much suffering throughout their lives, offered me a glance at a part of our society that is often overlooked — by the general populace and even the medical community. Moreover, spending time at the [shelter] showed me the impact even a little compassion and patience could have. So many times, I have been thanked for simply lending my ear for the duration of a story. This is a lesson I will definitely hold on to as I move *forward in my medical career.*" – Shu Yang

SHU YANG, University of Massachusetts Medical School

Yang addressed the medical needs of homeless individuals in Worcester by establishing



an evening foot clinic at the Greater Worcester Housing Connection. In addition to offering basic foot care, diabetic screenings, and clean footwear, the clinic provided individualized care and attention to the personal needs of shelter residents and helped connect them to other local resources, such as the Worcester Homeless Outreach and Advocacy Program (HOAP). Yang's Fellowship was supported by Novo Nordisk Community Care Boston.

In November 2012, fellows had the special opportunity to attend The Albert Schweitzer Fellowship's national annual conference, Building Healthier Communities: Leading by Example, featuring keynote addresses by Sanjiv Chopra, MD, MACP, about leadership and Adewale Troutman, MD, MPH, MA, CPH about health disparities and the social determinants of health, as well as a plenary Q&A session with Dr. Jim O'Connell, founder and president of Boston Health Care for the Homeless Program and 2012 recipient of the Schweitzer Prize for Humanitarianism.



2012–13 Fellows (left to right) Dana Aravich, BU Sargent College; Sydnee Chavis, Harvard School of Dental Medicine; Simone Ellis, BU School of Medicine; Dhara Shah, BU School of Dental Medicine; Connie Lu, Northeastern School of Pharmacy; Jenny Citrin, Tufts School of Dental Medicine; Devon Reber, Program Director; and Shu Yang, U. Mass. Medical School.

MOHAMED ZEIDAN, Tufts University School of Medicine

Zeidan addressed high re-visit rates to Boston emergency rooms by establishing a medical student follow-up program



at Tufts Medical Center. Focusing in particular on patients without primary care physicians, students met with as many patients as possible to ensure that they understand their conditions and the necessary steps for a full recovery. Students met with patients before discharge and again a week later to monitor their progress. Ultimately, the project provided underserved patients with advocates in the health care system while also educating future physicians on the needs of their community.

"This experience has greatly influenced the way I interact with patients. I have already noticed this in my surgery rotation as a third-year medical student. With almost every patient, I have stayed after our morning rounds to get to know them. I have gotten to learn about how they've met their spouse, how they like their jobs, what they like to eat and do for fun, and more. Each patient has gone out of his/her way to tell me how much this time together has meant to them, and I have left each interaction with a better understanding of the patient as a whole." — Mohamed Zeidan

2012-2013 Grants

The Foundation currently administers the following grant programs:

Community Action, which funds programs that creatively address issues that affect the health and well-being of the community

Care for the Medically Uninsured, which supports physician-led volunteer initiatives to provide free care to uninsured patients and increase access to care for the medically underinsured

International Health Studies, which provides funding for medical students and resident physician members of the MMS to pursue international education that focuses on underserved populations

COMMUNITY ACTION

Heywood Hospital — \$20,000 to support a part-time pharmacist who will provide bedside counseling on medication use, in-home consultation and monitoring to include medication reconciliation to identify any drug-related problems, and will serve as a liaison with patient's primary care physicians, caregivers, and pharmacies.

Community Health Programs — \$35,000 to outfit the medical van with equipment for a mobile ophthalmic office to provide all ages with comprehensive screening, diagnosis, and treatment for eye disease. The mobile clinic will travel to outlying rural areas, senior centers, food pantries, and Head Start programs, providing care to populations that are at a severe economic, mobility, and health disadvantage.

Girls Inc., of Worcester — \$10,000 to support Promoting Healthy Lifestyles for At-Risk Girls and its program components Fit Girls and Friendly PEERsuasian, whose goals are to improve the health of vulnerable low-income girls in Worcester and address unhealthy behaviors including tobacco/substance use, poor nutrition, and lack of exercise.



Thanks to the generous support of the Foundation, Community Health Programs will be outfitted with equipment for a mobile ophthalmic office in order to provide access to quality eye care for the most vulnerable populations: low-income children, the working poor, the chronically ill, and the elderly — all populations that currently may go for years without an eye exam and all populations that struggle with limited transportation options.

UMass Memorial Medical Center — \$15,000 to support a homebased asthma reduction program with children with asthma and their families living in Worcester's low-income Bell Hill neighborhood. Children who will be targeted for this program include those who have multiple asthma-related urgent/emergency visits or admissions; are not taking, filling, or refilling prescriptions or are overusing rescue medicines; miss school days; or have functional limitations.

"The grant for 'Comprehensive Colonoscopy Engagement' is important to Upham's Corner Health Center (UCHC) because our health center's mission is to provide comprehensive, culturally competent, community-based health and social services, so as to maintain and improve the health and well-being of residents of North Dorchester and the adjacent neighborhoods. Our patients face many barriers to care, and with the patient navigator, we want to support and engage patients referred to Boston Medical Center (BMC), UCHC's primary hospital affiliation, for screening colonoscopy. Past experience at UCHC in these efforts demonstrate the effectiveness of our goals to improve patient access to this service, to provide culturally and linguistically appropriate comprehensive services, to increase patient understanding of the procedure and its importance, and to increase completion of the procedure." — Jenna M. Tonet, MPH, public health program manager, Upham's Corner Health Center

Upham's Corner Health Center — \$10,000 to support a multilingual patient navigator for the Comprehensive Colonoscopy Engagement project. The primary objectives of the intervention are to decrease missed or cancelled appointments and to promote early detection.

CARE FOR THE MEDICALLY UNINSURED

Amherst Survival Center Free Medical Clinic — \$15,000 to hire a part-time clinic manager to oversee the transition to a highercapacity operation of this newly expanded clinic, which is staffed entirely by volunteer medical personnel and serves more than 500 individuals in Hampshire and Franklin counties.



Exterior view of the new Amherst Survival Center, which opened December 3, 2012. Photo by Jason Wysocki.

CHANGE — \$10,000 to support the expansion of the tuberculosis screening and educational program conducted by volunteer physicians, medical students, nursing and pharmacy students, and other health care workers at shelters in central Massachusetts in an effort to identify and treat additional latent tuberculosis patients.

"For the last eight years we have provided PPD testing for the schools and shelters in the area. Over 90% of our positives are immigrants from high-risk countries. The recent grant from the Foundation will allow us to not only expand our program both in numbers of patients tested, but also educate those with latent tuberculosis in the treatment of the disease." — Harvey G. Clermont, MD, medical director, CHANGE **Greater Westfield Free Health Services** — \$5,000 to support this physician-led volunteer medical team that provides free health services to meet the needs of the uninsured and underinsured in Westfield and surrounding western Massachusetts communities.

MetroWest Free Medical Program — \$10,000 to engage existing and new physicians and other health care and layperson volunteers to expand regular services beyond the clinic sessions offered on Monday, Tuesday, and Thursday nights in Framingham and Sudbury, to include health screening, education, and patient referrals through three food pantries.

"At the Family Van we believe that improving health literacy and health access will inspire youth to make healthy decisions, this will serve them into adulthood. They often rely on Internet searches to answer their health-related questions, which can lead to misunderstanding. With your support we will be able to reach high-risk youth and empower them to make healthier decisions." – Lunecee Eligene, program coordinator, The Family Van

The Family Van — \$10,000 to support the organization's Youth Initiative, which targets high-risk youth 12 to 24 years of age in Boston's most underserved neighborhoods and provides mobile health care screenings and education.

The Sharewood Project — \$5,000 to support this entirely studentoperated medical clinic that relies exclusively on volunteers to provide free health services to Greater Boston's most vulnerable residents.



Stephen Metz, MD; Candy Oyler, president, Greater Westfield Free Health Services; and Frank Horrigan, MD, medical director, Greater Westfield Free Health Services.



Lauren and David completing patient records at The Sharewood Project. This practice builds students' skills in reporting and understanding their clinical findings and allows the clinic to review patient encounters to ensure delivery of quality care.

2012-2013 Grants

INTERNATIONAL HEALTH STUDIES

Kristin Dwyer, MD, an emergency medicine resident at Boston Medical Center who traveled to the Hue Central Hospital and Hue University of Medicine in Vietnam and provided patient care and provider education. Her responsibilities included 20 clinical shifts, 10 case discussion lectures, and five to 10 formal curriculum lectures for the students, residents, and providers in the Emergency Department. In addition, she taught an ultrasound curriculum during her time in Hue, which included lectures and hands-on training.

"Working internationally is always an eye opening experience. Not only do you learn about health care systems in other countries, but it often helps highlight things I wouldn't otherwise appreciate about our health care system; like its excesses." – Kristin Dwyer, MD



The Emergency Department at the Hue Central Hospital in Vietnam.



Abhijeet Patil, MD, explaining the research study in India.

Raj Vyas, **MD**, a resident in the Harvard Combined Plastic Surgery Residency Program who traveled to Hospitalier et Universitaire de Treichville in Abidjan, Ivory Coast. Dr. Vyas worked with the Global Smile Foundation and directly served Abidjanians by repairing cleft lips and palates in an underserved region without any regional alternative physicians. In addition, in partnership with local providers, he provided intra-operative teaching alongside formal didactics.

"This grant has afforded me the opportunity to continue my cleft care field research in Abidjan, Ivory Coast, and to formalize/publish essential tools, such as the emergency crash cart, that will benefit any surgical outreach initiative." – Raj Vyas, MD

Abhijeet Patil, MD, a fellow in the UMass Medical School Fellowship Program, who traveled to the Government Hospital in Beed, India. Dr. Patil conducted a cross-sectional communitybased needs assessment on elderly men and women 60 years of age and older who were drawn from a field practice area of Government Hospital in Beed. The outcome goal of this project is to use the data to establish a community-level geriatric care program that will effectively provide high quality health care for the elderly, who are economically poor and lack health care resources and access to medical care in Beed.



Raj Vyas, MD, taking an Abidjan surgical resident through his first cleft repair on the mission's final day after working with him over the course of the operative week.

Kelli Jarrett, a medical student at Boston University School of Medicine who traveled to Shirati, Tanzania. Ms. Jarrett, under the supervision of a family medicine physician trained in the US, provided full-spectrum family medicine to an underserved population in rural Tanzania. This included diagnosis and treatment of most health care problems for both children and adults, including maternity care. Many of the visits to the clinic were for treatment of infectious diseases, including HIV, schistosomiasis and other parasitic infections, and malaria. In addition, she helped with public health intervention through the clinic, including visiting schools to administer anti-parasitic medications to schoolchildren and providing vaccination in the clinic.

"A Swahili proverb states: 'You kill a snake with the stick you have.' While I knew prior to this trip that resourcefulness and creativity are important when working in developing countries, it is certainly a lesson that was driven home during my time in Shirati." – Kelli Jarrett

Michael Matergia, a medical student at Harvard Medical School who traveled to Darjeeling, West Bengal, India. Mr. Matergia, under the direct supervision of a physician, conducted initial evaluations, developed management plans, and coordinated care at both Planter's Hospital and the outpatient clinic at the Darjeeling District Hospital. He participated in daily rounds and outpatient clinic sessions. Additionally, he participated in clinical outreach programs such as rural health camps. Through his community development project, he strived to improve the activities of the Comprehensive Health and Hygiene Improvement Program serving impoverished and disadvantaged families from rural communities surrounding Darjeeling. These families are either laborers on tea plantations or subsistence farmers. During his time in Darjeeling, he directly oversaw the initial implementation of an innovative model for child mental health.

"This experience has pushed me to develop as a clinician and grow as a future leader in global health." – Michael Matergia



Kelli Jarrett performing an ultrasound on a boy with hepatosplenomegaly from schistosomiasis.



Michael Matergia reviewing a chart at the outpatient clinic at the Darjeeling District Hospital.

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Thank you for your support of the Foundation through your philanthropic gifts from June 1, 2012, to May 31, 2013.

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We have made every effort to properly recognize our generous donors. If we have made an error, we apologize. Please contact us so we can correct our records.

1781 SOCIETY

The 1781 Society, named for the year the Massachusetts Medical Society was established, is a means for recognizing those donors who have made plans to leave a gift to the Foundation after their lifetime. Donors may provide for the future of the Foundation through outright bequests to the Foundation, or name the Foundation as the beneficiary of a life insurance policy or retirement plan.

We are deeply grateful to every member of the 1781 Society, including those who prefer to remain anonymous. Your legacy will ensure that the Foundation continues to improve the health and lives of people throughout the Commonwealth.

"For many physicians who have worked in their district and state medical society at various levels, this provides a very meaningful opportunity. Major life transitions, such as retirement or illness, often spur individuals to assess their legacy. For me, after my health and my family, philanthropy became an important priority — trying to make things better for people who have been less fortunate." – Francis (Rusty) Van Houten, MD, Foundation advisor and prior board member, and former MMS president

Our Supporters

TRIBUTES

The Foundation is pleased to accept contributions recognizing special occasion in the lives of family, friends, and colleagues. We are honored to recognize these gifts.

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HOLYOKE SOCIETY

The Holyoke Society is comprised of individuals who enroll as Life Members of the Massachusetts Medical Society. These distinguished physicians automatically become honorific members of the Foundation's Holyoke Society and a portion of their dues is contributed to the Foundation's endowment.

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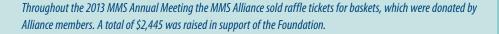
MORE INFORMATION

Join the MMS as a Life Member to be enrolled in the Holyoke Society. To receive a Life dues estimate, contact the Member Information Center at info@massmed.org or (800) 322-2303, ext. 7311.

2013

Sten B. Lofgren, MD Barry M. Manual, MD Joanna M. Sawicka, MD Christopher R. Smith, MD

The fourth annual Holiday Boutique, hosted by the Massachusetts Medical Society Alliance to benefit the Massachusetts Medical Society and Alliance Charitable Foundation, was held on Friday, November 30, 2012. Coinciding with the Society's House of Delegates meeting, the boutique featured mostly handmade items from Alliance members, including jewelry, wreaths, tabletop decorations, scarves, mittens, blankets, breads, candy, gingerbread houses, vinaigrettes, and jellies.







Silent Auction

The Foundation's ninth annual silent auction was held on Thursday, May 9, 2013, at the Seaport Hotel and World Trade Center in Boston. The auction was held in conjunction with the Nancy N. Caron Annual Member Art Exhibit, sponsored by the MMS Arts, History, Humanism, and Culture Member Interest Network.

Thank you to the following individuals and organizations that donated items for the silent auction:

Edward Amaral, MD Paul Berman, MD Beatrice Igne Bianchi Jonathan Bianchi Margaret Igne-Bianchi Linda Canty Hubert I. Caplan, MD Patricia Downs Berger, MD Jack T. Evjy, MD Richard Gross, MD Charles Huizenga, MD Judd Kline, MD Joyce Motta, Esq. Mario Motta, MD Marie-Christine Reti Susana Rev Alvarez, MD Deanna Ricker, MD Arthur Skarin, MD Sevim Under Stuart Weisberger, MD

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For a number of years, the exhibit has provided a unique opportunity for members and their families to share their artistic talents. Their selfexpression explores varied mediums and has been influenced and shaped by a variety of fascinating experiences. Artists were invited to donate their works for a silent auction to benefit the Foundation. Twenty-eight (28) artists participated in the event while 22 pieces of art were available for auction. In addition, we received 20 other items to be part of the silent auction. The event was an enriching experience, and more than \$4,500 was raised to support the Foundation and its activities.



Corey E. Collins, DO



Financials

Massachusetts Medical Society and Alliance Charitable Foundation Statement of revenues and expenses and changes in net assets for Fiscal Year ended May 31, 2013

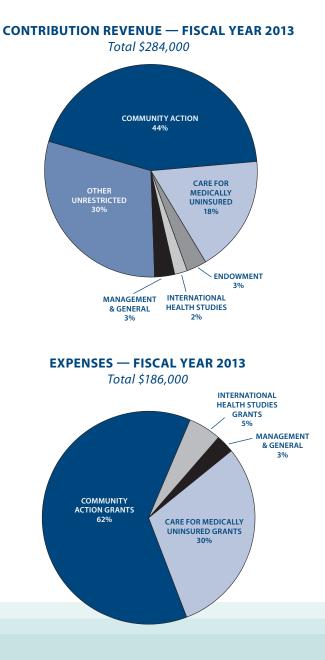
STATEMENT OF ACTIVITIES June 1, 2012, to May 31, 2013

REVENUE*	AUDITED	AUDITED 2013
Contributions		
Community Action	125	125
Care for Medically Uninsured	50	50
International Health Studies	5	5
Other Unrestricted	89	87
Endowment	3	9
Management & General	8	8
Total Contributions	280	284

OTHER REVENUE*	2012	2013
Unrestricted Investment Activity	12	3
Endowment Investment Activity	(25)	86
Total Revenues	267	373

EXPENSES*	2012	2013
Community Action Grants	125	115
Care for Medically Uninsured Grants	58	55
International Health Studies Grants	8	9
Other Unrestricted	25	1
Management and General	8	6
Total Expenses	224	186
Excess of Revenues over Expenses	43	187
Net Assets, Beginning of Year	1,304	1,347
Net Assets, End of Year	1,347	1,534

*In thousands of dollars



Because of the extraordinary support the Foundation receives from the Massachusetts Medical Society, we are able to keep our overhead expenses extremely low. As a result, those who give to the Foundation can be assured that 100% of their contribution goes where it is needed most — to address issues that affect the health and well-being of the community.



Foundation

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