



JOSIAH MACY JR. FOUNDATION

Careers for Leaders and Innovators
in Health Professions Education

2014 ANNUAL REPORT



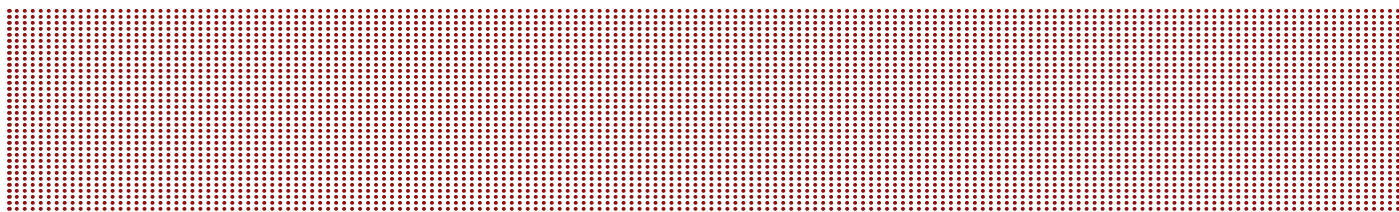
The Foundation's logo incorporates the mid-nineteenth century ship's flag of Josiah Macy & Sons, New York, shipping and commission merchants and ancestors of Josiah Macy Jr.

Cover: Two Macy-supported faculty embedded within simulation to learn facilitation skills during simulated scenarios at the University of Washington.



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EVE R. COLSON, MD, MHPE

Yale School of Medicine
2011 Macy Faculty Scholar

Dr. Colson is a professor and chief of the recently-established section of education in the Department of Pediatrics at the Yale School of Medicine. As a Macy Faculty Scholar, Dr. Colson implemented and is now the director of the longitudinal clinical experience. Under this experience, students start in the very first year of medical school interacting with patients, healthcare providers, and mentors.



TED JAMES, MD, FACS

The University of Vermont
College of Medicine
2012 Macy Faculty Scholar

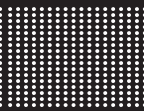
Dr. James is an associate professor of surgery and the director of interprofessional education at the University of Vermont College of Medicine. Dr. James created and successfully implemented a patient safety interprofessional education program at the University. The program's main goal is to improve healthcare delivery by providing health profession students with the opportunity to develop skills required for safe, efficient, team-based patient care.



MAYUMI WILLGERODT, PHD, MPH, RN

University of Washington
School of Nursing
2013 Macy Faculty Scholar

Dr. Willgerodt is a professor at the University of Washington School of Nursing. As a Macy Faculty Scholar, Dr. Willgerodt is implementing and evaluating an interprofessional education curriculum for pediatric dental residents, advanced practice nursing students, and social work students. She is also creating a team-based model of oral health care for underserved children in the Center for Pediatric Dentistry at the University of Washington.



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President's Statement

George E. Thibault, MD, *President*



As I look back on 2014, the work supported by the Macy Foundation continues to be at the forefront of aligning health professions education with the needs of patients, families, and clinicians in a rapidly changing healthcare delivery system. We are more convinced than ever that changing how physicians, nurses, and other health professionals are educated is critical to moving the delivery system toward better care, better health, and improved efficiency.

And if we are to truly transform health care and improve the public's health, we must invest in the careers of enough educational leaders and innovators to reach critical mass in the nation's medical and nursing schools. As I've often said, the dramatic changes in the content of medical practice, in the healthcare delivery system, and in the demographics of the patient population call for equally dramatic changes in the educational system preparing health professionals for practice and leadership.

Across the Foundation's priorities—from encouraging interprofessional education and teamwork to developing new content and models of clinical education to improving the care of underserved populations—investing in and nurturing first-rate educational leaders is paramount and deserves the same care and attention as developing the careers of first-rate clinicians and first-rate researchers. So, it is fitting that the theme of the 2014 Annual Report is "Careers for Leaders and Innovators in Health Professions Education."

Throughout the report, we highlight not only the Foundation's single most significant investment in

“The dramatic changes in the content of medical practice, in the healthcare delivery system, and in the demographics of the patient population call for equally dramatic changes in the educational system.” — George E. Thibault, MD

career development for educational leaders and innovators—the Macy Faculty Scholars Program—but also the important work of our grantees and the Foundation’s efforts to advance innovation in health professions education.

It has been a productive year.

We welcomed our fourth class of Macy Faculty Scholars in 2014, bringing the total to 21 scholars, and held our third Macy Faculty Scholars Annual Meeting, which for the first time included an alumni class of scholars. The 2011 scholars are all now in leadership positions in their institutions, continuing and building on the work they began as Macy Faculty Scholars. Filled with informative updates about the scholars’ projects, the day served as an affirmation for the Macy staff, and our dedicated National Advisory Committee, that the program and the scholars are exceeding our expectations. In an important milestone, the Board in October 2014 renewed the Macy Faculty Scholars program for an additional six years to complete the original goal of a 10-year cycle to put at least 50 scholars in place at medical and nursing schools across the country.

The Foundation also launched its first formal initiative to bring together the worlds of health professions education, healthcare delivery, and patient and community advocacy at the April 2014 Macy Conference, “Partnering with Patients, Families, and Communities to Link Interprofessional Practice and Education.” The conference brought together patients, leaders of patient advocacy groups, health professions educators, and leaders of health care

organizations to develop recommendations for the urgent reform of health professions education and practice in partnership with patients, families, and communities. Those attending crafted and agreed to the following vision statement:

We envision a future in which individuals, families, and communities are understood to be the very reason our healthcare system exists, and that those who are caring, teaching, learning, or otherwise working within the system must partner fully and effectively with them to foster optimal health and wellness for all.

Likewise, the Macy-supported National Center for Interprofessional Practice and Education at the University of Minnesota is well on the way to creating a nexus to bring together the worlds of health professions education and the healthcare delivery system. Created in 2012 by the Health Resources and Services Administration through a national competitive process, the Center is developing incubator sites across the country to collect longitudinal data to identify best practices and measure outcomes related to interprofessional practice and education. The Center, funded by Macy, the Robert Wood Johnson Foundation, and the Gordon and Betty Moore Foundation, and the federal government, is an important example of leveraging public and private resources to launch a large-scale effort to advance educational innovation.

In the spring of this year we celebrated the 20th anniversary of the Harvard Macy Institute with a one-and-a-half day symposium attended by more than 200 alumni of the program. The Harvard



George Thibault, MD speaking at the Health Affairs and Macy Foundation half-day symposium on GME reform.

Macy Institute was created by a series of grants from the Macy Foundation in the 1990s. The symposium honored the alumni and faculty for their innovative contributions to the field of health professions education. The program, with more than 3,500 alumni from hundreds of institutions representing more than 50 countries and virtually all health care disciplines, serves as an important foundation for the careers of innovators in health professions education.

Another significant development during the year was the release of the Institute of Medicine (IOM) report, "Graduate Medical Education That Meets the Nation's Health Needs." In early 2012, the Macy Foundation asked the IOM to conduct an independent review of the goals, governance, and financing of graduate medical education (GME) after organizing two conferences in 2010 and 2011 that made a series of recommendations for the reform of GME in this country.

The Foundation's initial funding for the IOM study committee helped attract additional support from other foundations and government agencies to complete this important examination of GME. The report's recommendations encourage

"innovation in the structures, locations, and designs of GME programs" to help achieve the goals of better individual care, better population health, and lower costs. We will be supporting ongoing discussions of the report's recommendations and of other ideas to better align GME with the needs of the public and a changing healthcare system.

None of these accomplishments would have been possible without the guidance and wisdom of our Board and the hard work and dedication of the Foundation staff. And, while we accomplished a great deal in 2014, much work remains to be done to foster innovations in health professions education to keep pace with the changing needs of the American people in a rapidly evolving healthcare system. We believe our scholars and grantees are up to the task, and we look forward to working with them and our government and philanthropic partners to fulfill the vision of better care, better health, and lower costs.

A handwritten signature in black ink that reads "George E. Thibault MD".

GEORGE E. THIBAUT, MD



Kate Macy Ladd



Josiah Macy Jr.



A Brief History

Kate Macy Ladd established the Josiah Macy Jr. Foundation in 1930 to honor the memory of her father, a well-known philanthropist who died young. Ladd intended the Foundation to devote itself to the promotion of health and the ministry of healing.

Over the decades, the founding mission has remained the same while the focus has shifted from medical research to health professions education. Today, the Josiah Macy Jr. Foundation is the only national foundation dedicated solely to improving the education of health professionals.

For more on the Foundation's history, please visit our website:

www.macyfoundation.org

Nurturing Leaders and Innovators in Health Professions Education



To improve health care and the public's health, we must align health professions education more directly with a changing healthcare delivery system and the needs of a changing population. In order to achieve this alignment we must develop the careers of people who can lead that change in health professions education.

2011 Macy Faculty Scholar Dr. Alan Dow teaches students in a simulation based setting at Virginia Commonwealth University.

Leadership development in health professions education is a critical piece of the Macy Foundation's work.

In developing the next generation of national leaders in health professions education, creative faculty members devoted to educational reform must be nurtured. We must also ensure faculty members have the skills and knowledge necessary to teach new curriculum content and develop new models for clinical education, in order to produce a healthcare workforce equipped to provide high-quality, patient-centered care.

"We are trying to prepare the next generation of educators who will be leaders in breaking down the silos between the professions, who will be leaders in how we can thoughtfully bring education and the delivery system closer together and who will be leaders in how we incorporate the insights and wishes of patients and families and communities in that system redesign," George E. Thibault said. "It takes time, creativity, and nurturing to develop those careers."

Mentoring Change Agents

Given the hundreds of medical and nursing schools across the country and the tens of thousands of students and faculty in those schools, the Macy Foundation in 2010 cast what at first may seem like a pebble in a big pond by creating the Macy Faculty Scholars Program to nurture and mentor five mid-career nursing or medicine faculty members a year to lead the charge for educational reform and innovation. Almost five years later, with 21 scholars in place and plans for at least 30 more by 2020, the ripples from those first pebbles have widened as the scholars advance within their home institutions and gain visibility nationally as articulate and thoughtful voices for educational reform and innovation.

"Each of the scholars is having a great influence on their institution, and that's where influence begins—they have to bring about change in their own institution first and then do that nationally,"

— George E. Thibault, MD

2013 Macy Faculty Scholars (Front row left to right): Memoona Hasnain, MD, MHPE, PhD; Kelly Karpa, PhD, RPH; Lisa Day, PhD, RN, CNE; Lauren Meade, MD; Mayumi Willgerodt, PhD, MPH, RN / 2013 Mentors (Back row left to right): Alan Schwartz, PhD; Paul M. Haidet, MD, MPH; Theresa M. Valiga, EdD, RN, CNE, ANEF, FAAN; Michael LaCombe, MD; Brenda Zierler, PhD, RN, FAAN





2011 Macy Faculty Scholar Dr. Dena H. Hassouneh teaches a student at Oregon Health & Science University School of Nursing

And that is exactly what the Macy Foundation had envisioned back in 2010—the careful selection of a small group of talented people nurtured and mentored to be change agents who influence their institutions, their colleagues, and their students, who all in turn will influence patient care in ever wider circles.

From Yale to the University of California, Irvine, from the University of Washington to Duke, and points in between, the Macy Faculty Scholars have undertaken projects ranging from designing interprofessional clinical experiences for health professions students to writing a book that provides an in-depth description of the barriers and challenges facing health professions faculty of color. They have developed courses on quality improvement and patient safety for medical residents and are identifying ways to keep patients front and center as new technology, such as electronic medical records, is deployed to advance patient-centered care.

“Each of the scholars is having a great influence on their institution, and that’s where influence begins—they have to bring about change in their own institution first and then do that nationally,” Thibault said.

Each year, the deans of the nation’s medical and nursing schools are invited to nominate one faculty member to be a Macy Faculty Scholar, and the program has drawn as many as 120 applicants a year. A National Advisory Committee ultimately chooses five—although in 2014, the caliber of candidates was so high, six scholars were selected—and each receives up to \$100,000 a year in salary support to protect at least 50 percent of their time over two years to further develop their career and pursue a mentored educational innovation project.

One National Advisory Committee Member, David Irby, PhD, a professor of medicine and former vice dean for education and director of the Office of Medical Education at the University of California, San Francisco, described his participation in the Macy Faculty Scholars program as a “singular joy,”



2012 Macy Faculty Scholar Dr. Sandrijn M. van Schaik teaches a student how to place an IV during a simulation session at the University of California, San Francisco.

adding that “the program stands alone in offering a boost to the careers of a highly select group of future leaders, innovators and scholars in health professions education. I continue to be amazed by the vision of the Macy Foundation in launching this signature program, which is transforming medical and nursing education for the better.”

Likewise, Sheldon Retchin, MD, MSPH, a senior vice president at Virginia Commonwealth University and chief executive officer of VCU Health System, who served as a mentor to 2011 Scholar Alan Dow, MD, MSHA, noted, “For 175 years we have educated health professionals on our campus, a compact 53-acre location that includes five health science schools and an academic medical center. Yet, despite this proximity and the opportunities for interprofessional interaction such proximity presents, we have not traditionally had the structures and programs to reap the benefits afforded by our geography. When Alan Dow became a Macy Faculty Scholar, that all changed.... Certainly, Alan has benefited tremendously from his selection as a Scholar, but, equally important, is the

ripple effects of his selection on other members of our community.”

For the Scholars, beyond the gifts of time and mentoring, the opportunity to develop a network of peers working toward similar goals can be transformational. In the words of 2011 Scholar Dena H. Hassouneh, PhD, ANP, PMHNP, a professor of nursing at Oregon Health & Science University, “The Macy Faculty Scholars program is truly a family, and each successive generation of scholars has something new to contribute.”

Both within and outside their institution, Scholars are increasingly recognized as leaders in health professions education. All of the 2011 Scholars have been promoted and received support from their institutions to continue the work they began as Macy Faculty Scholars. “There’s no greater success in the foundation world than to fund something and then to have someone else pick up and continue the support,” said Thibault.

Building Leaders and Innovators

While the Macy Faculty Scholars program is the centerpiece of the Foundation's work to develop the careers of the next generation of innovative educational leaders, it is not the only work. For decades, the Macy Foundation has supported programs that focus on improving the leadership practices and capacities of health professions faculty and students.

Established in 1994 with support from the Macy Foundation, the Harvard Macy Institute is an incubator for leaders and innovators in healthcare education. It provides continuing education and professional development to healthcare professionals and educators—including Macy Faculty Scholars—that prepares them to lead institutional change and develop and design innovative solutions that have a lasting impact on the way medicine is practiced and students are educated. In 2014 the Institute celebrated its 20th Anniversary with a Macy Foundation-sponsored symposium that highlighted the achievements and contributions of the over 3,500 alumni, representing more than 800 institutions across the globe, that have completed courses at the Institute. Today, alumni innovations are enhancing the care of patients worldwide.

With support from the Macy Foundation, Primary Care Progress hosted the Gregg Stracks Leadership Summit, two days of training to provide 75 medicine, nursing, physician assistant, and pharmacy students with leadership and advocacy skills to develop a new generation of primary care leaders. The goal is that participants will apply their newly developed skills to lead efforts to organize the primary care community at their school and throughout their careers.

Developing Faculty Skills and Expertise

The Foundation is also supporting a wide array of projects focused on faculty development.

"We will never have enough Macy Faculty Scholars to develop all the faculty we need," Thibault said. "It is also important that we focus on institutions, which have to play an important role in the development of their own faculty."

As our healthcare system experiments with new delivery models, and patient safety, quality improvement, population health and other knowledge becomes increasingly important in the practice of medicine, we need to ensure faculty have the necessary competencies and skills to effectively teach our future workforce.

"The nature of the competencies, knowledge, skills, and attitudes needed for 21st century practice is something none of us—and I'm old enough now that I can say this—were ever taught. I was never taught systems. I was never taught quality improvement," said Eric S. Holmboe, MD, formerly a senior vice president at the American Board of Internal Medicine and the principal investigator on a 2012 Macy grant to bring together the Boards of Family Medicine, Internal Medicine and Pediatrics to prepare faculty to redesign primary care residency programs to emphasize patient-centered care.

Through the grant, a curriculum focusing on such topics as systems, change management, teamwork, and population health management was developed to help faculty members improve teaching in ambulatory settings and emphasize patient-centered care. With initial testing complete, Holmboe plans to scale up the program, and the three Boards are interested in pursuing the project.

“An important aspect of the grant, which approached faculty and professional development as longitudinal and ongoing, was to help faculty reframe their own practice to focus on what patients really need—only then can they help residents learn how to provide patient-centered care,” Holmboe said.

“We are in a situation where the faculty and the learners are actually on equal footing. One of the concepts that is beginning to take hold is that this is mostly going to be co-learning. This is not necessarily something the faculty is just going to do to the residents—they need development so they can get up-to-speed and continue the learning journey with the residents and fellows,” he said.

Preparing faculty to teach new content was a key aspect of the Mayo Clinic Quality and Safety Initiative. With Macy Foundation support, Mayo Clinic experts developed online curricular modules and faculty syllabi covering topics related to quality improvement, quality measurement, patient safety, evidence-based medicine, leadership, and health policy.

Training Faculty to Deliver Interprofessional Education

How you teach can be just as important as what you teach.

As interprofessional education takes root, helping faculty develop a level of both comfort and competence to prepare learners to deliver team-based care is essential.

When Rita Charon, MD, PhD, introduced narrative medicine to medical, nursing, dental, and public health students at Columbia University to improve teamwork, she began with the faculty. With the goal



2012 Macy Columbia University Seminar

of developing faculty skills in narrative medicine and greater interprofessional competencies, Charon brought together faculty from each of the four schools to participate in a series of narrative seminars. Over a year, two faculty members from each of the four schools met monthly to discuss short stories, news articles, or poems that they had read. Charon then worked together with these faculty members to develop the Macy-funded interprofessional curriculum.

Likewise, Sarah Shrader, PharmD, and Jana Zaudke, MD, co-principal investigators of a Macy grant to the University of Kansas Medical Center (KUMC) to transform primary care training clinics into interprofessional training sites, focused on developing faculty precepting skills for interprofessional teams of learners.

Faculty preceptors stand at the intersection of practice and education and are perfectly positioned to bring together the worlds of interprofessional education and practice in primary care settings, according to Shrader and Zaudke. “But we realized we needed a formal faculty development piece to help our faculty get used



2012 Macy Faculty Scholar Dr. Wendy Madigosky teaches an interprofessional course on patient safety at the University of Colorado School of Medicine.

to precepting professions that are not their own,” Zaudke said.

KUMC will partner with the National Center for Interprofessional Practice and Education to be an incubator site, which will allow Shrader and Zaudke to collect outcome data on faculty development as well as patient outcomes.

Developing effective ways to provide faculty development in interprofessional education is also critical to scale up provision of interprofessional education.

With a 2014 Macy grant, the University of Missouri, the University of Washington, and the University of Virginia are developing three regional centers for faculty development in interprofessional education.

The three schools are scaling up a successful 2012 Macy-funded “train-the trainer” pilot grant to the University of Washington and University of Missouri that involved about 40 faculty members and provided hands-on faculty development in interprofessional education. The new grant will train hundreds of faculty members over the next four years, who in turn will return to their home institutions to advance interprofessional education and practice.

Along with developing skills to help colleagues incorporate interprofessional education into their teaching repertoire, the training approach creates opportunities for faculty members to learn from each other.

“What was so magical about the pilot—and part of it was orchestrated and part of it was organic and happened because we got the right people together—is they learned from one another and a lot of that learning was about how to navigate barriers,” said Leslie W. Hall, MD, interim dean of the University of Missouri-Columbia School of Medicine, (incoming chief executive officer of the Palmetto Health-USC Medical Group and executive dean of the University of South Carolina School of Medicine), and co-principal investigator of the project.

Now in its fifth year, the Interprofessional Learning Exchange and Development Center (I-LEAD) at Case Western Reserve University in Cleveland, Ohio, established a virtual center to support ongoing faculty development related to interprofessional practice, as well as curricular evaluation and enhancement. The I-LEAD Center provides faculty with access to evidence supporting interprofessional education and practice, programs and materials developed by the Institute for Healthcare Improvement and the Quality and Safety Education for Nurses initiative, and education and practice evaluation tools.

All of these faculty development activities of Macy grantees in combination with our growing cohort of Macy Faculty Scholars, are the essential underpinnings of the educational reform necessary to support healthcare delivery reform. We are proud of all of these accomplishments, and we anticipate even greater dividends for the learners they will touch in the years ahead.

**DENA H. HASSOUNEH,
PHD, ANP, PMHNP**

Oregon Health & Science University
School of Nursing
2011 Macy Faculty Scholar

Dr. Hassouneh is a professor at Oregon Health & Science University School of Nursing. As a Macy Faculty Scholar, Dr. Hassouneh conducted a national study about the experiences of faculty of color in nursing, medicine, pharmacy, and dentistry. She has a contract with an academic press to publish her book that will provide an in-depth description of the barriers and challenges facing health professions faculty of color.



**WRENETHA A. JULION,
PHD, MPH, RN**

Rush University College of Nursing
2012 Macy Faculty Scholar

Dr. Julion is a professor at Rush University College of Nursing. As a Macy Faculty Scholar, Dr. Julion has worked to transform interprofessional education and promote cultural competency through a service learning course that is available to all health profession students at Rush. Dr. Julion is currently collaborating with colleagues throughout Rush University Medical Center to embed interprofessional education and practice throughout the institution.



**MEMOONA HASNAIN,
MD, MHPE, PHD**

University of Illinois
College of Medicine at Chicago
2013 Macy Faculty Scholar

Dr. Hasnain is an associate professor and associate department head for faculty development and research at the University of Illinois College of Medicine at Chicago. As a Macy Faculty Scholar, Dr. Hasnain is developing and implementing a longitudinal team-based interprofessional health disparities training program for medicine, pharmacy, nursing, and public health students.



Macy Faculty Scholars Program



Dr. Herbert Pardes speaking to the Scholars at the 2014 Annual Meeting.

This year, we selected a group of six new scholars from the national applicant pool. The 2014 scholars represent a wonderful diversity of backgrounds and interests.

They will focus on projects such as: placing interprofessional student teams in primary practice, developing a culture of listening among medical students, using electronic

medical records with patients and families, using medical and nursing students in navigator teams with patients at risk for hospital readmission, introducing first-year medical students to clinical experiences in real practice settings, and introducing interprofessional students to the principles of team-based practice.

Macy Faculty Scholars receive \$100,000 in salary support per year for two years, enabling them to spend at least half of their time implementing educational reforms that are central to ultimately improving the health of the public. They also receive support for travel and career development activities.

INTRODUCING THE 2014 MACY FACULTY SCHOLARS

Laura Hanyok

MD

*Johns Hopkins University
School of Medicine
and School of Nursing*



As a Macy Faculty Scholar, Dr. Hanyok, an assistant professor of

medicine at Johns Hopkins, is educating interprofessional teams of medical, nursing, pharmacy, and pastoral care students to work together in caring for patients. “There’s always a lot more to taking care of a person than knowing the medical problems, and that’s something we’ve tried to impress upon and have our residents understand,” she said, adding that incorporating the “spirituality aspect of primary care” into students’ clinical experiences will be “unique and beneficial to learners.”

Hanyok’s project, which will place interprofessional student teams in primary care practices with patient-centered medical homes for complex patients, also will push beyond the walls of Hopkins to include pharmacy students from nearby Notre Dame of Maryland University, since Hopkins does not have a pharmacy program.

“What I’m hoping to tackle with the project is to give our learners an experience of what it would be like in a new collaborative system not based on how many patients you see in a day, but how good the care is that you deliver to them—measured in a variety of ways, including the patient’s experience and their view of things,” she said.

The project also will mentor internal medicine residents, who will serve as co-teachers for the student teams in primary care practices, to be effective teachers of interprofessional primary care practice.

“I think the leadership development of our resident physicians is a really important part of this. Not only do you have to be able to do the teamwork yourself, you have to figure out how to teach others how to do it,” said Hanyok, who serves as the medical school’s director of interprofessional education.

Douglas Larsen

MD, MEd

*Washington University
School of Medicine*



As part of Dr. Larsen’s Macy Faculty Scholars

project, about 120 medical students entering third-year clinical clerkships at Washington University School of Medicine in the fall of 2014 started changing what they do each day by setting and acting on weekly personal goals directly related to patient care—for example, checking in with patients and their families after rounds to make sure all of their questions have been answered.

By setting these personal goals, Larsen hopes to develop a “culture of listening” in medical students that will inevitably lead to better communication with patients.

Too often medical education distracts students and faculty from focusing on patients, according to Larsen. “When we think about where learning takes place, especially when we think about clinical education, learning takes place in the actual act of practicing medicine and taking care of patients. However, much of our educational system actually distracts from that—we spend a lot of time pulling students into conferences, into other lectures, having them prepare for multiple-choice examinations—and so, much of our system distracts medical

students from learning clinical patient care,” he said.

Having students set goals that they must incorporate into daily practice is critical to changing the culture of medical education and patient care. “If it is just something that’s administrative or a once in a while type of event, that doesn’t change culture. It just becomes an add-on that’s frustrating for people. But if you have something that changes your daily practice, then you start to change culture,” Larsen said.

Sarah Peyre

EdD

*University of Rochester
School of Medicine
and School of Nursing*



Dr. Peyre is using her Macy Faculty Scholars award to identify

and develop best practices for using electronic medical records (EMRs) with patients and families. A key question is “how are we making sure humanism stays in the driver’s seat with the integration of technology and, most importantly, how do we stay patient-centered,” according to Peyre.

She believes EMRs can be powerful tools for patient education. “If you really want to

do patient-centered use of the EMR, what I’m finding is patients want more of it, not less. And this aligns with our care redesign— with the idea that the point of care is changing, and it’s not within the four walls of a doctor’s office anymore,” Peyre said.

Peyre is thinking about how to develop a “teaching with the screen curriculum...to help people understand how to turn the screen toward the patient and how to share the screen with them and use their medical record and X-rays to teach the patient and check for understanding.”

Her next step will be to look at different practice settings, such as a community-based family medicine clinic or an inpatient cardiac setting, with the idea of focusing educational interventions on specific types of care to “capture all of the interprofessional education learners in their workplace and provide education in this forum so it’s not just geared toward the students or toward the faculty, but it’s really engaging the team, the culture, the environment, and how we value and engage technology and keep patients first in that interaction.”

Deanna L. Reising

PhD, RN, ACNS-BC, ANEF

*Indiana University
School of Nursing*



As a Macy Faculty Scholar, Dr. Reising is developing a program

to extend nursing and medical students’ education from the classroom to patients’ homes after they are discharged from the hospital.

Starting in 2015, about 100 medical and nursing students will serve as “navigator teams” that work with patients at risk for hospital readmission. The project aims to help patients transition safely from hospital to home and expose students to experienced health care professionals who are experts in population health management and transitional care.

The plan is for the navigator teams, composed of one medical student and one or two nursing students, to visit patients in the hospital before discharge and then visit the patients at home to assess how they are progressing and then share their findings with a transitional care nurse. “What they assess will be driven by the patient’s plan of care, and they will assess whether the plan of care is being implemented

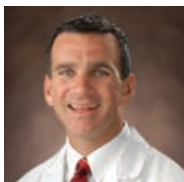
successfully at home,” Reising said, adding that medication management will be a key focus since so many problems are associated with patients not understanding medication instructions.

The project’s focus on interprofessional education is critical, according to Reising. “Too often we see a lack of collaboration associated with patient errors. We haven’t traditionally educated health professions students to work in teams, but we expect that they will be able to function in collaborative teams in practice.”

“The main goal of the navigator teams is to advance the Triple Aim of better health, better patient experience, and lower costs,” said Reising. “Our eventual goal is that the model will be spread across Indiana University Health.”

Charles Vega Jr. MD

*University of California Irvine
School of Medicine*



Dr. Vega, a professor of family medicine, is leading the introduction of the Patient-Centered Advanced Clinical Education, or PACE, curriculum in the medical school for his Macy Faculty Scholars

project. PACE emphasizes earlier clinical experiences for medical students in real practice settings.

Starting in fall 2015, the entire first-year class—more than a 100 students—will spend a half day in community- or university-based practices to apply what they are learning in lectures and classrooms with patients. Along with its longitudinal nature—PACE ultimately will encompass all four years of medical student education—the curriculum uses a lens of “how does this training improve our young physicians’ ability to take care of people,” Vega said.

Fostering such significant change across an entire medical school requires lots of faculty buy-in and commitment, according to Vega, who added, “We’ve got strong leadership in medical education that believes in this model. It’s not elective—we need to do something for the good of our students, for the good of our school and, ultimately, for the good of our community. It’s imperative that we start making these changes.”

“The details do get tricky,” Vega said. “That’s where that view on the patient is so helpful because once you have that as your North Star, you’re following that as a lead, it’s very difficult to go wrong and it’s very difficult to argue against what you are

trying to do if you are really trying to practice in a patient-centered way.”

Along with the time to focus on how to smoothly operationalize the new curriculum on such a large scale, the Macy Faculty Scholar award provides strong support from his fellow scholars and leaders at the Foundation. “They are good at helping me see the curves ahead and navigate them successfully,” Vega said.

Meg Zomorodi

PhD, RN, CNL

*University of North Carolina
at Chapel Hill School of Nursing*



Giving graduate students an early introduction to team-based

practice is essential to “breaking down silos” between the health professions, according to Dr. Zomorodi, whose Macy Faculty Scholars project will allow her to develop new courses and clinical experiences for interprofessional student teams.

Working with the UNC Physicians Network whose clinicians will serve as preceptors, Zomorodi is developing an interprofessional academic program focused on population health management with a goal of improving quality and safety, and reducing costs in UNC primary care practices.

CHECKING IN WITH THE 2013 SCHOLARS

"I've now got a practice partner saying, 'I need this too, and I'm willing to let you blow up my system to make it better.' His passion to improve his system and his willingness to collaborate with us is just so exciting," Zomorodi said.

The program will include three interprofessional courses, with one offered just as students from pharmacy, medicine, social work, nursing, and nutrition are beginning their graduate education. "There's a lot of research that suggests we need to expose them early on before they establish their roles," Zomorodi said. "They will learn not only what the other professions are, but how to work with them and learn from them."

In the second and third courses, students from the five disciplines will be deployed as teams to four UNC primary care practices to work together on a quality improvement intervention, identified with their preceptors, such as diabetes management. The student teams also will evaluate the interventions to determine their effectiveness. Students will gain valuable team-based clinical experiences, and the practices will gain valuable insights about how to improve patient care efficiently in a "truly win-win scenario," according to Zomorodi.

Lisa Day PhD, RN, CNE

*Duke University
School of Nursing*

In an effort to make professional values more visible in health professions education, Dr. Day is leading a group of Duke School of Medicine and Duke School of Nursing faculty and students to create a new interprofessional course that will assist students in recognizing, articulating, interpreting and reconciling values—their own and those of their colleagues—and in integrating these values into their professional work with individuals, families, and communities. The new course will include undergraduate nursing, undergraduate medical, doctor of physical therapy and physician assistant students.

Memoona Hasnain MD, MHPE, PhD

*University of Illinois College
of Medicine at Chicago*

Dr. Hasnain has made significant progress toward developing, implementing, and evaluating an interprofessional team-based training program for medicine, nursing, dentistry, pharmacy, public health, and social work students at the University of Illinois at Chicago. The program

is designed to equip learners with essential skills to improve health care for underserved populations and transform health disparities through interprofessional education, research, and collaborative practice.

Kelly Karpa PhD, RPh

*Penn State College
of Medicine*

Dr. Karpa is developing an interprofessional program that teaches medical and nurse practitioner students safe and effective medication prescribing and effective prescription utilization for patients. Initially the Interprofessional Pharmacology Clinical Reasoning (i-PCR) project involved medicine and nurse practitioner learners, but the project has evolved to include pharmacy learners as well. Dr. Karpa's overarching goal is to develop and launch an interprofessional clinical pharmacology curriculum at Penn State University's Hershey Medical Campus. Moving forward, Dr. Karpa has made plans to bring new learners, specifically nurse practitioner and pharmacy students, into several medication management related activities that are completed in a



The 2013 Macy Faculty Scholars convened in New York for the June 2014 Annual Meeting. From left to right: Lauren Meade, Mayumi Willgerodt, Memoona Hasnain, Kelly Karpa, and Lisa Day.

patient-centered medical home elective.

Lauren Meade
MD

*Tufts University
Medical School*

Thus far Dr. Meade has implemented a new discharge curriculum in a collaborative of eleven internal medicine training groups to ensure that patients experience a safe and effective discharge from the hospital. Next, Dr. Meade will study the effects of this discharge curriculum on patient and interprofessional practice outcomes. The

discharge of a patient from the hospital is an ideal setting for studying interprofessional education and the Triple Aim of improved patient care, population health, and lower cost.

Mayumi Willgerodt
PhD, MPH, RN

*University of Washington
School of Nursing*

Dr. Willgerodt is implementing and evaluating an interprofessional education curriculum for pediatric dental residents, advanced practice nursing students, and social

work students that focuses on oral health care among underserved children. As Dr. Willgerodt moves into her second year as a Macy Faculty Scholar she plans to expand the i-TEETH (interprofessional Teams Engaged in Education and Training for Health) program to include primary care community partners so teams may gain experience in primary care settings, and also include social work, physician assistant, family nurse practitioner, and family medicine trainees.

2014 Board Grants

University of California, Davis

Project Title: An Education and Practice Collaboration to Relieve Pain and Suffering

Project Description: UC Davis will create a new simulation tool for all health professions that will apply interprofessional communication and collaboration in the treatment of chronic pain. The education model will be tested first with prelicensure health professional schools (medicine, nurse practitioner, physician assistant, and pharmacy) and then expanded to veterinary school and learners from educational institutions such as social work, dentistry, physical therapy, and others.

UC Davis will convene experts in education and curriculum science, pain management clinicians, pain fellowship resident physicians, graduate nursing students, medical students, and individuals and families affected by chronic pain for a summit on chronic pain management. The summit will provide an opportunity for participants to review and build upon previously developed core competencies in pain management; identify core content, critical skills, and essential aspects of application in the clinical setting; and develop consensus recommendations on relevant competencies and educational content for a new elective in pain management.

The recommendations will inform the learning goals and simulation(s) for the new interprofessional course to be piloted with prelicensure learners. During the pilot phase, learners will have the ability to provide feedback and will be given pre- and post-testing of the competencies learned during the simulation. The course will be refined based on the feedback from participants

and a formative and summative evaluation, and offered to more learners and potentially to practicing clinicians as part of continuing education. UC Davis will disseminate results through the UC system, the National Center for Interprofessional Practice and Education, and other health professional schools.

Principal Investigators: Heather M. Young, PhD, RN, FAAN and Scott Fishman, MD

Award: \$339,977

Duration: 2 years

Board Date: January 2014

University of Kansas Center for Research, University of Kansas Medical Center - Kansas City

Project Title: The Faculty Preceptor as Nexus: Developing Preceptors Who Blend IPE at Point of Primary Care

Project Description: The University of Kansas Medical Center (KUMC) has run a teaching clinic where interprofessional student teams provide direct patient care under the supervision of faculty preceptors. The faculty preceptors have participated in a development program that combines interprofessional practice within an interprofessional education (IPE) curriculum at the point of primary care. With this grant, KUMC will create a faculty development package that addresses the transformation of traditional primary care training sites into interprofessional training sites; designs interprofessional education curricula to support and enrich live interprofessional practice in primary care

settings; and develops faculty precepting skills for interprofessional teams of learners.

The tools created will be piloted in five rural practices affiliated with KUMC Salina and Wichita campuses, through the Office of Rural Medical Education's Medical Education Network sites, and Kansas Area Health Education Centers. Dissemination across these sites will demonstrate reproducibility and sustainability of the tool as a national model for delivering IPE at the point of primary care. The project will be evaluated using qualitative and quantitative assessment strategies. KUMC will partner with the National Center for Interprofessional Practice and Education to be an incubator site, which will allow KUMC to collect additional outcome data on faculty development and patient outcomes.

Principal Investigators: Sarah Shrader, PharmD and Jana Zaudke, MD, MA

Award: \$410,364

Duration: 2 years

Board Date: January 2014

Dartmouth College

Project Title: Integrating Shared Decision-Making and Interprofessional Education

Project Description: Dartmouth College will use Macy support to teach health professions students in medicine, nursing, and physical therapy how to achieve effective shared decision-making with patients and how to conduct motivational interviews. Students will learn the basics of the curriculum asynchronously and then will be taught to function in effective interprofessional groups to achieve both shared decision-making and develop consistent implementation plans. The curriculum will be designed to be compatible with distance learning.

Through this project, Dartmouth will:

- assess the feasibility of developing a cohort of trained standardized patient coaches (SPCs) that can use video conferencing and other educational

technologies to deliver key skills to a range of students in healthcare professions using virtual encounters and virtual team simulations, supported by a content-rich online platform;

- leverage more than a decade of work on conceptual and related measure development—the Three Talk Model of Shared Decision Making, CollaboRATE, and Observer OPTION—and use them for educational purposes;
- use SPCs in a distance-learning mode, using video conferencing, in both one-to-one simulated interactions and in group-based simulations;
- place the curriculum into an asynchronous learning platform that can be accessed by an unlimited number of students; and
- demonstrate the ability to recruit students from different professional schools for both asynchronous and synchronous material.

Principal Investigator: Glyn Elwyn, MB BCh, PhD

Award: \$441,728

Duration: 2 ½ years

Board Date: May 2014

George Washington University, National Health Policy Forum

Project Title: Educating the 21st Century Health Care Workforce: Information and Dialogue for Federal Policy Makers

Project Description: With support from the Macy Foundation and others, the National Health Policy Forum has over the past two years produced a substantial set of meetings and written products on the healthcare workforce and health professions education. These efforts have brought the Forum's audience of congressional and executive branch healthcare policymakers up-to-speed on a number of important healthcare workforce issues, including the content and financing of physician education and training, and the role of non-physician professionals in delivering health care.

Over the next two years, the Forum will continue work to educate policymakers on healthcare workforce and health professions education and develop new papers on 1) the reform of graduate medical education financing in the Medicare program; 2) ongoing efforts and policies to assure a more adequate and appropriate supply of primary care services; and 3) efforts to promote more effective interprofessional education (IPE).

The topics proposed are timely discussions for members of Congress and policymakers. The future of GME financing has been a topic of debate for several years in Washington as policymakers explore how to efficiently produce the right workforce for the future. These discussions have encompassed concerns about the adequacy of the primary care workforce, the alignment of education and delivery system reform, and the impact of technology and changing practice on the demand for physicians and other members of the healthcare workforce. IPE has changed significantly since the Forum last hosted a meeting on the topic and it is important for policymakers to be up to date on the value and benefits of IPE in improving both the educational process and the experience of care for patients. Finally, payment policies in Medicare and Medicaid for primary care physicians and state scope of practice laws are some of the policies that affect the supply of primary care services. These topics need in-depth analysis and discussion with policymakers about how current and future policies can support better alignment between educational endeavors and a reforming healthcare system.

Principal Investigators: Judith Miller Jones, MA and Sally Coberly, PhD

Award: \$352,372

Duration: 2 years

Board Date: May 2014

Southern Illinois University School of Medicine

Project Title: Improving the Clinical Reasoning of Medical Students: Guaranteeing Competency of Graduates

Project Description: Southern Illinois University School of Medicine is reforming its four-year curriculum. With Macy support, the medical school plans to improve clinical decision-making and critical thinking and address the need to create more flexible, individualized learning plans for students.

Students will graduate with a consistent set of critical thinking and clinical decision-making skills. The reformed curriculum will prepare students to diagnose and provide initial management for twelve defined critical clinical competencies upon graduation from the program. The clinical competencies encompass approximately 144 discrete diagnoses and a large percentage of diagnoses seen in ambulatory and acute care settings. In each of the first three years, students will be expected to learn a portion of the diagnoses related to each of the twelve critical clinical competencies and to be able to practice with all twelve of them every year.

Since students will receive a standardized curriculum through learning and assessment of twelve critical clinical competencies, the other part of the curriculum reform will focus on optimizing and individualizing the learning environment for students. Students will have the ability to immerse themselves in their chosen fields. For example, students interested in family medicine could spend the entire second half of their third year in a community-based, rural healthcare team focusing on the patient-centered medical home together with the school's Department of Family Medicine. A more flexible and individualized curriculum may create a "richer educational experience" and produce a "more broadly trained physician as a result."

Principal Investigator: Debra Klamen, MD, MHPE

Award: \$577,452

Duration: 4 years

Board Date: May 2014

University of Missouri-Columbia

Project Title: Train-the-Trainer Interprofessional Faculty Development Program

Project Description: The University of Missouri-Columbia School of Medicine is building on a previously Macy-funded pilot to develop a national program for interprofessional education (IPE) faculty development. Together with two other Macy grantees, University of Washington and University of Virginia, they will develop three regional centers for IPE faculty development.

The co-PIs and the regional centers will:

- leverage existing partnerships and common interests among stakeholders to create a national advisory committee that includes national health professions educational leaders and leaders from successful faculty development programs;
- identify core elements of the curriculum that can be administered at each of the training hubs;
- identify training hub-specific curricular elements that can be added to the core program as part of the training;
- develop a model for marketing the training program to the target audience (faculty from academic health centers, practice-based training sites, rural sites, and single-specialty health professions schools);
- create a secure web-based directory of curricular resources, evaluation tools, and communication platforms utilizing the Macy and HRSA-funded website at University of Washington Center for Health Sciences Interprofessional Education, Research and Practice;
- deliver two training cycles per regional center per year for three years;
- assess the outcomes of the initial training efforts at each of the regional centers using a mixed methods evaluation;
- create a sustainable business model for the regional centers using counsel from the national advisory committee and a business consultant;
- transfer curricular, evaluation tools, and other resources to national organizations and centers such as Interprofessional Education Collaborative,

National Center for Interprofessional Practice and Education, and American Interprofessional Health Collaborative; and

- disseminate lessons learned from the initiative through appropriate publications and presentations.

Principal Investigators: Leslie W. Hall, MD, University of Missouri-Columbia; and Brenda Zierler, PhD, RN, FAAN, University of Washington

Award: \$799,818

Duration: 4 years

Board Date: May 2014

National Academy of Sciences, Institute of Medicine

Project Title: IOM Global Forum on Innovation in Health Professional Education

Project Description: With previous Macy support, the IOM began the Global Forum on Innovation in Health Professional Education. In its first three years, the Forum held five workshops and produced four publications (Interprofessional Education for Collaboration: Learning How to Improve Health from Interprofessional Models across the Continuum of Education to Practice; Establishing Transdisciplinary Professionalism for Improving Health Outcomes; Assessing Health Professional Education; Building Health Workforce Capacity Through Community-Based Health Professional Education). Over the next three years, the Forum will modify the format, alternating between workshops and fast-track IOM consensus conferences. Each of these activities will produce a summary report or recommendations that will be broadly disseminated through webcasts, IOM listservs, events, presentations at professional meetings, and articles written for scholarly publications.

Principal Investigator: Patricia Cuff, MS, RD, MPH

Award: \$225,000

Duration: 3 years

Board Date: October 2014

2014 President's Grants

Columbia University

This award supports a special publication of the American Journal of Public Health to disseminate the ideas from the Macy-supported Summit on Innovations in Public Health Education, held in June 2013 at the Mailman School. The goal is to promote innovations and set the agenda for public health education for the coming decades.

\$35,000 | Award: February 2014

Icahn School of Medicine at Mount Sinai

This award supports a two-day conference on the Future of Pre-Medical Preparation. It will bring together a team of experts from US and Canadian institutions to discuss overarching concepts for premedical education as well as practical approaches to enact change on a national level.

\$35,000 | Award: February 2014

Partners Healthcare System Inc. (Massachusetts General Hospital)

This award supports a two-day conference of the Healthcare Quality and Equity Forum to be held in Boston, Massachusetts on June 19 – 20, 2014. The conference is designed to help provide interprofessional leaders and teams with expertise in quality improvement as well as the knowledge and skills necessary to develop strategies to achieve equity in health care.

\$10,000 | Award: March 2014

West Virginia University Foundation

This award supports a workshop designed to prepare faculty as interprofessional educators to develop clinicians for the care of underserved populations. WVU's Robert C. Byrd Health Sciences Center is developing faculty to teach in a best-practices model for interprofessional education that will address a critical shortage of providers in Appalachia.

\$10,000 | Award: March 2014

Jewish Healthcare Foundation of Pittsburgh

This award supports a national media outreach effort to discuss the amount of health information available to patients online and through mobile apps and how the provider and patient relationship needs to transform to improve shared decision-making. Together with WQED, a Pittsburgh-based PBS affiliate, the Foundation will create a television documentary and DVD, an interactive website; and host community engagement sessions in Pittsburgh and other communities, and a series of TED Talks/video interviews with dynamic leaders (providers and consumers) for dissemination targeted to providers and patients. These activities will highlight the need for reform in medical education, potential solutions that technology offers, and engage patients in the dialogue about the changing relationship with providers and technology.

\$25,000 | Award: April 2014



Break out group discussion with University of Rochester School of Medicine and Dentistry students during Primary Care Progress' 2014 Gregg Stracks Leadership Summit.

The Arnold P. Gold Foundation

This award supports the Gold Humanism Honor Society biennial conference, "Advancing Humanism in the Age of Technology". The conference brings together members from 110 schools of medicine and ten residency programs that have demonstrated the values of humanistic patient care. Throughout the conference, attendees will have opportunities to network with other members and medicine's leading thinkers, academics, and practitioners; participate in professional and humanistic development programming; and assess each individual's ability to promote culture change towards humanism within an institution.

\$10,000 | Award: May 2014

Primary Care Progress

This award supports the 2014 Gregg Stracks Leadership Summit and three regional training sessions for health professions students. The Summit will convene a team of coaches, change-management experts, and practicing primary care clinicians to provide health professional trainees (medicine, nursing, physician assistant, and others) with leadership and advocacy skills to develop a new generation of primary care leaders.

\$35,000 | Award: May 2014

University of Pittsburgh

This award supports the All Together Better Health VII conference that is being hosted by the University of Pittsburgh and the National Center for Interprofessional Practice and Education. The goal of the conference, which draws a large international audience, is to advance interprofessional education and collaborative practice toward the goals of improved patient care experience (including health outcomes and patient satisfaction); improved health of populations and health equity; and added value in healthcare delivery and education (through improved quality and reduced costs).

\$10,000 | Award: May 2014

American College of Physicians

This award supports a meeting of twenty nurse practitioners and primary care physicians to identify and evaluate educational models to promote high value care (HVC) and interprofessional learning. The meeting will use the models to produce a blueprint for the creation and dissemination of team-based educational initiatives within the HVC program that include physician and nursing professionals co-learning. The meeting will also create a dissemination plan for the adapted HVC program with a possible pilot in the VA Centers for Excellence in Primary Care.

\$34,000 | Award: June 2014

American Medical Association

This award supports the AMA fall 2014 convening, "Accelerating Change in Medical Education: Adaptive Learning Models for Competency-based and Clinical Education Redesign". The convening brings together eleven schools, which were awarded grants from the AMA for innovative changes in medical education. The focus of the meeting will be on Vanderbilt University's work, as an AMA grantee, on adaptive learning focusing on clinical skills and the clinical environment.

\$35,000 | Award: June 2014

Institute on Medicine as a Profession

This award supports the development of a task force to explore the implications of the shift from solo practitioner, self-employed, and fee-for-service physicians to group practitioners and salaried physicians and how these changes affect medical professionalism. The task force will make actionable policy recommendations that promote standards of professionalism in the emerging physician practice models.

\$35,000 | Award: June 2014

University of California, San Francisco

This award supports the analysis and development of a model for high-performing primary care teaching clinics. Through a partnership with the Association of American Medical Colleges, UCSF will identify ten to fifteen teaching practices, conduct site visits, write a report on findings, and present a new model for high-performing teaching practices. The model will become a roadmap for other teaching practices to become high-performing for students, residents, interprofessional staff, and patients.

\$35,000 | Award: June 2014

University of Connecticut

This award supports a policy study on issues facing dental education. The goal of the study will be to develop practical strategies for restructuring dental education to address the current challenges of finance, education, interprofessional education, scholarship, and access. The study will also develop a long-term plan for implementing these strategies in the dental education system.

\$35,000 | Award: June 2014

South Carolina Area Health Education Consortium

This award supports a follow-up study to a previously Macy-funded survey assessing the progress being made with interprofessional education in dentistry, medicine, nursing, pharmacy, physician assistant studies, and public health. The results of the survey will provide a mid-decade report on the Healthy People 2020 interprofessional education objective.

\$35,000 | Award: September 2014

Thomas Jefferson University

This award supports the biennial 2014 Jefferson Center for Interprofessional Education conference, Interprofessional Care for the 21st Century: Redefining Education and Practice. The conference will showcase national and international scholarly work and works in progress to advance team-based care by clinicians and students.

\$17,500 | Award: September 2014

“We will never have enough Macy Faculty Scholars to develop all the faculty we need. It is also important that we focus on institutions, which have to play an important role in the development of their own faculty.”

— George E. Thibault, MD

The Fenway Institute

This award supports Grand Rounds trainings at up to fifteen healthcare institutions on LGBT health issues. The trainings will focus on the importance of removing barriers to accessing affirmative and quality care for people in the LGBT community and the need for all primary care providers to take a history of sexual health—an area much neglected in medical education but critical to understanding a broad range of issues including the sexual orientation and gender identity of people seen in a healthcare provider’s office.

\$35,000 | Award: October 2014

Jonas Center for Nursing and Veterans Healthcare

This award will support a Donald Jonas Legacy Nurse Scholar who will pursue clinical research and leadership in topics such as school health, autism, veterans’ health care, and homelessness.

\$10,000 | Award: December 2014

Hunter College

This award will support 12 “full season” Scholars and 48 rotating Herman Biggs Health Policy Fellows graduate students of different disciplines to each attend health policy meetings for the 2014 – 2017 seasons. The opportunity will enrich the Society’s conversations about health policy and provide enriching educational experiences for an interprofessional group of graduate students in the health professions.

\$15,000 | Award: December 2014



Please visit our website (www.macyfoundation.org) for more information on Macy Grantees.

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*Term ended in 2014

**Term commenced in 2014

Statements of Financial Position

YEARS ENDED JUNE 30, 2014 AND 2013

	<u>2014</u>	<u>2013</u>
Assets		
Cash and cash equivalents	\$ 5,154,440	\$ 4,178,538
Investments, at fair value	143,372,196	134,360,932
Accrued interest and dividends receivable	7,679	15,657
Prepaid expenses and other assets	96,163	83,405
Property and equipment, at cost, less accumulated depreciation	<u>5,242,037</u>	<u>5,398,971</u>
Total Assets	<u><u>\$153,872,515</u></u>	<u><u>\$144,037,503</u></u>
Liabilities and Net Assets		
Liabilities		
Grants payable	\$ 708,973	\$ 578,044
Other accrued liabilities	93,985	70,755
Deferred federal excise tax	298,359	188,757
Accrued retirement benefits	2,988	4,490
Due to broker	<u>23,093</u>	<u>19,398</u>
Total Liabilities	1,127,398	861,444
Net Assets		
Unrestricted	<u>152,745,117</u>	<u>143,176,059</u>
Total Liabilities and Net Assets	<u><u>\$153,872,515</u></u>	<u><u>\$144,037,503</u></u>

Statements of Activities

YEARS ENDED JUNE 30, 2014 AND 2013

	<u>2014</u>	<u>2013</u>
Revenue		
Dividends, interest and other income on investments	\$ 2,183,699	\$ 1,583,231
Net realized and unrealized gain on investments	17,148,359	14,009,687
Investment counsel and custodian fees	(815,337)	(795,549)
Provision for taxes		
Current excise tax	(73,183)	(41,055)
Deferred excise tax	(109,602)	(104,469)
	<u>18,333,936</u>	<u>14,651,845</u>
Expenses		
Salaries	1,501,932	1,367,240
Employee benefits	300,445	273,708
Professional services	169,824	277,807
Equipment and minor improvements	56,918	66,639
Utilities, insurance and building maintenance	76,602	69,795
Travel	85,131	83,162
Director meetings expense	51,337	53,107
Other administrative expenses	158,207	158,462
Depreciation	255,218	240,266
Grants and Conferences, and Publications		
Health professional education grants	3,693,978	3,762,814
Grant refunds	(51,963)	(144,489)
President's discretionary grants	494,200	499,608
Matching gift grants	150,240	181,710
Macy faculty scholars grants and related expenses	1,525,165	1,422,153
Conference expenses	164,951	144,888
Publications	86,873	148,445
Organizational dues	45,820	37,970
	<u>8,764,878</u>	<u>8,643,285</u>
Increase in net assets	9,569,058	6,008,560
Net assets, beginning of year	<u>143,176,059</u>	<u>137,167,499</u>
Net Assets, End of Year	<u><u>\$152,745,117</u></u>	<u><u>\$143,176,059</u></u>



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