The Patrick and Catherine Weldon Donaghue Medical Research Foundation is a charitable trust created pursuant to the will of Ethel F. Donaghue, late of West Hartford, Connecticut. The Foundation, which began operations in 1991, is governed by Bank of America and Lynne Garner, PhD, Trustees. The Foundation is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1986, is a private foundation within the meaning of Code Section 509(a), and is subject to the jurisdiction of the Probate Court for the District of West Hartford.
Working Together

Donaghue is a small foundation, as medical research foundations go. Yet we have an expansive, exciting purpose. To maximize the potential of our purpose with our limited resources, we have to work together with others.

Working together doesn’t come naturally to organizations. It takes a good deal of patience and practice, with several trials and errors, to get the right balance of you/me versus us. It doesn’t always work, but when it does the rewards are big. And it is often more fun than going it alone.

So in our grant-making decisions and in our activities aimed at increasing the impact of research in improving health, Donaghue views working together as a key ingredient.

We know that if we put our heads together with others, we can accomplish great things.
History & Purpose

History
The search for knowledge by Donaghue-funded scientists has been made possible by the lifelong prudence and beneficent vision of one far-sighted West Hartford woman, Ethel F. Donaghue, who died in 1989 without immediate family to inherit her carefully husbanded fortune of about $60 million. Miss Donaghue was one of Connecticut’s first woman lawyers, having earned degrees from the law schools of both the University of Pennsylvania and New York University by 1922, but her wealth did not derive from the practice of law. She was required to close her Hartford practice early to care for her ill mother Catherine and manage the family finances, which were extensive as a result of the shrewd entrepreneurial spirit of her father Patrick, an Irish immigrant to Hartford in the late 1800s. Patrick had died in 1910 of heart disease, when Ethel was only fourteen, and Catherine succumbed to cancer in 1933. Although Miss Donaghue enjoyed enviable wealth and was able to travel widely for many years, she lived those years alone in her West Hartford mansion, with only household help for companionship. Spurred on by living through several family health problems and outliving her entire immediate family by over three decades, Miss Donaghue developed an abiding interest in health care and research. She often contributed to hospitals and established two trusts during her lifetime to support research. Her commitment to advancing human health culminated in a trust created under Article Fourteenth of her will and devoting the bulk of her estate to The Patrick and Catherine Weldon Donaghue Medical Research Foundation, which honors the memory of her parents and is now reporting on the completion of its nineteenth year of grantmaking.

Purpose
The testamentary intent of Ethel Donaghue is the immutable mandate for the Donaghue Foundation trustees, who have developed statements of vision, mission and goals to give ongoing current meaning to Miss Donaghue’s purpose. Miss Donaghue said in her will that her trustees should seek out useful health knowledge through research. She envisioned a steadfast pursuit of knowledge that would be of practical benefit to human life, and the trustees have adopted Practical Benefit as a policy and operations compass. Prominent among Ethel Donaghue’s traits were a strong will, a championing of women’s causes, a keen sense of the practical, and a healthy dose of common sense. These traits loom large in the trustees’ reading of her words, particularly her urging that they undertake unusual and non-standard activities in furtherance of her purpose. A frequent question in trustee discussions of policy and program design is “What would Miss Donaghue do, were she here and in possession of the facts we have?” Nearly as important to the ongoing work of the Donaghue Foundation as what we are to do is how we are to go about it. That is expressed in our statement of goals and has characterized our work up to and including the just-completed year of 2010.
**Vision**
We envision constant improvement both in people's health and in the way research is converted into practical benefit.

**Mission**
We will be an engaged, imaginative and collaborative participant in the process that begins with rigorous health research and ends in realized health benefits and thereby give the vision of Ethel Donaghue its best expression and honor her and her family.

**Goals**
Promote knowledge uptake of health research into the realms of health care delivery, practice and policy.

Strengthen and widen understanding of the Foundation’s mission by other people and organizations who have the potential to improve health.

Ensure that our grantmaking programs are structured to support rigorous research that more directly leads to a positive impact on health.

Support promising researchers whose work specifically encompasses the principles of knowledge uptake.

Create networks and collaborations to test innovative ideas related to health research and health outcomes.

**Values**

**Steadfast in our commitment**
The purpose entrusted to us by Miss Donaghue in her will is an immutable mandate for us, and we will be unwavering in our resolve to give her vision its proper meaning and best expression in a context of changing facts and conditions.

**Principled and practical**
Guided by the balance between Miss Donaghue's lofty vision and her common sense practicality, we will ground our execution of her trust upon solid principles while applying them in ways that focus on the practical. While being ready to risk in our search for ways to make a difference in health, we will maintain the integrity and the prudence that mark the work of a fiduciary.

**Engaged to the point of effect**
Our method of operation will be active engagement with those involved in seeking to benefit human health. As a complement to our research funding, we will collaborate with others to promote uptake of health knowledge. Somebody should be seeing to it that scientific advances are actually taken up by users — and we are somebody.

**Respectful and reflective**
We respect not only Miss Donaghue's intent but also, through an integration of ethics and science, the human subjects of research and those with whom we work for the betterment of human health. We will strive to balance: our pursuit of new knowledge with its translation into actual use; scientific exploration with thoughtful reflection upon the implications of discovery; and the gaining of knowledge with the pursuit of wisdom to temper its use for practical benefit to human life.
Dear Friends,

Twenty years ago this May, the Donaghue Foundation was created from one woman’s decision to leave nearly all of her family’s fortune to medical research that would promote the advancement of human health. We are proud of what Donaghue has accomplished with the $82 million dollars that it has awarded for research during those twenty years, and we have learned a great deal. From this strong platform, our work continues with the purpose established by Ethel Donaghue.

As the theme of this year’s report indicates, much of our work in 2010 was accomplished by working with individuals from other foundations, community groups, research teams, universities, businesses, and affinity groups. For example, the Donaghue Foundation teamed up with the Connecticut Health Foundation and the Universal Health Care Foundation of Connecticut to fund a planning grant to the Community Health Center Association of Connecticut. Through this grant, CHCACT and their project manager worked with twelve of the state’s Federally Qualified Healthcare Clinics, the Department of Social Services, and all three of the state’s Medicaid insurers to develop an application to the the Agency for Healthcare Research and Quality for a demonstration project to test a new way to reduce unnecessary ER visits. In their role as independent evaluations, researchers from the University of Connecticut Health Center are also a partner on this project. While the dollar amount was modest, the grant provided the resources that enabled this diverse set of stakeholders to come together.
Donaghue’s 2010 Program for Research Leadership grant is another example of people from different organizations working together toward a complex goal. This grant award went to Harlan Krumholz, MD, Yale University School of Medicine, who has assembled a team of scientists from different universities and members of a large hospital system. This team will be developing tools to improve hospital outcomes and reduce costs using methods from genomics, proteomics and advanced statistics methods. (A fuller description of this grant is on pages 6 and 7).

And our funding partnership with the Mayday Fund entered its third year.

As described in this report, there are other examples of the formal collaborations Donaghue has engaged in this year. The Foundation works informally with many other organizations, as well. From all of these, as well as many advisers and friends, we get tremendous support and inspiration.

Miss Donaghue didn’t direct us to work with others, but the broad purpose she wrote for the Foundation named for her parents provides a great vehicle for this. We’re learning that these kinds of partnerships are what it takes for practical benefit to be the outcome of research. As we enter our next twenty years, we look forward to many more partnerships that will help us to do our job better.

Lynne Garner, PhD
Trustee and President

Amy R. Lynch, JD
Bank of America, Trustee

“As the theme of this year’s report indicates, much of our work in 2010 was accomplished by working with individuals from other foundations, community groups, research teams, universities, businesses, and affinity groups.”
This project will create the tools to characterize detailed patterns of hospital care for specific patient groups to help invest hospital resources where there is a greater return for patients.

In partnership with Premier, Inc., a consortium of more than 1,000 hospitals, the project will use a scientific, data-driven approach to investigating hospital care. Premier, Inc. has created one of the nation’s most comprehensive data warehouses of hospital processes, to which more than 400 hospitals contribute patient-level data. The data will be analyzed and organized to create hospital-specific profiles or “signatures.” The team coined the word “hospitalomics” as the approach borrows from efforts in systems biology and bioinformatics to take large amounts of
This project will create the tools to characterize detailed patterns of hospital care for specific patient groups to help invest hospital resources where there is a greater return for patients.

that generated the data to facilitate knowledge uptake to improve effectiveness and efficiency.

The infrastructure created by this effort will provide the capacity for ongoing research into comparative effectiveness of organizational strategies to deliver care more safely, effectively, equitably, and efficiently.
20 years of the Donaghue Foundation through the lens of past annual reports

1993
Research support is by nature an investment in the future. The Donaghue Foundation is dedicated to learning what can advance human health and putting it to work.

1997
The Donaghue Trustees know well the enormity of the challenge facing the best the research community has to offer. We know too the quite limited role we play in meeting that challenge. But, like the rugged little tugboat, called upon to do critical work at critical junctures in the voyages of great ocean liners, we stand prepared to put all of our power to good effect.

2001
There is, of course, a lot more on our agenda. Miss Donaghue’s will permits the spending of trust principal for “unusual” and “non-standard” activities, enabling — and challenging — her trustees to “do whatever they deem necessary or desirable” to further her purpose. While we appreciate the trust she placed in us, it would have been far easier if she had just told us what to do.
Ethel Donaghue’s legacy, the establishment of a medical research foundation, marked the culmination of a successful career and a generous life. Throughout her life Ethel Donaghue was described as extraordinary, brilliant, independent and compassionate. The Patrick and Catherine Weldon Donaghue Medical Research Foundation is an expression of Ms. Donaghue’s love for her parents and allegiance to her home state of Connecticut.

2003
A particularly noteworthy milestone was reached by the Foundation in 2003, as we followed Miss Donaghue’s charge to put her millions to work for the public good. She encouraged us to seek out ways to devote both income and principal of her trust to useful research. In the past year, the Foundation’s total of grants since inception reached $55 million, an amount that exceeds the full amount Miss Donaghue started us with at her death in 1989.

2005
The growth of the tree is not unlike the progression of research: starting with a scientist’s curiosity and vision, the germ of an idea, to a research question, and then a study design, the methodical collection and analysis of data, and eventually the publication of results. And, as illustrated in some of Donaghue’s recent efforts, even beyond.

2007
Donaghue’s logo is a stylized bridge, suggesting the value we place in the transfer of research to practice. As we continue in our exploration of knowledge uptake, we are beginning to understand that the bridge may need to be more than simply a passive conduit for that knowledge but one that transforms knowledge in ways that have greater utility for its intended audience.
This year’s Andrews Lecture was held at the Anlyan Center at Yale School of Medicine on October 7. More than 130 attended to hear Perri Klass, MD, the 2010 Andrews Lecturer, speak about “Patients and Providers: Stories and Secrets.” Klass is Professor of Journalism and Pediatrics at New York University and frequently writes about medicine, children, and health literacy. Her short stories have won five O. Henry Awards and she is a frequent contributor to *Health Affairs* and *The New York Times*.

Klass spoke about how writing can help clinicians gain perspective on their work and “see” their patients in a three dimensional and more empathetic light. She said she also uses writing to dissipate the worries that come at 1:00 AM when wondering “if I did the right thing.” She told the audience that keeping a journal is valuable because it captures how you felt the first time you encountered something new.

The choice of Klass to be this year’s Andrews Lecturer came from a group convened by Donaghue to make speaker recommendations for the series. The group was chaired by Judy Kunisch, Lecturer at Yale School of Nursing, and included Ray Andrews; Nancy Angoff, Associate Dean, Yale School of Medicine; David Smith, Director of the Yale Interdisciplinary Center for Bioethics; and Sheilah Rostow, former Bank of America Trustee for Donaghue. The medical and nursing school faculty on the committee, along with Linda Pellico, Assistant Professor of Nursing at Yale, who introduced Dr. Klass, felt that this year’s talk supported their work to engage students in narrative writing and journaling. Following the public lecture, Dr. Klass led a writing workshop for students.

The Andrews lecture series was inaugurated in 2008 to honor Ray Andrews’ stewardship of the Donaghue Foundation as its individual trustee from 1993 through 2007. Because of Ray’s abiding interest in making sure that the voice of the patient is heard by those in clinical research and practice and by health systems leaders, the lecture series has sought to inform and educate a medical audience by addressing the patient’s experience from a variety of perspectives.
“We have not only interesting stories to tell but stories that have to get told, and that is all about listening to the patient’s voice and hearing the patient’s story.”

Perri Klass, MD
Knowledge Uptake Initiatives

Policy webinars with INQRI
In 2010, the INQRI program (Interdisciplinary Nursing Quality Research Initiative), funded by the Robert Wood Johnson Foundation, continued its collaboration with the Donaghue Foundation by hosting a series of webinars on translating research into practice. This series was designed to complement INQRI’s 2010 call for proposals that was focused on translation and dissemination and to build on the work begun by INQRI and Donaghue with the Funders Forum held in July 2009. The agenda was designed to accomplish several goals — assist researchers in developing communication strategies that promote their work; share stories about successful implementation of evidence-based interventions; and promote discussion on the challenges associated with translating research into practice.

Four webinars, one of which was supported by Donaghue, were conducted throughout the year. These sessions were promoted to the public via the INQRI website and blog, by invitations to all INQRI grantees and Funders Forum participants. After each session, the webinar recording and pertinent materials were made public via the INQRI website for anyone not able to attend the live event.

Beyond Eureka! Conference
340 people from nearly 100 organizations attended the fifth Donaghue conference Beyond Eureka! Why is getting healthy so hard? And what we can do about it. Behavioral and cultural perspectives.

Two speakers focused on the many hidden forces that shape our decision making about health behaviors — economic, cultural, and behavioral factors that influence us, often in ways that we do not notice. Dan Ariely, PhD, Professor of Behavioral Economics at Duke University, has shown that we all succumb to irrationality in situations where rational thought is expected. Val Curtis, PhD is Director of the Hygiene Centre at the London School of Hygiene and Tropical Medicine. With her expertise in evolutionary psychology and social markets, Curtis has worked worldwide to help increase the formation of habits — like hand washing with soap — that improve public health. Although the Icelandic volcano prevented Val Curtis from being at the conference in person, a live video feed carried her from London to the conference room.

Following the speakers, Julio Urbina, who heads the Healthy Aging Program at the Samuels Foundation in New York City, led both speakers and Leslie Curry, PhD, Yale School of Medicine, in a discussion of how their ideas are put into action.

Healthcare Adventures feasibility project
In 2007, Donaghue made a grant to the Massachusetts General Hospital to see how simulation might improve leadership effectiveness in tackling hospital related patient safety and quality of care issues. The program, called Healthcare Adventures, was conducted at the Center for Medical Simulation (CMS) in Cambridge, MA. The one-day training plus follow up meetings
included participation in simulations of patient-related events, debriefing the team’s performance and planning a patient safety or quality project of the team’s choosing. Feedback from participants indicated that the training helped hospital leadership teams identify and improve team problem solving behaviors and attitudes.

With the research grant completed, the CMS leadership was interested in exploring the potential for offering Healthcare Adventures on a more widespread and continuing basis and Donaghue was interested in helping. With modest support from Donaghue for a feasibility study, the CMS leadership has been working with the New Enterprise Factory, whose mission is to help non-profits organizations take their under-realized assets and turn them into mission-driven earned revenue. Together, CMS and NEF are reviewing alternative models for sustaining and expanding the Healthcare Adventures program.

Scale-up meeting
Donaghue was a supporter, along with the Agency for Health Care Research and Quality, the Commonwealth Fund, US Department of Veterans Affairs, and the John A. Hartford Foundation of the Conference to Advance the State of the Science and Practice on Scale-up and Spread of Effective Health Programs held on July 6-8, 2010 in Washington DC. Attended by approximately 100 invited health care researchers, practitioners, and funders, the conference sought to trigger a new era of rapid and broad scale-up of effective practices in health care and public health for the ultimate purpose of achieving improvements in health through more rapid diffusion and uptake of effective, innovative practices. As a part of the event, teams of meeting participants worked together in a visioning exercise to define ideal systems for spreading effective practice, and to identify “gaps” or areas for improvement.

New Venture Advisory Group
What new organizational models would be necessary to effectively move research findings into health policy and practice? That is the question that Donaghue posed to its New Venture Advisory Group. The group, made up of individuals with a variety of experience, backgrounds and points of view (see the membership list later in this report), came together to provide feedback and guidance to Donaghue on avenues for lending support and deploying resources to address the gaps between research and its use. With help from Wellspring Consulting, the New Venture Advisory Group met once in 2010 and again in 2011 to participate in some “blue sky thinking” about knowledge translation. This initiative builds on Donaghue’s previous work; convening funders with similar interests, surveying university technology transfer offices, and commissioning a study of the scaling up of evidence-based community health programs.
Awards

2010 NEW AWARDS

PROGRAM FOR RESEARCH LEADERSHIP

Harlan M. Krumholz, MD
Yale University School of Medicine
Hospitalomics: A system-based approach to hospital performance

Augustus Mazzocca, MD
University of Connecticut Health Center
The effect of early range of motion on clinical outcomes, patient satisfaction, and cuff integrity following arthroscopic rotator cuff repair

Vinoth H. Srihari, MD
Yale University School of Medicine
Specialized treatment early in psychosis

Peggielee Wupperman, PhD
St. Luke’s-Roosevelt Hospital
Female-focused treatment for domestic violence and alcohol use

Robert Beech, MD
Yale University School of Medicine
Gene-expression algorithms to predict lithium response

Larry Davidson, PhD
Yale University School of Medicine
Restoring hope and health to adults with serious mental illness

Naomi Driesen, PhD
Yale University School of Medicine
Prefrontal development in youths at risk for schizophrenia

Thomas M. Gill, MD
Yale University School of Medicine
Enhancing independent bathing in community-living elders

Carlos M. Grillo, PhD
Yale University School of Medicine
RCT for obesity and binge eating in monolingual hispanic persons

William T. Zempsky, MD
Connecticut Children’s Medical Center
Sickle cell pain: A novel approach to assessment and relief

Quing Zhu, PhD
University of Connecticut
Novel imaging devices for diagnosis and treatment of breast cancers

PRACTICAL BENEFIT INITIATIVES

Evelyn Barnum, JD
Community Health Center Association of Connecticut
First Contact for Care

Judith Fifield, PhD
University of Connecticut Health Center
Ethel Donaghue Center for Translation Research into Practice and Policy

Jessee M. Combs, MD
University of Connecticut Health Center
Improving the quality of care for atrial fibrillation by promoting patient-centered decision making

Terri Fried, MD
Yale University School of Medicine
CARE: Community Alliance for Research and Engagement

Anne Kenny, MD
University of Connecticut Health Center
The Donaghue nutrition research competition

Diane Meier, MD
Mount Sinai School of Medicine
Factors associated with successful palliative care programs in hospitals

Gregg Meyer, MD
Massachusetts General Hospital Physician Organization
Engaging leaders in patient safety through simulation

DONAGHUE INVESTIGATOR

Hal Blumenfeld, MD, PhD
Yale University School of Medicine
Impaired consciousness in epilepsy: Mechanisms and consequences

Becca Levy, PhD
Yale University School of Medicine
Promoting older individual’s health behaviors through positive age beliefs

Jennifer Prah Ruger, PhD
Yale University School of Medicine
Ethics and economics of healthcare disparities

William T. Zempsky, MD
Connecticut Children’s Medical Center
Sickle cell pain: A novel approach to assessment and relief

GRANT PROGRAMS

Clinical and Community Health Issues
For research studies that address major medical conditions and the health of individuals, groups and communities. Grants are for up to $240,000 over two or three years. This program is no longer open to new applications.

Donaghue Investigator
Supports particularly promising medical researchers holding faculty appointments at Connecticut research institutions. Awards were for $100,000 a year for five years. This program is no longer open to new applications.

Program for Research Leadership
The Program for Research Leadership is a team-based award that supports research that has the potential for making a direct, near-term impact on improving public health, clinical practice, or community health interventions; related knowledge uptake activities; and activities to creating a learning environment among the team. Awards will be up to $200,000 a year for four years.

Practical Benefit Initiatives
The Foundation initiates research projects in an interactive process with prospective investigators, and funding is based upon promise of practical benefit to human life. This program is not currently open for new initiatives.

2010 CONTINUATION AWARDS

CLINICAL AND COMMUNITY HEALTH ISSUES

Sheila M. Alessi, PhD
University of Connecticut Health Center
Contingency management and pharmacotherapy for smoking cessation

Robert Beech, MD
Yale University School of Medicine
Contingency management and pharmacotherapy for smoking cessation

Larry Davidson, PhD
Yale University School of Medicine
Restoring hope and health to adults with serious mental illness

Naomi Driesen, PhD
Yale University School of Medicine
Prefrontal development in youths at risk for schizophrenia

Thomas M. Gill, MD
Yale University School of Medicine
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Novel imaging devices for diagnosis and treatment of breast cancers

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Terri Fried, MD
Yale University School of Medicine
CARE: Community Alliance for Research and Engagement

Peggielee Wupperman, PhD
St. Luke’s-Roosevelt Hospital
Female-focused treatment for domestic violence and alcohol use

Robert D. Kerns, PhD
Yale University School of Medicine — VA Connecticut Healthcare System
Implementing a VA Stepped Care Model of Pain Management

William Tamborlane, MD
Yale University School of Medicine
Changing life-styles for better health

DONAGHUE INVESTIGATOR

Hal Blumenfeld, MD, PhD
Yale University School of Medicine
Impaired consciousness in epilepsy: Mechanisms and consequences

Becca Levy, PhD
Yale University School of Medicine
Promoting older individual’s health behaviors through positive age beliefs

Jennifer Prah Ruger, PhD
Yale University School of Medicine
Ethics and economics of healthcare disparities

William T. Zempsky, MD
Connecticut Children’s Medical Center
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NEW VENTURE ADVISORY GROUP

Michael Rion
Resources for Ethics and Management
Principal

Russell Bromley
TRAC Consulting
Principal

Charles Cutler, MD
Cutler Healthcare Consulting
President

Guy Fish, MD
Fletcher Spaght Inc & Fletcher Spaght Ventures
Vice President

Peggy Hill
Nurse-Family Partnership
Chief Strategic Relations Officer

Veronica Nieva, PhD
Westat
Vice President

Stephanie Spangler, MD
Yale University
Deputy Provost for Health Affairs, Associate Vice President for West Campus Planning and Program Development

PROGRAM FOR RESEARCH LEADERSHIP REVIEW COMMITTEE

Gregory B. Diette, MD, MHS (Chair)
Johns Hopkins University School of Medicine
Associate Professor of Medicine, Environmental Health Sciences & Epidemiology

Russell Bromley
TRAC Consulting
Principal

John Charde, MD
Senior Whole Health
Medical Director, Quality

Charles Cutler, MD
Cutler Healthcare Consulting
President

Michael Gaffney, PhD
Pfizer, Inc.
Vice President, Statistical Research & Consulting

John H. Holmes, PhD
University of Pennsylvania School of Medicine
Associate Professor of Medical Informatics in Epidemiology

Maulik S. Joshi, DrPH
American Hospital Association
Senior Vice President

Marlene Schwartz, PhD
Yale University
Deputy Director for the Rudd Center for Food Policy & Obesity

POLICY ADVISORY COMMITTEE

Michael Rion (Chair as of October)
West Hartford
Principal, Resources for Ethics and Management

Nancy Angoff, MD
New Haven
Associate Dean, Yale School of Medicine

Cheryl Beck, DNSc
Tolland
Professor, University of Connecticut

Carrie Brady, JD
Wilton
Healthcare Consultant

John Charde, MD
Salisbury
Medical Director, Quality, Senior Whole Health

Lisa Davis, RN, BSN, MBA
Glastonbury
Chief of the Public Health Initiatives Branch
State of Connecticut Department of Public Health

Bruce Gould, MD
West Simsbury
Associate Dean, University of Connecticut School of Medicine

Katherine C. III, MD
Bristol
President & CEO, Hospital for Special Care (Retired)

David Knecht, PhD
Storrs
Professor, University of Connecticut

Marie Massaro
Wethersfield
Massaro Consulting

Dennis May
Guilford
CEO, Connecticut Hospital Association (Retired)

TV Rajan, MD, PhD
Farmington
Professor, University of Connecticut School of Medicine

Honorable Alvin W. Thompson (Chair through September)
Windsor
Judge, US District Court, Hartford
### Grants

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**Funds Awarded by Grant Program for Grant Cycle Beginning in 2010**

**Research in Clinical & Community Health Issues**
- New: 0
- Continuing: 9

**Donaghue Investigator Program**
- New: 0
- Continuing: 5

**Practical Benefit Initiative**
- New: 0
- Continuing: 6

**Program for Research Leadership**
- New: 1
- Continuing: 2

### Financials

- **Investment in marketable securities**: $59,748,417
- **Cash and cash equivalent**: $303,168
- **Other assets**: $49,645
- **Total assets and fund balance**: $60,101,230
- **Income**: $1,455,033

**Expenditures**

**Program Grants**
- Clinical and Community Health: $375,851
- Donaghue Investigator: $552,684
- Practical Benefit Initiatives: $860,138
- Program for Research Leadership: $220,000

**Program support and Foundation-administered projects**: $398,883

**Management and General**: $481,955

**Investment Management**: $136,078

**Total Expenditures**: $3,025,589

Note 1: In addition to these expenditures, an estimated amount of up to $2,050,558 has been earmarked for future spending in support of ongoing grants. The figures listed above are unaudited. Fair market values are approximate.

Note 2: In addition to this amount, the Foundation facilitated $138,638 in research grants for foundations or other philanthropic sources.

1 - Current value: $60,101,230
2 - Original value of Ethel Donaghue's gift: $53,438,074
3 - Grants made since Foundation’s inception: $81,897,256
Ethel Donaghue’s legacy would be even more meaningful if her Foundation’s efforts prompted others to support health research as a part of their own philanthropic planning. The Donaghue Foundation supports the work of Leave a Legacy Connecticut and encourages people to include charitable bequests for health research purposes in their wills. While the Foundation will accept additional funds itself only if they are solely and expressly for Miss Donaghue’s own testamentary purpose, we do believe strongly in the public value of committing private sector resources to the ongoing cause of health research.