“Some of us have great runways built for us. If you have one, take off! But if you don’t have one, realize, it is your responsibility to grab a shovel and build one for yourself and for those who will follow after you.”

— Amelia Earhart, Aviatrix
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AMDA Foundation 2012 Board of Directors

**Officers**

Daniel Swagerty, Jr. MD, MPH, CMD  
Chairman of the Board  
University of Kansas Medical Center  
Center on Aging  
Kansas City, Kansas

Barbara Resnick, PhD, CRNP  
Secretary/Treasurer  
University of Maryland School of Nursing  
Baltimore, MD

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Immediate Past Chair

**Directors**

Mary P. Evans, MD, CMD  
Charlottesville, VA

Paul R. Katz, MD, CMD  
Baycrest Centre for Geriatric Care

Cari R. Levy, MD, PhD, CMD  
University of Colorado

John E. Morley, MB, BCh  
St. Louis Univ. HSC/Geriatrics

Joseph G. Ouslander, MD  
Florida Atlantic University

Patrick Quail, MB, BCh, CMD  
Intercare Group Inc.

Melvin Rector, NHA, LNHA  
National Healthcare Corporation

Peter Winn, MD, CMD  
Oklahoma University

**Staff**

Harvey Tillipman, MBA, MSW  
Interim Executive Director

Christine Ewing  
Operations Manager
In an age when organizations are struggling to stay afloat and charitable donations are down in many areas, the Foundation has continued to fund its popular Futures Program, meet Wall of Caring and other fundraising goals, and attract the interest and support of nationally known clinicians, authors, speakers, and educators.

AMDA members and friends continue to support the Foundation because they believe in the legacy of post-acute/long term care, the legacy of quality, and the legacy of a commitment to their patients and colleagues.

Introduction

Post-acute and long term care (PA/LTC) didn’t start with the AMDA Foundation, but the Foundation solidified the legacy of PA/LTC. When the organization was officially chartered and incorporated on January 17, 1996, it provided a home for PA/LTC research and its translation into practice. It gave young practitioners an opportunity to learn about careers in PA/LTC, including medical direction, and connect with experienced mentors and learn about job opportunities.

The Foundation created a forum to recognize and honor leaders, visionaries, and innovators. And it brought practitioners, caregivers, academicians, consumers, and others together to celebrate milestones and innovations, identify opportunities for quality improvement, and promote teamwork and an ongoing pursuit of excellence.

PA/LTC has come a long way since the 1935 Social Security Act created a program called Old Age Assistance, which would pay cash to elders. This program eventually spawned Medicare, which is the cornerstone of payment for nursing home care. PA/LTC facilities have come a long way from the ’50s when old, poorly maintained buildings and lack of oversight led to quality concerns. The Foundation has kept its finger on the pulse of change and promoted issues such as culture change, person-centered care, and quality improvement and process improvement models.

“There are only two lasting bequests we can give our children... one is roots, the other wings.”

– Stephen Covey, Bestselling Author

In an age when organizations are struggling to stay afloat and charitable donations are down in many areas, the Foundation has continued to fund its popular Futures Program, meet Wall of Caring and other fundraising goals, and attract the interest and support of nationally known clinicians, authors, speakers, and educators.

AMDA members and friends continue to support the Foundation because they believe in the legacy of post-acute/long term care, the legacy of quality, and the legacy of a commitment to their patients and colleagues.
Message from the Chair

The AMDA Foundation is proud to report their continued notable progress this past year. The Board has maintained an ongoing focus on assuring that our programs are closely aligned with the needs of the AMDA membership. We have sought additional opportunities to work with our colleagues in AMDA and its affiliates as we explored areas of synergy across our programs. First, I would like to thank Chris Ewing for her continued exceptional contribution as our long-time manager, including very graciously and deftly assisting the Foundation through the transition of having Harvey Tillipman as our interim executive director and Chris Laxton as the permanent executive director.

In terms of programming, the Futures Program remains strong with the agenda improved each year and continued high participant satisfaction. The program has continued in its goal of advancing interprofessional education and participation. In this respect, special thanks to Dr. John Morley for continued inclusion of the Futures Program in his Gateway Geriatric Education Center and Dr. Barbara Resnick for again facilitating funding from the Gerontological Advanced Practice Nurses Association (GAPNA) for an IDT member of the 2012 Futures class. Their efforts continue to be instrumental in advancing our overall program goals, as well as our specific inter-professional goals. Of course, we owe ongoing special thanks to the Futures co-chairs, Drs Heidi White and Cari Levy, for their tremendous contribution to making the program so successful.

“The greatest use of life is to spend it for something that will outlast us.”
— William James,
19th Century American Philosopher
We have continued our strategy of financially supporting the Futures Program through a multi-faceted approach.

Our traditional fundraising efforts continue to provide substantial program support through a number of nursing home sponsorships including support from Forest Laboratories, Inc. Kindred has continued their longtime support for the 2012 program due to the efforts of Dr. Keith Krein. We are also thankful for continued support obtained from Extendicare by Mel Rector, as well as for his continuing to obtain support from National Healthcare.

The Futures Program continues to rely on cost-sharing through travel support from the residency and fellowship programs. Of the 60 participants in 2012, 35 participants received this program support. This is a gratifying demonstration of the geriatric medical education community’s belief in the value of the Futures Program. Sincere thanks are again due the AMDA, AMDCP, and Foundation Board members who contributed to our individual giving campaign. Additionally, special thanks to the 10 state chapters who provided program support including: Ohio for their support of 3 scholarships; Maryland, Michigan, Florida and Pennsylvania for each sponsoring a scholarship; and generous contributions from Missouri, Oklahoma, Tennessee, Washington and Wisconsin. Thanks are also due to Dr. John Weigand and Central Ohio Geriatrics for their support of a full scholarship. This year, the long term care practice, Central OH Geriatrics, partnered with the state chapter to help ensure that all the participants from their state had funding to attend. Similar partnerships were successful in Pennsylvania – the state chapter partnered with a group or individual(s) to work together to fund scholarships.

The Futures Program also benefitted from contributions raised at the Wall of Caring, with nearly $30,000 raised through the generosity of our AMDA membership. The Wall of Caring recognizes not only the many donors to the Futures Program, but also provides an opportunity for our members to offer tributes to the important people in their lives. This year we continued our successful innovation of the silent auction by enlisting authors to contribute autographed books on caring and donated books for caregivers as the centerpiece of the auction. This year, we had over 75 items to auction.

The AMDA Foundation/Pfizer Quality Improvement Award and the Quality Improvement & Health Outcome Award (QIHO) continue to raise awareness in the long term care community that relatively small cost projects can make a big difference in the lives of residents and the quality of their care. Each of these award programs relies on AMDA members to serve on the selection committees. I would like to thank the AMDA Foundation/Pfizer Quality Improvement Award committee members: Suzanne Gillespie, MD, CMD (Chair), John Morley, MB, BCh, Tobie Olsan, PhD, and Peter Winn, MD, CMD; and the Quality Improvement & Health Outcome Award (QIHO) committee members: William Smucker, MD, CMD (Chair), Sally Brooks, MD, FACP, Suzanne Cryst, RD, CSD, LD, Marianna Grachek, MSN, NHA, CALA, FACHCA and Donna L. Hamby, MSN, RN, NP. The Foundation could not stage these awards without their help.
The Foundation sponsored two research sessions at Long Term Care Medicine-2012. The first session was an afternoon intensive titled “When is Quality Improvement Research? A Training Program on Team QI Activities in Your Nursing Facility.” Building on the successes of several AMDA Foundation training programs, QI experts and in the trenches practitioners met to skill build around the concept of “team science,” including discussions of key strategies for effective research collaboration at the facility level. Many thanks to the session speakers Paul Katz, MD, CMD; Jurgis Karuza, PhD; Christie Tiegland, PhD.

The second session was “AMDA Foundation: QI Awards and Expert Panel Discussion” and featured the awardees presenting their project results with accomplished researchers Paul Katz, MD, CMD and Joe Ouslander, MD and Sabine Maria von Preyss-Friedman, MD, CMD serving as the discussants for the award presentations.

On behalf of the Foundation Board, I wish to thank everyone in the AMDA community for their support of our programs this past year. It is gratifying to report our progress and invite your continued involvement in your Foundation.

Respectfully Submitted,

Daniel Swagerty, Jr., MD, MPH, CMD

Chair, AMDA Foundation
Fundraising

“Everyone must leave something behind when he dies, my grandfather said. A child or a book or a painting or a house or a wall built or a pair of shoes made. Or a garden planted. Something your hand touched some way so your soul has somewhere to go when you die, and when people look at that tree or that flower you planted, you’re there.”

— Ray Bradbury in Fahrenheit 451

Wall of Caring

During AMDA Long Term Care Medicine—2012 in San Antonio, TX, the Wall of Caring exceeded its fundraising goal of $28,000, bringing in nearly $30,000 for the Futures Program. Contributing significantly to this success was people’s desire to pay tribute to James Pattee, MD, CMD, the ‘father’ of AMDA’s Core Curriculum who passed away in 2011. After Foundation Chair Daniel Swagerty, MD, MPH, CMD, took to the podium during one of the general sessions to urge members to honor Dr. Pattee, the Wall raised nearly $10,000 by the end of the day. Many of these contributions were accompanied by written tributes expressing gratitude for his leadership, friendship, and inspiration.
**Auction at the Wall**

The Foundation’s Auction at the Wall book auction also broke records. Over 75 books and other items brought in nearly $7,000, a $2,000 increase over the previous year. In addition to many AMDA-related items, such as a full set of clinical practice guidelines and AMDA LTC Medicine—2013 registration, the auction featured author-signed books by Keynote Speaker Dr. Robert Wicks; Foundation Chair Daniel Swagerty, MD, MPH, CMD; author, physician, and AMDA friend Jason Karlawish, MD, and others. Dr. Levine also donated two of his photographs to the auction. One, “Dr. Nichols Visits the Sacred Heart Convent,” brought in $600 for the Foundation. The other, “Harmonica Lady,” was the prize in a drawing among several $1,000-plus Wall of Caring donors. It went to Dr. Richard Miles of Belle Vista, Arkansas.

**Caring Canines Calendar**

The 2012 Caring Canines Calendar sold over 500 copies last year. Over 80 submissions were received, from facilities across the country. The AMDA Foundation booth in San Antonio featured a special guest, Mike, a nursing home therapy dog owned by AMDA member David Smith, MD, CMD. Mike brought his own brand of comfort and joy to meeting participants and drew crowds of people to the booth and brought attention to the calendar.
**Futures Program**

Once again in 2012 the Futures Program was tremendously popular and well received. The 2012 Futures class was comprised of 59 young physicians and an advance practice nurse who learned about the many career opportunities in long term care medicine and about the roles and responsibilities of the medical director. After the one-day intensive program, the participants received a 3-day registration to attend the many diverse educational and networking opportunities at LTC Medicine-2012.

We were fortunate to once again welcome program chairs Heidi White, MD, CMD, and Cari Levy, MD, PhD, CMD. Participants also heard from veteran practitioners about specialized careers in research, private practice and other areas. They learned about nursing home regulations, quality improvement, and clinical leadership and teamwork.

“The Futures Program is one of the best things AMDA’s ever done,” said John Voytas, MD, CMD, Geriatric Fellowship Program Director, William Beaumont Hospital
A special welcome reception the night before the day-long program brought together Futures participants with Certified Medical Directors to promote networking and mentorship relationships. Additionally, Pat Bach, PsychD, and Dan Bluestein, MD, CMD, led a team building exercise which helped jump start conversations between the Futures participants gathered from across the nation.

This comprehensive and intensive program, designed to increase the workforce shortage in long term care could not happen each year without the support of the long term care community. Support for the program came from many areas including fellowship or residency programs, AMDA state chapters, nursing home chains, pharmaceutical and a long term care practice. We would like to thank the following for their support:

- AMDA-Dedicated to Long Term Care™
- Central Ohio Geriatrics
- Extendicare
- Forest Pharmaceuticals
- Kindred Healthcare
- National Healthcare Group
- The Gerontological Advance Practice Nurses Association (GAPNA)
- A grant from Saint Louis University Geriatric Education Center

The role of the AMDA state chapters is multi-faceted. Although we value their financial support, they are instrumental in developing relationships with the program directors in their state to help identify those young physicians who would benefit from the Futures Program. The participants are then invited to attend their local state chapter activities and become involved in the community.
This year, in a grassroots effort, the state of Ohio sponsored the attendance of 7 participants to the program in San Antonio. The AMDA state chapter made a tremendous financial commitment to sponsor 3 attendees, while the long term care practice, Central Ohio Geriatrics, headed by Dr. John Weigand, sponsored the attendance of 2 participants. Dr. Weigand noted that not only was this financial commitment beneficial to his practice, but for future of long term care. Two more attendees had posters accepted to the LTC Medicine-2012 poster session and were awarded a full scholarship by the Kindred Foundation. We would like to thank the following state chapters for their support of the 2012 Futures Program:
Over the years, clinical and academic leaders have come to value the program and have demonstrated an eagerness to support it as a necessary tool in training the future providers. Many participants note that they gained valuable and practical training that they hadn’t yet received in their training. We would like to thank the following programs who supported the attendance of their fellow(s) or residents at 2012 Futures:

- Florida Medical Directors Association
- Maryland Medical Directors Association
- Michigan Medical Directors Association
- Missouri Association of Long Term Care Physicians
- Ohio Medical Directors Association
- Oklahoma Medical Directors Association
- Pennsylvania Medical Directors Association
- Tennessee Association of Long Term Care Physicians
- Washington State Medical Directors Association
- Wisconsin Association of Medical Director

- Harvard/Beth Israel Deaconess Medical Center
- Indiana University Geriatrics Fellowship
- LSU (Lafayette) Geriatric Medicine Fellowship
- Lynchburg Family Medicine Residency
- MAHEC Geriatrics Medicine Fellowship
- Nova Southeastern University
- Saint Louis University Geriatric Medicine
- University of Alabama at Birmingham, Geriatrics
- University of Cincinnati Geriatric Medicine
- University of Connecticut Geriatric Fellowship
- University of Hawaii Geriatric Medicine Fellowship
- University of Kansas Geriatrics Program
- University of Louisville Geriatric Medicine
- University of Michigan Geriatric Fellowship
- University of Nebraska Medical Center Geriatrics
- University of Rochester Geriatrics Fellowship
- University of Utah Internal Medicine Residency
- University of Wyoming Family Medicine at Casper
- UTHSCSA-Audie L. Murphy VA Hospital Geriatrics
- Vanderbilt University Department of Geriatrics
- VirginiaTech Carilion School of Medicine Geriatric
- West Virginia University Geriatric Program
- Winthrop University Hospital, Geriatric Medicine
- Yale Health System/ Bridgeport Hospital, Geriatric

The AMDA Foundation extends its thanks to the individuals who support the AMDA Foundation through their contribution at the Wall of Caring and throughout the year.
Quality Improvement Awards

The AMDA Foundation quality awards are an excellent opportunity for physicians and researchers—both experienced professionals and novice practitioners—to pursue studies and make a valuable contribution to quality care. The Foundation presented its 2012 quality improvement awards during Long Term Care Medicine—2012. Foundation Board Chair Daniel Swagerty, MD, MPH, CMD, presented the AMDA Foundation/Pfizer Quality Improvement Awards (along with Mr. Frank Asper from Pfizer) and the Foundation Quality Improvement and Health Outcome Award (QIHO) during the Friday General Session.

“Being recognized by AMDA for improvements to a fall management program that potentially could impact resident quality of care around the nation is a tremendous honor.”

— Randolf Palmaira, CNR Executive Director
The Effect of a Computer-Generated Rounding Report on Physician Workflow in the NH: A Time Motion Study."

Susan Leger-Krall, ARNP, PhD
River Garden Hebrew Home, Jacksonville, FL.

"Evaluation of the Effectiveness of Diffused Lavendar in an Alzheimer’s Adult Day Care Center in Decreasing Various Behavioral Issues: A Pilot Study."
Anna Rahman, PhD, MSW

Garden Crest Rehabilitation Center, Los Angeles, CA.

“A Coaching Course to Improve Incontinence Care Performance.”

2012 QIHO Awards

The newly established QIHO awards are designed to recognize programs implemented by medical directors and care teams that have demonstrated quality improvement and enhanced quality of life for their long term care facility residents. Each awardee presents their program at the Foundation session during AMDA Long Term Care Medicine.

CNR Center for Nursing and Rehabilitation, Brooklyn, NY

“Enhancing Resident Safety via a Fall Reduction Initiative.”
StoneGate Senior Living, Lewisville, TX

“Beyond Puree.”

Winchester Terrace Nursing Facility, Mansfield, OH

“Reducing Hospital Readmissions: Keys to Quality Care.”
Leadership Awards

The AMDA Foundation helped present AMDA’s prestigious leadership awards—the 2012 Medical Director of the Year, the William Dodd Founder’s Award and the James Pattee Award for Excellence in Education. These awards honor AMDA members who are innovative leaders, visionary practitioners, avid educators, prolific writers/peakers, committed volunteers, and compassionate, knowledgeable, and dedicated practitioners and patient advocates.

2012 Medical Director of the Year Award

The Medical Director of the Year Award recognizes those individuals whose vision, passion, leadership, knowledge, and commitment succeed in taking patient care in the facilities they serve as medical director to exceptional levels of quality, excellence, and innovation. AMDA asks facility staff and their interdisciplinary leaders to identify and nominate outstanding medical directors.

Noel DeBacker, MD, CMD — 2012 Medical Director of the Year

Dr. DeBacker received several nominations including one from President and CEO William Lowe of Chicagoland Methodist Senior Services. Among his many attributes, Dr. DeBacker was recognized for his innovative and extensive work with interdisciplinary teams. “Quality care requires the input of health care providers and team members. Great things happen when everyone puts their minds together to help a person.”

“Through AMDA, we have come a long way. It is up to all of us in our everyday work, individually and collectively, to promote the right principles and values....”

— Steven Levenson, MD, CMD, 2012 AMDA William Dodd Founder’s Award Recipient
Nominees for the 2012 Medical Director of the Year:

- Jorge Andrade, MD
- Washington Baquero, MD
- David R. Barthold, MD, CMD
- Lowell F Clark, MD, CMD
- Peter Dalum, MD, CMD
- S Anthony Gaeta
- Eric J. Hilgeford, MD, CMD
- Daniel Joseph Hurley, MD
- Robert G. Kaplan, MD, FACP, CMD
- Tae Joon Lee, MD, CMD
- David LeVine, MD, CMD
- Charles J. Mirabile, MD, CMD
- Meenakshi Patel, MD, CMD
- James Rider DO, CMD
- Chester Rogers, MD
- Robert G. Timmons, MD
- Sabine von Preyss-Freidman, MD, CMD
- Heather Zinzella-Cox, MD, CMD

William Dodd Founder’s Award for Distinguished Service

The Dodd Award, named for AMDA’s Founder, recognizes significant contributions to building the organizational strength, image, and mission of AMDA (to promote Medical Direction and Physician Services in long term care, to enhance the reputation of AMDA, and to advance goals enabling the association to improve care delivered to patients throughout the long term care continuum).

Steven Levenson, MD, CMD — 2012 Dodd Award Recipient

Dr. Levenson is a multi-facility medical director for Genesis ElderCare in Baltimore. Active in AMDA since 1986, Dr. Levenson is a past president and served as editor of AMDA’s first journal. He also served for several years as medical editor for Caring for the Ages. He was a key player in crafting several AMDA clinical practice guidelines, and he participated in numerous CPG development consensus conferences. An enthusiastic advocate of state chapters, Dr. Levenson is a long-term leader in the Maryland Medical Directors Association and has worked on advocacy issues of import to practitioners and facilities in his state.

Left to Right: Daniel Swagerty, MD, MPH, CMD; Steven Levenson, MD, CMD; Karyn Leible, MD, CMD
Nominees for the 2012 William Dodd Award

- Paul J. Drinka, MD, CMD
- Fred Feinsod, MD, CMD
- William Hovland, MD, CMD
- Paul R. Katz, MD, CMD
- H. Huson Middleton, III, MD, CMD
- Jonathan Musher, MD, CMD

- Jeff Nichols, MD
- Terrence A. O’Malley, MD, CMD
- William K. Rosen, MD, CMD
- Joshua Schor, MD, CMD
- Kamran Sheikh, MD, CMD
- Linda Uhrig Hitchcock, MD, FAAFP, CAQ, CMD

James Pattee Award for Excellence in Education

The Pattee Award, named after the physician considered to be the father of AMDA’s Core Curriculum on Medical Direction, recognizes significant contributions to the educational goals of AMDA (to enhance the educational structure and framework of AMDA, to advance education specific to long term care physician practice, and to promote AMDA leadership via educational endeavors within the long term care continuum).

Paul Katz, MD, CMD — 2012 Pattee Award Recipient

Dr. Katz is vice president of medical services at Toronto-based Baycrest Geriatric Health Centre. Dr. Katz served as AMDA president in 2010-2011, and he is a former program chair and chair of the Clinical Practice Committee. He is an active Foundation member and has been involved with AMDA’s international workgroup and promoting quality long term care on the world stage. A widely published author and speaker, Dr. Katz has authored numerous articles in JAMDA and worked as senior editor for a series of books on advances in long term care. He also has co-edited textbooks and is an avid researcher.
The nominees for the 2012 James Pattee Award:

- Jeff Burl, MD, CMD
- Barbara Messinger-Rapport, MD, CMD, PhD
- William K. Rosen, MD, CMD
- Joshua Schor, MD, CMD
- Karl Steinberg, MD, CMD
- Eric Tangalos, MD, CMD
Education

As always the Foundation sponsored educational program about LTC research during AMDA Long Term Care Medicine. At the 2012 program, the Foundation supported two key programs: “When is QI Research?” and a program where Foundation QI award winners offered updates on their projects.

During the first session, Paul Katz, MD, CMD, discussed the significance of carefully selecting and framing the questions you want to address and the forum for asking them. “The question should derive naturally from rationale for conducting QI,” he said, adding, “The study scope also is dependent on the rationale as well as the available resources.” Planning, he said, should include answering questions such as what resources might be useful, what—if any—data is already available, who will collect data, what team members will be involved and how, and whether or not chart reviews are required.

“You are not here merely to make a living.
You are here to enable the world to live more amply, with greater vision, and with a finer spirit of hope and achievement.
You are here to enrich the world.
You impoverish yourself if you forget this errand.”

— Woodrow Wilson
During a separate program, 2012 QI award recipients updated attendees on the progress of their studies. Among the highlights:

- Investigators on the study, “From Isolation to Collaboration: A Rural Nursing Home Initiative to Reduce Residents’ Preventable Hospitalization,” talked about how their project established a collaborative, with information and videoconferencing infrastructure, providing team members with a strong base of QI knowledge and coaching, created high regional interest in transitional care and readiness to collaborate with nursing homes, and encouraged leadership commitment.

- Govind Bharwani, PhD, talked about “Reducing Agitation Through Non-Pharmacologic Therapies.” In this study, the use of non-pharmacologic interventions such as music, video, and memory prop therapies resulted in antipsychotic use reduction. The authors concluded that there is strong evidence that non-pharmacologic behavior-based ergonomics therapy program can reduce agitation and improve resident quality of life, as well as help reduce falls and behavior and mood issues.

- The study, “Beyond Puree,”™ addressed a program designed to make food more appealing and palatable for residents who have swallowing difficulties and can’t eat solid foods. Cheryl Korbuly, RD/LD, talked about several positive outcomes of her study including a significant reduction in the use of calorie-enhancing supplements and a significant amount of positive weight gain.

- “Reducing Hospital Readmission: Keys to Quality Care” showed how a study designed to employ proven clinical tools and staff education helped maintain continuity of care during acute illness episodes, enable the delivery of quality care, solidify relationships with attending physicians, provide nurses with tools/methods to confidently care for residents, and—ultimately—reduce hospital readmissions to less than 11%.

- “Enhancing Resident Safety via a Fall Reduction Initiative” employed an innovative resident-centered approach to falls prevention that resulted in a 53% reduction in falls. In addition to reduced falls, the facility experienced enhanced staff knowledge and skills in the areas of fall management/restraints and pain assessment. They also developed user-friendly screening/assessment tools. Additionally, resident/family satisfaction surveys documented a satisfaction rate of over 90%.

Award recipients praise the AMDA Foundation programs for giving them the opportunity to further explore their best practices and QI ideas and share the results with the widest possible audience. They said that they have received calls and e-mail messages from across their states and around the country from colleagues asking questions or seeking advice on implementing similar projects.
In 2011 the AMDA Foundation received a grant to study outcomes in diabetes care in the long term care setting.

In 2012, long-time Foundation Research Network member and study principal investigator T.S. Dharmarajan, MD, CMD, moved forward with facility recruitment and data collection. The AMDA Foundation pursued involvement in a study on diabetic care in the nursing home, with the primary objective of having residents transition from a sliding scale insulin regimen to a basal/bolus regimen. Throughout the year, the Foundation—working through T.S. Dharmarajan, MD, CMD, was seeking facilities to participate in the study and beginning to provide participants with information and training.

The main objective of the study is to demonstrate the superior efficacy of basal/bolus insulin over sliding scale insulin in reducing mean fasting blood glucose concentration averaged over days 21-28 in nursing home patients with type 2 diabetes by use of an algorithm conversion tool.

Dr. T.S. Dharmarajan at LTC Medicine-2012 Poster Session
The Industry Advisory Board is a partnership between the AMDA Foundation and representatives from divisions of industries with an interest in long term care medicine.

The IAB creates a forum where AMDA members and industry leaders can come together to discuss issues of mutual interest with a goal to identify collaborative opportunities to advance effectiveness in LTC medicine through discussions around disease state management and patient-centered care. It is mutually beneficial to discuss current issues and trends in geriatric medicine across the LTC continuum with our industry partners.

We are grateful to our industry partners in 2012:

- Astellas Pharma US
- Purdue Pharma L.P.
- sanofi aventis U.S.
# Financials

**AMERICAN MEDICAL DIRECTORS ASSOCIATION FOUNDATION**  
**STATEMENTS OF ACTIVITIES**  
**YEARS ENDED DECEMBER 31, 2012 AND 2011**

## Revenue and Support

<table>
<thead>
<tr>
<th></th>
<th>2012 Unrestricted</th>
<th>2012 Temporarily Restricted</th>
<th>2011 Unrestricted</th>
<th>2011 Temporarily Restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants</td>
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<td>$</td>
<td></td>
<td>$ 47,000</td>
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<tr>
<td>Federal passthrough award</td>
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<td>30,000</td>
<td>31,000</td>
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<tr>
<td>Contributions</td>
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<td>25,500</td>
<td>118,640</td>
<td>128,573</td>
<td>5,000</td>
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<tr>
<td>Meeting Services</td>
<td>2,200</td>
<td>2,200</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contract revenue</td>
<td>39,763</td>
<td>39,763</td>
<td>4,880</td>
<td></td>
<td>4,880</td>
</tr>
<tr>
<td>AMDA member and other contributions</td>
<td>43,165</td>
<td>43,165</td>
<td>62,436</td>
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<td>62,436</td>
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<tr>
<td>Interest income</td>
<td>370</td>
<td>370</td>
<td>705</td>
<td></td>
<td>705</td>
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<tr>
<td>Other income</td>
<td>12,862</td>
<td>12,862</td>
<td>44,277</td>
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<td>44,277</td>
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<tr>
<td>Net assets released from restrictions</td>
<td>45,000</td>
<td>(45,000)</td>
<td>125,350</td>
<td>(125,350)</td>
<td></td>
</tr>
<tr>
<td>Total revenue and support</td>
<td>266,500</td>
<td>(19,500)</td>
<td>247,000</td>
<td>(73,350)</td>
<td>323,871</td>
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## Expenses

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<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Symposium</td>
<td>9,302</td>
<td>11,147</td>
</tr>
<tr>
<td>Futures Program</td>
<td>75,785</td>
<td>16,668</td>
</tr>
<tr>
<td>Research Funding</td>
<td>61,043</td>
<td>120,538</td>
</tr>
<tr>
<td>Award Programs</td>
<td>25,869</td>
<td>90,099</td>
</tr>
<tr>
<td>Total program services</td>
<td>171,999</td>
<td>238,452</td>
</tr>
</tbody>
</table>

|                      |      |      |
| Support services     |      |      |
| Fundraising          | 13,249| 17,746|
| Management and general | 70,700 | 88,978|
| Total support services | 83,949 | 106,724|
| Total expenses       | 255,948| 345,176|

## Change in Net Assets

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>NET ASSETS, beginning</td>
<td>101,897</td>
<td>146,897</td>
</tr>
<tr>
<td>NET ASSETS, ending</td>
<td>$ 112,449</td>
<td>$ 101,897</td>
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**NET ASSETS**, ending

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<th>2012</th>
<th>2011</th>
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<td>$ 112,449</td>
<td>$ 101,897</td>
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<td>$ 25,500</td>
<td>$ 45,000</td>
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<td>$ 137,949</td>
<td>$ 146,897</td>
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Independent Auditors’ Report

To Board of Directors
American Medical Directors Association Foundation
Columbia, MD 21044

We have audited the accompanying financial statements of the American Medical Directors Association Foundation (the “Foundation”), which comprise the statement of financial position as of December 31, 2012 and 2011, and the related statements of activities and cash flows for the years then ended.

Management’s Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.
Auditor’s Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity’s preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the American Medical Directors Association Foundation as of December 31, 2012 and 2011, and its changes in net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Robis, Jones & Marcusca, P.A.

Columbia, Maryland
February 15, 2013
Our Thanks

We gratefully acknowledge those who made the Foundation’s work possible in 2012.

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