

# 2017 ANNUAL REPORT



**The John A. Hartford Foundation**  
Dedicated to Improving the Care of Older Adults



“ Innovation in caring for older adults means going beyond simply responding to needs. It means leveraging all the resources at your disposal to create momentum for real change. ”

– Margaret L. Wolff, Chair of the Board

## 2017 Annual Report

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# The John A. Hartford Foundation

Dedicated to Improving the Care of Older Adults

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The John A. Hartford Foundation  
[www.johnahartford.org](http://www.johnahartford.org)

The John A. Hartford Foundation  
strives to do the greatest good  
for the greatest number by  
supporting efforts to improve  
the care of older adults.





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# President and Board Chair's Letter

*Momentum.* That's the word that permeates the work of The John A. Hartford Foundation, its partners, and grantees over the past year. Indeed, 2017 was a banner year for leveraging what we've learned and taking big, bold steps to transform the way we care for older adults in America.

Momentum is also what we had in mind when we committed to our three areas of strategic focus: *Age-Friendly Health Systems*, *Family Caregiving*, and *Serious Illness and End of Life*. That's because we feel the tide changing when it comes to creating health systems that are optimally designed to care for us as we age, that support our family caregivers, and improve serious illness and end-of-life care.



We're more focused than ever on directly applying the lessons we've learned over 35 years to build and enhance the field of geriatrics in order to change health care practice. Last year we took exciting steps that we believe will achieve meaningful impact in the near term.

- We launched our Age-Friendly Health Systems initiative with five leading health systems, in partnership with the Institute for Healthcare Improvement, the American Hospital Association and the Catholic Health Association.
- We connected health system leaders and insurers with evidence-based resources for improving care for patients with complex health and social needs through the *Better Care Playbook*, launched through a collaboration that now includes The Commonwealth Fund, Milbank Memorial Fund, the Peterson Center on Healthcare, the Robert Wood Johnson Foundation and The SCAN Foundation.
- From community clinics to Capitol Hill, we've actively and intentionally raised awareness about how to improve health care delivery to older adults, so both patients and payers benefit from high-value, evidence-based care at lower costs. Our nonpartisan efforts educate decision-makers on pressing issues and help equip them with important information to advance care for older adults.

In 2017, the Board of Trustees welcomed new member, Nirav Shah, MD, previously Senior Vice President and Chief Operating Officer for Clinical Operations at Kaiser Permanente Southern California and former New York State Health Commissioner. We also sincerely thank Barbara Paul Robinson, Co-Vice Chair, who retired from the board after 11 years following a decade of distinguished service as General Counsel.

Thank you for being a part of our momentum in 2017. Together, we will ensure that older adults receive the care and support needed to continue making vital contributions.

Terry Fulmer, PhD, RN, FAAN  
President

Margaret L. Wolff  
Chair of the Board



# TRANSFORMING CARE

**Testing and implementing new approaches to better care.**

For decades, we've built a field of experts in aging and health who are innovating and improving care.



**Age-Friendly  
Health Systems**



**Testing Patient  
Priorities Care**



**Preventing Elder  
Mistreatment**

“

We're transforming the way people think about care for older adults by investing in what works.

– Terry Fulmer, PhD, RN, FAAN, President,  
The John A. Hartford Foundation

”



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Dedicated to Improving the Care of Older Adults



## OPPORTUNITY

We all deserve reliable health care that aligns with our goals and preferences, particularly as we get older. It's not just the right thing to do, *it's an economic imperative*. At the time that adults over age 65 were only 12 percent of the population, they accounted for 35 percent of all hospital stays and 26 percent of all doctor visits, and those trends continue. Poor-quality care harms older patients, causes families to suffer, and wastes money.

## APPROACH

We know meaningful change requires bold action.

In 2017, we launched the Age-Friendly Health Systems initiative in partnership with the Institute for Healthcare Improvement, the American Hospital Association, and the Catholic Health Association.

Together with experts in geriatric care, we are developing and testing an innovative model of care for older patients in five health systems across more than 30 states: Anne Arundel Medical Center, Ascension, Kaiser Permanente, Providence St. Joseph Health, and Trinity Health. Our goal: to bring age-friendly care to 20 percent of US hospitals and health systems by 2020.

## IMPACT

In the first stage of the initiative, which runs from 2017 through 2018, we are testing the Age-Friendly Health System prototype and scaling the model with participating health systems. Our efforts in this initial phase center on high-level interventions, referred to as the 4M Bundle, which should be delivered across care settings, from the hospital to the kitchen table:

- **What Matters:** Know and act on each older adult's specific health goals and preferences
- **Medications:** Use age-friendly medications that facilitate mobility, mentation, and "deprescribe" medications that aren't age-friendly
- **Mentation:** Identify and manage depression, dementia, and delirium
- **Mobility:** Ensure that older adults move every day

The second stage of the project, to be launched in 2019, will spread the model to an additional 10 to 15 health systems. We will also continue efforts to scale up the model to more than 1,000 age-friendly hospitals and health systems by 2020.



“ A hospital like ours already had programs on elder care, but we never looked at it from a whole system approach. We're now testing ideas and asking critical questions and it's making a difference. When we feel like we can better care for our patients, there is a positive effect on clinicians. ”

– Barbara Jacobs, MSN, RN, Vice President, Nursing and Chief Nursing Officer, Anne Arundel Medical Center





## OPPORTUNITY

We are living longer than ever before, but that often comes with additional health care needs. One in five people in the US age 65 or older have three or more chronic conditions. As different clinicians manage these various conditions, care is often fragmented and confusing to patients and caregivers. This uncoordinated care can be unhelpful, burdensome, and even harmful: one in five Medicare beneficiaries experience “guideline-driven harm” as a result of clinicians prescribing disease-specific medications that adversely affect the patient’s coexisting conditions.



## APPROACH

Patient Priorities Care is a new approach for care teams that uses patients’ own priorities to align health care among all their clinicians. The idea came to life in 2014, when a group of patients, clinicians, health system leaders, and other national experts proposed feasible strategies for improving the care of older adults with multiple chronic conditions.

The process begins with a member of the health care team who serves as a facilitator with the patient and his or her family, helping identify the patient’s health values and priorities. The care team translates the patient’s priorities into specific care options, explains any tradeoffs, and integrates care, including tests, self-care tasks, procedures, and medications. Over time, the team tailors care to help the patient meet his or her goals. The objective: less burdensome care that is more consistent with what matters most to the older adult.

## IMPACT

In late 2016, we launched a pilot program at primary care practices in an Accountable Care Organization and its partner cardiology practices to test and build evidence about Patient Priorities Care and refine the approach. In 2017, the program enrolled nearly 200 older patients and a cadre of clinicians. The Patient Priorities Care team is conducting quantitative and qualitative analyses, such as patient interviews, to assess the model.

Evaluation results will be made public in 2018, but preliminary results find:

- Patients report a better understanding of what they want out of their health care and how to get there.
- Clinicians report having better communication with their clinician colleagues.
- Clinicians report care options were clarified resulting in more consistent care.

“

**The John A. Hartford Foundation has been successful because of a combination of the passion that they have for improving care, the persistence they have shown over the years, and their astute assessment of opportunities that can help move us toward tangible improvements in care for older adults in this country.**

”

– Mary Tinetti, MD, Chief of Geriatrics, Yale School of Medicine





# TRANSFORMING CARE

## National Collaboratory to Address Elder Mistreatment



### OPPORTUNITY

An estimated 10 percent of older adults—5 million people—suffer from elder abuse, neglect, self-harm, exploitation, and other forms of mistreatment each year. Health systems, often an entry point for older adults, have a golden opportunity to intervene. And yet, there is no standard protocol for identifying and treating older adults who have endured mistreatment.

### APPROACH

In late 2016, we funded the National Collaboratory to Address Elder Mistreatment with the Education Development Center (EDC) to develop and pilot test a new standard for elder abuse interventions. The Collaboratory convened leading national experts in four geographically diverse states—California, Massachusetts, New York, and Texas—to create a prototype model for identifying and treating survivors of elder mistreatment that can work in emergency departments nationwide.



### IMPACT

Collaboratory participants are making steady progress toward closing a critical gap in US health care delivery—the failure to identify and prevent elder mistreatment. The University of Southern California Keck School of Medicine/National Center on Elder Abuse, The University of Texas Health Science Center at Houston/Texas Elder Abuse and Mistreatment Institute, State of Massachusetts Executive Office of Elder Affairs, and New York’s Weill Cornell Medicine, Division of Geriatrics and Palliative Medicine are working together to create a replicable community-based, multi-disciplinary model for curbing abuse, neglect, self-harm and the exploitation of older people.

The model will be adaptable to communities big and small—including rural areas where the needs are especially high—and is expected to improve the way emergency department personnel work with older adults who come through their doors. By training all personnel in the department—from nurses to social workers—we are building a more informed workforce to identify abuse and neglect at the earliest stages.

“ The Foundation’s focus on eradicating elder abuse, neglect, and exploitation has been extraordinary. They are thinking about how older patients can be impacted by the health care system and are scaling up community-based models to identify and treat elder abuse and mistreatment, especially in low-resource areas. By bringing us together through a grant to EDC, we are collectively on the brink of real transformational change. ”

– Laura Mosqueda, MD, Dean, Keck School of Medicine, University of Southern California





## SPREADING WHAT WORKS

We know our success relies on working with other organizations to accelerate improvements in care for older adults with complex health needs.



**Sharing the Better  
Care Playbook**



**Spreading Home-Based  
Primary Care**



**Supporting Family  
Caregivers**

“

The John A. Hartford Foundation has a wealth of knowledge, experience, and familiarity with older adults who have complex health and social needs. Their insights have deeply informed the collective thinking of our collaboration around the Playbook to maximize its effectiveness.

– David Blumenthal, MD, President, The Commonwealth Fund

”



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## OPPORTUNITY

When people with complex medical and social needs require health care, they encounter a system that's expensive, inefficient, and poorly coordinated across hospitals, physician practices, and other places where people go to receive care and supportive services. What's more, the majority of these patients are older than age 65—elevating the need to address this issue as America's population ages.

## APPROACH

Six health care foundations—The John A. Hartford Foundation, The Commonwealth Fund, the Milbank Memorial Fund, the Peterson Center on Healthcare, the Robert Wood Johnson Foundation, and The SCAN Foundation—are working together to improve care for people with complex needs. Developed by experts at the Institute for Healthcare Improvement, the *Better Care Playbook* curates information on what's worked to help this patient population, for use by health system leaders, insurers, policymakers, and others.

## IMPACT

The Playbook has curated and shared dozens of key resources highlighting successful approaches for frail older adults, people living with serious illness, and other populations. New resources are continually added and cover a range of topics including building age-friendly health systems, developing serious illness strategies for health plans and accountable care organizations, and implementing home-based care to promote aging in place.





# TRANSFORMING CARE

## Spreading Home-Based Primary Care



### OPPORTUNITY

There are approximately 6 million fragile, vulnerable older adults in the US with difficulty accessing office-based primary care because they are frail, functionally limited, and homebound. They are among the costliest patients due to a snowball effect from multiple chronic conditions, functional impairment, frailty, and social stressors.

### APPROACH

Teams at the Johns Hopkins University School of Medicine and University of California, San Francisco (UCSF), in collaboration with the Home Centered Care Institute (HCCI) and the American Academy of Home Care Medicine are training clinicians in measuring and tracking the quality of care in home-based primary care, and in spreading information about how emerging payment models might sustain and expand access to this care.



### IMPACT

In 2017, HCCI trained more than 120 clinicians and practice managers at prestigious institutions—including the Cleveland Clinic, University of Arizona Center on Aging, and UCSF, just to name a few—to perform home-based primary care. Beyond that, HCCI plans to train 5,000 clinicians and practice managers with the goal of ensuring that at least half of people who can benefit from home-based primary care have access to those services.

“ Home-based primary care provides better care and saves money. We want to bring it back to its rightful place in the fabric of our health system. The support of The John A. Hartford Foundation not only helps us accomplish the work, but also opens doors by letting potential partners know that they’re behind this. ”

– Thomas Cornwell, MD, Chief Executive Officer,  
Home Centered Care Institute





### OPPORTUNITY

More than 18 million family members are taking care of older adults in the US, and nearly 9 million are caring for people with high needs like dementia. Many of these caregivers are themselves at risk for poor health, emotional stress, and financial harm, according to a National Academies of Sciences, Engineering, and Medicine report co-sponsored by The John A. Hartford Foundation. *Families Caring for an Aging America* recommends that health systems and clinicians should strengthen their capacity to recognize and support family caregivers, among other recommendations for addressing caregiver needs.



### APPROACH

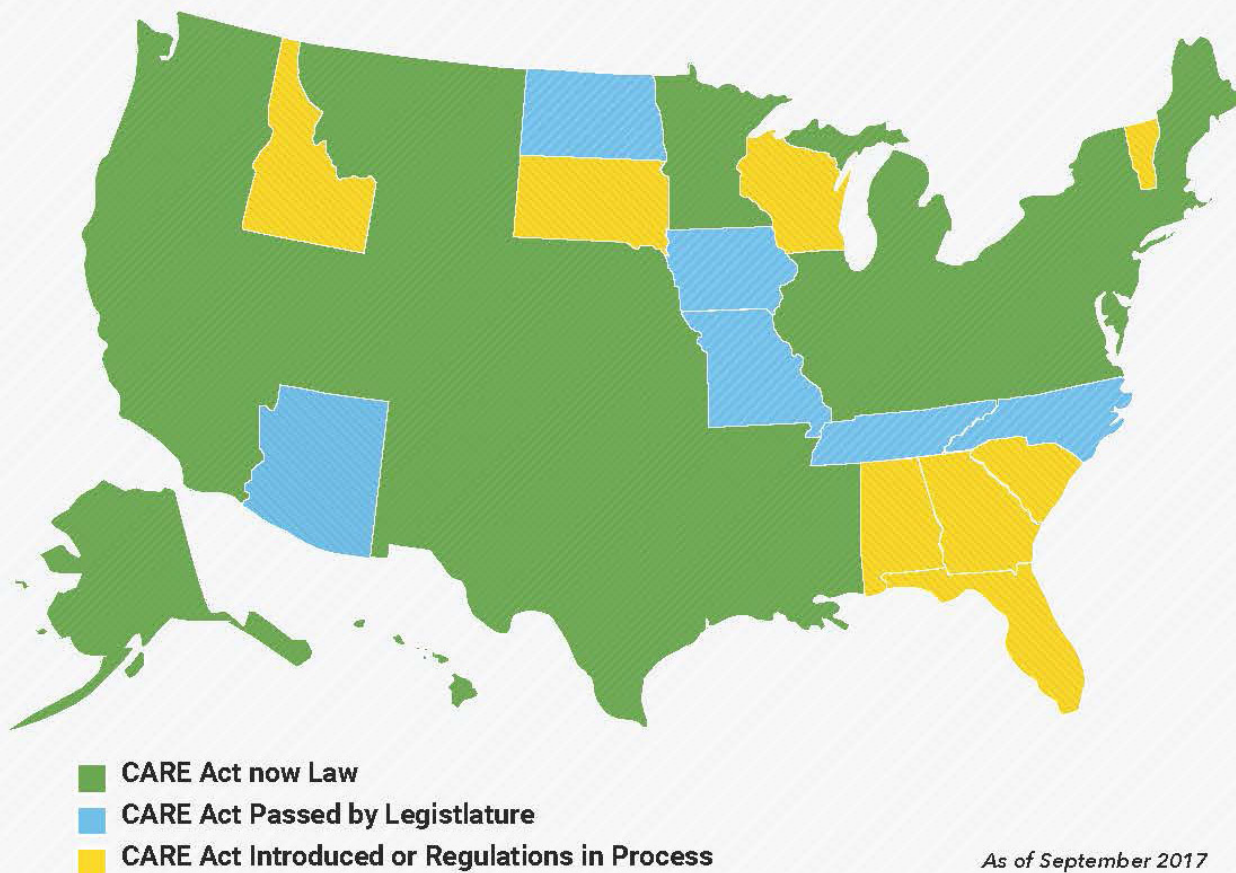
The Supporting Family Caregivers Providing Complex Care project—in partnership with AARP's Home Alone Alliance—is helping health systems better serve family caregivers. The project will identify and share best practices in implementing the CARE Act, a law passed in 39 states that requires hospitals to identify and educate patients' family caregivers before discharge. This project and others—such as the Dementia Care Program at the University of California, Los Angeles (UCLA)—also educate nurses and other clinicians to improve how they work with family caregivers.

### IMPACT

The Dementia Care Program at UCLA prepares nurse dementia care managers to provide better support to patient families and improves the coordination of care. Participants had Medicare costs that were \$2,100 lower annually than a comparison group and were a third less likely to be admitted to a long-term care facility. The John A. Hartford Foundation is supporting replication of this project to benefit the millions of families in need. In addition, the RAISE Family Caregivers Act, which will lead to the development of a national strategy to recognize and support family caregivers, recently became federal law. This act was a major recommendation from The John A. Hartford Foundation-sponsored report, *Families Caring for an Aging America*.



### States with the CARE Act Enacted or Under Consideration



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The John A. Hartford Foundation doesn't just fund things. They support and nurture the work, they seek out others who have ideas, and they help bring the best ideas to bear.

”

– Susan Reinhard, PhD, RN, Senior Vice President,  
AARP Public Policy Institute





## Informing decision-makers.

In 2017, we connected federal policymakers, health system leaders, clinicians, and service providers with critical news and resources about age-friendly health care.



***POLITICO***  
**Partnership**



***Kaiser Health News***  
**Reporting  
Project**



***Health Affairs Aging***  
**and Health Series**



***Congressional***  
**Stories of Families  
Caregiving**

“

The Foundation is creating an environment for innovation in how our health care system responds to the needs of older Americans. We're investing in innovative and creative minds and changing the mindset about how we provide care to older adults—for everyone from providers to family caregivers.

”

– David Di Martino, Partner, Blue Engine Message & Media,  
Trustee, The John A. Hartford Foundation



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## POLITICO Partnership

POLITICO

### THE AGENDA

Aging in America

A special report | September 2017

Presented by



In September 2017, we launched a partnership with global news and information company *POLITICO* to connect with federal policymakers and position the Foundation as a nonpartisan resource for improving policy and practice around the care of older adults. The resulting special report, *The Agenda: Aging in America*, took a comprehensive deep dive into the biggest barriers to improving care for our aging population. The report coincided with a *POLITICO Live* event introduced by The John A. Hartford Foundation President Terry Fulmer and featured experts discussing how to make the health care delivery system more responsive to older patients with complex needs.



## Kaiser Health News Reporting Project

Our partnership with *Kaiser Health News* builds awareness and understanding of geriatric care issues among the public, policymakers, and the health care sector. It has developed a top-tier reporting desk to inform key decision-makers and the public on the most pressing aging and geriatric care issues. This year our funding resulted in more than 120 articles, two large-scale investigative projects, and two events in Washington, DC. *Kaiser Health News* amplified the reach of its articles through partnerships with *The Washington Post*, *NPR*, and others, spreading awareness to thousands of additional readers.

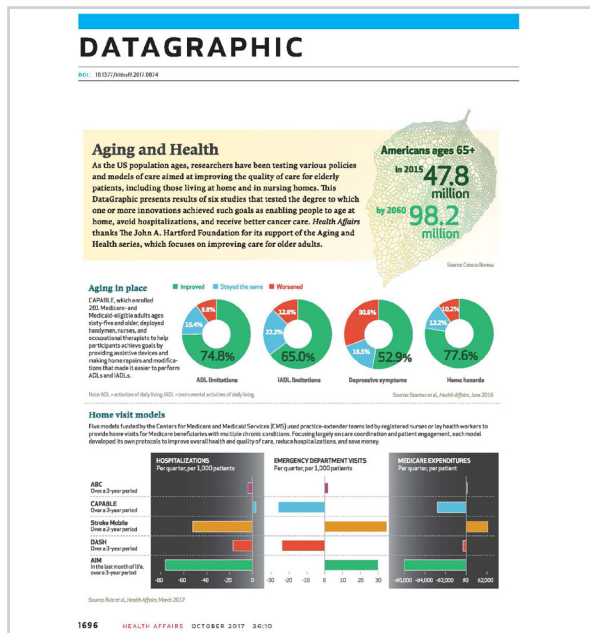


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## Health Affairs Aging and Health Series



As part of our work with *Health Affairs*, we supported the publication and wide dissemination of research, analysis, and commentary on new health care models that improve care for older adults. *Health Affairs*' reputation as the nation's leading health policy journal advanced best practices in the care of older adults and positioned aging and health policy issues as central to the national health care dialogue. In 2017, *Health Affairs* completed its two-year Aging and Health series with our support, publishing 17 articles, 15 blog posts, and holding two events in Washington, DC. The series was renewed and will continue for another two years.



## Congressional Stories of Family Caregiving

In November 2017, we supported a briefing on Capitol Hill where six members of the US House of Representatives—Rep. Debbie Dingell, D-MI; Rep. Michelle Lujan Grisham (pictured), D-NM; Rep. Jim Langevin, D-RI; Rep. Jacky Rosen, D-NV; Rep. Jan Schakowsky, D-IL; and Rep. Chris Smith, R-NJ called for better supports and services for family caregivers and shared their personal stories to illustrate the challenges that accompany the family caregiving experience. “Congressional Stories of Family Caregiving: Challenges, Rewards, and A Call to Action” was hosted by the Gerontological Society of America, which released a proceedings paper. Afterward, in an op-ed in *The Hill*, The John A. Hartford Foundation Program Director Rani Snyder lauded the efforts of 39 states and territories in enacting the CARE Act critical to families caring for older adults.







## Grants

We funded a robust roster of 15 new grants to improve the care of older adults. The Foundation made \$18.8 million in payments to existing grants in 2017.

### Grants Awarded in 2017

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#### First Quarter 2017

##### **Benjamin Rose Institute**

**\$498,635**

*Online Resource for Comparing Evidence-Based Dementia Caregiving Programs*

David M. Bass, PhD

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##### **Grantmakers in Aging**

**\$265,750**

*Core Support Renewal*

John A. Feather, PhD

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##### **Foundation-Administered Grant**

**\$185,000**

*Assessing the Accomplishments and Impact of The John A. Hartford Foundation's Grantmaking Over the Past 30 Years*

Stephen Isaacs and Paul Jellinek



# Grants Awarded in 2017

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## Second Quarter 2017

**President and Fellows of Harvard College** **\$898,426**

*Understanding Information Continuity and its Impact on Care for Older Adults*

Ashish K. Jha, MD, MPH

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**National PACE Association** **\$397,793**

*PACE 2.0: Adapting and Disseminating PACE to Serve High-Need, High-Cost Populations*

Peter Fitzgerald, MSc

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**Regents of the University of California (UCLA)** **\$298,887**

*Dissemination of a Comprehensive Dementia Care Program that Focuses on Patients and Caregivers Planning Grant*

David B. Reuben, MD

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**Fordham University** **\$75,000**

*Documentary Treatment of "The Best Years: A Film about the Last Phase of Life"*

William F. Baker, PhD

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## Third Quarter 2017

**National Committee for Quality Assurance** **\$1,494,992**

*Demonstration of Person-Driven Outcome Measures for an Age-Friendly Health System*

Erin Giovannetti, PhD

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**AARP Foundation** **\$1,372,242**

*Supporting Family Caregivers Providing Complex Care: Bridging the Gap between Expectations and Execution*

Susan C. Reinhard, PhD, RN

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**Icahn School of Medicine at Mount Sinai** **\$500,000**

*Implementation of Rehabilitation at Home*

Albert L. Siu, MD, MSPH

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**American Bar Association Fund for Justice and Education** **\$151,997**

*Advancing Legal and Medical Collaboration in Advance Care Planning*

Charles P. Sabatino

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**Trustees of Columbia University in the City of New York** **\$109,528**

*The John A. Hartford Foundation State Aging Index: State- and City-Based Differences in the Status of Aging-Related Supports and Services and Their Relation to the Well-Being of Older Persons*

John W. Rowe, MD



# Grants Awarded in 2017

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## Fourth Quarter 2017

<b>Project HOPE – The People-to-People Health Foundation, Inc.</b> <i>Health Affairs: Publishing and Disseminating Lessons on Innovative Health Care Models for an Aging Population Renewal</i> Alan Weil, JD	<b>\$496,000</b>
<b>Tides Center</b> <i>Eldercare Workforce Alliance Renewal</i> Amy M. York	<b>\$200,000</b>
<b>Institute for Healthcare Improvement</b> <i>Continued Development of the Better Care Playbook (Phase 3)</i> Kedar Mate, MD and Donald A. Goldmann, MD	<b>\$137,000</b>

## Funding Guidelines

The John A. Hartford Foundation makes grants to organizations in the United States which have tax-exempt status under Section 501(c)(3) of the Internal Revenue Code (and are not private foundations within the meaning of Section 107(c)(1) of the code), and to state colleges and universities. The Foundation does not make grants to individuals.

The Foundation makes grants by invitation only. Please visit [www.johnahartford.org](http://www.johnahartford.org) for more information.

To view all our annual reports, please visit: [www.johnahartford.org/about/annual-reports](http://www.johnahartford.org/about/annual-reports)





# Summary of Active Grants

		Balance Due January 1, 2017	Grants Authorized During Year	Amount Paid During Year	Balance Due December 31, 2017
<b>AGING &amp; HEALTH</b>					
<b>AGE-FRIENDLY HEALTH SYSTEMS</b>					
<b>American Academy of Home Care Medicine</b> <i>Building Awareness and Engaging Payers to Bring Home-Based Primary Care into the Mainstream</i> Mindy J. Fain, MD	Chicago, IL	\$100,000		\$13,729	\$86,271
<b>American College of Surgeons</b> <i>Geriatric Surgery Verification and Quality Improvement Program</i> Clifford Y. Ko, MD, MS, MSHS	Chicago, IL	1,815,662		277,684	1,537,978
<b>American Geriatrics Society, Inc.</b> <i>Geriatrics Workforce Enhancement Program (GWEP) Coordinating Center</i> Nancy E. Lundebjerg, MPA	New York, NY	2,003,631		842,014	1,161,617
<b>American Geriatrics Society, Inc.</b> <i>Geriatric Orthopedic Hip-Fracture Co-management Implementation</i> Nancy E. Lundebjerg, MPA	New York, NY	1,399,263		448,814	950,449
<b>American Geriatrics Society, Inc.</b> <i>Developing a National Collaborative to Improve Emergency Department Care of Older Adults</i> Kevin Biese, MD	New York, NY	826,467		328,397	498,070
<b>Center for Medicare Advocacy</b> <i>Reducing Harm to Medicare Beneficiaries: Improving Hospital Observation Status and Other Policies</i> Judith Stein, JD	Mansfield, CT	375,000		250,000	125,000
<b>Community Catalyst, Inc.</b> <i>Voices for Better Health: Geriatrics Provider Collaboration Renewal</i> Reneé Marcus Hodin, JD	Boston, MA	807,108		538,155	268,953
<b>Education Development Center, Inc.</b> <i>National Co-Laboratory to Address Elder Mistreatment</i> Rebecca Stoeckle	Waltham, MA	774,984		256,724	518,260
<b>Hebrew Rehabilitation Center for Aged Research and Training</b> <i>Hospital Elder Life Program (HELP): Taking to Scale</i> Sharon K. Inouye, MD, MPH	Boston, MA	60,000		60,000	



## Summary of Active Grants

		Balance Due January 1, 2017	Grants Authorized During Year	Amount Paid During Year	Balance Due December 31, 2017
<b>AGE-FRIENDLY HEALTH SYSTEMS</b>					
<b>Home Centered Care Institute</b> <i>National Home Care Medicine Education &amp; Expansion Initiative</i> Thomas Cornwell, MD	Schaumburg, IL	\$384,147		\$137,002	\$247,145
<b>Icahn School of Medicine at Mount Sinai</b> <i>Implementation of Rehabilitation at Home</i> Albert L. Siu, MD, MSPH	New York, NY	0	500,000	125,000	375,000
<b>Icahn School of Medicine at Mount Sinai</b> <i>Mobile Acute Care Team Services: Outcomes and Dissemination of Hospital at Home in Fee-for-Service Medicare and Beyond</i> Albert L. Siu, MD, MSPH	New York, NY	828,398		419,421	408,977
<b>Institute for Healthcare Improvement</b> <i>Age-Friendly Health Systems</i> Kedar Mate, MD	Cambridge, MA	2,482,461	250,000	1,022,529	1,709,932
<b>Institute for Healthcare Improvement</b> <i>Continued Development of the Better Care Playbook</i> Kedar Mate, MD & Donald A. Goldmann, MD	Cambridge, MA	180,838	137,000	227,419	90,419
<b>Johns Hopkins University</b> <i>Implementation of a National Learning Collaborative to Enhance the Quality of Home-Based Primary Care</i> Bruce A. Leff, MD	Baltimore, MD	887,404		200,185	687,219
<b>The NASW Foundation, Inc.</b> <i>Gerontological Social Work Supervisors Program</i> Joan Levy Zlotnik, PhD, MSSW	Washington, DC	337,701		337,701	
<b>National Association of Area Agencies on Aging, Inc.</b> <i>Building the Capacity of the Aging and Disability Networks to Ensure the Delivery of Quality Integrated Care</i> Sandy Markwood, MA	Washington, DC	1,967,005		973,165	993,840
<b>National Committee for Quality Assurance</b> <i>Demonstration of Person-Driven Outcome Measures for an Age-Friendly Health System</i> Erin Giovannetti, PhD	Washington, DC	342,955	1,494,992	709,920	1,128,027



# Summary of Active Grants

		Balance Due January 1, 2017	Grants Authorized During Year	Amount Paid During Year	Balance Due December 31, 2017
<b>AGE-FRIENDLY HEALTH SYSTEMS</b>					
<b>National Council of Young Men's Christian Associations of the United States of America</b> <i>Preventing Diabetes among Older Adults Program</i> Heather Hodge, MEd	Chicago, IL	\$259,023		\$259,023	
<b>National PACE Association</b> <i>PACE 2.0: Adapting and Disseminating PACE to Serve High-Need, High-Cost Populations</i> Peter Fitzgerald, MSc	Alexandria, VA		397,793	217,568	180,225
<b>President and Fellows of Harvard College</b> <i>Understanding Information Continuity and its Impact on Care for Older Adults</i> Ashish K. Jha, MD, MPH	Cambridge, MA	30,000	898,426	420,826	507,600
<b>Regents of the University of Minnesota</b> <i>Increasing Interprofessional Collaboration (IPC) in Clinical Nursing &amp; Health Professions Education</i> Barbara F. Brandt, PhD	Minneapolis, MN	200,000		50,142	149,858
<b>Research Foundation for Mental Hygiene, Inc.</b> <i>Health and Aging Policy Fellows Program</i> Harold Alan Pincus, MD	Menands, NY	1,414,877		335,958	1,078,919
<b>Santa Fe Group, Inc.</b> <i>Oral Health for America's Seniors: Expanding Medicare</i> Michael C. Alfano, DMD, PhD	New York, NY	50,190		50,190	
<b>Trustees of Indiana University</b> <i>OPTIMISTIC Resource Center Planning Grant</i> Kathleen Unroe, MD, MHA	Indianapolis, IN	50,484		50,484	
<b>Yale University</b> <i>Patient Priorities Care (formerly known as Carealign Implementation)</i> Mary E. Tinetti, MD	New Haven, CT	1,973,018		1,067,790	905,228
<b>Total Age-Friendly Health Systems</b>		<b>\$19,550,616</b>	<b>\$3,678,211</b>	<b>\$9,619,840</b>	<b>\$13,608,987</b>





## Summary of Active Grants

		Balance Due January 1, 2017	Grants Authorized During Year	Amount Paid During Year	Balance Due December 31, 2017
<b>SERIOUS ILLNESS &amp; END OF LIFE</b>					
<b>American Bar Association Fund for Justice and Education</b> <i>Advancing Legal and Medical Collaboration in Advance Care Planning</i> Charles P. Sabatino	Chicago, IL		\$151,997	\$151,997	
<b>Fordham University</b> <i>Documentary Treatment of "The Best Years: A Film about the Last Phase of Life"</i> William F. Baker, PhD	New York, NY		75,000	75,000	
<b>Icahn School of Medicine at Mount Sinai</b> <i>The Center to Advance Palliative Care (CAPC): Transformation Business Plan</i> Diane E. Meier, MD	New York, NY	1,000,000		395,984	604,016
<b>National Academy of Sciences</b> <i>Roundtable on Quality of Care for People with Advanced Illness</i> Sharyl Nass	Washington, DC	140,960		70,473	70,487
<b>New York University</b> <i>Nurses Improving Care for Healthsystem Elders in Long-Term Care (NICHE-LTC)</i> Eileen M. Sullivan-Marx, PhD, RN	New York, NY	976,965		13,380	963,585
<b>University of Washington</b> <i>Building a Collective Strategy to Accelerate Progress in End-of-Life Care</i> Anthony Back, MD	Seattle, WA	2,199,195		1,175,465	1,023,730
<b>Total Serious Illness &amp; End of Life</b>		<b>\$4,317,120</b>	<b>\$226,997</b>	<b>\$1,882,299</b>	<b>\$2,661,818</b>



# Summary of Active Grants

		Balance Due January 1, 2017	Grants Authorized During Year	Amount Paid During Year	Balance Due December 31, 2017
<b>FAMILY CAREGIVING</b>					
<b>AARP Foundation</b> <i>Supporting Family Caregivers Providing Complex Care: Bridging the Gap between Expectations and Execution</i> Susan C. Reinhard, PhD, RN	Washington, DC		\$1,372,242	\$499,537	\$872,705
<b>Benjamin Rose Institute</b> <i>Online Resource for Comparing Evidence- Based Dementia Caregiving Programs</i> David M. Bass, PhD	Cleveland, OH		498,635	195,987	302,648
<b>Regents of the University of California</b> <i>Dissemination of a Comprehensive Dementia Care Program that Focuses on Patients and Caregivers, Planning Grant</i> David B. Reuben, MD	Los Angeles, CA		298,887	298,887	
<b>Total Family Caregiving</b>		<b>\$0</b>	<b>\$2,169,764</b>	<b>\$994,411</b>	<b>\$1,175,353</b>
<b><u>COMMUNICATIONS &amp; SPECIAL INITIATIVES</u></b>					
<b>Trustees of Columbia University in the City of New York</b> <i>The John A. Hartford Foundation State Aging Index: State- and City-Based Differences in the Status of Aging-Related Supports and Services and Their Relation to the Well-Being of Older Persons</i> John W. Rowe, MD	New York, NY		\$109,528	\$109,528	
<b>Grantmakers in Aging</b> <i>Reframing Aging: Phase II</i> John A. Feather, PhD	Arlington, VA	299,350		193,775	105,575
<b>Grantmakers in Aging</b> <i>Core Support Renewal</i> John A. Feather, PhD	Arlington, VA		265,750	104,984	160,766
<b>Henry J. Kaiser Family Foundation</b> <i>Kaiser Health News: The Late Life and Geriatric Care Reporting Project</i> David Rousseau, MPH	Menlo Park, CA	2,068,675		642,522	1,426,153
<b>Project HOPE - The People-to-People Health Foundation, Inc.</b> <i>Health Affairs: Publishing and Disseminating Lessons on Innovative Health Care Models for an Aging Population Renewal</i> Alan Weil, JD, MPP	Bethesda, MD	226,527	496,000	463,557	258,970



# Summary of Active Grants

		Balance Due January 1, 2017	Grants Authorized During Year	Amount Paid During Year	Balance Due December 31, 2017
<b><u>COMMUNICATIONS &amp; SPECIAL INITIATIVES</u></b>					
<b>Rockefeller Archive Center</b> <i>Archiving of Hartford Foundation's Historical Grant Documents</i> Margaret A. Hogan	Sleepy Hollow, NY	\$100,000		\$100,000	
<b>Tides Center</b> <i>Eldercare Workforce Alliance Renewal</i> Amy M. York	San Francisco, CA	152,600	200,000	252,580	100,020
<b>Total Communications &amp; Special Initiatives</b>		<b>\$2,847,152</b>	<b>\$1,071,278</b>	<b>\$1,866,946</b>	<b>\$2,051,484</b>
<b><u>SOCIAL INNOVATION FUND</u></b>					
<b>Bighorn Valley Health Center, Inc.</b> <i>Social Innovation Fund: Healthy Futures/IMPACT Expansion Subgrantee</i> Earl Sutherland, PhD	Hardin, MT	\$58,058		\$58,058	
<b>Butte Silver Bow Primary Health Care Clinic, Inc. d/b/a Butte Community Health Center</b> <i>Social Innovation Fund: Healthy Futures/IMPACT Expansion Subgrantee</i> Molly Molloy	Butte, MT	37,277		37,277	
<b>Community Health Center of Central Wyoming, Inc.</b> <i>Social Innovation Fund: Healthy Futures/IMPACT Expansion Subgrantee</i> Ryan Bair, MSW, LCSW	Casper, WY	122,517		122,517	
<b>Kodiak Area Native Association</b> <i>Social Innovation Fund: Healthy Futures/IMPACT Expansion Subgrantee</i> Tammy L. Hansen	Kodiak, AK	219,902		219,902	
<b>Lewis County Community Health Services</b> <i>Social Innovation Fund: Healthy Futures/IMPACT Expansion Subgrantee</i> Tre Normoyle, PhD	Chehalis, WA	68,719		68,719	
<b>Partnership Health Center, Inc.</b> <i>Social Innovation Fund: Healthy Futures/IMPACT Expansion Subgrantee</i> Andrea Wirshing-Batalla	Missoula, MT	151,585		151,585	
<b>Peninsula Community Health Services</b> <i>Social Innovation Fund: Healthy Futures/IMPACT Expansion Subgrantee</i> Regina Bonnevie-Rogers, MD	Bremerton, WA	215,764		215,764	





## Summary of Active Grants

		Balance Due January 1, 2017	Grants Authorized During Year	Amount Paid During Year	Balance Due December 31, 2017
<b><u>SOCIAL INNOVATION FUND</u></b>					
<b>University of Washington</b>	Seattle, WA	\$520,588	\$185,226	\$643,678	\$62,136
<i>Social Innovation Fund: Healthy Futures IMPACT Expansion Renewal</i>					
Jürgen Unützer, MD, MPH, MA					
<b>Total Social Innovation Fund</b>		<b>\$1,394,410</b>	<b>\$185,226</b>	<b>\$1,517,499</b>	<b>\$62,136</b>
<b><u>LEGACY GRANTS</u></b>					
<b>American Federation for Aging Research, Inc.</b>	New York, NY	\$1,699,245		\$463,099	\$1,236,146
<i>Paul B. Beeson Career Development Awards in Aging Research Partnership Renewal</i>					
Odette van der Willik					
<b>American Federation for Aging Research, Inc.</b>	New York, NY	54,209		54,209	
<i>Centers of Excellence in Geriatric Medicine and Training National Program Office Renewal</i>					
Odette van der Willik					
<b>American Geriatrics Society, Inc.</b>	New York, NY	428,079		61,069	367,010
<i>Geriatrics for Specialists Initiative: Phase V</i>					
John R. Burton, MD					
<b>Gerontological Society of America</b>	Washington, DC	145,409		145,409	
<i>Hartford Change AGENTS Initiative</i>					
Angelia Bowman					
<b>New York University<sup>4</sup></b>	New York, NY	232,826		232,826	
<i>National Hartford Centers of Gerontological Nursing Excellence Coordinating Center</i>					
Tara A. Cortes, PhD, RN					
<b>Regents of the University of Colorado</b>	Denver, CO	2,114,767		848,667	1,266,100
<i>Practice Change Leaders for Aging and Health Renewal</i>					
Eric A. Coleman, MD, MPH					



## Summary of Active Grants

		Balance Due January 1, 2017	Grants Authorize During Year	Amount Paid During Year	Balance Due December 31, 2017
<b><u>LEGACY GRANTS</u></b>					
<b>Wake Forest University Health Sciences</b> <i>Integrating Geriatrics into the Specialties of Internal Medicine Renewal: Capitalizing on Forward Momentum</i> Kevin P. High, MD, MSc	Winston-Salem, NC	\$275,444		\$74,907	\$200,537
<b>Total Legacy Grants</b>		<b>\$4,949,979</b>	<b>\$0</b>	<b>\$1,880,186</b>	<b>\$3,069,793</b>
<b>TOTAL AGING &amp; HEALTH</b>		<b>\$33,059,277</b>	<b>\$7,331,476</b>	<b>\$17,761,181</b>	<b>\$22,629,571</b>
<b><u>PRESIDENT'S DISCRETIONARY GRANTS</u></b>					
<b>PARTNERSHIP FUND</b>					
<b>Camden Coalition of Healthcare Providers</b> <i>Putting Care at the Center 2017 Conference: Sponsor A Scholarship Program</i> Joanne Palek	Camden, NJ		\$3,000	\$3,000	
<b>Grantmakers in Aging</b> <i>2017 Annual Conference Presenting Sponsorship</i> John A. Feather, PhD	Arlington, VA		25,000	25,000	
<b>Hebrew Home for the Aged at Riverdale Foundation, Inc.</b> <i>2017 Annual Dinner</i> Daniel A. Reingold, MSW, JD	Riverdale, NY		12,000	12,000	
<b>Isabella Foundation, Inc.</b> <i>2017 Gala</i> Mark J. Kator, MA, MBA	New York, NY		5,000	5,000	
<b>Medicare Rights Center, Inc.</b> <i>2017 Awards Dinner Silver Page Journal Ad</i> Denise Grant	New York, NY		1,000	1,000	
<b>National Academy of Sciences</b> <i>2017 Forum on Aging, Disability and Independence Workshop Sponsorship</i> Sarah Domnitz, PhD	Washington, DC		25,000	25,000	
<b>New York Academy of Medicine</b> <i>2017 Gala</i> Jo Ivey Boufford, MD	New York, NY		12,180	12,180	



## Summary of Active Grants

	Balance Due January 1, 2017	Grants Authorized During Year	Amount Paid During Year	Balance Due December 31, 2017
<b><u>PRESIDENT'S DISCRETIONARY GRANTS</u></b>				
<b>Primary Care Development Corporation</b> New York, NY <i>2017 Gala Sponsorship</i> Ronda Kotelchuck		\$1,000	\$1,000	
<b>Rockefeller Philanthropy Advisors, Inc.</b> New York, NY <i>Supporter Sponsorship for 2017 Jonas</i> <i>Scholar Leadership Conference</i> Eliza Bromfield		1,000	1,000	
<b>United Hospital Fund of New York</b> New York, NY <i>2017 Gala Sponsor</i> Michelle Levy-Branower		7,100	7,100	
<b>Total Partnership Fund</b>	<b>\$0</b>	<b>\$92,280</b>	<b>\$92,280</b>	<b>\$0</b>
<b>MEMBERSHIPS/OTHER</b>				
<b>The Foundation Center</b> New York, NY <i>Annual Support</i> Bradford K. Smith, MA		\$11,000	\$11,000	
<b>Grantmakers in Aging</b> Arlington, VA <i>Annual Support</i> John A. Feather, PhD		7,500	7,500	
<b>Grantmakers in Health</b> Washington, DC <i>Annual Support</i> Faith Mitchell, PhD		7,500	7,500	
<b>Hispanics in Philanthropy</b> Oakland, CA <i>Annual Membership</i> Gracia Goya		4,925	4,925	
<b>Philanthropy New York, Inc.</b> New York, NY <i>Annual Support</i> Ronna D. Brown, JD		17,350	17,350	
<b>Services &amp; Advocacy for Gay Lesbian Bisexual &amp; Transgender Elders, Inc.</b> New York, NY <i>Annual Support</i> Michael Adams, JD, MA		5,000	5,000	
<b>Total Membership/Other</b>	<b>\$0</b>	<b>\$53,275</b>	<b>\$53,275</b>	<b>\$0</b>
<b>TOTAL PRESIDENT'S DISCRETIONARY GRANTS</b>	<b>\$0</b>	<b>\$145,555</b>	<b>\$145,555</b>	<b>\$0</b>





## Summary of Active Grants

	Balance Due January 1, 2017	Grants Authorized During Year	Amount Paid During Year	Balance Due December 31, 2017
<b>TOTAL (OTHER)</b>				
<b>Matching Grants<sup>1</sup></b>		\$781,898	\$781,898	
<b>Discretionary Grants<sup>2</sup></b>		68,000	68,000	
<b>Grants Refunded or Cancelled</b>	\$637,756	(645,817)	(8,061)	
<b>Contingent Grants Adjustments<sup>3</sup></b>	(1,449,705)	\$1,449,705		
<b>Discounts to Present Value</b>	(947,869)	417,231		(530,638)
<b>GRAND TOTAL</b>	<b>\$31,299,459</b>	<b>\$9,548,048</b>	<b>\$18,748,573</b>	<b>\$22,098,933</b>

<sup>1</sup>Grants made under the Foundation's program for matching charitable contributions by Trustees and staff.

<sup>2</sup>Grants made under the Foundation's program for charitable contributions designated by staff.

<sup>3</sup>Contingent grants

<sup>4</sup>Grants previously at other organizations prior to 2017

		Expenses Authorized Not Incurred Jan. 1, 2017	Projects Authorized During Year	Expenses Incurred During Year	Expenses Authorized Not Incurred Dec. 31, 2017
<b>Foundation-Administered Grant</b> <i>Assessing the Accomplishments and Impact of The John A. Hartford Foundation's Grantmaking Over the Past 30 Years</i> Stephen Isaacs	New York, NY		\$185,000	\$135,000	\$50,000
<b>Foundation-Administered Grant</b> <i>Communications &amp; Dissemination Initiative Renewal</i> John Beilenson	New York, NY	795,432	1,444	796,876	
<b>Foundation-Administered Projects</b> <i>To Pursue Selected Activities in the Strategic Plan</i>			213,516	213,516	
<b>Total</b>		<b>\$795,432</b>	<b>\$399,960</b>	<b>\$1,145,392</b>	<b>\$50,000</b>





## Financials

We strive to preserve and grow our endowment to maintain a strong grants program. Our endowment ended 2017 at approximately \$587 million.

## FINANCIAL SUMMARY

The Foundation's investment portfolio had increased to approximately \$587 million at the end of 2017. Spending for grants, administrative expenses and taxes totaled \$23 million. Total net-of-fee return on the investments, income plus realized and unrealized capital gains, was approximately 12.5 percent, which slightly lagged a classic 60 percent equity/40 percent bond gross-of-fee portfolio. We are pleased that the Foundation was able to preserve and enhance the real value of its endowment over the past 30 years; the portfolio delivered an 8.7 percent return per annum, exceeding the average inflation (2.6 percent) plus spending rate (4.9 percent) for a total of 7.5 percent per year.

The Foundation's investment objective continues to be securing maximum long-term total return on its investment portfolio in order to maintain a strong grants program, while assuring consistent growth of its assets at a level greater than the rate of inflation. With the assistance of Goldman Sachs, the Foundation's investment advisor since August 2012, the Foundation has proactively redesigned and maintained a moderate risk portfolio diversified across a wide array of asset classes and strategies.

Despite elevated geopolitical uncertainty, 2017 was a remarkable year with global equities hitting record highs and volatility hovering near historic lows throughout the year.



# FINANCIAL SUMMARY CONTINUED

Global equities notched another strong year with double-digit returns; emerging market equities led the global stock market rally, outperforming both non-U.S. developed and domestic equities during the year. The portfolio's long-only public equities, which accounted for 51 percent of the total portfolio, had delivered an impressive gain of 22 percent during the year. Conversely, investment-grade fixed income, tactical tilts and private real estate, all of which had a single-digit return, weighed on the 2017 performance. Despite the possibility that the world economy and financial markets may progress through the later stages of the bull-market cycle, we are confident that our disciplined, prudent investment approach will provide us with the ability to navigate a challenging market.

Throughout 2017, the Foundation continued transitioning its portfolio to its interim targets by gradually increasing its exposure to private equity and trimming its allocation in hedge funds. Compared to its strategic asset allocation, the portfolio has remained underweight in private investments, but overweight in public equities, mainly driven by the strong equity market performance during the year. At year-end 2017, the Foundation's asset mix was 51 percent long-only equities, 17 percent fixed-income, 2 percent cash, 13 percent hedge funds, 8 percent tactical tilts and a total of 9 percent in private equity and private real estate funds. In comparison, at the end of 2016, the Foundation's portfolio was comprised of 44 percent long-only equities, 15 percent fixed-income, 6 percent

cash, 13 percent hedge funds, 9 percent tactical tilts and a total of 13 percent in private equity and real estate funds.

The Finance Committee and the Board of Trustees meet regularly with Goldman Sachs to review asset allocation, investment strategy and the performance of the underlying investments. Northern Trust Corporation is the custodian for all the Foundation's securities. A complete listing of investments is available for review at the Foundation's offices. Audited financial statements were not completed in time for this publishing, but will be available on the Foundation's Web site in June.

The Foundation's endowment ended 2017 at approximately \$587 million, representing a net increase of \$44 million after disbursement for grants and expenses during the year. The portfolio continued to benefit from the stock market rally and delivered a solid gain of 12.5 percent for the year, far outpacing the rate of inflation and spending of 6.7 percent.







## Leadership and Staff

We are committed to improving the care  
of older adults.

### Our Trustees

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Nirav R. Shah

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David Di Martino

John R. Mach, Jr.

Barbara Paul Robinson

“

The John A. Hartford Foundation has demonstrated unparalleled leadership in raising national awareness about the needs of family caregivers – especially the financial, physical, and emotional burdens they take on to support those they love.

”

– Rep. Michelle Lujan Grisham (D-NM), Co-Chair, Assisting Caregivers Today Caucus



# LEADERSHIP AND STAFF

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*Chief Financial Officer and Treasurer*

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*Senior Program Officer*

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Jennifer Phillips

*Executive Assistant*

Ann Raffel

*Information Technology Officer*

George Suttles

*Program Officer*

Crystal Tsoi

*Program Associate*







## Foundation Milestones

In 2017, the Foundation and its grantees launched major initiatives and produced valuable resources to advance better care of older adults.

### JANUARY

- The John A. Hartford Foundation launches four new grant initiatives:
  - Age-Friendly Health Systems
  - National Collaboratory to Address Elder Mistreatment
  - The *Better Care Playbook*, Phase 2
  - AGS CoCare: Ortho™, a geriatrics/orthopedics co-management program for hip fracture patients
- Foundation staff co-author articles for the *Academic Emergency Medicine's* Special Issue on Shared Decision Making in the ED.
- Rani E. Snyder, Program Director, joins the board of Grantmakers In Aging.
- The Aging and Disability Business Institute at n4a launches its new website to help community-based organizations partner with health systems.
- George Suttles joins the Foundation as Program Officer.

### FEBRUARY

- The *Health Affairs* blog features the *Better Care Playbook*.

### MARCH

- The Foundation awards three new grants, totaling \$950,000, to support dementia caregiving and to strengthen aging philanthropy.
- Terry Fulmer, President, receives The Rosalie S. Wolf Award for her work on the prevention of elder abuse from the American Society on Aging.
- The Conversation Project releases a new toolkit on being and selecting a health care proxy.
- The *Journal of the American Geriatrics Society* publishes the 30-year history of the Foundation's Centers of Excellence in Geriatric Medicine and Geriatric Psychiatry.
- The National Academy of Medicine releases its final synthesis paper from the Vital Directions for Health and Health Care Initiative.
- The American College of Surgeons publishes initial hospital-level surgical care standards for older adults.

### APRIL

- The Reframing Aging project releases its Gaining Momentum Toolkit.





# FOUNDATION MILESTONES CONTINUED

## MAY

- *The New York Times* cites the Foundation's "Conversation Stopper" physician survey on barriers to advance care planning.
- Jane Carmody joins the Foundation as Program Officer.

## JUNE

- The Foundation awards four new grants, totaling \$1.67 million, to improve the care of older adults with complex needs across care settings.
- Nirav Shah, MD, previously Senior Vice President and Chief Operating Officer for Clinical Operations at Kaiser Permanente Southern California and former New York State Health Commissioner, joins the board.
- Barbara Paul Robinson, Co-Vice Chair of the Board of Trustees, retires from the board after 11 years following a decade of distinguished service as General Counsel.
- The Foundation releases a statement in support of Congressional hearings on PACE as a promising model.

## JULY

- Dr. Jack Rowe launches The John A. Hartford Foundation Aging Society Index at the International Association of Gerontology and Geriatrics World Congress.
- The NASEM Roundtable on Quality Care for People with Advanced Illness releases *Integrating the Patient and Caregiver Voice into Serious Illness Care*.

## AUGUST

- The Home-Centered Care Institute launches its nationwide network for home-based primary care education.

## SEPTEMBER

- The Foundation awards five new grants, totaling \$3.6 million, to accelerate the move to age-friendly health systems, support family caregivers, and improve serious illness and end-of-life care.
- *POLITICO* holds Aging in America event in DC and launches series.

- Respecting Choices, an internationally recognized evidence-based model of advance care planning, launches its new website.
- The Foundation and IHI publish an article in the *Journal of the American Geriatrics Society* on "The Age-Friendly Health System Imperative."

## OCTOBER

- The National PACE Association launches its PACE 2.0 Project web page with resource library.
- The Center for Medicare Advocacy releases its Outpatient Observation Status Toolkit.
- The American Academy of Nursing inducts Amy Berman, Senior Program Officer, into the 2017 class of Academy Fellows.

## NOVEMBER

- Members of Congress share their personal caregiving experiences at a Congressional Stories of Family Caregiving Capitol Hill briefing with the Gerontological Society of America.
- AARP Public Policy Institute holds 2017 CARE Act Summit.
- The Physician-Focused Payment Model Technical Advisory Committee recommends full implementation of an alternative payment model for the Hospital at Home model, to the HHS Secretary.
- *Kaiser Health News* holds event on advance care planning in Washington, DC and via Facebook Live.

## DECEMBER

- The Foundation awards three new grants, totaling \$833,000, to disseminate evidence and tools that can improve cost and quality outcomes for older adults and to promote policies that strengthen the eldercare workforce.





## The John A. Hartford Foundation

Dedicated to Improving the Care of Older Adults

“

It is necessary to carve from the whole vast spectrum of human needs one small band that the heart and mind together tell you is the area in which you can make your best contribution.

”