

# The Miriam *Memo*

2018



**The Power of  
Palliative Care** *page 8*



**The Miriam Hospital**  
*Lifespan. Delivering health with care.®*



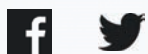


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**COVER:** *Grateful patient Dawn Shippey and her medical oncologist and palliative care specialist Angela Taber, MD at The Miriam Hospital Gala & Auction. Read more about Dawn's story on page 8.*



**Arthur J. Sampson**  
President, The Miriam Hospital

**W**hat makes a special place “special”? Is it the people? The feeling it engenders? Its centrality to the community it serves? When it comes to The Miriam, I’ve been told the answer is all three. But there is one more factor in our “specialness” equation and that’s where you come in.

Our family of donors is second to none.

This edition of *The Miriam Memo* is dedicated to you and everyone who cares about The Miriam. Please make sure to visit our 2017 Honor Roll at [www.miriamhospital.org/2017-Honor-Roll](http://www.miriamhospital.org/2017-Honor-Roll). You have our gratitude.

In these pages, you will meet individuals at The Miriam who embody our credo of striving, every day, for perfection in the delivery of compassionate, patient-centered care, and members of our donor community whose philanthropy is rooted in the conviction that one person really can move mountains.

I am deeply honored to be the president of a hospital that inspires such dedication from so many, both inside and outside our walls. Thank you for all that you do—your friendship truly makes The Miriam a special place and helps us to achieve our mission of *Delivering health with care*.

## Connect with Us

The collage features three devices: a laptop showing the Lifespan website with a search bar and navigation menu; a tablet displaying the 'Miriam Moments' eNewsletter for Winter/Spring 2017, advertising the 'Northern Lights' gala and auction; and a smartphone showing the Facebook profile for 'The Miriam Hospital' with a 'Sign Up' button and social media icons.

[miriamhospital.org/Giving-to-TheMiriam](http://miriamhospital.org/Giving-to-TheMiriam)



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# Ride ‘Round Rhody: A Decade of Supporting Local Cancer Care and Research

**L**IFECycle co-founders Dani and Jacob Brier have vivid memories of their impetus for establishing Ride ‘Round Rhody. It was 2008, and the avid cyclists were preparing for an out-of-state bike-a-thon raising money for cancer research—a cause near and dear to them both, as they’ve each lost loved ones to the dreadful disease. The following year, Dani and Jacob agreed that they’d ride in a local event to support cancer care in their own community. There was just one problem; there wasn’t one.

“When we couldn’t find a local event, we immediately decided it was up to us to create one,” recalls Jacob, who is a Miriam Hospital Governor. “So, we founded LIFECycle and its signature event, Ride ‘Round Rhody.”

This year, Ride ‘Round Rhody (RRR) will celebrate its 10th anniversary on Sunday, July 29, when riders depart from The Farmer’s Daughter, a garden center and events venue located in Kingston, RI. Since its inception, the event has raised more than \$550,000, supporting cancer treatment at The Leonard and Adele R. Decof Family Comprehensive Cancer Center at The Miriam Hospital, part of the Lifespan Cancer Institute, as well as other local cancer programs.



Howard Safran, MD

A couple of the projects RRR funds have supported at The Miriam are complementary therapies such as massage, Reiki, and acupuncture, and genomic testing to determine if specific targeted therapies are appropriate for patients.

A ride, not a race, RRR is an all-day, family event that offers cyclists of all levels their choice of 15, 40, or 80 mile scenic routes through southern Rhode Island. Participants have a specific fundraising goal to meet and receive support and encouragement from a team of dedicated, passionate volunteers. After the ride, it’s back to The Farmer’s Daughter for a BBQ, great music, games, activities, and a few fun surprises to celebrate 10 years of making a difference in cancer care. “At the core of why LIFECycle exists is the importance of helping people dealing with a cancer diagnosis,” says Jacob. “Different patients require different forms of treatment, and Ride ‘Round Rhody is our opportunity to support the important work being done at The Miriam and at cancer centers throughout the state.”

To learn more about this year’s Ride ‘Round Rhody event or to register, please visit [www.lifecycleinc.org/rrr](http://www.lifecycleinc.org/rrr).

# A Family's Loyalty Spans the Decades

**W**hen Nathan S. Rakatansky, MD joined The Miriam Hospital's medical staff in 1933 as its first chief of anesthesiology, the hospital was located on Parade Street and ether was the anesthesia of choice. Fast forward to 1967, when Nathan's son Herbert joined the medical staff as one of only four gastroenterologists in the state.

Herbert fondly recalls what it was like at The Miriam when he was a young physician: "The emergency department nurse, Mrs. Peckham, would call at all hours of the night. She'd say, 'Dr. Rak, do you need a new patient?' The older docs weren't interested in coming to the ED, but for me it was great."

His daughter Ellen has her own vivid memories of those same occasions. "I remember dad saying, 'I'm off to The Miriam—I've got a bleeder!' My dad is so incredibly committed to The Miriam. He's a doctor through and through," she says. Ellen also remembers accompanying her grandmother, Rachel Rakatansky, a long-time hospital volunteer, to the gift shop and working in the coffee shop. Rachel founded the gift shop in 1953 and co-managed it for many years.

**"My parents were both very loyal to The Miriam because of its critical role in the health and well-being of the community."**

—Herbert Rakatansky

During Herb's 41 years of active practice, he served as president of the medical staff, as his father once had, as well as the Rhode Island Medical Society. He was also very active with the American Medical Association and, together with Dr. Philip A. Torgan, set up the first



Dr. Nathan and Rachel Rakatansky

endoscopy room at The Miriam. Under Herb's leadership, the private practice he began grew to eight physicians, known today as Gastroenterology Associates.



Dr. Herbert Rakatansky and his daughter Ellen

After Nathan's and Rachel's passing in 1995 and 2000, respectively, the family established an annual visiting lecture series. When Herb retired in 2008, his practice partners added his name to the series. The Drs. Nathan and Herbert and Mrs. Rachel Rakatansky Distinguished Visiting Lecture, hosted at The Miriam, promotes excellence in medical care through continuing education.

"My parents were both very loyal to The Miriam because of its critical role in the health and well-being of the community. They devoted their lives to that hospital," says Herb. "This lecture is a great way to honor them, as well as recognize The Miriam as the quality institution it has always been."

# A Special Celebration Raises \$783,195



Arthur J. Sampson; Susan H. Kaplan; Robin and Marcus Ansell



Suzanne Gilstein and Howard P. Safran, MD



Nat Harris; Jennifer Quigley-Harris; Kate Locouture

**M**ore than 550 guests filled the WaterFire Arts Center in Providence on Saturday, April 21, when The Miriam Hospital hosted its 2018 gala and auction, *Experience the Northern Lights*. Representing the hospital's largest and most critical annual fundraiser, the event inspired by the grandeur of the aurora borealis raised \$783,195.

The funds will benefit *The Miriam Fund for a New Generation* in support of the hospital's greatest and most pressing needs, along with helping to advance its palliative care program, part of The Miriam's renowned oncology services. Of the total raised, the event's auction and fund-a-need generated \$403,450 to support the addition of another nurse practitioner to the palliative care team at The Leonard and Adele R. Decof Family Comprehensive Cancer Center at The Miriam Hospital, part of the Lifespan Cancer Institute.

Co-chaired by Robin and Marcus Ansell, the evening of illuminated sensations began with a special cocktail and hors d'oeuvres reception, followed by remarks from hospital leadership. Guests were then introduced to Dawn Shippey, a Miriam patient who shared her journey with lung cancer and the difference palliative care made—emotionally, mentally, and physically—on her road to survivorship.

Prior to dinner, celebrity auctioneer Paul Zekos of The Zekos Group presented the event's live auction and fund-a-need. As he prepared for the fund-a-need, longtime Miriam philanthropist Suzanne Gilstein announced a challenge to match all donations at the \$2,500, \$1,000 and \$500 levels, up to a total of \$100,000.

Presenting Sponsors



Leadership Donor



# EXPERIENCE THE NORTHERN LIGHTS THE MIRIAM HOSPITAL GALA & AUCTION

Inspired by Suzanne's generosity, guests met the challenge, raising their bid numbers high and often.

"I could not be more thankful to our co-chairs, event committee, donors, and sponsors for pulling out all of the stops and making tonight an overwhelming success," said Arthur J. Sampson, president of The Miriam Hospital. "The generosity exhibited tonight by Suzanne Gilstein and all of our supporters will make a dramatic and lasting difference in the delivery of our cancer programs to our patients and their families."

After the evening program concluded, guests danced to the sounds of The Sweetbeats Band.

The Miriam Hospital extends its thanks and appreciation to *Experience the Northern Lights* presenting sponsors Amica Mutual Insurance Co. and University Orthopedics; leadership donor Amica Companies Foundation; platinum sponsors Amaral Revite General Contractors and Med Tech Ambulance Service; and the many others whose generosity made the event possible.



Annette and Jason Grant



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# Palliative Care Treats the Whole Patient



Dawn with pet therapy dog Kya

**D**awn Shippey's journey began five years ago with excruciating knee pain.

After winding up in The Miriam's emergency department, scans revealed a tumor—but not on her knee. It was in her lung.

"They removed 80 percent of my right lung," says the Pawtucket resident, now 56. "Stage 3 lung cancer—I was terrified." But that's when Dawn met her "earth angel"—medical oncologist and palliative care specialist Angela Taber, MD.

"I wouldn't be here without her," says Dawn. "She held my hand that first day and told me, 'You will not be alone through this journey.' And I never was."

Under Dr. Taber's care, Dawn went into remission not once but twice, after the tumor spread to her left lung. Today, she's cancer-free, thanks to aggressive chemotherapy and the palliative care she received from the beginning.

To reach and serve more palliative care patients, The Miriam collaborates with an experienced team from Hope Hospice and Palliative Care Rhode Island. And now thanks to an outpouring of support at this spring's signature event (story page 6), the hospital is hiring a

second full-time palliative care nurse practitioner to expand the program to more patients.

Palliative care is often confused with hospice care. Hospice is end-of-life care, meaning no more disease-directed treatment, but a focus on quality of life. Palliative care is a specialized service for patients with a serious illness who are still undergoing treatment and need an extra level of emotional, physical, and mental support.

"Most people don't know enough about palliative care to realize it has everything to do with living," says Dawn. "They show you how to survive with this disease because it's not an easy process."

**"Palliative care is meeting that person where they are, finding out what's important to them and helping them get to their goals, with the best quality of life possible."**

— Dr. Angela Taber

Research shows that palliative care increases quality of life, but also increases length of life. All things being equal, just providing that extra layer of support helps people live longer. Expert pain management is an important part of the equation.

"Palliative care is the magic of what we do," concludes Dr. Taber. "You walk into a room and you're told you have cancer. A million things go through your head. Palliative care is meeting that person where they are, finding out what's important to them and helping them get to their goals, with the best quality of life possible."



# The Magic of Listening

If you mention Ashley Chartier’s name to almost anyone at The Miriam Hospital connected to cancer care, you’re likely to be met with the question “Isn’t she wonderful”? The 32-year-old has been practicing her special brand of “in-the-moment” oncology nursing at The Miriam for eight years and recently became certified in palliative care.

We sat down with Ashley to talk about her work in The Miriam’s cancer program.

**Q. You earned your nurse practitioner degree last year. Why did you decide to practice palliative care?**

**A.** When I was working as an infusion nurse on Fain 3, I’d talk with my patients and they’d tell me about their cancer, their symptoms, and how much they wanted a good quality of life. I’d seen the difference palliative care had made for our patients who had received it and would think, “This person would benefit a lot from palliative care.” I wanted to be able to deliver that level of care myself, to have the time to focus on their symptom management, personal goals, and quality of life they told me they wanted for themselves.

**Q. What do you want people to understand about palliative care?**

**A.** Palliative care doesn’t just treat the disease. It treats the whole person. Pain management is an important part of palliative care, because if we can control their symptoms, people won’t quit their therapy. I’ve also found that most patients with cancer want to talk about things they may find difficult to discuss with their family: “How can I still be a wife or a husband when I’m going through treatment?” “How can I set up my will?” “How can I express forgiveness?”

Something magical happens when you can take the time to ask, listen, and really understand the goals of your patients. You help bring comfort.

**Q. What are the rewards of your work?**

**A.** My first palliative care patient was a lovely woman in her late 70s. Whenever she’d see me, she’d say, “Here’s my angel.” She loved to come in and just talk. Those visits made a difference in the quality of her life. Having that kind of an impact on a patient’s life is why I went into nursing in the first place. Specializing in palliative care has moved the level of connection with my patients to a whole new level and that is incredibly rewarding.



Ashley Chartier, NP (right) visiting patient



Jennifer Bento, NP and Ed Godbout, PA-C with CDU patient

## Clinical Decision Unit Opens

With emergency department visits dramatically on the rise, the opening of a Clinical Decision Unit (CDU) is one of the innovative ways The Miriam Hospital is improving patient care. The new 10-bed unit adjacent to the ED is a dedicated space for patients who meet specific criteria and are expected to stay less than 24 hours. “Clinical decision units are a growing practice that helps improve the patient experience and manage flow of care in hospitals,” explains Ilse M. Jenouri, MD, Medical Director of Emergency Medicine at The Miriam. “The CDU allows patients to get the care they need in the most efficient way. If a patient needs care longer than 24 hours, they are admitted to a general floor from the CDU.” Among the qualifying clinical criteria for patients to be moved to the CDU are anemia, chest pain, low blood sugar, and stroke-like symptoms.

Marilyn first felt an unusual pain in her chest at dinner. By bedtime, the pain hadn’t gone away. “Am I having a heart attack?” Frightened, she called 911. Once in The Miriam’s emergency department, a heart attack was quickly ruled out and additional tests were

ordered. Marilyn was transferred to the CDU where she remained under their watchful eye and was able to get a restful night’s sleep.

The next morning she had a consultation with a cardiologist who ordered a stress test. The results indicated it was safe for her to go home. A provider spoke with her primary care physician about the results and follow-up plans were made. Marilyn will need to make medication and lifestyle adjustments to deal with her blood pressure and cholesterol elevations but her chest pain, at the moment, was not life-threatening.

The CDU also helps the hospital better serve the aging population coming to The Miriam. If a patient has a bad fall but didn’t break any bones and needs care in a skilled nursing facility, the patient would be transferred to the CDU. There, a case manager would work closely with physical and occupational therapy to facilitate the next steps and prevent the patient from being admitted. Dr. Jenouri says, “Patients get the full service they would have received if admitted, but in a more efficient manner. It’s a win-win for everyone.”



# Thanks to Donor Support, The Miriam Makes Headline News

The past 12 months have been marked by national recognition and accolades for The Miriam Hospital. We are proud of all we have accomplished, and are grateful for the vital role our generous donor community plays in helping to make our successes possible.

Thank you for helping to ensure we remain the hospital of choice for our community.

- The Miriam was one of just two hospitals in Rhode Island to receive Healthgrades' 2018 Distinguished Hospitals Award for Clinical Excellence. The award recognizes the top 5 percent of hospitals in the country for comprehensive and consistent quality.
- For the third consecutive year, The Miriam was ranked No. 1 in Rhode Island by *U.S. News & World Report* in its 2017 annual review of Best Regional Hospitals. Recognized as a global authority in hospital rankings, the magazine also designated The Miriam as a "high performer" in the areas of chronic obstructive pulmonary disease, colon cancer surgery, heart failure, and hip replacement.
- Last fall, The Leapfrog Group awarded The Miriam its fifth, semi-annual "A" grade for the highest standards of hospital safety based on performance, and also named it one of the nation's 35 "Top Teaching Hospitals."
- In 2017, The Total Joint Center at The Miriam Hospital once again earned The Joint Commission's *Gold Seal of Approval® for Advanced Certification for Total Hip and Total Knee Replacement*.
- CareChex named The Miriam best in Rhode Island for total joint replacement in its *2018 Hospital Quality Rankings*—the most comprehensive national survey for evaluating hospital care and patient safety.
- Recognizing The Miriam's continued excellence in stroke treatment, the American Heart Association/American Stroke Association distinguished The Miriam Hospital with its 2017 "Get With The Guidelines—Stroke Silver-Plus Quality Achievement Award" and its "Target: Stroke Honor Roll Elite" award. For more than a decade, The Miriam has been honored by the Association for implementing the latest, research-based clinical guidelines for heart and stroke care.





Dr. Roye with surgical patient

## Q&A with G. Dean Roye, MD, The Miriam's Chief Medical Officer

**A**lmost a year ago, The Miriam appointed G. Dean Roye, MD, as senior vice president of medical affairs and chief medical officer.

Dr. Roye joined Lifespan in 2000 as an attending surgeon. From 2013 to 2017, he served as The Miriam's director of general surgery and previously was the director of the bariatric surgery program at Rhode Island Hospital.

Dr. Roye recently sat down with us to share a bit about his new role and first year.

**What has kept you at Lifespan and The Miriam for nearly two decades?**

I had my Miriam privileges for 10 years before moving my practice here in 2010, when Lifespan consolidated the bariatric surgery program at The Miriam. General and bariatric surgery has always been my focus, and I wanted to continue that work by joining The Miriam as core staff. My experiences at The Miriam were always great, but nothing replicates practicing at the hospital every day. I get an incredible amount of satisfaction from my job, both on the clinical and administrative sides. What has always stood out most



to me is the collegial and welcoming atmosphere. From the hospital's leadership and caregiver teams to the environmental services staff and volunteers, everyone works together for what is best for every patient. My experience at Miriam is simply unique.

**What interested you most about the position of senior vice president of medical affairs and chief medical officer?**

What appealed to me was the opportunity to influence and affect the system of care as a way to help more patients. As a surgeon, I may operate on 300 patients a year. But from an administrative standpoint, I can have an impact on every patient who walks through The Miriam's doors, and that is extremely rewarding.

**As hospital emergency departments continue to evolve, what do you see as the next big innovation in emergency care at The Miriam?**

One of the things a lot of people may not realize about the emergency department is how much research they do. We have one of the leading emergency medicine academic departments in the country in terms of research volume. Some of what's been instituted as a result includes a process to cut down on patient wait times and the recent opening of a Clinical Decision Unit, where patients who require observation but may not need admission get the care they need, freeing up ED space. I believe quality of care begins when a patient walks through the door, and the ED is a primary place for that to happen.

**How has the closing of the ED at Memorial Hospital impacted The Miriam?**

It's increased the flow of patients—emergency room visits from Pawtucket and Central Falls have doubled and tripled, respectively. We're handling capacity demands in a multitude of ways, including an equipped overflow area and the new CDU. We've also ramped up our hospital-wide huddles, which are twice weekly

meetings with representatives from every department and every floor to discuss capacities and opportunities to discharge patients more efficiently. The fact that we've been able to maintain our quality and outcomes, and decrease length of stay despite these challenges speaks to the quality of people we have here, but also the desire to do the right things for the right reasons.

**You are devoted to training the next generation of medical practitioners; why is this so important to you?**

This is an excellent question, and gets to why I went into academics. After finishing my fellowship, I had an opportunity to join a private practice in Louisiana. It was a great experience, but it made me realize how much I missed teaching. I take a lot of pride in staying on top of current literature, and when students come to me with intellectual curiosity and we have in-depth discussions about specific medical protocols or recommendations, it energizes me. When you help students make connections with their learning and they have that 'aha' moment, that's the reward for being a good teacher. Students are great at internalizing information and it's my job to help them take that knowledge and put it into practice. Ultimately, that's what it's all about.



G. Dean Roye, MD



## Program Inspires Hope and Healing

**A**rtist Beth Scanlon Melfi asked a group of patients receiving chemotherapy on the third floor of the Fain building to finish this sentence: “Each piece of the puzzle brings us one step closer to ...”

Recovery ... Tranquility ... Hope ... Forgiveness ...  
Getting out of my own way ... Being whole.

Patients, their families, and staff painted these words, and many more, on puzzle pieces that Beth then arranged over four large panels. The puzzle project was the first in a series of permanent installations that adorn the walls of the Leonard and Adele R. Decof Family Comprehensive Cancer Center at The Miriam Hospital, part of the Lifespan Cancer Institute.

Initiated by Beth over a decade ago, the “Projects of Possibility” art therapy program is a collaborative experience in self-expression and healing.

Beth conceived the idea while keeping her sister company as she received treatment at The Miriam. “At the time, there wasn’t much to do when you were having chemotherapy,” Beth recalls. “I wondered, ‘Can I do something to help patients relax and create in the moment?’”

Turns out, she could indeed. Over the years, hundreds of participants have enjoyed the arts program, creating

striking and inspirational works in a variety of media. Supported in part by the Edwin S. Soforenko Foundation, “Projects of Possibility” taps into the healing power of each participant’s creativity as they make their cancer journey.

“The theme of transformation runs throughout our projects,” says Beth. “It’s a concept that resonates here.”

So far, six projects have been completed, each involving as many as 50 patients, family members, and staff. Beth leads workshops a couple times a week, setting up trays with supplies that are easy to manipulate from an infusion chair. She also provides a verbal prompt to get participants thinking.

One large and colorful installation is studded with origami stars. Inside each star are messages of hope and transformation. Another, titled “We are Leaves from the Same Tree,” is composed of clay leaves affixed to a myriad of boughs. The entire work is glazed for a stunning display.

“It’s a wonderful way for our patients to be able to express themselves and to then have their work on display for others to view,” says Laura Butterfield, RN, Director of Outpatient Cancer Services at The Miriam. “We make it a point to call attention to the projects. For patients and visitors alike, it’s a very inspiring welcome.”



# Make The Miriam Part of Your Legacy

**P**lanned giving is a way to integrate your personal, financial, and estate planning goals. The right planned gift may provide you with tax and income benefits while helping ensure The Miriam's lifesaving work continues well into the future. Here are some of the most common planned gifts you can make:

**BEQUEST** Your Will may include a gift of a specific asset, a dollar amount, or a percentage of your estate to charity.

**CHARITABLE GIFT ANNUITIES AND CHARITABLE REMAINDER TRUSTS** These plans can provide you with lifetime income, a charitable income tax deduction, and leave a nice gift to charity. If you own appreciated assets such as stock or real estate, we can help you sell those assets tax free.

**LIFE ESTATE** You can make a tax-deductible gift of your home and remain living in it for your lifetime. There are additional real estate sale strategies that can provide you with cash, a charitable deduction, and even income.

There are many ways you may benefit from planned giving. Contact John Garcia at 401-606-4615 or [John.Garcia@Lifespan.org](mailto:John.Garcia@Lifespan.org), or visit [TheMiriamHospitalLegacy.org](http://TheMiriamHospitalLegacy.org) today so we may assist you in discovering the right plan for you.



## The Miriam People Society

**T**he Miriam People Society was founded by past-chair and Miriam Hospital visionary Stanley Grossman to encourage and recognize supporters who give \$1,000 or more on an annual basis, and Founders who have cumulative giving of \$25,000 or more to the hospital over their lifetime. These special Founder supporters are recognized as members of The Miriam People Society for life. As a member, you will see how your gifts are making a difference every day in the lives of our patients and their families. You'll receive regular news and information from us and invitations to special events, including The Miriam People Dinner, our annual fall gathering that provides us an opportunity to say "thank you" for our donors' support.



**To become a member of The Miriam People Society, please call 401-793-2004.**



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## Lawyer's Advice Inspires Giving



**W**hen 79-year-old Rich Rudert contacted a lawyer two years ago for assistance with his estate planning, he never imagined the impact it would have on his life. The retired electrical engineer recalls his lawyer saying, “Why don’t you give some money away, see how it makes you feel, and see what it can do?”

Living on the east side of Providence within walking distance to The Miriam Hospital, Rich enjoyed volunteering in the emergency department. “Even though it was a volunteer job, I felt useful. I looked forward to coming in to work,” says Rich. When his lawyer gave him the unexpected advice to donate money to a cause he believed in, “The Miriam was an obvious choice.”

Rich named the hospital a beneficiary of his investment account in his estate plans, and he also supports the hospital through yearly donations.

“My time volunteering was truly life-changing for me,” says Rich. In fact, it inspired him to go back to school to become a Certified Nursing Assistant. “Being in the emergency department at The Miriam and helping patients motivated me to pursue the CNA certification. I was always more of a numbers person, so this has been quite a departure for me. Still, it feels right.”

In addition to supporting The Miriam Hospital, Rich supports WGBH, the Jewish Community Center, and a number of other local sports and cultural organizations he not only enjoys, but that benefit the community.

Rich, a competitive runner, credits his active lifestyle for keeping him out of the doctor’s office. But if he needed medical care, he says The Miriam Hospital is the place to go. “They provide excellent health care to the community; it’s one of the best in Rhode Island. I was so impressed by the professional staff I worked with as a volunteer,” Rich says.

While philanthropy is a new experience for Rich, he says he gets so much from it. “My lawyer was right,” he says with a smile. “I thought more people donated money than actually do, but I found out that there are fewer than I thought. It feels good to know I’m helping The Miriam—today and in the future.”