

FUNDING APPLICATION

GENERAL INFORMATION

Organization Information

Legal Name: San Antonio Christian Dental Clinic	Federal Tax ID#: 74-2428161	501(c)(3) Public Charity	
Address: 1 Haven for Hope Way	City: San Antonio	State: Texas	Zip Code: 78207
Website: www.sachristiandental.org	Fax: (210) 220-2325	United Way Funded: No	

Head Of Organization

Name: Gloria Canseco	Title: Executive Director
E-Mail Address: gloria@sachristiandental.org	Phone: (210) 220-2300

Application Contact

Name: Gloria Canseco	Title: Executive Director	E-Mail Address: gloria@sachristiandental.org	Phone: (210) 220-2325
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Has the organization applied to the Najim Family Foundation in the past and been declined?

No

Grant Amount Requested \$:	Total Project Budget \$:	Organization's Annual budget \$:
\$50,000	\$50,000	\$1,485,000

Mission Statement:

The mission of San Antonio Christian Dental Clinic is to provide charitable dental care to low-income and homeless Bexar County adults, eliminating cost and access barriers to oral health.

PROJECT INFORMATION

Program / Project Title:

Access to Dental Care for Haven for Hope Children Pilot Program

PROJECT TIMELINE

Start Date	End Date
05/01/2019	11/29/2019

Harvey E. Najim Family Foundation Priorities:

Medical Needs

Program / Project Description:

PROJECT DESCRIPTION

For over 35 years, San Antonio Christian Dental Clinic has provided charitable dental care to low-income and homeless Bexar County adults in an effort to assist people facing cost or access barriers. Committed to providing the highest quality of dental care while demonstrating the loving nature of Christianity, we have successfully provided approximately \$3 million dollars of care at no cost to our patients.

This project proposes a 6-month pilot program to measure utilization of pediatric dental care for diagnostic and preventive procedures uniquely for children ages 4-17 living on the Haven campus. Pediatric services would be offered by staff dentists twice a month on Fridays with scheduling that allowed for treatment appointments and walk in patients.

For Haven families, patients would be able to access screenings and preventive care without leaving campus, at no cost, and other barriers associated with Medicaid-based services. Neither parents nor children would struggle with long waits, and limited appointments often associated with public assistance programs. Haven for Hope has agreed to provide sitter services in the lobby areas for siblings.

Treatments would be limited to dental exams and x-rays, cleanings, sealants, and silver diamine fluoride treatments, a relatively new technique that stops decay with noninvasive methods. Children who require fillings, extractions, pulp therapy, or other dental concerns would be referred to nearby practices for care. These referrals would be to partnering community clinics and neighborhood practices authorized for Medicaid.

BACKGROUND

Ten years ago, organizers of Haven for Hope invited our agency to become the dental health provider on campus. Since then our homeless patient population has grown from 22% to nearly 50% of all patients treated. Traditionally, dental care for adults has been the greatest need since children are eligible for state assistance such as CHIP or STAR programs. As such, Haven families were directed to neighborhood practices or federally qualified health centers for their children's dental care.

While this met cost barriers for Haven families, Haven leadership did not feel access barriers were satisfactorily addressed especially when taking into account factors leading to homelessness, particular those surrounding trauma, violence, or mental health. From SA Christian Dental Clinic's point of view, pediatric care was neither a high need nor was it aligned with The Clinic's stated mission. Efforts to host one-day pediatric dental screenings in 2012 and 2014 resulted in few respondents on one occasion and none at all on the other.

Since then the scope of Haven's reach has expanded and in 2018, an interest in pediatric care was reiterated. The Board of Directors agreed to reconsider pediatric care from the perspective of supporting the needs of a valued partner yet agreed that prior year dental screenings were not the answer. Staff suggested that regularly scheduled pediatric days for Haven children might have greater appeal than one-day screenings and board members agreed to a pilot program supported by restricted funding.

Evaluation Plan:

In 2018, there were approximately just over 500 children ages 5-17 and 2,200 adults ages 18 and over on the Haven's campus. In 2018, we saw 976 distinct Haven for Hope patients representing 44% of the total. If we could treat 100 children on campus in the 6-month pilot period, ideally taking the child from exam to complete preventive care treatment plan, we would consider the program a success.

We use the axiUm electronic practice management system for tracking data. We would collect demographic data. Internally, evaluation results guide internal protocols for continuous improvement of patient care. Every two weeks, the clinic's leadership team meets to evaluate the impact of existing protocols and processes on dental services and the patient experience. The result has been a values-based dental care program that is responsive to need, respectful of mission, driven by compassion, and aligned with the highest standards of care.

Plans to sustain project beyond the term of this request:

To continue to program uninterrupted, we would ask the Najim Family Foundation for full support for another 6 months. During that time, we would begin to solicit additional private support with like-minded interests.

It is important to note that our value system purposefully avoids the hyperegulation connected with public assistance programs. This model permits us to make judgement calls, assures we can quickly accommodate patient needs, and demonstrates both the spirit of American volunteerism and the loving nature of Christianity. It also means that a single downturn in funding has the potential to restrict our capacity for care.

This having been said, the last ten years have shown tremendous progress in service, programming, and financial stability. We continue to meet the needs of 100% of Haven for Hope members presenting for care including Courtyard patients and are committed to doing the same for children should the program prove successful.

Children Impacted:

How many unduplicated children will the TOTAL PROJECT INITIATIVE impact?	How many unduplicated children will NFF REQUESTED FUNDS impact?
100	100

Please provide the percentage of each group below that will be served by the project in which funds are being requested. Do not leave any area blank. If that specific group will not be served, include zero. The percentage should total 100%.

A. Population Served Age		B. Population Served Ethnicity	
Infants (0-5)	2%	African American	25%
Children (6-13)	49%	Asian American	0%
Young Adults (14-18)	49%	Caucasian	24%
TOTAL:	100%	Hispanic/Latino	48%
		Native American	1%
		Other and Define	2%
		TOTAL:	100%

City Council District for Which Children are Being Served:

District5

Line item Budget:

Line Item Description	Total Project Funds Allocation	Najim Funds Allocation
Dental Instrumentation	\$12,050	\$12,050
Dental Consumables	\$8,500	\$8,500
Waitroom Play Area Setup	\$2,500	\$2,500
Medical Waste Disposal	\$200	\$200
.1 FTE Staff Dentist	\$5,600	\$5,600
.1FTE Staff Hygienist	\$2,800	\$2,800
.3FTE Dental Assistants	\$5,200	\$5,200
.1FTE Care Coordination Staff	\$2,100	\$2,100
.1FTE Sterilization Staff	\$1,500	\$1,500
.1FTE Intake/Discharge Staff	\$1,400	\$1,400

Malpractice Insurance Contribution	\$320	\$320
TOTAL:	\$42,170	\$42,170
OTHER FUNDING RESOURCES		
For Project being Requested: Funding sources and amounts, pending and committed.		
PROJECT - PENDING		
Funder Name	Amount Requested	
none pending	\$0	
TOTAL:	\$0	
PROJECT - COMMITTED		
Funder Name	Amount Requested	
none committed	\$0	
TOTAL:	\$0	
Other funding sources and amounts, pending and committed not specific to this request.		
ALL OTHER ORGANIZATION REQUESTS - PENDING		
Funder Name	Amount Requested	
Greehey Family Foundation	\$225,000	
St. Luke's Lutheran Ministries	\$20,000	
Semmes Foundation	\$20,000	
St. Susie Foundation	\$10,000	
Phyllis Schoener Foundation	\$10,000	
TOTAL:	\$285,000	
ALL OTHER ORGANIZATION REQUESTS - COMMITTED		
Funder Name	Amount Requested	
Methodist Healthcare Ministries	\$418,013	
Baptist Health Foundation of San Antonio	\$250,000	
Nancy Smith Hurd Foundation	\$100,000	
WellMed Medical Management	\$100,000	
Kronkosky Charitable Foundation	\$54,097	
Warthog Foundation	\$5,000	
TOTAL:	\$927,110	
BOARD OF DIRECTORS		
What percentage of your board contributes financially to the organization?		
100%		
If Board giving is not at 100%, please explain why?		
How are board members expected to participate in your organization?		
All board members are expected to participate financially, through regular attendance at board meetings, active engagement in fundraising and activities, and through service on at least one board committee.		
LIST OF BOARD DIRECTORS		

Name & Office Held	Corporate Affiliation
Cynthia C. Robinson, President	First Presbyterian Church
George Carroll, JD, Vice President	Carroll and Hinojosa, LLC
Charles Wedge, JD, CPA - Treasurer	First Baptist Church of San Antonio
Christina Meiners, DDS - Secretary	Communicare
Glen Cameron	First Baptist Church of San Antonio (retired)
Norma Reyes, DDS	Greater San Antonio Hispanic Dental Association
Alex DePeralta, DDS	UT Health Science Center Dental School
David Singleton, DDS	San Antonio District Dental Society
David N. Rickey, DDS	US Navy, Dental Corps (retired)
Mary Wofford	USAA (retired)
Sam Escarsega, DDS	Private Dental Practice, US Army Dental Corps (retired)
Art Scott, DMD, DDS	Office of US Surgeon General, (retired)
Signature	