

FUNDING APPLICATION

GENERAL INFORMATION			
Organization Information			
Legal Name: Transplant Association of Texas (dba Transplants for Children)	Federal Tax ID#: 74-2514759	501(c)(3) Public Charity 509 (a)(1)	
Address: 11107 Wurzbach Road, 202	City: San Antonio	State: TX	Zip Code: 78230
Website: www.tfcsatx.org	Fax: (210) 949-1212	United Way Funded: No	
Head Of Organization			
Name: David Davenport, CFRE		Title: Executive Director	
E-Mail Address: ddavenport@tfcsatx.org		Phone: (210) 949-1212	
Application Contact			
Name: David Davenport, CFRE	Title: Executive Director	E-Mail Address: ddavenport@tfcsatx.org	Phone: (210) 949-1212
Previous Najim Funding			
Year	Funding \$		
2007	\$50,000		
2008	\$50,000		
2009	\$25,000		
2010	\$25,000		
2012	\$25,000		
2013	\$25,000		
2014	\$25,000		
2015	\$25,000		
2018	\$25,000		
Total	\$275,000		
Has the organization applied to the Najim Family Foundation in the past and been declined?			
Yes 2016			
Grant Amount Requested \$:	Total Project Budget \$:	Organization's Annual budget \$:	
\$75,000	\$297,783	\$713,245	
Mission Statement:			
Transplants for Children assists children and their families to overcome the lifelong emotional, social and financial challenges associated with pediatric organ transplantation.			

PROJECT INFORMATION

Program / Project Title:

To support the Pediatric to Adult Care Transition Program (PACT) to build the necessary skills for the transplantees successful transition.

PROJECT TIMELINE

Start Date	End Date
01/01/2020	12/31/2020

Harvey E. Najim Family Foundation Priorities:

Disabilities/Special Needs

Program / Project Description:

Pediatric organ transplantation, long considered a last option for terminally ill children, has now become the treatment of choice for a number of serious medical conditions. Despite growing confidence, organ transplantation is not as much a "cure" for a particular end-stage disease as it is a transition from an often chronic and life-threatening disease to a second chronic condition--living with and caring for a transplanted organ.

Though pediatric organ transplantation has a significant life-extending benefit to children who have chronic life-threatening health conditions and end-stage organ failures, the life-saving surgery and recovery doesn't end there. The number one priority of the transplant survivor is to keep the organ alive after transplant surgery and avoid the consequences of organ rejection. Transplant rejection occurs when the transplanted tissue or organ is rejected by the recipient's immune system and destroying the transplanted tissue. Acute or chronic rejection disease occurs when the immune system's natural defense response attacks the new organ either in a single episode or over a long period of time. Graft versus host disease is a life threatening condition in which the donor cells attack the recipient's healthy cells. Both diseases present themselves as chronic disabilities as defined by the World Health Organization: "...[as] an impairment ... in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or actions. Disability is thus not just a health problem. It is a complex phenomenon..."

To avoid organ rejection the recipients must adhere to a strict and often complex medical regimen designed specifically for them. Post-transplant treatment requires powerful immunosuppressant drugs that must be taken at specific times throughout the day for the rest of their lives to avoid the consequences of transplant rejection but with these necessary drugs are the added unwanted side effects which for adolescents becomes the most important part of their identity as an acceptable member of their social circle.

The mortality rate of a serious health condition creates even more challenges. Up to a third of all adolescent transplant recipients may be non-adherent. Normal adolescent tendencies of questioning authority often times predisposes them to reject previously accepted medical advice and treatment. Preoccupation with body image and adverse cosmetic effects of some immunosuppressive drugs too often collide. Other factors contribute, among them impulsivity and risk-taking. As transplant survivors reach this vulnerable age, clinical health professionals often struggle to effectively facilitate the transition from pediatric to adult care. It is broadly agreed that 1) there is a need to improve the transition process 2) many youth are ill-equipped to receive and navigate care in the adult system 3) adult health care providers may lack knowledge and skills to care for young adults with childhood-onset chronic conditions and 4) inadequate health insurance and transition services funding negatively impact patient outcome.

To fill this gap, in 2019 TFC has committed to a complete programmatic redesign. The center-piece is a one-of-kind community-based pediatric to adult-care transition support program designed specifically to address the high prevalence of pediatric and adolescent organ loss, often leading to death.

Health care transition is the process of changing from a pediatric to an adult model of health care critical to the survival of the transplant recipient. The aims of transition are to improve the ability of adolescents and young adults to manage their own medical regimen and health care, effectively navigate health services, and to ensure an organized process to facilitate transition preparation, transfer of care, and integration into adult-based care. Pediatric to adult care transition encompasses provider, family and patient communication, education and action. Therapeutic alliance team members include the patient and family unit, transplant nurses, physicians, surgeons, social workers, coordinators, primary care providers, allied health professionals and community resource/nonprofit organizations. The goal of this critically important program is to implement proven and multi-faceted strategies resulting in a positive quantifiable impact on medical regimen adherence and healthy patient outcomes.

TFC will 2 symposium/panel events each year; one in the spring during National Pediatric Transplant Week and another in the Fall; the 20th Annual Chronic Illness and Disability Conference: Transition from Pediatric to Adult-based Care; Sponsored by Baylor College of Medicine and Texas Children's Hospital. The Houston-based conference will be live-streamed at the San Antonio Area Foundation. This symposium will bring together not only youth and young adults who have a chronic illness or disability and their parents or guardians but even more critically, physicians and health care providers of all disciplines who play an important role in the medical care regimen. TFC will sponsor and coordinate this event in October, 2019.

Through a set of strategically designed events and multi-generational mentoring, TFC will guide young people through the process of building the "toolbox" of skills needed to successfully transition to adult based medical care. TFC will provide incentives for youth participation through our STARS College Success and Scholarship program. Through active participation and completion of the program, they become eligible for scholarships to support their education beyond high school. In between events and activities, TFC will connect with young people through a specialized text messaging system designed to inspire increased medical adherence using Nudge Theory, continued learning, personal growth and skill building. To further support adolescents in their adherence to prescribed medical regimens parents will have the opportunity to participate in "What is Transition?" workshops and learn effective ways they can support their child's transition process.

Evaluation Plan:

Written evaluations, readiness checklists and Focus Group Testing are being done to test the effectiveness of the efforts throughout the year. Findings from these evaluation tools will be made available to funding sources as well as health care professionals in an effort to improve and adjust program design to have the greatest positive impact on patient adherence to medical routines and outcomes. Transplants for Children has partnered with faculty research specialists at Texas A&M University - San Antonio to conduct ongoing assessments of this important program.

Plans to sustain project beyond the term of this request:

TFC believes this program will become a national model for how community-based nonprofits partner with local transplant/chronic illness clinics to improve outcomes during the difficult and complex pediatric to adult care transition. We are building the professional and financial base necessary to sustain this critical lifesaving program.

Children Impacted:

How many unduplicated children will the TOTAL PROJECT INITIATIVE impact?

1,100

How many unduplicated children will NFF REQUESTED FUNDS impact?

1,100

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)	28%	African American	4%

Children (6-13)	40%	Asian American	3%
Young Adults (14-18)	32%	Caucasian	13%
TOTAL:	100%	Hispanic/Latino	68%
		Native American	1%
		Other and Define	11%
		TOTAL:	100%

City Council District for Which Children are Being Served:

District10

Line item Budget:

Line Item Description	Total Project Funds Allocation	Najim Funds Allocation
Salaries and Wages	\$56,000	\$0
Program Expenses	\$121,783	\$75,000
2019 STARS Scholarship Pool	\$20,000	\$0
STARS Endowment	\$100,000	\$0
TOTAL:	\$297,783	\$75,000

OTHER FUNDING RESOURCES

For Project being Requested: Funding sources and amounts, pending and committed.

PROJECT - PENDING

Funder Name	Amount Requested
Gordon Hartman Foundation	\$25,000
Greehey Family Foundation	\$50,000
Najim Family Foundation	\$75,000
Kronkosky Charitable Foundation	\$70,000
TOTAL:	\$220,000

PROJECT - COMMITTED

Funder Name	Amount Requested
Halff Family Endowment	\$5,000
Anonymous Individual	\$50,000
TOTAL:	\$55,000

Other funding sources and amounts, pending and committed not specific to this request.

ALL OTHER ORGANIZATION REQUESTS - PENDING

Funder Name	Amount Requested
Servant's Heart Foundation	\$15,000
San Antonio Area Foundation	\$25,000
Security Service Federal Credit Union	\$10,000
H-E-B Tournament of Champions	\$75,000
TOTAL:	\$125,000

ALL OTHER ORGANIZATION REQUESTS - COMMITTED

Funder Name	Amount Requested
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Carl Anderson Charitable Foundation	\$10,000
Valero Foundation	\$20,000
Amy Shelton McNutt Charitable Foundation	\$2,000
St. Luke's Lutheran Health Ministries	\$3,000
Blue Bird Auxiliary	\$5,000
Texas Cavaliers	\$3,000
Cowden Foundation	\$10,000
Kronkosky Charitable Foundation	\$74,500
TOTAL:	\$127,500

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?
Be a registered organ donor, Actively participate at all meetings, in partnership with executive director set the strategic vision of the organization, make a personal contribution, invite others to contribute, be advocates of the organization and its mission, share networks/open doors, say thank you, participate on a committee, actively recruit other members, advocate for organ donation, participate in TFC special events and appropriate program activities.

LIST OF BOARD DIRECTORS

Name & Office Held	Corporate Affiliation
Nathan Johnson, Board Chair	NuStar Energy
Jeanna Gaines, Vice Chair	Bank of America
Steve Alaniz, Secretary	Momentum Physical Therapy & Sports Medicine
Amy Libich, CPA Treasurer	Sol Schwartz & Associates, LP
Jesse Baza, Member	Lone Star Capital Bank
Irma Ayroso-Guardiola, Member	University Health Systems
Dr. Ikuyo Yamaguchi, MD, Member	University Health Systems
Michael Oliver, Member	Security Service Federal Credit Union
Tina Trinkle Ortega, Member	Aetna
Ryan Garcia, Member	Thomas Randolph Excavation, LLC
Nicole Locastro, Member	Transplant Parent/Family
David M. Davenport	Transplant Survivor/Transplants for Children

Signature
David M. Davenport