

# CHARITABLE GRANTS

Existing Partners



Teen Cancer America (TCA) is extending a one-time additional support opportunity to existing TCA hospital partners (grant recipients) who are committed to the continued development of their AYA Oncology Programs, AYA awareness, and AYA focused care.

Comprehensive AYA programs are developed in collaboration between pediatric and medical oncology. They coordinate and build upon existing services and resources to:

- Holistically address the unique needs of adolescents and young adults who have been diagnosed with cancer
- Educate and support the providers caring for them

TCA encourages novel and continued approaches to improving AYA care and the potential for building environments that enhance the young adult hospital experience.

## 2023 Grant Cycle

- TCA is prioritizing proposals that focus on reaching AYAs being treated in rural and community settings.
- Proposals are due by: Thursday, August 10th, 2023, 5:00pm EDT

## HOW TO APPLY

### STEP 1: Qualify for the Teen Cancer America Re-Grant

Re-Grants are available to existing TCA Hospital partners whose final disbursement was completed two or more years ago and provides services for adolescents and young adults with cancer in the United States. We define a comprehensive AYA program as one created across pediatric and medical oncology into a single, cohesive program. TCA will **NOT** consider applications that do not include both.

### STEP 2: Submit a Grant Proposal

- I. **Cover Sheet** (all applicants)
  - A. Name of Hospital(s) applying
  - B. Name, title, and contact information (Phone, Email) of the individual submitting this Grant Proposal
  - C. Project Title (AYA Facility, AYA Program Initiative, etc.)
  - D. Total program and grant request budget
  - E. Signature of Support of Chief Executive(s) (include date and printed name)

For questions contact: [alec@teencanceramerica.org](mailto:alec@teencanceramerica.org)  
For more information: visit our [FAQs](#)

## II. Description of your AYA Program (all applicants)

For each institution in your proposal, please provide the following:

- A. Describe your engagement, relationship with TCA to date.
- B. Provide a brief description of your current AYA program, the population of patients being served, and how effective it is to both your patients and institution as a whole.
- C. Provide insight into the objectives being pursued through this grant funding proposal, and the methods or strategies to accomplish them.
- D. How does your existing AYA program reach rural, community, and satellite centers? How do you plan to further that reach and build upon those relationships in the future?
- E. How will this proposal impact the regional and national picture?

If you are applying as an **Existing Partner AYA Program**, please see:

*III.i) Comprehensive AYA Program Enhancement*

If you are applying as an **Cross Site AYA Collaborative Project** across multiple institutions, please see:

*III.ii) Cross Site AYA Collaborative Project*

### III.i) Comprehensive AYA Program Enhancement

- A. Pediatric hospital or health care facility.  
Name:  
Street address:  
City, county, state, and zip code:
- B. Adult hospital or health care facility.  
Name:  
Street address:  
City, county, state, and zip code:
- C. Describe the progression of your AYA program subsequent to the acquisition of TCA funding
- D. Elaborate on challenges throughout the development and implementation of your AYA program and share significant lessons learned.
- E. How do pediatric and medical oncology collaborate to better serve AYAs at your institution? How do you implement processes of care for all AYAs served by your program?
  - a. If your program has been historically divided or you do not currently have a partner, how will this grant facilitate bridging pediatrics and adult oncology?

- F. Complete one [AYA Oncology Services Worksheet](#) for pediatrics and adult oncology and submit both with your grant application.
  - a. You may not have all the listed services at your institution. Please add any not listed.
  - b. If a service exists but is not AYA specific, it is still important to note its existence and how your AYAs gain access.
  - c. If a service exists and could be improved, include ideas on enhancing in the notes column.
  - d. Our evaluation of your proposal will **NOT** be based on how much exists at your institution(s) already. We would like to understand what your program can include and provide from both pediatric and adult sides.
- G. Comparing pediatrics and adult using your completed [AYA Oncology Services Worksheet](#):
  - a. How can patients gain access to services that exist only on one side?
  - b. Which areas have gaps in both adult and pediatric oncology and how will you work together to address those gaps?
- H. Identify your most at-risk AYA subpopulations (e.g. houseless, LGBTQIA+, rural).
  - a. What are the unique challenges they face that are distinct from your general AYA population?
  - b. How are you engaging these young people and addressing their needs?

### III.ii) Cross Site AYA Collaborative Project

- A. Fill out for **each** partnering hospital, healthcare facility, and organization.
  - Institution name:
  - Street address:
  - City, county, state, and zip code:
  - Population served:
  - Project lead name, title, and contact information (Phone, Email):
- B. Describe your collaborative project's projected outcomes articulating the proposed goals and how you plan to achieve them by providing the following information in chart (see here) form:
  - a. measurable objectives;
  - b. key activities;
  - c. evaluation indicators;
  - d. timeline and accountable leaders alignment.
  - e. Provide evidence that supports the efficacy of the proposed intervention/service pathway.
- C. How do you plan to analyze, implement, and share your project findings?
- D. Describe how you will engage underserved AYA patients and survivors in the development and implementation of your project?
  - a. What are the unique challenges they face that are distinct from your general AYA population?
  - b. How are you planning to address their needs?
- E. What makes this specific project valuable to the larger field of AYA oncology?

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## III. Funding Request (all applicants)

- A. What specific programmatic or project need is TCA being asked to fund?

## IV. Line Item Budget (all applicants)

- A. Please include all current AYA program staff with true costs and/or supported estimates.
- B. If requesting financial support for:
  - a. Positions - please provide job description(s), responsibilities, reporting structure, and FTE status. **TCA does not pay for indirect costs such as dean's tax, fringe benefits, grant tax, etc. When applying for a grant with TCA you agree that these will not be included in your requested budget.**
  - b. Space - please provide description, goals, and plans of the facility if available. Outline which patients (in-patient, out-patient, pediatric, adult) will have access to the space.
  - c. Project - A detailed account of all costs expected to be associated with the individual project.

## VII) Plan for Program Sustainability (all applicants)

- A. How might this project or role be financially supported after TCA funding is fully disbursed?
- B. What steps are needed to obtain support from your institution, the community, or other partners?
- C. Who are the key stakeholders to include in your sustainability plans?
- D. How do you plan to engage development in this process? What specific goals and responsibilities do they need to fulfill?

## STEP 3: Proposal Review and Awarding

A grant proposal is a request for funding and not a guarantee of an award. Unfortunately, not every worthy request can be funded and often the full amount requested may need to be adjusted; however, TCA will fully consider each proposal. All proposals reviewed by TCA staff.

**Proposal due Thursday, August 10th, 2023 by 5:00pm EST.**

**Grant decisions will be announced by Thursday, August 31, 2023.**

If you are awarded a grant, a draft agreement will be sent for review - payment installations and terms will be outlined and agreed upon. TCA has the ability to update the deliverables proposed with the help of the submitting organization to ensure alignment with the mission and goals of both organizations.

**Thank you so much for your submission to TCA!**

**We are pleased to be working with so many wonderful hospital partners across the United States and look forward to continued growth, connection, and collaboration.**

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