

Funding for Innovative Research Protocols and Programs Designed to Advance Donation and Transplantation through Clinical, Social, and Behavioral Interventions

Introduction

Gift of Life Donor Program (GLDP) is the federally designated not-for-profit organization coordinating organ and tissue donation and transplantation in the eastern half of Pennsylvania, southern New Jersey, and Delaware. GLDP has served the region for over 50 years and is the most active of 56 organ procurement organizations in the United States. GLDP has coordinated the recovery and allocation of more than 59,000 organs and more than 2 million tissue allografts for transplant since 1974. GLDP is also the region's primary source for organ and tissue donor information and conducts hundreds of professional and community education programs annually.

GLDP was established in 1974 to improve the efficiency of recovering and sharing kidneys with its constituencies in the tri-state areas of Pennsylvania, southern New Jersey, and Delaware. It has expanded its services and the transplant programs it supports over the past 50 years. It currently supports 12 transplant centers with 35 organ-specific programs at which nearly 5,300 patients await a life-saving transplant. GLDP partners with more than 126 acute care hospitals in the region in coordinating recoveries of the "gift of life."

In 1998 GLDP's Board of Directors established the Transplant Foundation, a 501(c) (3) organization that supports the mission of GLDP, including education, research, and services to donor families and recipients. The Foundation is the steward for broad-based programming and initiatives, including the Gift of Life Institute, Transplant Pregnancy Registry International, Gift of Life Donor Dash, Camp Jeremy, and Team Philadelphia, and has also facilitated the strategic development and operation of Gift of Life Howie's House, along with numerous other scientific, medical, and community-based activities.

Objectives

Transplant Foundation's Donation and Transplantation Innovative Grant Program was established to advance organ and tissue donation and transplantation, particularly in the GLDP donation service area. Proposals should include projects that require financial support in amounts ranging up to \$100,000. Projects requiring other amounts may also be considered. Examples of projects would include:

 Evaluations of clinical interventions to increase organ procurement and organ utilization, positively impacting transplant outcomes and extending graft survival (deceased and living)



- Projects designed to advance the quality and safety of transplantable organs and tissue
- Projects focused on emerging specialties in the delivery of donation and transplantation services
- Projects designed to evaluate initiatives to increase quality and promote cost-effectiveness in the donation and transplantation field
- Pilot projects employing innovative messaging or outreach to increase donor designation rates
- Social and behavioral interventions to increase public commitment to organ and tissue donation and enrollment in a state registry
- Pilot projects with evaluative measures designed to address burdens faced by transplant recipients and their families (no direct funding of prescription drugs or medications)

Guidelines

Eligibility

The Grant Program aims to support innovation, quality, and safety in donation and transplantation through scientific research, community programming, or alternate approaches to existing processes and protocols. To be eligible for a grant, projects should meet the following criteria:

- 1. Have as its primary applicant a member of the GLDP donation service area (eastern half of Pennsylvania, southern New Jersey, and Delaware).
- 2. Have a core purpose consistent with the Transplant Foundation's mission of advancing organ and tissue donation and transplantation. Projects should indicate how they will impact organ and tissue donation and transplantation within the GLDP donation service area.
- 3. The specific aspect of the project funded by the grant should be capable of completion within one year of the date funding is released. If an applicant seeks approval for a multi-year project, the applicant must demonstrate why the extended timeframe is appropriate.
- 4. Special consideration will be given to projects that can be replicated or developed for broader application to better service the Transplant Foundation's constituents and the Gift of Life Donor Program service area.



Application Dates

Grant applications will be accepted for review according to cycle submission deadlines of May 1st, August 1st, and November 1st.

Eligible applicants must be within the GLDP donation service area – the eastern half of Pennsylvania, southern New Jersey, and Delaware – and be able to complete their project within one year.

Submission

To apply for a Transplant Foundation Grant, please complete the application on the following page and submit it with all required supplemental materials to grants@donors1.org.

Terms & Conditions

When a project is preliminarily selected for funding, the applicant(s) will be required to complete an additional certification regarding the project, including conflicts of interest, ownership, etc.

Regular updates on the progress of the project are required at least twice during the grant term and more frequently if requested. Any publication of the results of a project supported by the Grant Program must include attribution satisfactory to the Gift of Life Transplant Foundation.

Projects that have the potential to be developed as business ventures may require additional evaluation and a separate contract. Any creation, invention, or modification developed under the Grant Program will be considered the property of the Gift of Life Transplant Foundation.

Funds not used within the time frame approved by the Gift of Life Transplant Foundation must be returned unless an extension is requested and approved.



Applicant Information

Project Director/Principal Investigato	r: Co-Applicant/Aut	horized Representative:
ame:	Name:	
itle:	Title:	
rganization:	Organization:	
ddress 1:	Address 1:	
ddress 2:	Address 2:	
ity	City:	
tate: Zip:	State:	Zip:
elephone:	Telephone:	
mail:	 Email:	
Gift of Life Howie's House, or Gift of L If not, do you have an existing relationsl	<u> </u>	izations (describe)?
	Acknowledgment	
By signing below, you acknowledge the	following:	
2. Your application conforms to the3. Your application does not seek f	agree to the Grant Program guideling guidelines of the Grant Program. unding for capital projects. applemental materials listed on Pag	
Primary Applicant's Signature		Date
Co-Applicant's Signature		Date



Proposal

roduction: Ple	ase provide an ex	ecutive summ	ary of your prope	osal including the	e qualifications of
ect staff and th	e project timeling	es. (300 words)	osai, including the	e qualifications of



Statement of Need: Please explain the need addressed by your project, including the target population (200 words)						
Methodol	ogy: Please expl	ain how your	proposal will	address the st	ated need. (20	0 words)



valuation & Publication valuated and whether you	on: Please explain the frequency and method by which your results will us intend to publish any results. (200 words)	ll be
ther Funding Sources:	Please describe any other funding sources for this project. (100 words	s)



Preliminary Budget: Assumes a 12-month time frame. No more than 15% of requested funds may be allocated for overhead charges (general or unspecified expenses charged by the institution).

	Assumptions or Details	Requested from Transplant Foundation	Overall Budget Total
Personnel (list)	•		
Supplies			
Equipment			
Travel			
Patient Care			
Other Expenses (list)			
Total		\$	\$



Other Project Information		
Are human subjects involved?	Yes	No No
If yes, is the project exempt from Federal Regulations? If yes, provide the exemption number:	Yes	No
If no, is the IRB review pending: IRB approval date (if received):	Yes	No No
Is proprietary or privileged information included in the application?	Yes	
Does the project involve activities outside the United States or partnerships with international organizations or collaborators?	Yes	No
If yes, please identify countries and explain involvement:		
Is this project undertaken for credit at an institution of higher education: If yes, please identify the institution: Faculty advisor: Degree sought / course of study: Credits expected for this project:	Yes	No
Supplemental Materials Checklist		
Cover letter		
Project director/principal investigator curriculum vitae/resume		
Additional key personnel curriculum vitae/resume		
Full project budget, if available		
Previously published works related to the project, if available		
IRB approval, if applicable		