



Faith In Practice

Life Changing Medical Mission

Strategic Plan

August 2023

Each of you should use whatever gift you have received to serve others, as faithful stewards of God's grace in its various forms.

-1 Peter 4:10



Strategic Planning Committee

Eric Askenasy, MD

Abigail Berkman

Lola Coke, PhD

Eric Condon

Phil Johnson, MD

Joe Lopez

Cary Moorhead, MD

Bob Morrow, MD

Brian Parsley, MD

Ken Wine



Serving Where God Has Called Us



The Issue: Vast Poverty and Healthcare Inequity

- 17.1M people live in Guatemala.
- 59% (10 million people) live in poverty (11.6% in the US).
- #10 highest poverty rate in the world and highest poverty rate in the Americas.
- 91% of the indigenous population (6.8M people) live in extreme poverty
 - no healthcare
 - no food
 - no clean water
 - no education



The Issue: Vast Poverty and Healthcare Inequity

- Government spending on healthcare is the lowest in Central America.
- 17,000 physicians for 17.1M people
- 80% of physicians work in Guatemala City and not in the rural areas of Guatemala.
- Healthcare options in Guatemala:
 - Private Hospitals (unaffordable for most).
 - Social Security Hospitals (for officially “employed” individuals working for companies that pay into the system).
 - National Hospitals and Clinics (understaffed and under-resourced).
 - Social Hospitals (churches and nonprofit organizations).



The Issue: Barriers to Care

Healthcare and Access

- National Hospitals and Clinics are underfunded and under-resourced.
- National hospitals that do exist do not have supplies or medication, and will ask patients to cover all costs including medication, instrumentation, medical supplies, etc.
- Undeveloped roads in remote villages prevent travel.
- No money to pay for transportation or lodging to receive care.
- No continuity of care among healthcare providers (no systems to manage care).



The Issue: Barriers to Care

Trust and Understanding

- Mayan languages are still prominent in indigenous communities, and many do not speak Spanish as a second language.
- Traditional Mayan medical practices inform decision making, which may conflict with western medical standards.
- Many patients are receiving care for the very first time.
- Patients have limited understanding about their disease/condition or their medical treatment plan.
- Most children in “urban areas” leave school after third grade (12 or 13) so they can work in the fields or at home.
- No/limited education for indigenous children.



The Issue:

Health and Wellness

- Malnutrition in expectant mothers can lead to severe neural tubal defects that require surgery after birth.
- Many children suffer from chronic malnutrition.
- Highest prevalence of stunted growth in children less than five in Latin America – 47% nationally, up to 90% in hardest hit areas of the country.
- Type 2 Diabetes and pre-diabetes found in 25% of the indigenous population.
- Chronic kidney disease prevalent in the rural population.
- Lack of national medical statistics to drive care.
- Unmanaged comorbidities prevent surgical treatment.
- High rates of untreated trauma.
- High rates of revisions needed to correct previous surgeries.



A Patient Story: No Access to Healthcare

In February 2023, a Faith In Practice orthopedic team was able to help a 17-year-old teen begin his journey toward mobility.

At 11 years old, he was hit by a car and broke his left tibia. He never received care for the injury other than to sew the skin together where the bone was protruding – sadly, a common reality for many of our patients.

Throughout his teenage years, he was unable to walk without the assistance of crutches due to the severity of the injury. After his surgery, his leg was straight, and he is on the road to more independent mobility.

This transformational surgery was made possible because of Faith In Practice's surgical program and through Christ's commitment to work through Faith In Practice to help others.





Strategic Initiatives to Address the Need

Strategic Priorities

1. Increase access to specialty care:

Increase the number of missions completed each year from 40 to 52 in ten years (+8 surgical, +4 medical clinic).

\$500,000 annual cost at mission capacity.

2. Increase access to ongoing healthcare for the underserved:

Invest in 200 community health workers and navigators to provide health and referral services to Guatemala's most underserved and remote communities.

\$300,000 annual cost once fully developed.

3. Transform social healthcare through robust partnerships:

Increase access to health and surgical care through the creation of a health alliance, a clinically integrated network of health providers dedicated to serving Guatemala's most underserved communities.

\$100,000 annual cost once fully developed.

Strategic Priorities

4. Digitize healthcare to drive patient care.

Develop technology that will support community health workers and the health alliance by increasing continuity of patient care and visibility into the needs of those we serve.

Onetime \$300,000 investment, \$150,000 ongoing maintenance.

5. Train and inspire future health professionals.

Annually expose 100 aspiring health professionals to the needs of the poor to further develop their careers of compassion and build the volunteer pipeline of tomorrow.

\$200,000 annual investment.

1 Increase Access to Specialty Care

Impact

- **Increase Access** → Increase the number of surgical and medical clinic missions (+8 surgical and +4 medical)
- **Targeted Missions** → Recruit surgical teams and medical providers based on the needs of our patients
- **Healthier Patients** → Provide healthcare to patients closer to where they live through NGO partnerships and smaller team sizes
- **Increasing specialty care for 5,000 additional patients annually**

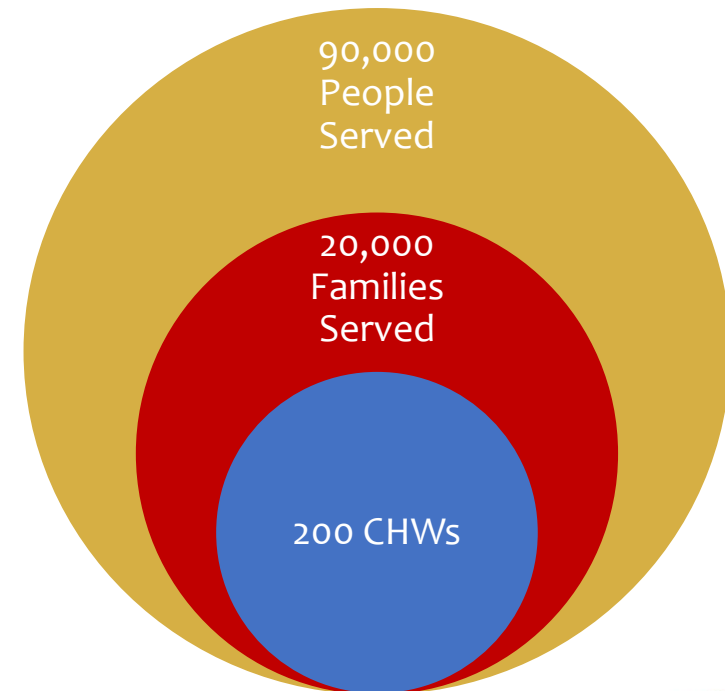


2 Increase Access to Ongoing Healthcare for the Underserved

Impact

- **Increase Trust** → Train and support 200 Community Health Workers and Navigators (CHWs). CHWs are members of the communities we serve
- **Healthier Communities** → CHWs provide primary care and health education to increase wellness within their community
- **Surgical Support** → Provide pre/post-surgical support to patients to increase positive patient outcomes
- **200 Guatemalans will be trained** in CHW techniques, provided ongoing support, and impact **tens of thousands of lives annually**

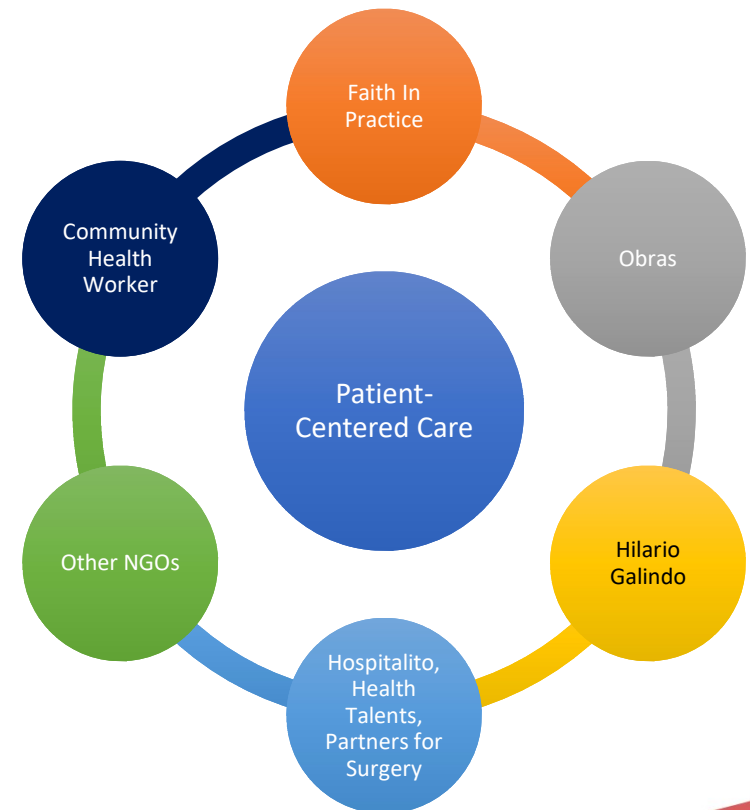
1 CHW → 100 families → 450 People



3 Transform social healthcare through robust partnerships

Impact

- **Increase Referral Partnerships from other NGOs** → increasing the number of patients served
- **Sharing Information** → increase visibility into the patient's continuum of care through the sharing of clinically-relevant information
- **Intentional Collaboration** → bring healthcare NGOs working in Guatemala together annually to share information, foster deep relationships, and create meaningful collaborations to address the most pressing health needs in the community
- **Hundreds of thousands of lives impacted**



4 Digitize healthcare to drive patient care

Impact

- **Increase Efficiency** → move from a pen/paper system to a digital patient management system
- **Increased Visibility** → proper systems increase our ability to better manage patient health and recruit vital medical specialties
- **Increase Likelihood of Surgical Readiness** → visibility into patient comorbidities will increase our ability to bring surgical-ready patients to surgical missions
- **Hundreds of thousands of lives impacted**



5 Train and Inspire Future Health Professionals

Impact

- **Providing Direct Patient Care** → medical professionals provide direct patient care to hundreds of underserved patients under the guidance of an experienced physician
- **Teaching Medicine and Cultural Integration** → medical professionals learn from established providers in the field and develop invaluable understanding of global health and health inequity
- **Building the Volunteer Pipeline** → early exposure to medical missions before completion of school to encourage medical mission service later in life
- **100 medical professionals annually with 10 – 15% continuing medical mission volunteerism later in life**





Mission Investment








Faith In Practice
Life Changing Medical Mission

Assumptions

- Investment in programs and partnerships to increase access to high-quality health and surgical services.
- Investment in talent and process infrastructure to become more effective and efficient in providing care.
- Implement best practices in fundraising to drive revenue and allow for strategic investment in the mission.
- Steady yet conservative growth in the number of missions completed annually .
- Team fees remain flat (\$1,300) to ensure missions remain accessible to volunteers.



Mission Investment

Strategic Priority		Annual Investment	Additional Lives Impacted Annually
1. Increase # of Missions to Serve More Patients (+8 Surgical, +4 Medical Clinics)		\$500,000	5,000+
2. Train and Support 200 Community Health Workers and Navigators		\$300,000	90,000+
3. Transform Social Healthcare through Robust Partnerships		\$100,000	Hundreds of Thousands
4. Digitize Healthcare to Drive Patient Care (Initial Investment of \$300,000)		\$150,000	Hundreds of Thousands
5. Train and Inspire Future Health Providers		\$200,000	100 Health Providers and Thousands of Patients

Total Annual Investment: \$1,250,000
Total Annual Impact: Health and wellness to 100,000+ people

Make A Difference Today

*Your gift will provide health and wellness
to the most underserved families in Guatemala*

www.faithinpractice.org/give





About Faith In Practice

The Unique Experience of Faith In Practice

Fostering Spirituality and Compassion In Patients and Volunteers

“ These patients endure so much — physically and emotionally. They often travel long distances to be seen by the doctors here. They carry so much hope and have so much faith.

And sometimes, we do not have good news for them. But giving them what we have to give — a hug, a smile, that small connection — could reignite that hope; restore their faith. ”

~Faith In Practice Volunteer



Mission

Faith In Practice improves the health and wellness of underserved Guatemalans through health-related medical missions, community-based health initiatives, robust partnerships, and education while fostering spirituality and compassion in our patients and volunteers.



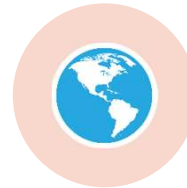
Guiding Principles



SHARING OUR
FAITH THROUGH
DEEDS



ACCEPTANCE,
RESPECT, AND
EMPATHY



APPRECIATION OF
CULTURAL
DIFFERENCES



SHARING OUR
GIFTS AND
TALENTS



SUPPORT AND
NURTURE
VOLUNTEERS



COURTESY



PERSONAL
INTEGRITY

Leadership – Board and Officers



Cary Moorhead, MD, Board Chair
ENT Surgeon, President at Texas ENT,
Team Leader



Shelley Adams
Wealth Manager Advisor, Merrill Lynch



Erik Askenasy, MD
Colorectal Surgeon, Memorial Hermann
Team Leader



Michael Berend, MD
Orthopedic Surgeon & Co-Founder, Midwest
Center for Joint Replacement
Team Leader



Abigail Berkman
Chief Operations Officer and Co-founder of
Avante Surgical Partners



Lola Coke, PhD
Ret'd Dean and Associate Professor, Kirkhof
College of Nursing, FIP Quality Committee Chair

Leadership – Board and Officers



Eric Condon
Independent Construction Contractor
Volunteer



E. Sterling Craig, MD
Plastic Surgeon, Co-founder of Fusi and Craig
Plastic Surgery



Julie Eberly
Nonprofit and fundraising professional, Former
President of Lemonade Day, FIP Development
Committee Co-Chair



Phillip Johnson, MD
Division director, professor and vice-chair Dept. of Internal
Medicine, McGovern Medical School/UTHealth, Team Leader,
FIP Governance Committee Chair

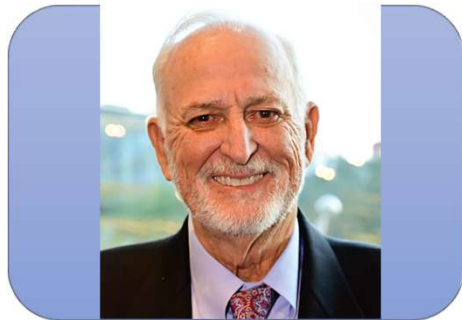


Norman Lewis
Business Owner of Tootsies, Independent
Business Management Consultant



Joseph Lopez
Retr'd Chemical Engineer
Mission Volunteer

Leadership – Board and Officers



Paul McElroy

Chairman, Board of Directors of RDM Inc./
Lupe Tortilla Mexican Restaurants
Co-Founder and CEO of Saltgrass Steakhouses



Robert Morrow, MD

Associate Professor and Executive in Residence
for UT Health School of Public Health, Family
Medicine Physician, Mission Volunteer



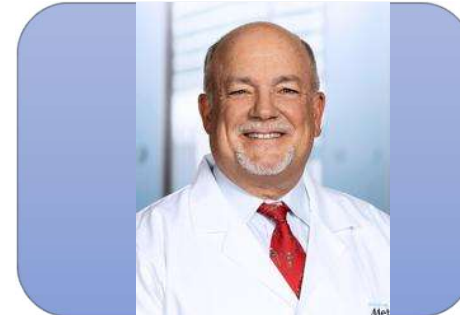
Paul Nazarian, MDiv, Dmin

Sr. Pastor at Northwoods Presbyterian Church, Mission
Volunteer, Chair of Mission Integration Committee



Lucy Parker

Former Director of International Patient Relations
at Texas Orthopedic Hospital, Mission Volunteer



Brian Parsley, MD

Orthopedic Surgeon, Houston Methodist Hospital, Program
Director Adult Reconstruction Fellowship – Dept. of
Orthopedics at Baylor, Dev. Committee Co-Chair, Team Leader

Leadership – Board and Officers



Matthew Pogodzinski, MD

ENT surgeon, SSM Health Dean Medical Group, Medical Director Cleft Palate Clinic-SSM/Dean Clinic, Team Leader



Steven Retzloff

Chairman Allegiance Bank,
FIP Audit Committee Chair



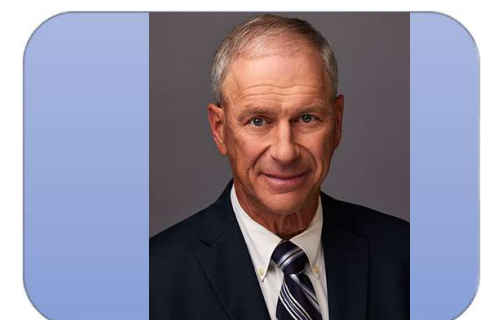
Louis Smith, Jr

Sr. Executive VP, COO Harris Health System



Gary Whitt

Retr'd Senior Vice President at Bank of Texas,
FIP Finance & Administration Chair



Mark Woolf, MD

Retr'd Orthopedic Surgeon, Mission Volunteer

Leadership – Board and Officers



Michelle Bair, PhD
Faith In Practice President & CEO

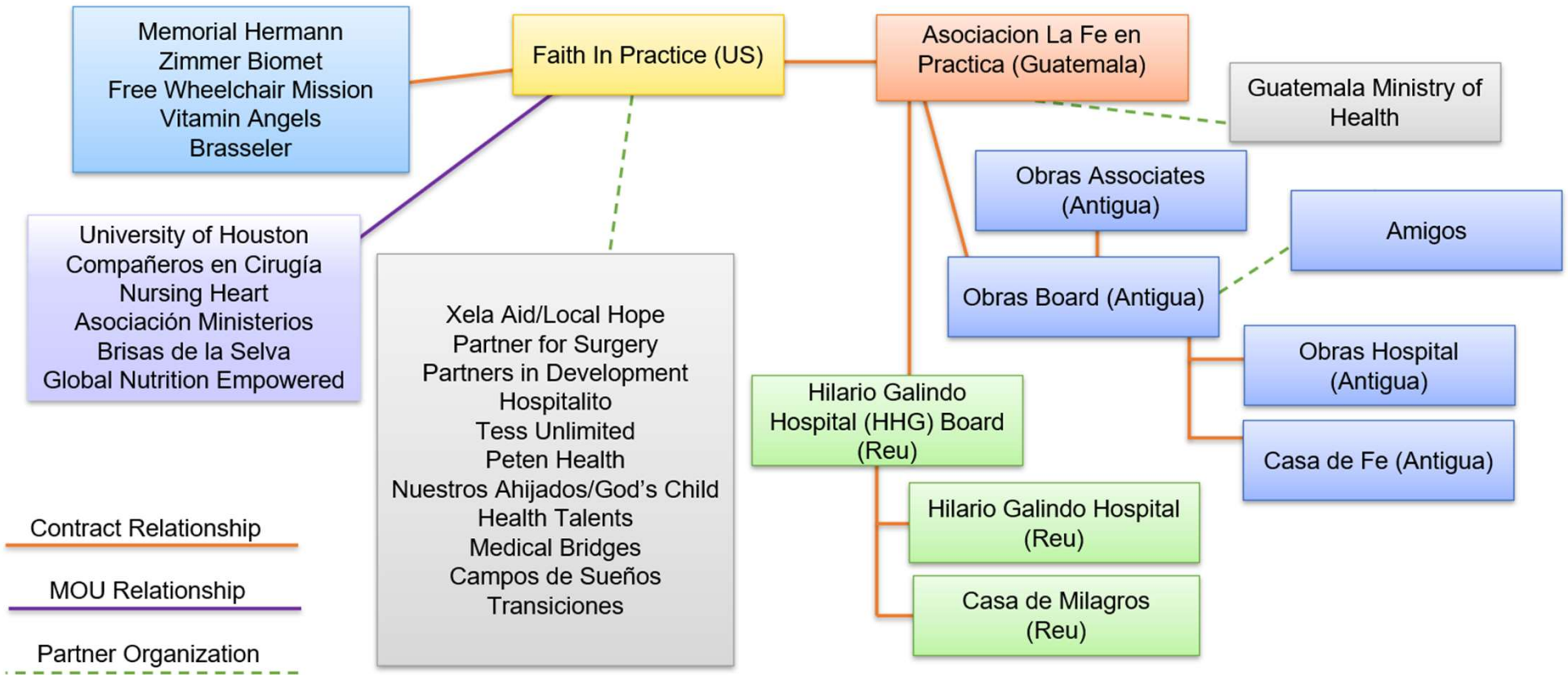


Penny Mock
Faith In Practice Chief Administrative Officer
Treasurer

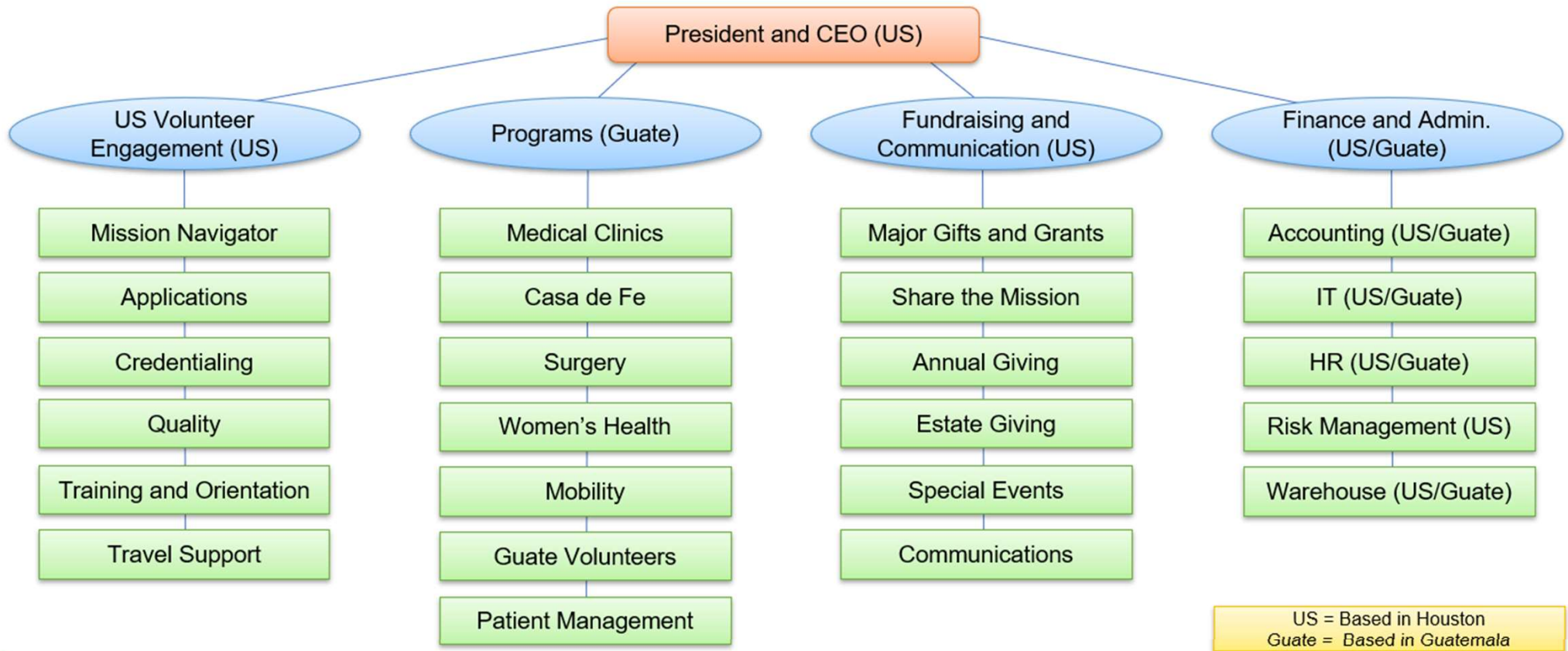


Susan Eyre
Secretary

How We Work in Partnership



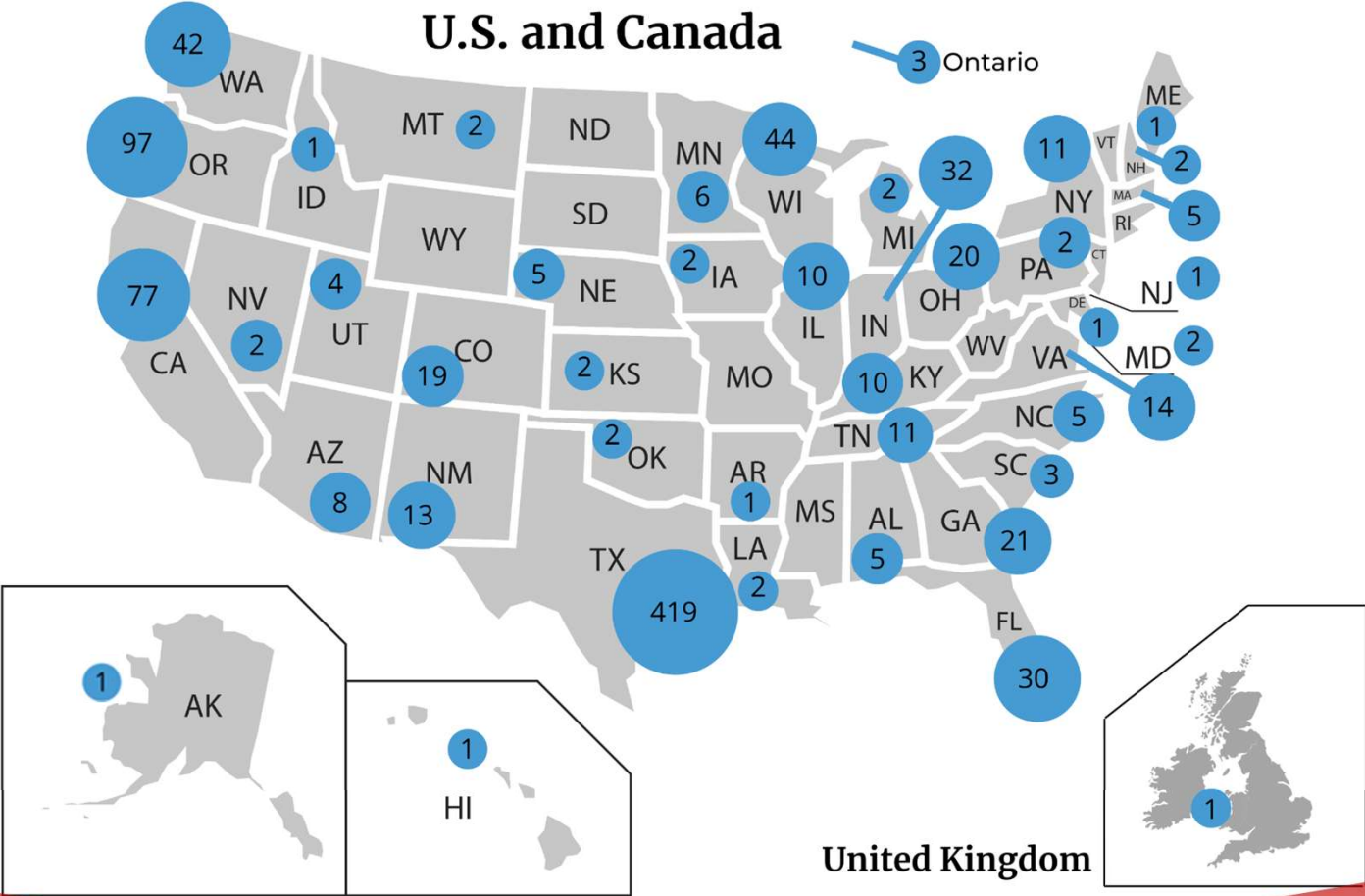
Faith In Practice Structure



Where we Serve



Where our Volunteers Come From



US, Canadian, and UK Volunteers

Through Faith In Practice's network of more than 2,500 active volunteers, we complete 42 surgical missions and medical clinic missions in Guatemala each year. Volunteers bring vital skills and a passion for service that make Faith In Practice unique.

Our volunteers are industry-leading surgeons, primary and specialty care doctors, anesthesiologists, pharmacists, physical and occupational therapists, nurses, dentists, audiologists, and critical medical personnel like scrub techs, sterile processing specialists, imaging experts, and more.

Additionally, our teams include many nonclinical providers who serve in essential roles as chaplains, team administrators, bloggers, photographers, translators, wheelchair techs, and more.

Family, Friends, and Partners

In addition to our volunteers, there are countless family members, friends, and organizations who make a significant impact on our mission and ability to care for those most in need by supporting our volunteers. For them, we are truly blessed and grateful.



Guatemalan Volunteers

More than 300 volunteers from local communities play an important role in identifying patients. They foster trust and understanding between providers and patients.

They regularly accompany patients from their village to the FIP medical clinic or surgical mission and serve as companions and translators.

More than this, these volunteers treat each patient with great love and faith, serving in response to God's call to love one's neighbor as one's self.



Programs and Impact

Medical Clinic Missions

Working with local agencies and communities, Faith In Practice conducts 12 medical clinics throughout Guatemala where healthcare is difficult if not impossible to access. Medical clinics provide vital acute care and serve as a main referral point for our surgical program.

Teams are comprised of family medicine and primary care doctors, as well as pediatricians, orthopedists, gynecologists, and often ENTs, audiologists, and dermatologists.

Each clinic will see 1,500 – 2,500 patients, providing direct patient care for around 20,000 patients annually



Programs and Impact

Surgical Missions

Our extraordinary teams are comprised of the most well-regarded surgeons in the US and governed by a robust quality committee that ensures the highest standards of patient care.

Our surgical program partners closely with Las Obras Sociales del Santo Hermano Pedro Hospital in Antigua and Hospital Hilario Galindo in San Felipe. Our primary areas of surgical focus are orthopedics, gynecology, urology, ENT, reconstructive plastics, general surgery, and cold trauma.

Faith In Practice completes 2,500 surgeries each year.



Programs and Impact

Women's Health

Faith In Practice provides pelvic exams, cervical cancer screenings, prenatal vitamins, and health education to local women. For many women, this is their first opportunity to have a well women exam.

Faith In Practice is a leading trainer in cervical cancer screening techniques. We train local providers on how to detect and treat pre-cancerous cervical cells immediately.

We also provide personal case management support for patients who may receive an advanced cancer diagnosis. We support them in the evaluation process as well as help in connecting them to the one cancer hospital in all of Guatemala.



Programs and Impact

Mobility Clinics

Each year Faith In Practice provides more than 2,600 mobility aids to those most in need – everything from wheelchairs to walkers and canes.

Patients receive a free medical consultation during their visit and medical support, like medication or a referral to a surgeon or specialist if appropriate.

Faith In Practice also helps to connect mobility patients with local physical therapists to receive ongoing support.



Make A Difference Today

*Your gift will provide health and wellness
to the most underserved families in Guatemala*

www.faithinpractice.org/give





Quality Assurance Committee Update

Committee Members

- Lola Coke, RN, ACNS-BC, PhD, Chair
- Erik Askenasy, MD
- James Bruce, MD
- Prisila Foss, MD
- Wilson Hartz, MD
- Gene Huebner, MD
- Michelle James, RN, MN, MBA
- Phil Johnson, MD
- Jorge Mendez, MD
- Matthew Pogodzinski, MD
- Wendy Robinson, JD
- Robert Wells, MD
- Mark Woolf, MD
- Michelle Bair, CEO, FIP, Ex-Officio
- Megan Henry, Staff, FIP
- Jaime de Leon, Staff, FIP
- Abby Maxa, Staff, FIP

Quality Assurance Committee Role

- Active committee since 2007.
- Members represent all disciplines.
- Meets bi-monthly.
- Created a quality assurance manual—not comprehensive to all policies/procedures.
- Key quality issues that arise.

Quality Committee Role

- **Review Unusual Occurrences.**
 - Any occurrence on a trip where patient/volunteers/equipment resulted in an unusual outcome.
- **Review tracking of patients by program directors.**
- **Maintain Quality Manual/other manuals as appropriate.**
- **Update Unusual Occurrence/Variance Forms.**
- **Review qualifications of volunteers as needed.**
- **Consult on health climate in Guatemala.**



General Team Quality Updates in 2024

- **Quality of care same as US standards**
- **Emergency Issues-need to maintain safety, help within Samaritan rule.**
 - Volunteers/FIP Staff Members- take care of them... transfer as needed.
 - Patients/Family Members.
- **Vaccinations/Immunizations.**
 - Illness During Missions Protocol (Covid)
 - Dengue, Malaria, Zika- reinforce with team leaders at Leadership Conference.



General Team Quality Updates in 2024

- **Symptom Surveillance and care by Team Doctor- Illness During Mission protocol**
 - Discuss with In-Country staff how illness is communicated to the team
 - Need to consider privacy of information of volunteer
- **Medical History Form- US volunteers are asked to complete-but is voluntary. Reinforce form is in sealed envelope with contents only made available to team doctor.**
- **Retired Volunteers**
 - Surgeons
 - Nursing
 - Guidelines in Quality Manual
 - In country staff to report how volunteer performed for future decision on returning to a team



General Surgical Issues

- **With Obras expansion, there may be two mission teams present in the same week.**
 - FIP staff should not provide any coverage for the other team-liability issue.
 - Supplies can be discussed with in-country staff.
- **Coverage by Guatemalan Staff after teams leave.**
- **Track patients, conversation with US surgeon.**
- **Quality Follow-up on return cases to FIP resources.**
- **Case Complexity**
 - Deferral to another team.
 - Appropriate follow-up.



Quality Gynecological Issues

- Preventing infection post-operatively- discuss number of cases with in-country staff to ensure needed antibiotics are available.
- Home discharge with oral antibiotics.



Medical Team Issues

- Formulary update
- Created Medical team Unusual Occurrence
 - Complete for any issue that arises so Quality Committee can evaluate.



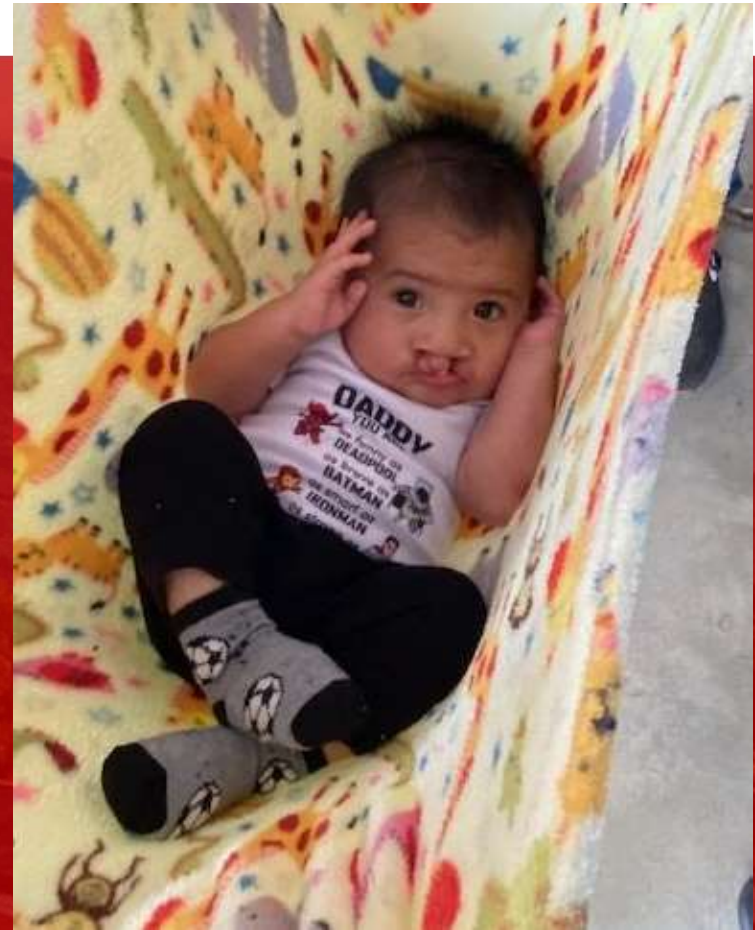
Quality Orthopedic Issues

- Ortho Committee created including Ortho Trauma.
- Continuity of care –team a month.
- Relationship with other teams.
- Streamline surgical packs.
- Increase in kind donations—help from teams geographically.
- Screening clinics—1/2 day to triage for next team.
- Spine surgical team.
- Succession planning.
- Medical teams will include an ortho doc for patient selection.



Quality ENT and Nursing Issues

- Cleft cases-are referred to in-country surgeons.
- Nursing roles- the right nurse for the role
 - PACU expertise.
 - Expertise by patient population- Pediatric vs. Adult
 - Circulator expertise.



Quality Anesthesia Issues

- Anesthesia providers- need 2 MD Anesthesiologists on each team
- Anesthesia Assistant role
- Anesthesiologist/CRNA ratio-1:4
- Equipment/Supplies (Stat Cart)- need to review on Sunday
 - Maintenance of cart varies between HHG and Obras.
 - HHG: FIP manages- toolbox for emergency and malignant hyperthermia
 - Obras: Hospital manages
- Anesthesia triage form
- Ultrasound and glidescopes will be available



Communication

- Ensure permission is obtained from Guatemalan patients/staff in photos.
- Importance of confidentiality during uncertain times.



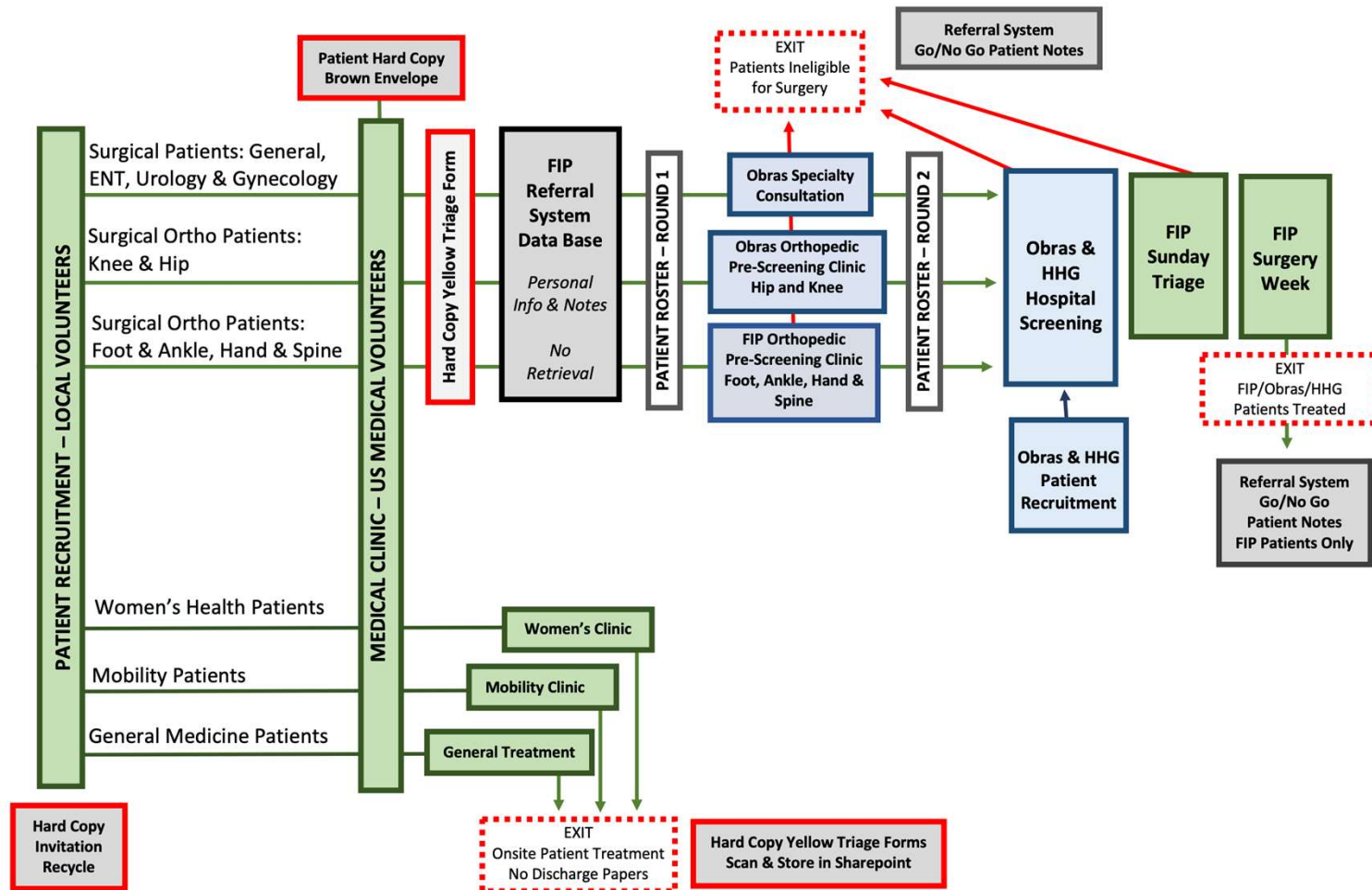
Questions?

- Things to discuss?
- Team Issues?



Faith In Practice Patient Story

Faith In Practice Patient Journey





Volunteer Engagement Team

Growing Support for the Lifeblood of Faith In Practice



Faith In Practice
Life Changing Medical Mission

Volunteer Engagement Team 2024 Objectives



- **Updated volunteer portal launching soon.**
- **Consistent engagement and additional touchpoints with volunteers throughout the year outside of their mission.**
 - Connect with first-time volunteers for contribution recognition and gaining feedback on their experience.
 - Quarterly communication from Faith In Practice sharing organizational updates.
- **More robust post-trip assessment and feedback provided to Team Leaders .**
- **Development of Service Line Leader Program.**
 - First step toward more formalized succession planning and knowledge transfer.
 - Targeting end of 2024 to have SLL positions defined and filled.

VET Initiatives 2024 and Beyond

- Explore additional opportunities for ongoing Team Leader support.
- Grow volunteer pool and better identify and place volunteers seeking to serve with Faith In Practice but do not have a team.
- Increase first-time volunteerism and raise percentage of volunteers returning to serve.
- Continued cultivation of the Service Line Leader program.





Blogging & Share The Mission



Faith In Practice
Life Changing Medical Mission

Blogger Role Adjustments

Blogger Role Adjustments

- Faith In Practice Social Media
 - Timing & Content
 - FIP – Produce 1 post at the beginning of trip, 1 at the end
- Blog
 - 1 blog post – due the Wednesday following the trip
- Patient Stories
 - Interview 2 patients
- Volunteer Stories
 - Interview 2 volunteers (ideally 1 new and 1 veteran)
- Photographs
 - Collect photos and submit (include photos for patients and volunteers)
 - Other team members can post and tag FIP
- Blog use and follow-ups
 - We will send the blog and patient story to all donors who gave to the team after your trip is complete



Blogging – Patient Story Form

 **FAITH IN PRACTICE**
PATIENT STORY FORM

Please collect two patient stories during your time in Guatemala that showcase the impact of your Team's work. Respect patient confidentiality and obtain their consent. Please submit the two completed Patient Story Forms, along with photos of the patients by the last day of your trip. Thank you for capturing these powerful narratives and contributing to our mission.

Patient's Name:

Patient's Last Name:

Age:

Gender:

Hometown:

What is ailing the patient?:

(Ex. When did it start, what happened, how is it impacting their life and the lives of their loved ones?)

Describe the treatment plan and next steps your team developed for the patient? How will this positively impact the patient?

Will it improve their mobility/ability to work?

How does the patient's illness affect their daily life and the lives of their loved ones?

What was the most memorable moment you had with the patient during your mission trip?

What was the most memorable moment you had with the patient during your mission trip?

Please provide any meaningful quotes from the patient, doctors or family member.

If there is anything else you would like to share to further enrich the patient's story, please feel free to provide those details in the box below.

This could include personal experiences, unique perspectives, or any other relevant information

Thank you so much for taking the time to fill out this form and for sharing your meaningful and impactful experience with us. We greatly appreciate your dedication and valuable contribution to Faith In Practice's mission and the care and hope you have provided to those in need.

Share The Mission Additions

Share The Mission Toolkit

- <https://www.faithinpractice.org/stm-toolkit/>
 - Can be found under the 'volunteer' tab on our website for tools to help you Share The Mission
 - Set Up Your Fundraising Page (updated)
 - Manage Your Page and Check Donations (updated)
 - Letter/Email/Social Media Templates (updated)
 - **Donor Form (new)**
 - **FAQ (new)**
 - **Important Info to Know (new)**



Share The Mission Additions

What is Share The Mission?

Share The Mission (STM) is our volunteer fundraising program and depend on the funds raised through STM to support the costs of care for each patient.

Although only you and your team travel, your family and friends can participate in this life-changing medical mission by providing desperately needed healthcare in Guatemala. Their prayers and donations make a difference for all Faith In Practice patients by directly supplying:

- Medical supplies and medications
- Pre-and post-operative screenings and follow-up care
- Transportation, housing, and food for patients and Guatemalan volunteers
- Infrastructure and administrative costs ensuring efficient care
- Wheelchairs, mobility aids, prostheses, and hearing aids
- Special case management and a referral system

- BECOME A VOLUNTEER
- TRIP DATES
- VOLUNTEER FAQS
- VOLUNTEER RESOURCES
- VOLUNTEER PORTAL LOGIN
- TEAM LEADER PORTAL
- SHARE THE MISSION TOOLKIT**

Fundraising Resources

Fundraising Page

Manage Your Page and Check Donations

To Find Your Page

- 1 Click the link that corresponds with your travel date:
 - Traveling in 2023? Click here
 - Traveling in 2024? Click here
- 2 Click "LOGIN" in the top right corner
- 3 Log in to your Classy account:
 - Remember your Classy password is not linked to your Volunteer Portal account, so you may have set a different password for this account.
- 4 After login, click on "Go To..." in the top right corner of the page.
- 5 Select your fundraising page from the drop-down menu.

Once In Your Page

Manage
Click the Manage button to check your donations and your photo, story or headline. *Note: the Manage button only appears after you have logged in to your Classy account.*

View
Click the "View" button to see how your fundraising page appears to others.

Details
Change your photo, fundraising end date and notification settings.

Email
Access email templates to share your trip with friends and family. *Note: email templates can be found on the volunteer portal under STM resources.*

Donations
To view a detailed list of your donations.

Story
Edit the text that appears on your fundraising page, add photos or videos.

Set Up Your Page

Manage Your Page

Share The Mission Additions

Share Your Page

Letter/Email

Dear Friends,

I'm going on a medical mission trip to Guatemala with Faith In Practice in **[INSERT TRIP MONTH]**. I will serve with the **[INSERT TEAM # and NAME]** team, and we will provide urgently needed care to patients in **[INSERT TRIP LOCATION]**, Guatemala.

As a volunteer, I pay for my travel fees and stay in Guatemala. However, my team will rely on donations to fund expenses like medicines, supplies, patient care and transportation to make this mission possible. These donations make it possible for Faith In Practice volunteer teams to provide the best possible care to our patients from diagnosis to recovery. (If you've volunteered in the past, consider sharing a patient story and your experience on that trip to illustrate the impact of your work.)

If you would like to join me in this mission by making a donation, I would greatly appreciate your support. Every dollar makes a difference in the lives of these patients. You can give by any of the following methods:

- Visit my online fundraising page **[LINK TO YOUR FUNDRAISING PAGE]**.
- Send a check to Faith In Practice at 7500 Beechnut Street, Suite 208, Houston, TX 77074. Please be sure to include my name and trip number **[TRIP NUMBER]** at the bottom of the check so the gift will be credited to my fundraising page.
- Call Faith In Practice at 713-484-5591 to make a donation over the phone.

Thank You

Dear Family/Friends,

I am back from my life-changing mission trip to **[INSERT LOCATION]** and I wanted to take a moment to express my heartfelt gratitude to each one of you who helped make it possible through prayers or donations. During the course of my trip, we treated **[# OF PATIENTS, # OF SURGERIES]** and received countless hugs and smiles of hope in return. **[INSERT PATIENT STORY, PICTURES]**

I couldn't wait to share stories and pictures from my trip to show the impact of your support. Serving with Faith In Practice has changed my life and the lives of so many patients and it wouldn't have been possible without you.



Support My Mission Trip with Faith In Practice

***REQUIRED** – Be sure to fill out the form with your name, your team name, and your Share The Mission URL before using!

***Volunteer Name :**

***Volunteer Team Name/Number :**

***Personal STM URL :**

How can you support my medical mission trip to Guatemala? You can make a donation to Faith In Practice one of 3 simple ways:



Online

1. Go to my personal URL and donate on my page (URL above)
2. Go to faithinpractice.org
 - o Click "Give To A Team" in the upper right corner of the homepage
 - o If necessary, select the year my mission trip takes place
 - o On the Share The Mission Homescreen, click "Donate Now"
 - o Please find my name in the box to make sure your gift is credited to my page
 - o Don't forget to check back in on my personal page (URL above) to see my progress and comment on my page!



Over the Phone

1. Call Faith In Practice at: 713-814-5591
 - o Be sure to provide my name and my teams name (listed above)



Send a Check

1. Mail a check to Faith In Practice directly at:
 - o 7500 Beechnut Street, Suite 208
Houston, TX 77074
 - o Make the check payable to [Faith In Practice](#)
 - o Please include this form with your mailed check and fill out the boxes below:

Donor Information

NAME (First, Last)	PREFERRED NAME
STREET ADDRESS	EMAIL
CITY, STATE, ZIP	PHONE

Share the Mission & Classy



New Functionality

- Activity Feed activation
 - The Activity Feed is now activated
 - Thanking Donors on the platform – You, your team, and FIP
- Anonymous Donors
 - Anonymous Amount
 - Anonymous Names

Faith In Practice's new outreach to STM Donors

- Donor Outreach
 - Goal of 100% team participation by creating individual STM pages
 - Goal of donor outreach from FIP on behalf of the page creator

A screenshot of an activity feed. It shows three entries: 1. A donation from Joe Velez for \$100.00 with the message "Good luck and be safe!!!" and a timestamp of "24 days ago". 2. A donation from Susan Richardson for \$100.00 with the message "Savsnah, I commend you on volunteering for such a great cause. You are Amazing!" and a timestamp of "24 days ago". 3. A donation from Darrick DeViney for \$50.00 with a timestamp of "25 days ago" and a comment icon showing "1". Below these is a message from "Faith In Practice" with the text "Thank you for your support of Faith In Practice!" and a timestamp of "20 days ago", along with a "Delete" link.

Do you need further assistance?

If you need assistance with setting up your Share The Mission Page or general questions, please contact Mindy Stanford.

Mindy Stanford – Development Manager
mstanford@faithinpractice.org
713-814-5591

Values-based Estate Planning

“Remember this: Whoever sows sparingly will also reap sparingly, and whoever sows generously will also reap generously. Each of you should give what you have decided in your heart to give, not reluctantly or under compulsion, for God loves a cheerful giver.”

2 Corinthians 9:6-8



Planning for Your Future

Why Values-based Estate Planning?

“Your estate plan is the single greatest financial impact you can have on your family and the largest financial transfer you will ever control. Planning for this transfer can be profoundly liberating and positive when it breathes life and possibility into the future.”

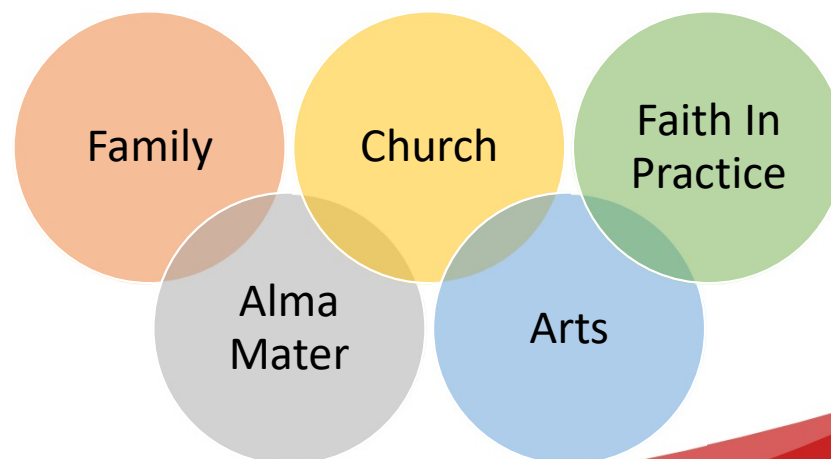
– *Eddie Thompson, Ed.D., FCEP*
Founder, Thompson & Associates



Planning for Your Future

How does the Planning Process Work?

- You work directly with an Estate Planning partner from Thompson & Associates
- You start with your values
- Values are clarified
- Assets are quantified
- Preliminary recommendations are reviewed
- Final recommendations are presented



Planning for Your Future

- Faith in Practice will provide planning services at **NO COST** to you
- It's a good opportunity to review, up-date or create a plan
- Thompson & Associates provide estate planning **education** and **advice**
- Thompson & Associates **does not** sell products
- Thompson & Associates will no solicit gifts for Faith in Practice, yet 6 out of 10 will include philanthropic gifts in their estate plan
- Thompson & Associates' obligation is to the needs of the planning clients
- Thompson & Associates' conversations are **CONFIDENTIAL**
- Thompson & Associates' services are provided with **NO** obligation

**Thompson & Associates confidential planning sessions are in person or via video conferencing.*



Vince McElligott, FCEP
Executive Vice President
Thompson & Associates

Planning for Your Future

Why Is Faith In Practice Offering This?

- Providing a complimentary service to our volunteers, donors, and advocates who have given so much to our Mission.
- About 68% of all Americans do not have a will.
- Empowering our volunteers, donors, and advocates through education to make a lasting impact on their families and the causes they care about most.



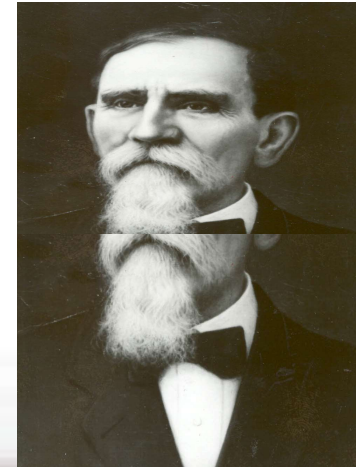
Estate Planning BINGO! Get 5 in a Row to Win!

Created a living will document	Named executors in your last will and testament	Understand the tax consequences of your estate plan	Funded your trust properly	Understand what is meant by the term "probate process"
Have up to date power of attorney documents	Understand which assets pass by contract	Named guardians for minor children	Qualify for the federal estate tax	Have children with different abilities to manage wealth
Have an independent life insurance policy	Have reviewed my plan in the last 10 years	Free Space!!!	Take advantage of 401K charitable qualified distribution	Have appreciated stock
Have heirs that will have an income tax burden at my passing	Understand how to plan for a special needs dependent	Have properties in multiple states	Assets that pass by contract list preferred beneficiaries	Have a blended family
Have a transfer of death designation for your home	Understand which assets pass through probate	Private business owner	Have reviewed my plan since retirement	Know how to plan for mineral or land rights

The Impact of Estate and Planned Gifts

George Hermann

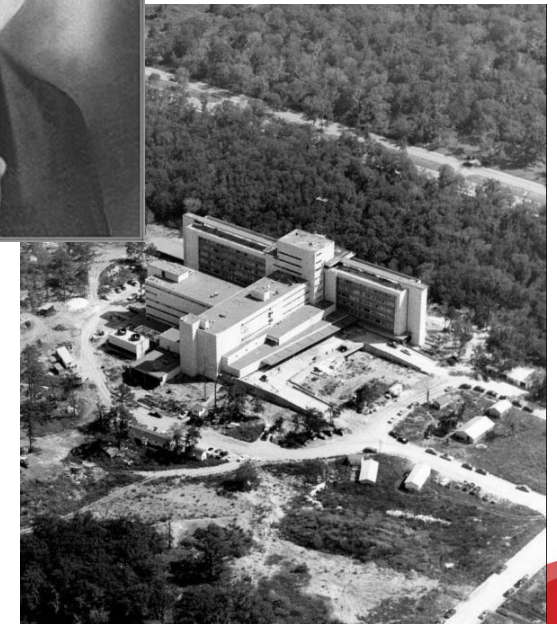
- Oilman and philanthropist, George Hermann, was born in Houston, TX, on August 6, 1843.
- He operated a sawmill, in what is now Hermann Park, sold cordwood, and engaged in the cattle business. Around 1885 he went into the real estate business. The discovery of oil in Humble in 1903 made him a millionaire.
- Before his death, he donated Hermann Park to the city of Houston. He died at Johns Hopkins Hospital in Baltimore, MD, on October 21, 1914, and was buried in Houston.
- The bulk of his estate, valued at \$2.6 million, was willed to the city of Houston for the erection and maintenance of **Hermann Hospital**, which became the cornerstone of the **Texas Medical Center**.



The Impact of Estate and Planned Gifts

Monroe Dunaway Anderson

- Banker and cotton trader from Tennessee (1873). Built Anderson, Clayton and Company, the largest cotton company in the US (1904), with his brother. Relocated to Oklahoma and then to Houston as Galveston was the largest cotton port in the country.
- In 1938, suffered a stroke and was treated at the Baptist Memorial Hospital (one of 2 founding hospitals that would create the Memorial Hermann Health System).
- Concerned about losing funds to estate taxes if something happened to him, he created the M. D. Anderson Foundation (1936). At his death, the Foundation received \$19M from his estate (1939).
- The MD Anderson Foundation agreed to match the Texas Legislature's funding of \$500K to build a cancer hospital and research center under one condition – that it be built in the Texas Medical Center. This agreement created the **MD Anderson Cancer Center** (1941).



The Impact of Estate and Planned Gifts

John Sealy

- A Pennsylvania native, Mr. Sealy moved to Texas in 1846 seeking business opportunities. He built his fortune in banking, shipping, railroads, and cotton.
- John Sealy left \$50,000 of his estate to public charity (1884). In 1887, his relatives directed this gift to create a new city hospital – [John Sealy Hospital in Galveston](#).
- The Sealy family decision to build a hospital swayed Texas to finally build the University of Texas medical school in Galveston (voted on in 1881). The [University of Texas Medical Branch](#) opened in 1891 and John Sealy Hospital became its primary teaching hospital.
- The University of Texas assumed control of John Sealy Hospital in 1941 and it continues as a state hospital today.



The Impact of Estate and Planned Gifts

Michael Bloomberg

- In 1964, Michael Bloomberg graduated from **Johns Hopkins University** in Baltimore, MD. In 1965, he made his first gift to the university: \$5.
- Since then, the billionaire businessman and former mayor of New York, who is worth \$94.5 billion according to Forbes (2023), has donated more than \$3.35 billion to the school.
- His 2018 \$1.8 billion gift to Johns Hopkins University is the largest philanthropic gift ever made to an American academic institution.



Ready to Plan?

To sign up to meet with Vince McElligott, please contact Michelle Bair at mbair@faithinpractice.org