

Pfizer and The European Innovation Partnership on Active and Healthy Ageing (EIP on AHA) Announces

Project CHANGE - Clinical practice oriented cHange solutions towards Active aNd healthy aGEing

Competitive Grant Program

I. Background

Pfizer Global Medical Grants (GMG) supports the global healthcare community's independent initiatives (e.g., research, quality improvement or education) to improve patient outcomes in areas of unmet medical need that are aligned with Pfizer's medical and/or scientific strategies.

Pfizer's GMG competitive grant program involves a publicly posted Request for Proposal (RFP) that provides detail regarding a specific area of interest, sets timelines for review and approval, and uses an external review panel (ERP) to make final grant decisions. Organizations are invited to submit an application addressing the specific gaps in practice as outlined in the specific RFP.

For all quality improvement grants, the grant requester (and ultimately the grantee) is responsible for the design, implementation, and conduct of the independent initiative supported by the grant. Pfizer must not be involved in any aspect of project development, nor the conduct or monitoring of the quality improvement program.

The European Innovation Partnership on Active and Healthy Ageing (EIP on AHA) is an initiative launched in 2013 by the European Commission to foster innovation and digital transformation in the field of active and healthy ageing, aiming to strengthen EU research and innovation by bringing together a range of relevant actors at EU, national, and regional levels across different areas to handle specific societal challenges and involve all the innovation chain levels.

On September 2018 Pfizer has formalized the partnership with EIP on AHA submitting a formal commitment on the area of Adherence to medical prescription, Integrated care, and Frailty; as a result, Pfizer conveyed an Advisory Board composed of EIP-AHA members, Pfizer, and other experts, with the aim to:

- Identify clinical practice and systems-related challenges and gaps in the EU.
- Develop a comprehensive strategy addressing healthy ageing in patients with non-communicable disease and particularly affected by hypertension and chronic pain, focusing on:
 - Adherence to prescription and medical plans;
 - Integrated care;
 - Prevention of functional decline and frailty;
- Identify and prioritize possible types and characteristics of specific projects that could address the challenges and gaps identified in the two objectives above.

II. Eligibility

Geographic Scope:	Europe
Applicant Eligibility Criteria	<ul style="list-style-type: none"> The following may apply: medical, dental, nursing, allied health, and/or pharmacy professional schools; healthcare institutions (both large and small); professional associations; government agencies; Research facilities and other entities with a mission related to healthcare improvement. More information on organizations eligible to apply directly for a grant can be found at http://www.pfizer.com/files/IGLC_OrganizationEligibility_effJuly2015.pdf. Collaborations within institutions (e.g., between departments and/or inter-professional), as well as between different institutions / organizations / associations, are encouraged. Please note all partners must have a relevant role and the requesting organization must have a key role in the project. For programs offering credit, the requesting organization must be the accredited grantee.

III. Requirements

Date RFP Issued	<ul style="list-style-type: none"> March 4, 2019
Clinical Area	<ul style="list-style-type: none"> It is critical to address the global burden of non-communicable diseases (NCDs) by making trusted, quality health solutions available to every patient, everywhere. Despite significant medical advancements in the prevention and treatment of chronic conditions. NCDs such as cardiovascular disease, chronic pain, urology disorders, and glaucoma continue to be the leading causes of death and disability globally, and affect healthy ageing.
Specific Area of Interest for this RFP:	<ul style="list-style-type: none"> It is our intent to support projects proposing translational approaches, in particular initiatives that improve clinical practice for ageing populations that address the issues of adherence to prescription and medical plans, integrated care, or prevention of functional decline and frailty. The approaches should be based on scientific evidences and use mature technologies/methodologies to improve the clinical outcomes and/or the quality of life of individuals (for instance in terms of Disability-Adjusted Life Years - DALYs). Projects focusing on reducing, identifying, or monitoring risk factors (behavioural, biological, societal...) that increase the chances to develop the conditions are also of interest. Clinical practice oriented solutions for better patient outcomes will be preferred for consideration. It is expected that proposed projects will have to identify and examine an intervention/strategy to promote healthy ageing

	<p>that has the potential to reduce NCD burden in Europe in one or preferably more of the following five ways:</p> <ol style="list-style-type: none"> i. Using existing evidence of what works in primary prevention in high risk individuals and/or secondary prevention; ii. Incorporating situational analysis of community needs; iii. Focusing on the enablers/opportunities and critical barriers (e.g. access, awareness, knowledge, skills, adherence) to implement tactics as demonstrated by the evidence and overcome barriers at the least cost (e.g. using population attributable risk); iv. Having measurable outcomes and data collection to demonstrate the impact of the initiative; v. Recognizing that the intervention must be adapted to usual practice, fit within existing health service context, and be sustainable. <ul style="list-style-type: none"> • Multi-disciplinary collaborations are encouraged when appropriate, but all partners must have a relevant role. • It is expected that projects will be evidence-based (education and/or quality improvement) and the proposed research/evaluation will follow generally accepted scientific principles. During review the intended outcome of the project is given careful consideration and, if appropriate based on the project goal, projects with the maximum likelihood to directly impact patient care will be given high priority. Projects including an educational element can find more information on principals of learning and behavior change for health professionals at www.pfizer.com/files/HealthProfessionalsLearningandBehaviorChangeAFewPrinciples.pdf. • There is a considerable amount of interest in receiving responses from projects that utilize system-based changes. Although educational efforts for grantees and patients may be entirely appropriate components in responses to this RFP, projects that include an overt description of system changes will be given high priority. • It is not our intent to support clinical research projects unless they specifically target clinical practice and system improvements. Projects evaluating the efficacy of therapeutic or diagnostic agents will not be considered. Information on how to submit requests for support of clinical research projects can be found at www.Pfizer.com/iir.
<p>Target Audience of Project Results:</p>	<ul style="list-style-type: none"> • Healthcare organizations public or private, particularly Primary Care Physicians and Pharmacists. • Patient advocacy groups

<p>Disease Burden Overview:</p>	<p>NCDs</p> <p>At present, there are about 166 million people aged 60 years and older in Europe, more than double compared to the 1950s, and one out of five is older than 80. People aged 60 or older represent 22% of all Europeans, a proportion that is double compared to the rest of the world.</p> <p>In Europe, the main NCDs, including diabetes, cardiovascular diseases, cancer, chronic respiratory diseases, and mental disorders, account for an estimated 86% of the deaths and 77% of the disease burden. Of the six WHO regions, the European Region is the most affected by NCDs.</p> <p>The World Health Organization defines healthy ageing as “the process of developing and maintaining the functional ability that enables wellbeing in older age”. Addressing the challenges to healthy ageing is becoming an important issue in Europe, and solutions targeted towards prevention and appropriate treatment of NCDs and slowing of functional decline are of urgent importance. Clinical practice oriented solutions are needed to help increase disease awareness and patient empowerment, improve treatment adherence, and optimize clinical outcomes for patients with NCDs.</p>
<p>Recommendations and Target Metrics:</p>	<ul style="list-style-type: none"> • European Society of Cardiology guidelines: www.escardio.org/Guidelines/Clinical-Practice-Guidelines • European Medicines Agency. Geriatric Medicines Strategy. https://www.ema.europa.eu/en/human-regulatory/research-development/medicines-older-people • European Glaucoma Society Guidelines https://www.eugs.org/eng/egs_guidelines_reg.asp • European Association of Urology Guidelines https://uroweb.org/guidelines/ • Multimorbidity care model: Recommendations from the consensus meeting of the Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS). Palmer et al, Healthy Policy 2018;122: 4-11.
<p>Gaps Between Actual and Target, Possible Reasons for Gaps:</p>	<p>Initiatives that solely focus on knowledge improvement (e.g., journal clubs, grand round programs, lectures) will not be eligible for consideration. We are seeking applications that span a broad range of implementation levels. Applicants are encouraged to submit quality improvement research, health services research and/or educational research proposals that evaluate the effectiveness, barriers and/or outcomes associated with ageing which could include, but are not limited to:</p> <ul style="list-style-type: none"> • Drug adherence to increase awareness and communicating ways to prevent and manage NCDs. • Integrated care model solutions that focus on shared decision-making and objectives, the use of care managers, patient-centered care, and evidence-based pathways of care. • The prevention of functional decline and frailty strategies and solutions for interventions at both at the individual and population level.

Barriers:	Barriers	Behaviors	Effects
	Clinical practice	Patients receiving disjointed care from different specialists or different levels of care	Over-prescribing Lack of care coordination Greater focus on physical health rather than mental health
	Patient	Lack of understanding by the patient (often due to cognitive impairment or hearing problems) Lack of communication training for physicians	Patient may be unwilling to disclose sensitive information or might feel judged Responsibility of the patient (e.g., self-care and behaviour change)
	System	Financial and organizational challenges of healthcare systems (staff shortages, ageing workforce...) Non cost-effective healthcare management based on the acute care rather than chronic care No health data digitalization Ageism	Inappropriate polypharmacy, fragmented healthcare Highest deleterious impact on fragile, multimorbid patients No life-course approach Different access to treatment options depending on patient's age
	Technology	Limited involvement of patients and healthcare providers in the development of Information and Communication Technology (ICT) solutions ICT solutions too focused on specific clinical settings Resistance of healthcare providers in the use of certain technologies in clinical practice	Poorer clinical outcomes Inefficient systems Poor adherence to drug and treatment plans
Current European Efforts to Reduce Gaps:	<p>EIP-AHA is a communication and information hub for all actors involved in Active and Healthy Ageing through Europe promoted by the European Commission (https://ec.europa.eu/eip/ageing/home_en)</p> <p>Medicines optimisation in patients in intermediate care, nursing homes, and domiciliary care settings. https://ec.europa.eu/eip/ageing/commitments-tracker/a1/medicines-optimisation-patients-intermediate-care-nursing-homes-and_en</p> <p>QUELYPHARM - Qualification of Elderly Polypharmacy https://ec.europa.eu/eip/ageing/commitments-tracker/a1/quelypharm-qualification-elderly-polypharmacy_en</p>		

	<p>Information technology and adherence in ageing population with chronic diseases and polypharmacy https://ec.europa.eu/eip/ageing/commitments-tracker/a1/information-technology-and-adherence-ageing-population-chronic-diseases-and_en</p> <p>Scale-up and replication of ICT tools able to facilitate patient/citizen empowerment and to support the integration process https://ec.europa.eu/eip/ageing/commitments-tracker/b3/scale-and-replication-ict-tools-able-facilitate-patientcitizen-empowerment_en</p> <p>Impact of Community-based Program on Frailty Prevention and frailty Mitigation (ICP – FPM) https://ec.europa.eu/eip/ageing/commitments-tracker/a1/impact-community-based-program-frailty-prevention-and-frailty-mitigation-icp-_en</p> <p>Needs assessment of older people; frailty research; participatory research on age friendly environments https://ec.europa.eu/eip/ageing/commitments-tracker/a3/needs-assessment-older-people-frailty-research-participatory-research-age_en</p> <p>Ageing and Healthy Eating: Omics integration to promote Health https://ec.europa.eu/eip/ageing/commitments-tracker/b3/ageing-and-healthy-eating-omics-integration-promote-health_en</p> <p>Development of products and technologies helping to maintain health and quality of life https://ec.europa.eu/eip/ageing/commitments-tracker/b3/development-products-and-technologies-helping-maintain-health-and-quality_en</p> <p>Integrated care pathways supporting multi-morbid patient journeys: The case of diabetes care https://ec.europa.eu/eip/ageing/commitments-tracker/b3/integrated-care-pathways-supporting-multi-morbid-patient-journeys-case_en</p>
<p>Expected Approximate Monetary Range of Grant Applications:</p>	<ul style="list-style-type: none">• Individual projects requesting up to \$200,000 USD will be considered.• The amount of the grant Pfizer will be prepared to fund for any project will depend upon the external review panel's evaluation of the proposal and costs involved, and will be stated clearly in the approval notification.

<p>Key Dates:</p>	<ul style="list-style-type: none"> • RFP release date: March 4th, 2019 • Letter Of Intent (LOI) due date: April 19th 2019 • Please note the deadline is midnight Eastern Time (New York, GMT -5). • Review of LOIs by External Review Panel: May 20th, 2019 • Anticipated LOI Notification Date: May 31st, 2019 • Full Proposal Deadline: July 19th, 2019 • *Only accepted LOIs will be invited to submit full proposals • Please note the deadline is midnight Eastern Time (New York, GMT -5). • Review of Full Proposals by External Review Panel: September 2019 • Anticipated Full Proposal Notification Date: October 2019 • Grants distributed following execution of fully signed Letter of Agreement • Period of Performance: Up to 24 months
<p>How to Submit:</p>	<ul style="list-style-type: none"> • Please go to www.cybergrants.com/pfizer/loi and sign in. First-time users should click “REGISTER NOW”. • Select the following Competitive Grant Program Name: “Project Change – NCDs” • Requirements for submission: Complete all required sections of the online application and upload the completed LOI template (see Appendix). • If you encounter any technical difficulties with the website, please click the “Need Support?” link at the bottom of the page. <p>IMPORTANT: Be advised applications submitted through the wrong application type and/or submitted after the due date will not be reviewed by the committee.</p>
<p>Questions:</p>	<ul style="list-style-type: none"> • If you have questions regarding this RFP, please direct them in writing to the Grant Officer, Angelo Carter (angelo.carter@pfizer.com), with the subject line “Project Change – NCDs”
<p>Mechanism by which Applicants will be Notified:</p>	<ul style="list-style-type: none"> • All applicants will be notified via email by the dates noted above. • Applicants may be asked for additional clarification or to make a summary presentation during the review period.

References:

1. Causes of Death 2008 [online database]. Geneva, World Health Organization (http://www.who.int/healthinfo/global_burden_disease/cod_2008_sources_methods.pdf.)
2. Lim SS, vos T, Flaxman AD, Danaei G, et al A comparative risk assessment of burden of disease and injury attributable to 67 risk factors and risk factor clusters in 21 regions, 1990-2010 : a systematic analysis for the Global Burden of Disease Study 2010. *Lancet*. 2012; 380(9859):2224-60
3. World Health Organization. Global status report on non-communicable diseases 2010. Geneva, World Health Organization, 2011.
4. Ollila E: Global health priorities - priorities of the wealthy? *Global Health*. 2005; 1:6-10.1186/1744-8603-1-6.
5. Bono F, Matranga D. Socioeconomic inequality in non-communicable diseases in Europe between 2004-2015: Evidence from the Share Survey. *European Journal of Public Health*. 2019;29:105-110.

IV. Terms and Conditions

Please take note every Request for Proposal (RFP) released by Pfizer Independent Grants for Learning & Change (IGLC), as well as a RFP released jointly with a Partner(s), is governed by specific terms and conditions. Click [here](#) to review these terms and conditions.

Appendix A

Letter of Intent Requirements

The Letter of Intent (LOI) will be accepted via the online application. When answering the LOI questions in the application please keep the following in mind:

Goals and Objectives	<ul style="list-style-type: none"> Briefly state the overall goal of the project. Also describe how this goal aligns with the focus of the RFP and the goals of the applicant organization(s). List the <i>overall</i> objectives you plan to meet with your project both in terms of learning and expected outcomes. Objectives should describe the target population as well as the outcomes you expect to achieve as a result of conducting the project.
Assessment of Need for the Project	<ul style="list-style-type: none"> Please include a quantitative baseline data summary, initial metrics (e.g., quality measures), or a project starting point (please cite data on gap analyses or relevant patient-level data that informs the stated objectives) in <i>your</i> target area. Describe the source and method used to collect the data. Describe how the data was analyzed to determine that a gap existed. If a full analysis has not yet been conducted, please include a description of your plan to obtain this information. The RFP includes a national assessment of the need for the project. Please do not repeat this information within the LOI (you may reference the RFP, if necessary). Only include information that impacts your specific project, linking regional or local needs to those identified on the national basis, if appropriate.
Target Audience	<ul style="list-style-type: none"> Describe the primary audience(s) targeted for this project. Also indicate whom you believe will directly benefit from the project outcomes. Describe the overall population size as well as the size of your sample population
Project Design and Methods	<ul style="list-style-type: none"> Describe the planned project and the way it addresses the established need. If your methods include educational activities, please describe succinctly the topic(s) and format of those activities
Innovation	<ul style="list-style-type: none"> Explain what measures you have taken to assure that this project idea is original and does not duplicate other projects or materials already developed. Describe how this project builds upon existing work, pilot projects, or ongoing projects developed either by your institution or other institutions related to this project.

<p>Evaluation and Outcomes</p>	<ul style="list-style-type: none"> • In terms of the metrics used for the needs assessment, describe how you will determine if the practice gap was addressed for the target group. Describe how you expect to collect and analyze the data. • Quantify the amount of change expected from this project in terms of your target audience. • Describe how the project outcomes will be broadly disseminated.
<p>Anticipated Project Timeline</p>	<ul style="list-style-type: none"> • Provide an anticipated timeline for your project including project start/end dates
<p>Additional Information</p>	<ul style="list-style-type: none"> • If there is any additional information you feel Pfizer should be aware of concerning the importance of this project, please summarize here
<p>Organization Detail</p>	<ul style="list-style-type: none"> • Describe the attributes of the institutions / organizations / associations that will support and facilitate the execution of the project and the leadership of the proposed project. Articulate the specific role of each partner in the proposed project. Letters of support from partner organizations will be required at the Full Proposal stage only and should not be included with the LOI.
<p>Budget Detail</p>	<ul style="list-style-type: none"> • A total amount requested is the only information needed for the LOI stage. Full Budget is not required. This amount can be adjusted at the Full Proposal stage as applicable. • The budget amount requested must be in U.S. dollars (USD). • While estimating your budget please keep the following items in mind: <ul style="list-style-type: none"> ○ Institutional overhead and indirect costs may be included within the grant request. Examples include human resources department costs, payroll processing and accounting costs, janitorial services, utilities, property taxes, property and liability insurance, and building maintenance as well as additional project expenses such as costs for publication, IRB / IEC review fees, software license fees, and travel. Please note: Pfizer does not provide funding for capital equipment. ○ The inclusion of these costs cannot cause the amount requested to exceed the budget limit set forth in the RFP. ○ It should be noted that grants awarded through GMG cannot be used to purchase therapeutic agents (prescription or non-prescription). • Pfizer maintains a company-wide, maximum allowed overhead rate of 28% for independent studies and projects