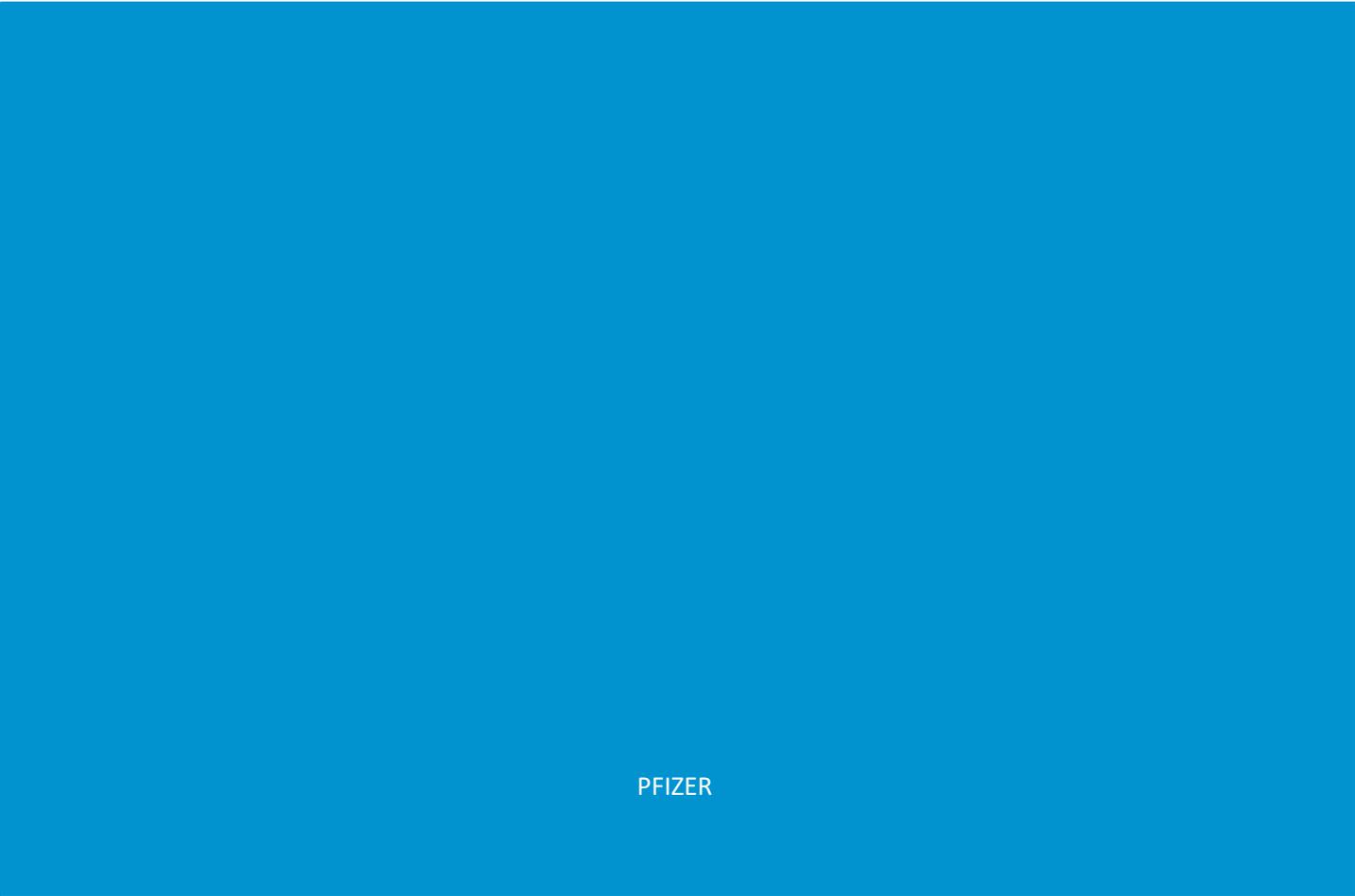




The attached document contains a new Request for Proposal (RFP) from Pfizer's Global Medical Grants program. While Pfizer recognizes many institutions and healthcare professionals around the globe are prioritizing challenges associated with the COVID-19 pandemic, we are cognizant that the healthcare and patient community will continue to benefit from ongoing support for research, improvement science, and education in spite of this crisis. It is in this spirit that Pfizer will continue our grants program by publishing RFPs that have been planned for 2020.

Thank you in advance for all that you are doing to improve the care of patients. Pfizer is proud to be able to support these efforts through this grants program.

Please contact the Global Medical Grants team at GMG@pfizer.com if you have any questions or would like to be temporarily removed from our mailing list.



PFIZER



Pfizer and the Crohn's & Colitis Foundation Announce
Addressing Health Disparities in Inflammatory Bowel Disease
Competitive Grant Program – using Expert Review Panel

I. Background

The Crohn's & Colitis Foundation (Foundation) is initiating this RFP for quality improvement and/or education interventions that aim to reduce the impact of health disparities that exist around vaccine usage and health maintenance in patients with inflammatory bowel disease (IBD). This project is a multi-year endeavor being conducted in collaboration with Pfizer Global Medical Grants (GMG).

The Crohn's & Colitis Foundation is the largest non-profit, voluntary, health organization dedicated to finding cures for inflammatory bowel diseases (IBD). The Foundation's mission is to cure Crohn's disease and ulcerative colitis, and to improve the quality of life of children and adults who are affected by these diseases. The Foundation works to fulfill its mission by funding research; providing educational resources for patients and their families, medical professionals, and the public; and furnishing supportive services for those afflicted with IBD. For more information visit www.crohnscolitisfoundation.org, call 888-694-8872, or email info@crohnscolitisfoundation.org.

Pfizer 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.



II. Eligibility

Geographic Scope:	United States
Applicant Eligibility Criteria	<ul style="list-style-type: none"> • Only organizations are eligible to receive grants, not individuals or medical practice groups. • The following may apply: medical, dental, nursing, allied health, and/or pharmacy professional schools; healthcare institutions (both large and small); professional associations; government agencies; 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"> • June 1, 2020
Clinical Area	<ul style="list-style-type: none"> • Inflammatory bowel disease (IBD)
Specific Area of Interest for this RFP:	<ul style="list-style-type: none"> • It is our intent to support quality/process improvement projects and/or educational interventions into multi-disciplinary health services approaches for the improved management of health maintenance and vaccine administration in IBD patients who are part of a medically underserved population. For the purposes of this RFP, we define underserved as patients who have experienced health and/or system disparities secondary to social determinants of health. • Multi-disciplinary collaborations are encouraged when appropriate, but all partners must have a clear and relevant role. • It is expected that projects will be evidence-based (education and/or quality improvement) and the proposed evaluation will follow generally accepted principles. During review, the intended outcome of the project will be given careful consideration and, if appropriate based on the project goal, projects with the maximum likelihood to directly impact patient care will be given highest priority. Projects including an educational element can find more information on principals of learning

	<p>and behavior change for health professionals at www.pfizer.com/files/HealthProfessionalsLearningandBehaviorChangeAFewPrinciples.pdf.</p> <ul style="list-style-type: none"> • 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, including those that evaluate the efficacy of therapeutic or diagnostic agents. Information on how to submit requests for support of these types of clinical research projects can be found at www.Pfizer.com/isr.
<p>Target Audience:</p>	<ul style="list-style-type: none"> • The target population comprises patients of all ages who have been diagnosed with IBD.
<p>Disease Burden Overview:</p>	<p>Ulcerative colitis and Crohn’s disease are the two most common forms of inflammatory bowel disease (IBD) and affect 3.1 million Americans.¹ Most IBD patients view their gastroenterologist as their primary healthcare provider; however, data has shown that these patients do not receive preventive services at the same rate as general medical patients.² Ensuring patients receive optimal preventive care is critical to improving overall patient outcomes. Additionally, health disparities are a significant issue for IBD patients.³⁻¹⁰ For instance, health care differences due to race have been shown to contribute to suboptimal healthcare outcomes for minorities and low-income groups. Thus, it is critical to identify differences among the medically underserved to increase their access and ultimately improve IBD patient outcomes.</p>
<p>Recommendations and Target Metrics:</p>	<ul style="list-style-type: none"> • Related Guidelines and Recommendations <ul style="list-style-type: none"> ○ The Crohn’s & Colitis Foundation’s Professional Education committee has developed an evidence-based health maintenance checklist (https://www.crohnscolitisfoundation.org/science-and-professionals/education-resources/health-maintenance-checklists), which includes: <ul style="list-style-type: none"> ▪ Vaccine-preventable illnesses; ▪ Cancer prevention; ▪ Other screenings (e.g. DEXA scan, PPD/IGRA, smoking status, depression check)

<p>Gaps Between Actual and Target, Possible Reasons for Gaps:</p>	<p>Racial and socioeconomic disparities exist in healthcare and are of particular concern in those with chronic conditions, including inflammatory bowel disease (IBD). Examples of differential care received by different patient populations include:</p> <ul style="list-style-type: none"> • Primary health care maintenance (HCM) services such as administration of immunizations and preventative health screening is significantly lower among IBD patients than the general health patient population.² The correlation between health disparities in IBD and HCM requires a closer analysis, as these patients are already vulnerable. • Studies have described that rates of screening for skin examinations and regular ophthalmologic examinations among minority IBD patients are lower than Whites.¹¹ • Studies have shown that there are racial/ethnic disparities in colorectal cancer screening with lower rates in minority patients in comparison to Whites.¹² • Furthermore, Black patients have lower screening for osteoporosis and evaluation of bone health compared to Whites and Hispanics.¹³ • Administration of vaccinations such as the HPV or influenza vaccine is also lower among minority patients, with a reduced awareness of importance of these immunizations to health reported among different race/ethnic groups.^{14,15} • Post-partum preventative care is also lower among minority patients and low socioeconomic status with IBD.¹⁶
<p>Barriers:</p>	<p>Access to preventative care is a notable barrier beyond socioeconomic status (SES) regardless of IBD phenotype or response to current therapies in IBD.^{17,18} IBD patients experience less overall management of health maintenance compared to other patient populations. These social and/or systemic causes, such as implicit bias, patient-provider distrust, communication or knowledge gaps, or lack of shared decision-making among different race or ethnic groups contribute to health disparities and influence disease outcomes, not only in progression of disease, but also in preventative care. Therefore, the disparities that exist specific to this patient population require a more careful analysis and understanding. Studies support the use of education and shared decision-making to convey the importance of vaccination and preventive health services to both HCPs and patients, with a goal of improving outcomes and adherence.¹⁵</p>
<p>Current National Efforts to Reduce Gaps:</p>	<p>Several organizations have published HCM recommendations for healthcare providers who care for patients with IBD:</p> <ul style="list-style-type: none"> • American College of Gastroenterology https://journals.lww.com/ajg/Fulltext/2017/02000/ACG_Clinical_Guideline_Preventive_Care_in.15.aspx

	<ul style="list-style-type: none"> American Gastroenterological Association (http://agaperspectives.gastro.org/health-maintenance-measures-best-practices-for-dealing-with-patients-with-ibd/) Crohn’s & Colitis Foundation (https://www.crohnscolitisfoundation.org/science-and-professionals/education-resources/health-maintenance-checklists) <p>HCM guidance are available on the Crohn’s & Colitis Foundation website for both adult and pediatric patients with IBD (https://www.crohnscolitisfoundation.org/). Efforts by these GI Societies to increase diversity within all ranks of the membership are also anticipated to increase insight into the issues of health disparities and how to reduce differences in care.</p> <p>Review of the literature demonstrates that appropriate counseling and educational materials positively affects HCM recommendations and adherence regardless of race/ethnic group and SES, and therefore greater efforts in awareness may help address these health disparities. The goal of this RFP is to fund projects that propose actionable solutions to the HCM challenges faced by patients with IBD that are rooted in social determinants of health.</p>
<p>Expected Approximate Monetary Range of Grant Applications:</p>	<ul style="list-style-type: none"> Individual projects requesting up to \$350,000 will be considered. The total available budget related to this RFP is \$700,000. 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: June 1, 2020 Full Proposal Deadline: July 13, 2020 Please note the deadline is 23:59 Eastern Time (New York, GMT -5). Review of Full Proposals by External Review Panel: August 21, 2020 Anticipated Full Proposal Notification Date: August 28, 2020 Grants distributed following execution of fully signed Letter of Agreement Anticipated Project Start and End Dates: October 2020 to October 2022
<p>How to Submit:</p>	<ul style="list-style-type: none"> Please go to www.cybergrants.com/pfizer/QI and sign in. First-time users should click “REGISTER NOW”. Select the following Competitive Grant Program Name: 2020 GMG L - Addressing Health Disparities in Inflammatory Bowel Disease Requirements for submission: Complete all required sections of the online application and upload the

	<p>completed proposal template (see Appendix).</p> <ul style="list-style-type: none"> If you encounter any technical difficulties with the website, please click the “Technical Questions” 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, Amanda Solis (amanda.solis@pfizer.com), or Foundation contact, Orna Ehrlich (oehrlich@crohnscolitisfoundation.org) with the subject line “2020 GMG L - Addressing Health Disparities in Inflammatory Bowel Disease.”
<p>Review and Approval Process</p>	<ul style="list-style-type: none"> A specific grant program RFP uses an external review panel (ERP) to make final grant decisions. The panels are comprised of professionals selected by the Crohn’s & Colitis Foundation from the medical community with advanced degrees and expertise in particular clinical areas, or specific needs of a geographic region/learner group, or expertise in research, continuing professional development or quality improvement.
<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 during the review period.

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Appendix A

Proposal Requirements

The proposal will be accepted via the online application. When answering the proposal 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.
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.
Evaluation and Outcomes	<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.

Anticipated Project Timeline	<ul style="list-style-type: none"> • Provide an anticipated timeline for your project including project start/end dates
Additional Information	<ul style="list-style-type: none"> • If there is any additional information you feel the Crohn's & Colitis Foundation and Pfizer should be aware of concerning the importance of this project, please summarize here
Organization Detail	<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.
Budget Detail	<ul style="list-style-type: none"> • Detailed Budget is required. • 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