Pfizer Announces a Quality Improvement Grant RFP

Improving NOAC adherence and persistence, initiatives for pharmacists

Competitive Grant Program - internal Pfizer review process

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 general area of interest, sets timelines for review and approval, and uses an internal Pfizer review process to make final grant decisions. Organizations are invited to submit an application addressing the practice gaps as outlined in the specific RFP.

For all independent 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:	Israel
Applicant Eligibility Criteria	• The following may apply: pharmacists (hospital or community), clinical pharmacists; pharmacy schools, pharmacy departments of healthcare institutions (both large and small), professional associations and medical societies related to pharmacy, medical education companies for pharmacists, drugstore chains and other entities with a mission related to healthcare professional education and/or healthcare improvement. • The organization and PI must be based in the eligible country. • For project involving multiple departments within an institution and/or between different institutions / organizations / associations, all institutions must have a relevant role and the requesting organization must have a key role in the project. • For projects offering continuing education credit, the requesting organization must be accredited.

III. Requirements

Date RFP Issued	• 15 July 2022
Clinical Area	• Anticoagulation therapy management
General Area of Interest for this RFP:	Projects to be considered for Pfizer support will focus on improving the adherence and persistence to oral anticoagulants. Non-vitamin K antagonist oral anticoagulants (NOACs) are considered by international guidelines the preferred choice of anticoagulants for stroke prevention in Atrial Fibrillation (AF) and for Venous Thromboembolism (VTE) treatment. Poor adherence to chronic disease therapy is currently considered a public health problem responsible for high morbidity and mortality in addition to incurring high financial costs. Adherence of over 80% to prescribed medications is associated with 8–26% fewer hospitalizations, 3–12% fewer emergency department visits, and up to 15% fewer outpatient visits among patients with various chronic diseases. In the specific case of NOACs, and given their short half-life, treatment non-adherence may expose patients to an increased risk of thromboembolic events. However, in real-world clinical practice, adherence and treatment persistence to NOACs is suboptimal in many patients. Reasons for NOAC non-adherence may relate to the cost, concern about an increased risk of adverse events particularly bleeding, lack

of symptoms, and uncertainty about the need for anticoagulation.
The pharmacy profession plays a significant role in the healthcare setting, and pharmacists undertake a range of responsibilities in healthcare services.

Community pharmacist-led interventions have been shown to improve patients' adherence and contribute to better disease control. Tailored pharmacist-based interventions address barriers to medication adherence by examining the factors that affect a person's ability to take their medications. It is our intent to support Quality Improvement initiatives that aim to address the challenges in areas outlined above, focused on pharmacists.

It is not our intent to support clinical research projects. Projects evaluating the effectiveness of therapeutic or diagnostic agents will not be considered.

References:

1. Hindricks G, Potpara T, Dagres N, Arbelo E, Bax JJ, Blomström-Lundqvist C, Boriani G, Castella M, Dan GA, Dilaveris PE, Fauchier L, Filippatos G, Kalman JM, La Meir M, Lane DA, Lebeau JP, Lettino M, Lip GYH, Pinto FJ, Thomas GN, Valgimigli M, Van Gelder IC, Van Putte BP, Watkins CL; ESC Scientific Document Group. 2020 ESC Guidelines for the diagnosis and management of atrial fibrillation developed in collaboration with the European Association for Cardio-Thoracic Surgery (EACTS): The Task Force for the diagnosis and management of atrial fibrillation of the European Society of Cardiology (ESC) Developed with the special contribution of the European Heart Rhythm Association (EHRA) of the ESC. Eur Heart J. 2021 Feb 1;42(5):373-498. doi: 10.1093/eurheartj/ehaa612. Erratum in: Eur Heart J. 2021 Feb 1;42(5):507. Erratum in: Eur Heart J. 2021 Feb 1;42(5):546-547. Erratum in: Eur Heart J. 2021 Oct 21;42(40):4194. PMID: 32860505.

2. Stevens SM, Woller SC, Kreuziger LB, Bounameaux H, Doerschug K, Geersing GJ, Huisman MV, Kearon C, King CS, Knighton AJ, Lake E, Murin S, Vintch JRE, Wells PS, Moores LK. Antithrombotic Therapy for VTE Disease: Second Update of the CHEST Guideline and Expert Panel Report. Chest. 2021 Dec;160(6):e545-e608. doi: 10.1016/j.chest.2021.07.055. Epub 2021 Aug 2. PMID: 34352278.

3. World Health Organization (WHO). Adherence to long-term therapies: evidence for action; 2003, 216 pages [English]. ISBN 92 4 154599 2.

4. Roebuck MC, Kaestner RJ, Dougherty JS. Impact of Medication Adherence on Health Services Utilization in Medicaid. Med Care. 2018 Mar;56(3):266-273. doi: 10.1097/MLR.0000000000000870. PMID: 29309392.

5. Arbel A, Abu-Ful Z, Preis M, Cohen S, Saliba W. Adherence with direct oral anticoagulants in patients with atrial fibrillation: Trends, risk

	factors, and outcomes. J Arrhythm. 2021 Nov 18;38(1):67-76. doi: 10.1002/joa3.12656. PMID: 35222752; PMCID: PMC8851575. 6. Ozaki AF, Choi AS, Le QT, Ko DT, Han JK, Park SS, Jackevicius CA. Real-World Adherence and Persistence to Direct Oral Anticoagulants in Patients With Atrial Fibrillation: A Systematic Review and Meta-Analysis. Circ Cardiovasc Qual Outcomes. 2020 Mar;13(3):e005969. doi: 10.1161/CIRCOUTCOMES.119.005969. Epub 2020 Mar 9. PMID: 32148102. 7. Borne RT, O'Donnell C, Turakhia MP, Varosy PD, Jackevicius CA, Marzec LN, Masoudi FA, Hess PL, Maddox TM, Ho PM. Adherence and outcomes to direct oral anticoagulants among patients with atrial fibrillation: findings from the veterans health administration. BMC Cardiovasc Disord. 2017 Sep 2;17(1):236. doi: 10.1186/s12872-017-0671-6. PMID: 28865440; PMCID: PMC5581418. 8. Clifford S, Garfield S, Eliasson L, Barber N. Medication adherence and community pharmacy: a review of education, policy and research in England. Pharm Pract (Granada). 2010 Apr;8(2):77-88. doi: 10.4321/s1886-36552010000200001. Epub 2010 Mar 15. PMID: 25132874; PMCID: PMC4133060.
Target Audience:	• Pharmacists (community or hospital) • Clinical pharmacists • Pharmacy professional schools • Pharmacy departments of healthcare institutions or medical centers) • Professional associations and medical societies related to pharmacy • Drugstore chains
Expected Approximate Monetary Range of Grant Applications:	• Individual projects requesting up to 75,000 ILS will be considered. The estimated total available budget related to this RFP is 150,000 ILS.
Key Dates:	• RFP release date: 15 July 2022 • Grant Application due date: 31 August 2022 Please note the deadline is 23:59 Eastern Standard Time (e.g. New

	York, GMT -5). • Anticipated Grant Award Notification Date: October 2022 • Grants will be distributed following a fully executed agreement. • Anticipated Project Start and End Dates: January 2023 to January 2024
How to Submit:	• Please go to www.cybergrants.com/pfizer/QI and sign in. First-time users should click "Create your password". *[Note: there are individual portals for each grant application type (e.g., knowledge, LOI, research full proposal, and QI full proposal). Please be sure to use the URL above.]* • Click the "Start A New Quality Improvement Application" button. • In the application: o For the question "Competitive Grant?" select Yes o Select the following Competitive Grant Program Name: 2022 IM IL: Improving NOAC adherence and persistence, initiatives for pharmacists • Requirements for submission: Complete all required sections of the online application and upload your project proposal (see Appendix) in the Full Proposal Submission field. • If you encounter any technical difficulties with the website, please click the "Technical Questions" link at the bottom of the page. **IMPORTANT:** Be advised applications submitted after the due date will not be reviewed by the committee.
Questions:	If you have questions regarding this RFP, please direct them in writing to the Grant Officer, Ai Ping Lee (AiPing.Lee@pfizer.com), with the subject line 2022 IM IL: Improving NOAC adherence and persistence, initiatives for pharmacists, July 2022.
Grant Agreements:	• If your grant is approved, your institution will be required to enter into a written grant agreement with Pfizer. Please click here to view the core terms of the agreement. • Pfizer has drafted the terms of these agreements to be balanced and reasonable and to further the goals of both parties. Negotiating grant agreements requires significant resources, so please ensure that your institution (including your legal department) is able and willing to abide by these terms before proceeding with submission of your application as they will need to be accepted in their entirety.

Review and Approval Process:	• Grant requests received in response to a general RFP are reviewed by Pfizer to make final grant decisions.
Mechanism by which Applicants will be Notified:	• All applicants will be notified via email by the dates noted above. • Applicants may be asked for additional clarification during the review period.

Appendix A

Quality Improvement Project Full Proposal

Applications will be accepted via the online portal in English. Full Proposal documents should be no longer than 10-15 pages in length (12-point font and 1-inch margins) excluding Organization Detail and References. When uploading your Full Proposal please ensure it addresses the following*:

Goals and Objectives	• 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 *overall* 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	• 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 *your* 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	• 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	• 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	• 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	• 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	• Provide an anticipated timeline for your project including project start/end dates
Additional Information	• If there is any additional information you feel Pfizer should be aware of concerning the importance of this project, please summarize here
Organization Detail	• 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.
Budget Detail	• The budget amount requested must be in Israeli Shekels (ILS). • While estimating your budget please keep the following items in mind: o General organizational running costs such as insurances, heating, lighting, rent, building maintenance may be included. Pfizer does not provide funding for capital purchases (infrastructure expenses such as equipment, purchases of software or software licenses, technology or bricks and mortar). Equipment hire/leasing is acceptable and may be included in project budget. o The inclusion of these costs cannot cause the amount requested to exceed the budget limit set forth in the RFP. o It should be noted that grants awarded through GMG cannot be used to purchase Pfizer therapeutic agents (prescription or non-prescription). • Pfizer maintains a company-wide, maximum allowed overhead rate of 28% for independent studies and projects. The amount for overheads would be included in the total budget amount requested. Please click here for details.

*The online application also includes the fields noted above. The text in those fields should be the same text that is included in your Full Proposal document.