

REQUEST FOR PROPOSALS (RFP)

QUALITY IMPROVEMENT GRANTS



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I. BACKGROUND

Bladder Cancer Canada is the first and only patient advocacy organization dedicated solely to bladder cancer patients since it was created in 2009.

Bladder Cancer Canada's vision is to support bladder cancer patients and their teams, increase awareness of bladder cancer among the general public and medical community as well as fund research which pursue the diagnosis, treatment and elimination of bladder cancer.

A Canada/USA bladder cancer research funding study presented at ASCO-GU in 2021 showed that, for metastatic bladder cancer, only 27% of funds went to the high-priority areas defined by the stakeholders, patients, caregivers, and scientists.¹

Surgically unresectable metastatic bladder cancer remains largely incurable, with few patients surviving more than two years. Real-world studies suggest that 40%-65% of bladder cancer patients are not receiving front-line therapy and, many that do, are not offered second-line or subsequent therapies despite the benefits of survival with these treatments. Less than 40% of patients receive platinum- containing chemotherapy although they meet the eligibility criteria for this therapy.²

Despite the development of maintenance therapy, agents with improved toxicity profiles, and the approval of frontline immunotherapy, many patients are still unable to access these treatments. One reason is that the patient population is predominantly geriatric with co-morbid conditions who are unable to tolerate the toxicity of, or are ineligible for, currently available standard treatments. In addition, the implementation of technology for accessing medical care through devices may be challenging for this population. Other reasons include socioeconomic factors, including minorities, and those in zip codes which are health care deserts who may find access to standard treatments and clinical trials challenging.^{3,4} Education of clinical teams, patients, caregivers, and healthcare systems is needed to improve the implementation of available, and recommended treatment options, in order to support guideline concordant care.⁴ Furthermore, best practices to improve the quality of care may include the use of pathways, navigation, expert care review, real-time guidance, shared-decision making, care planning workflows, and patient reported outcomes (PROs).

In this spirit, Pfizer and EMD Serono are very proud to partner with Bladder Cancer Canada to launch this Request for Proposals (RFP) program aimed at helping to improve the lives of people living with bladder cancer and help reduce the gap in funding of high-priority research topics that are relevant for patients, caregivers, healthcare professionals and systems, and scientists. Responses to this RFP will be reviewed by an Expert Review Panel led by Bladder Cancer Canada. The panel will be comprised of bladder cancer experts (patients and medical experts) and a Pfizer and EMD Serono Medical Affairs representative. The Expert Review Panel will make all final grant decisions.

NOTE: A French translation of this RFP can be found [here](#).

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II. RFP INTENT

The intent of this RFP is to encourage proposals for the implementation of strategies that will measurably improve the quality of care of patients with locally advanced/ metastatic bladder cancer. This type of Quality Improvement (QI) should consider aspects of quality such as clinical competence, outcomes and process assessment, program evaluation, quality indicators and quality assurance. For the purposes of this project, locally advanced or metastatic bladder cancer is defined as stage IV unresectable disease that has progressed beyond the bladder to the surrounding tissue or lymph nodes, or with overt metastases. Successful projects will incorporate quality improvement methods to overcome identified gaps or challenges, with the ultimate goal of optimizing the treatment and care of patients with metastatic bladder cancer, with a focus on strategies that will improve quality and length of life as there is, to date, no known cure. Potential concepts and ideas around areas for improvement may consider guideline-based care, overcoming identified barriers (e.g. clinical and treatment related factors, patient-related psychosocial factors and healthcare system or technological related barriers), etc.

Supporting healthcare professionals in their efforts to maintain and improve their knowledge, ability, and performance related to treating patients with metastatic bladder cancer is critical to improving patient care. The quality of care that healthcare professionals provide takes place in complex systems that are often in need of analysis and modification to allow for more efficient and effective patient care. In addition, providing resources and education to patients, their caregivers, and family members is crucial to help ensure they are informed and can participate in the shared decision-making process.

Multiple factors contribute to the complexity of treating bladder cancer including:

- The need for interdisciplinary involvement in care.
- The rapidly changing options for personalizing treatment strategies.
- Managing treatment and disease side effects.
- Communicating with patients, caregivers, and family members about quality of life and end-of-life decisions and other obstacles patients face when living with the disease.

III. RFP SCOPE

The scope of this RFP includes QI projects that achieve one or more of the following:

- Facilitate healthcare systems and providers to engage patients, their caregivers, and families in shared decision-making.
- Encourage the use of multi-disciplinary care models (e.g., nurse navigators and palliative care).
- Use evidence-based educational strategies that will lead measurable behavior changes (e.g., improved communication skills, patients' improved ability to recognize adverse events and what to do if they occur).
- Improve the integration and standardization of care across affiliated hospitals, systems, and regions.
- Implement approaches to optimize care throughout the patient cancer experience, including optimal access to clinical trials and evidence-based treatment.

Quality Improvement grants help improve patient outcomes in areas of unmet medical needs. They should not be confused with general research grants which are focused on the development or refinement of specific and defined medical knowledge. Research projects answer questions about best practice, whereas Quality Improvement projects implement best practices. Research projects (e.g., clinical trials) will not be considered under this RFP. It is expected that projects will be evidence-based (education and/or quality improvement) and the proposed evaluation will follow

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generally accepted scientific principles. During review the intended outcome of the project will be given careful consideration and projects with the maximum likelihood to directly impact patient care will be given high priority.

There is a strong interest in receiving responses from projects that utilize system-based changes. Although educational efforts for healthcare professionals 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 the intent of this RFP to support clinical research projects. Projects evaluating the efficacy of therapeutic or diagnostic agents will not be considered.

ELIGIBILITY

GEOGRAPHIC SCOPE	Canada
APPLICANT ELIGIBILITY CRITERIA	<ul style="list-style-type: none">• Only organizations are eligible to receive grants, not individuals or physician-owned medical practices.• The following types of organizations may apply: medical, nursing, allied health, and/or pharmacy professional schools; hospitals, cancer centers, healthcare institutions (both large and small); professional associations; patient advocacy groups; other entities with a mission related to healthcare improvement.• 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.

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REQUIREMENTS

DATE RFP ISSUED	January 11, 2023
CLINICAL AREA	Oncology – Genitourinary – Urothelial Carcinoma
EXPECTED APPROXIMATE MONETARY RANGE OF GRANT APPLICATIONS	<ul style="list-style-type: none">Individual projects requesting up to a maximum of \$100 000 (CAD) will be considered.The total available budget related to this RFP is \$ 200,000 (CAD).The amount of the grant Pfizer-EMD Serono and BCC will be prepared to fund for any project will depend upon the joint review panel’s evaluation of the proposal and costs involved and will be stated clearly in the approval notification.
KEY DATES	<ul style="list-style-type: none">RFP Release Date: January 11, 2023Full Proposal Due Date: April 19, 2023 (DEADLINE EXTENDED)Review of Full Proposals by Expert Review Panel: April 2023Anticipated Full Proposal Notification Date: May 2023Grants distributed following execution of fully signed Agreement.Anticipated Project Start and End Dates: 2023 to 2025 (2-year project length maximum; projects may have shorter timelines but must not exceed 2 years).
HOW TO SUBMIT	<ul style="list-style-type: none">Please go to www.cybergrants.com/pfizer/QI and sign in. First-time users should click “REGISTER NOW”. <i>[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.]</i>Click the “Start A New Quality Improvement Application” button.For the question “Competitive Grant?” select YesSelect the following Competitive Grant Program Name: 2023 ONC CAN BCC Quality of Care QI <p><u>Requirements for submission:</u></p> <ul style="list-style-type: none">Complete all required sections of the online application (see Appendix).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>
QUESTIONS	<ul style="list-style-type: none">If you have questions regarding this RFP, please direct them in writing to the Grant Officer, Amanda Kaczerski (Amanda.Kaczerski@pfizer.com), with the subject line “2023 ONC CAN BCC Quality of Care QI.”

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GRANT AGREEMENTS	<ul style="list-style-type: none">• 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 have 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	<ul style="list-style-type: none">• A specific grant program RFP uses an expert review panel (ERP) to make final grant decisions.• The panels are comprised of professionals 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.• Responses to this RFP will be reviewed by an Expert Review Panel led by Bladder Cancer Canada. The panel will be comprised of bladder cancer experts (patients and medical experts) and a Pfizer and EMD Serono Medical Affairs representative.
MECHANISM BY WHICH APPLICANTS WILL BE NOTIFIED	<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.
REFERENCES	<ol style="list-style-type: none">1. Kaiser J. et al. ASCO GU Cancers Symposium 2002. Abstract No. 422.2. D. Geynisman, E. Broughton, Yi Hao, et al. Real-world treatment patterns and clinical outcomes among patients with advanced urothelial carcinoma in the United States. Urologic Oncology: Seminars and Original Investigations, 2021, ISSN 1078-1439. https://doi.org/10.1016/j.urolonc.2021.11.0143. Iyer, S.Zhang, H. Born. Evaluating therapeutic bladder cancer trial disparities in race/ethnicity. Journal of Clinical Oncology 2022 40:6_suppl, 446-4464. J. Vehawn, M. Choudry, T. Hunt, et al.; Urban families ameliorate rural genitourinary cancer disparities; Journal of Clinical Oncology 2022 40:6_suppl, 25-25

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Appendix A

Quality Improvement Project Full Proposal

Applications will be accepted via the online portal. 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	<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 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	<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 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	<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.

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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 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.
BUDGET DETAIL	<ul style="list-style-type: none">• While estimating your budget please keep the following items in mind:• The budget amount requested must be in Canadian dollars (CAD).<ul style="list-style-type: none">○ 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. 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. Please click here for details.