

Pfizer Quality Improvement Request for Proposals

Competitive Grant Program – using Expert Review Panel

Optimizing Antimicrobial Stewardship Program in Saudi Arabia

Overview

This competitive program seek to establish the optimal use of antibiotics to reduce resistance and the harmful effects of their use, while improving the quality of care in preventing and treating infections.

Geographic Scope

Saudi Arabia

Project Types and Area of Interest

Submissions that focus on establishing or improving sustainable and holistic hospital Antimicrobial Stewardship (AMS) programs in health facilities. Multi-disciplinary collaborations are encouraged, and all partners must have a relevant role.

The RFP will support awardees over a period of 18-24 months to incrementally develop/improve local AMS programs and to establish centers of excellence.

The RFP goal is to seed the development of a global collaborative community of AMS practice, through the establishment of accredited AMS Centers of Excellence that:

- Develops and validates a quality management system (QMS) approach to AMS best practice.
- Identifies barriers to high quality AMS practice and develops/ implements interventions to overcome these.
- Fosters and shares locally developed and tested approaches to improving practice using QMS tools such as “plan-do-study-act” (PDSA cycle).
- Develops sustainable AMS programs which can share exemplar practice to spread learning to other institutions across their region.

Key Milestones

Submission Deadline

**Anticipated Grant
Award Notification**

**Anticipated Project
Start Date**

31 July 2025

Sep 2025

Nov 2025

Funding Range and Project Length

Individual projects requesting up to 200,000 USD will be considered. The estimated total available budget related to this RFP is 400,000 USD. Larger grant amounts may be considered depending on the project scope and methodology. Project length will be a maximum of 24 months.

I. Eligibility

Geographic Scope/Location of Project:

- Saudi Arabia

Applicant Eligibility Criteria

- The following may apply: medical, dental, nursing, allied health, and/or pharmacy professional schools; healthcare institutions (both large and small); professional organizations; government agencies; and other entities with a mission related to healthcare improvement.
- Only organizations are eligible to receive grants, not individuals or medical practice groups (i.e., an independent group of physicians not affiliated with a hospital, academic institution, or professional society).
- 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.
- The applicant must be the Project Lead/Principal Investigator (PI) or an authorized designee of such individual (e.g., Project Lead/PI's grant/research coordinator).
- The Project Lead/PI must be an employee or contractor of the requesting organization.
- Requesting organization must be legally able to receive award funding directly from Pfizer International LLC. We strongly recommend that applicants confirm this with their organization or institution prior to submitting an application. Grants awarded to organizations that are subsequently found to be unable to accept funding directly from Pfizer International LLC. may be subject to rescission.

II. Requirements

Primary Area of Interest:

- Antimicrobial Stewardship

Specific Area of Interest for this RFP:

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

- Submissions that focus on establishing or improving sustainable and holistic hospital AMS programs in resource-limited health facilities and / or in support of underserved populations. Multi-disciplinary collaborations are encouraged, and all partners must have a relevant role.
- The RFP will support awardees over a period of 18-24 months to incrementally develop/improve local AMS programs and to establish centres of excellence.
- The RFP goal is to seed the development of a global collaborative community of AMS practice, through the establishment of accredited AMS Centres of Excellence that: Develops and validates a quality management system (QMS) approach to AMS best practice. Identifies barriers to high quality AMS practice and develops/ implements interventions to overcome these. Fosters and shares locally developed and tested approaches to improving practice using QMS tools such as “plan-do-study-act” (PDSA cycle). Develops sustainable AMS programs which can share exemplar practice to spread learning to other institutions across their region.

Target Audience

- Medical and allied health professionals from healthcare institutions (large and small), professional associations and medical societies, and other entities with a mission related to healthcare professional education and/or healthcare improvement.

Disease Burden Overview

- In Saudi Arabia, In 2019, there were 2,500 deaths directly attributable to AMR and 9,100 deaths associated with AMR in Saudi Arabia. The primary pathogens contributing to AMR-related deaths in Saudi Arabia include *Staphylococcus aureus*, *Escherichia coli*, *Streptococcus pneumoniae*, *Klebsiella pneumoniae*, and *Pseudomonas aeruginosa*.¹ The misuse and overuse of antimicrobials in humans, animals, and plants drive the development of drug-resistant pathogens, making infections harder to treat and increasing the risk associated with medical procedures. If unchecked, AMR is expected to remain a leading cause of death globally by 2050, emphasizing the urgent need for robust antimicrobial stewardship programs^{2,3,4}.

Recommendations and Target Metrics

- The World Health Organization (WHO) recommends creating national action plans and following a set of 13 key interventions like improving monitoring and reporting of antimicrobial stewardship programs in participating healthcare facilities, Strengthen National Infection Prevention and Control Program, etc. Additionally, the 2026 AMR Benchmark suggests expanding to new countries, and focusing on priority pathogens identified by WHO^{5,6}

Barriers

- Implementing effective antimicrobial stewardship (AMS) programs to combat antimicrobial resistance (AMR) faces several barriers, including insufficient data on antimicrobial use and resistance patterns, poor global and local coordination, healthcare professionals lack of skills related to AMS principles and challenges in communication to inform the involved teams. Additionally, time constraints and competing priorities among HCPs further hinder the implementation of AMS programs.⁷ The challenges hindering the effective implementation of Antimicrobial Stewardship (AMS) programs also include ambiguous roles and responsibilities, inadequate technical support for antimicrobial resistance (AMR) testing and reporting, and a lack of capacity building for proper monitoring and reporting of AMS initiatives.^{5,6,8}

Current National Efforts to Reduce Gaps

- Saudi Arabia has a National AMR action plan which is continuously monitored and evaluated to ensure progression. National efforts also include developing a dynamic surveillance dashboards and enhancing laboratory capacity for high-quality microbiological data. Additionally, national guidelines for AMS have been created and disseminated, baseline assessments of AMS in healthcare facilities have been conducted. Public awareness campaigns and educational programs on AMR have been launched.⁶

References

1. The burden of antimicrobial resistance (AMR) in Saudi Arabia [Internet]. Available from: https://www.healthdata.org/sites/default/files/2023-09/Saudi_Arabia.pdf.
2. World Health Organization (2023). *Antimicrobial Resistance*. [online] World Health Organization. Available at: <https://www.who.int/news-room/fact-sheets/detail/antimicrobial-resistance>. ghdx.healthdata.org. (n.d.).
3. Global Bacterial Antimicrobial Resistance Burden Estimates 2019 | GHDx. [online] Available at: <https://ghdx.healthdata.org/record/ihme-data/global-bacterial-antimicrobial-resistance-burden-estimates-2019>. IHME (2019).
4. Antimicrobial resistance (AMR). [online] The Institute for Health Metrics and Evaluation. Available at: <https://www.healthdata.org/research-analysis/health-risks-issues/antimicrobial-resistance-amr>.
5. www.who.int. (n.d.). *Library of national action plans*. [online] Available at: <https://www.who.int/publications/m/item/kingdom-of-saudi-arabia--second-antimicrobial-resistance-action-plan-2022-2025>.
6. Public Health Authority Antimicrobial Resistance Program [Internet]. Available from: https://cdn.who.int/media/docs/default-source/antimicrobial-resistance/amr-spc-npm/nap-library/kingdom-of-saudi-arabia-nap-amr-2022-2025.pdf?sfvrsn=722aaed5_3&download=true

7. Who.int. (2025). *item*. [online] Available at: <https://www.who.int/publications/m/item/amr-resource-pack-2025>
8. Accesstomedicinefoundation.org. (2025). *The methodology for the 2026 AMR Benchmark | Access to Medicine*. [online] Available at: <https://accesstomedicinefoundation.org/resource/the-methodology-for-the-2026-amr-benchmark> [Accessed 14 Apr. 2025].

Expected Approximate Monetary Range of Grant Applications

IMPORTANT: Grants will be distributed following a fully executed agreement and submission of Final Protocol, Documentation of IRB/IEC Approval, Regulatory Approval (if applicable), Exemption or Waiver.

- Individual projects requesting up to \$200K will be considered. The estimated total available budget related to this RFP is \$400K.
- Award amounts include direct costs, institutional overhead costs (capped at 28% per Pfizer policy), and indirect costs.
- The amount of the grant Pfizer will be prepared to fund for any project will depend upon the expert review panel's evaluation of the proposal and costs involved, and will be stated clearly in the grant agreement.

Key Dates:



IMPORTANT: Be advised applications submitted after the due date will not be reviewed.

*Please note the deadline is 23:59 Eastern Standard Time (e.g., New York, GMT -5)

How to Submit:

IMPORTANT: Please read this section carefully since applications submitted not following these instructions will not be accepted and will be cancelled.

- Please go to www.cybergrants.com/pfizer/QI and sign in.
 - Note: there are individual portals for each grant application type. Please be sure to use the URL above.
 - First-time users should click "Create your password".
- Click the "**Start A New Quality Improvement Grant Application**" button.
- Requirements for submission:
 - Complete all required sections of the online application
 - IMPORTANT:** Upload proposal (see Appendix) in the Proposal/Protocol field.

- In the application:
 - For the question “**Competitive Grant?**” select “**Yes**”
 - Select the following Primary Area of Interest: **Infectious Disease- Antimicrobial Stewardship-QI**
 - Select the following Competitive Grant Program Name: **2025 I&I Saudi Arabia Antimicrobial Stewardship QI**

Questions:

- If you encounter any technical difficulties with the website, please click [here](#) or the “Technical Questions” link at the bottom of the page in cybergrants.
- Please click [here](#) to view “Frequently Asked Questions” regarding the Competitive Grant Program.
- If you have questions regarding this RFP, please direct them in writing to the Grant Officer, Rehab Elsaie (rehab.z.elsaie@pfizer.com), with the subject line “Optimizing Antimicrobial Stewardship Program in Saudi Arabia June 2025”

Review and Approval Process

- Grant requests received in response to a specific RFP are reviewed by 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.

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.

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.
- Under Pfizer's competitive grant program, modifications to grant agreements will not be reviewed unless a genuine conflict exists as between applicable law and the terms of the relevant grant agreement. Applicant is encouraged to share the core terms with counsel for approval prior to submitting an application.
- Except where prohibited by applicable law and, in any case, subject to review by Pfizer Legal, payment of grant funding may only be paid to the grantee organization.
- This RFP is supported by Pfizer International LLC and, if approved the payment will be issued by a Pfizer US based legal entity.

About Pfizer Grants

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

For all Investigator Sponsored Research (ISRs) and general research grants, the grant requester (and ultimately the grantee) is responsible for the design, implementation, sponsorship, and conduct of the independent initiative supported by the grant, including compliance with any regulatory requirements. Pfizer must not be involved in any aspect of study protocol or project development, nor the conduct or monitoring of the research program. An ISR grant request cannot be submitted for a study that has already commenced and was not originally supported by Pfizer.

About Pfizer Grants

Quality improvement (QI) projects are systematic, data-guided, sustainable activities designed to bring about immediate, positive changes in the delivery of healthcare in particular setting (1,2). Quality improvement seeks to standardize structure and processes to reduce variation, achieve predictable results, and improve outcomes for patients, healthcare systems, and organizations. Structure includes things like technology, culture, leadership, and physical capital. Process includes knowledge capital (e.g., standard operating procedures) or human capital (e.g., education and training) (3).

QI projects systematically apply what is already known into the local practice, intended to quickly improve patient care within a specific setting. The goal of QI projects is to close a gap in performance at a specific health care system. The "performance" is a standard in health care that is not efficiently/appropriately/consistently being done (4). For these reasons, QI focuses on translating existing knowledge into programs or practices to immediately improve the quality of services to individuals and populations within a local institution or setting (5). The risk of participation in QI is the same as the risk of receiving standard clinical care (6) since the standard of care remains the same for all patients.

In contrast, research projects use a systematic approach to discover something that is unknown. Research projects add new knowledge to what was previously unknown in literature through testing of a hypothesis or a scientific question (4). Research aims to generate knowledge with broad applications, often through controlled studies. The subjects may or may not benefit directly from the knowledge gained. Research studies aim to evaluate an innovation, study something new, or analyze a process not yet rigorously studied (6).

Appendix

IMPORTANT: RFP Submission Requirements

Applications will be accepted via the online portal listed in the How to Submit section. Project Proposals/Protocols should be single-spaced using Calibri 12-point font and 1-inch margins. Note there is a 15-page limit exclusive of references. When uploading your Full Proposal please ensure it addresses the following sections:

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 U.S. dollars (USD).
- While estimating your budget please keep the following items in mind:
 - General organizational running costs such as legal fees, insurance, heating, and lighting etc. should be included in an Institutional Overhead (if required). These costs are not specific to a grant request and therefore, should not appear as line items in budgets. However, costs that are specific to the study (e.g., some countries require insurance to be taken out on a per-study basis for clinical research) would be acceptable to be included as line items.
 - The inclusion of these costs cannot cause the amount requested to exceed the budget limit set forth in the RFP.
 - 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.
 - It should be noted that grants awarded 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. Please [click here](#) for details.