Pfizer Quality Improvement Request for Proposals

Competitive Grant Program – using Pfizer Internal Review Process

Shared Decision Making in Hemophilia Patient Care

Overview

Shared Decision Making (SDM) plays a vital role in the interaction between individuals living with hemophilia (PlwH), their caregivers, and the multidisciplinary teams at hemophilia treatment centers.This competitive grant program aims to support Quality Improvement (QI) projects that integrate SDM tools and care algorithms into hemophilia patient care.

Geographic Scope

United States

Project Types and Area of Interest

It is our intent to support projects focusing on

- Implementing shared decision making (SDM) tools and/or management of care algorithms into hemophilia patient care. Multi-disciplinary collaborations are encouraged when appropriate, but all partners must have a relevant role.
- Identifying significant barriers that contribute to geographic, gender and racial healthcare disparities disproportionately impacting the Hemophilia community. The goal is to enhance early detection and determine targeted interventions that address these challenges with focus on SDM.
- Exploring empowering strategies that enable patients to actively participate in their care, as well as in making informed decisions regarding disease management options.

Key Milestones

Submission Deadline	Anticipated Grant Award	Anticipated Project Start Date
23 JUL 2025	SEP 2025	NOV/DEC 2025

Funding Range and Project Length

Individual projects requesting up to $30,000 will be considered. Pfizer anticipates awarding 2 grants.

Project Length can be up to 18 months.

I. Eligibility

Geographic Scope/Location of Project:

- United States

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 Inc. 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 Inc. may be subject to rescission.

II. Requirements

Primary Area of Interest:

Hemophilia

General 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.

- Shared Decision Making (SDM) is an important aspect of the interaction between people living with hemophilia (PlwH) or their caregivers and the multidisciplinary team at the hemophilia treatment center.[1,2]
- The SDM process fosters effective communication with empathy, allowing the person living with hemophilia and the multidisciplinary team (MDT) to collaboratively determine the most comprehensive management of care. This involves making informed treatment decisions based on clinical evidence, assessing available treatment options, benefits, efficacy, and safety, while considering the values and preferences of the PlwH.[1,3,4]
- Regarding hemophilia, various tools and guidelines already exist to assist people living with hemophilia (PlwH) in navigating discussions and establishing clear health goals. For instance, the

WFH SDM tool is available. However, healthcare disparities remain a significant issue for underserved populations.[5,6]

- With this in mind, it is our intent to support projects that focus on:
- Implementing shared decision making (SDM) tools and/or management of care algorithms into hemophilia patient care. Multi-disciplinary collaborations are encouraged when appropriate, but all partners must have a relevant role.
- Identifying and addressing significant barriers that contribute to geographic, gender and racial healthcare disparities disproportionately impacting the Hemophilia community. The goal is to enhance early detection and determine targeted interventions that address these challenges with focus on SDM.
- Exploring empowering strategies that enable patients to actively participate in their care, as well as in making informed decisions regarding disease management options, systematically assessing and documenting patient's view on their treatment & its burden to be considered as a data point in the SDM discussion.
- 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.

Target Audience

- People living with hemophilia, caregivers and members of multidisciplinary teams that care for Hemophilia patients including but not limited to Hematologists, Pharmacists, Specialty Nurses, Orthopedist, Genetic Counsellors, and other Physicians.

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 $30,000 will be considered. Pfizer anticipates awarding 2 grants.
- Award amounts include direct costs, institutional overhead costs (capped at 28% per Pfizer policy), and indirect costs.

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: Hemophilia
- Select the following Competitive Grant Program Name: 2025 RD US SDM Hemophilia 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, Talita Honorato-Rzeszewicz (talita.honorato-rzeszewicz@pfizer.com), with the subject line "SDM Hemophilia QI."

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.

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 Inc. 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 internal Pfizer review process to make final grant decisions. Organizations are invited to submit an application addressing the research gaps 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.

About Pfizer QI 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 (7,8). 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) (9).

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 (10). 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 (11). The risk of participation in QI is the same as the risk of receiving standard clinical care (12) 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 (10). 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 (12).

References

1. Valentino,L. et al. Personalising haemophilia management with shared decision making. J Haem Pract 8(1), 2021.
2. Mayo Clinic Shared Decision Making National Resource Center. Accessed May 20, 2025. https://carethatfits.org/shared-decision-making. Published August 19, 2024
3. Thornburg C., Coffin D. How clinicians and persons with hemophilia may approach shared decision-making. Exp. Rev. Hem. Vol 17 (6), 2024
4. NBDF. Shared Decision Making. Accessed May 20, 2025. https://www.bleeding.org/bleeding-disorders-a-z/treatment/shared-decision-making.
5. WFH. SDM WFH Shared Decision Making Tool. Accessed May 20, 2025. https://sdm.wfh.org.
6. Skinner M. et al. Achieving the unimaginable: Health equity in haemophilia. Haemophilia 26 (1), 2020.
7. Baily MA, et al., Hastings Cent Rep, 2006.
8. Lynn J, et al., Ann Intern Med, 2007.
9. Centers for Medicare & Medicaid Services, Page Last Modified: 09/10/2024.
10. Jackson C, Research Quality Manager, Office of Research and Scholarship University of Maryland, Baltimore School of Nursing.
11. Columbia University Institutional Review Board Guidance for the Classification of Quality Improvement Activities Versus Research with human Subjects, 2023.
12. Newhouse et al., J Nurs Adm, 2006.ibliography of relevant references.

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 12-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 through GMGP 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.

Required Documents

- Project Plan or Proposal