Request for Proposals (RFP)
Smoking Cessation
September 3, 2014

I. Background

Pfizer Independent Grants for Learning and Change (IGLC) and the Smoking Cessation Leadership Center (SCLC) at the University of California, San Francisco are pleased to announce a second round of grant funding that will produce measurable learning and change strategies for organizations interested in smoking cessation. The word "independent" in IGLC means that the projects funded by Pfizer are the full responsibility of the recipient organization. Pfizer has no influence over any aspect of the projects, and only asks for reports about the results and the influence of the projects in order to share them publicly. Information on the first round of grant funding can be found at www.pfizer.com/independentgrants under the sections on closed RFPs and prior funded initiatives.

The SCLC, which is volunteering its assistance to this grants program and receives no financial remuneration from Pfizer, is a national program office of the Robert Wood Johnson Foundation and also receives significant support from the Legacy Foundation. The SCLC mission is to increase smoking cessation rates, as well as the number and types of health professionals who help smokers quit. The Center creates partnerships with a variety of groups and institutions to develop and implement programs for smoking cessation. Partnerships with dental hygienists, anesthesiologists, pharmacists, nurses, emergency physicians, hospitals, family physicians, counselors, the federal Substance Abuse and Mental Health Services Administration and myriad other groups all lead toward the same goal: saving lives by increasing smoking cessation rates and cessation interventions.

This Request for Proposals (RFP) is being issued by both organizations. SCLC is the lead organization for review and evaluation of applications. A review committee, led by SCLC, will make decisions on which initial letters of intent will be chosen to submit full proposals and which proposals will be funded. Grant funding will be provided by the IGLC. Follow-up evaluation and technical assistance during the course of the grant period will be performed by SCLC. Up to $2 million is available for this second round (see below for eligibility of institutions and size of awards).

The RFP model is a two stage process. Stage 1 is the submission of a letter of intent. After review of the LOI, some institutions will be invited to submit a full grant proposal, which constitutes Stage 2.
When the RFP is issued, it is posted on the Pfizer IGLC website (www.pfizer.com/independentgrants) and is sent via email to listservs maintained both by Pfizer and SCLC. In addition the RFP may be posted on websites of other relevant organizations.

II. Eligibility

Geographic Scope:	☑ United States Only ☐ International(specify country/countries)_____
Applicant Eligibility Criteria:	U.S. health care institutions, large and small; health care professional organizations and other non-profit organizations with a mission related to healthcare improvement; government agency partners with the capacity to reach individual smokers. Collaborations within institutions (e.g., between departments and/or inter-professional) as well as among different institutions/organizations are encouraged. All partners should have a relevant role and the requesting organization must have a key role in the project. Questions about eligibility can be directed to either SCLC or IGLC.

III. Requirements

Date RFP Issued:	September 3, 2014
Clinical Area:	Smoking Cessation
Specific Area of Interest for this RFP:	It is our intent to support projects that focus on improving the competence of healthcare professionals and the performance of healthcare systems so that all smokers can be helped to quit. Special populations that are disproportionately burdened by smoking are especially relevant. These include persons with chronic mental illness, substance use disorders, those in the criminal justice system, patients with chronic illnesses caused by smoking (e.g., COPD, cancer, heart disease), diabetes young adults, disadvantaged socioeconomic communities, racial and ethnic minority populations, etc. Proposals that go beyond merely educating health professionals to address system changes that will reach larger numbers of patients are encouraged. Examples include accountable care organizations, integrated health delivery systems, and national clinician associations. Systems-change proposals might include multiple healthcare organizations that coordinate care of smokers wanting to quit among relevant partners (e.g. hospital to quitline or community center). Proposals that will evaluate the results of the intervention(s) in terms of actual numbers of smokers who attempt to quit and/or successfully quit are encouraged. During review the intended outcome of the project is given careful consideration and projects with the maximum likelihood to directly impact patients and measure patient outcomes will be given high priority. Project timelines should be a maximum of 2 years from grant award date.
Target Audience:	Primary-care providers and other clinicians (e.g., family medicine, internists, nurse practitioners, physician assistants, respiratory therapists), specialists (e.g. cardiologists, pulmonologists, , oncologists), patients, and healthcare delivery systems.

Disease Burden Overview:	The Centers for Disease Control and Prevention website is a comprehensive resource for Smoking and Tobacco Use Information: http://www.cdc.gov/Tobacco/
Related Guidelines and Recommendations:	Current clinical practice guidelines and systems-change resourses can be found at the website Treating Tobacco Use and Dependence. April 2013. Agency for Healthcare Research and Quality, Rockville, MD. http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/tobacco/clinicians/update/index.html
Example National Targets:	The U.S. government program, Healthy People (www.Healthypeople.gov) includes a 2020 Tobacco Use Goal to "Reduce illness, disability, and death related to tobacco use and secondhand smoke exposure." Healthy People 2020 objectives are selected to communicate high-priority health issues. Example objectives include: TU-1.1 Reduce cigarette smoking by adults* Baseline: 20.6 percent of adults aged 18 years and older were current cigarette smokers in 2008 (age adjusted to the year 2000 standard population) Target: 12.0 percent TU-4.1 Increase smoking cessation attempts by adult smokers ** Baseline: 48.3 percent of adult smokers aged 18 years and older attempted to stop smoking in the past 12 months in 2008 (age adjusted to the year 2000 standard population) Target: 80.0 percent TU-5.1 Increase recent smoking cessation success by adult smokers Baseline: 6.0 percent of adult smokers aged 18 years and older last smoked 6 months to 1 year ago in 2008 (age adjusted to the year 2000 standard population) Target: 8.0 percent TU-10.4 Increase tobacco cessation counseling in substance abuse care settings Baseline: 34.2 percent of substance abuse care facilities reported offering smoking cessation counseling services in 2011 Target: 37.6 percent http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=41 * according to CDC 2014 data: this rate improved to 18.1% in 2012 ** according to CDC 2014 data: this rate improved to 52.9% in 2012

Expected Approximate Monetary Range of Grant Applications:	The total amount available for this RFP is $2 million. Grant proposals should be in the range of $25,000 to $150,000. Review panel members may provide total budget suggestions at the LOI stage for those chosen to move forward to the Full Proposal stage. The ratio of potential impact to budget request will be a criterion for judging both the LOIs and the full proposals. In general, single institutions with less reach should prepare more modest budgets.
Key Dates:	LOI due date: October 23, 2014 Anticipated LOI Notification Date: December 10, 2014 Full Proposal due date: February 4, 2015 (Note that only accepted LOIs will be invited to submit full proposals) Anticipated Full Proposal Notification Date: March 31, 2015 Grants will be paid-in-full following execution of fully signed Letter of Agreement. Grant award date for timeline planning purposes: April 15, 2015
How to Submit:	Please go to the website at www.pfizer.com/independentgrants and click on the button "Go to the Grant System". If this is your first time visiting this site you will be prompted to take the Eligibility Quiz to determine the type of support you are seeking. Please ensure you identify yourself as a first-time user. Select the following Area of Interest: Smoking Cessation SCLC 2014 Requirements for submission: Complete all required sections of the online application and upload the completed LOI template (see Appendix). If you encounter any technical difficulties with the website, please click the "Need Support?" link at the bottom of the page
Questions:	If you have questions regarding this RFP, please direct them in writing to the Grant Officer, Jackie Waldrop at Jacqueline.Waldrop@Pfizer.com or to the SCLC, Catherine Saucedo at csaucedo@medicine.ucsf.edu
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 or to make a summary presentation during the review period.

IV. Terms and Conditions

1. This RFP does not commit Pfizer or its partners to award a grant or a grant of any particular size if one is awarded, nor to pay any costs incurred in the preparation of a response to this request.

2. Pfizer reserves the right to accept or reject any or all applications received as a result of this request, or to cancel this RFP in part or in its entirety, if it determines it is in the best interest of Pfizer to do so.

3. For compliance reasons and in fairness to all applicants, all communications about the RFP must come exclusively to Pfizer IGLC or to the SCLC. Applicants should not contact other departments within Pfizer regarding this RFP. Failure to comply will disqualify applicants.

4. Consistent with its commitment to openness and transparency, Pfizer reports education grants provided to medical, scientific, and patient organizations in the United States. Pfizer reserves the right to announce the details of successful grant application(s) by whatever means insures transparency, such as on the Pfizer website, in presentations, and/or in other public media. In the case of this RFP, a list of all LOIs selected to move forward may be publicly disclosed. In addition, all approved full proposals, as well as all resulting materials (e.g., status updates, outcomes reports, etc.) may be posted on the IGL&C website and/or any other Pfizer document or site.

5. Pfizer reserves the right to share with organizations that may be interested in contacting you for further information (e.g., possible collaborations) the title of your proposed project and the name, address, telephone number, and e-mail address of the applicant from the requesting organization.

6. To comply with 42 U.S.C. § 1320a-7h and 42 C.F.R. §§ 403.900-.914 (the Sunshine Act), Provider (sponsor) must provide to Pfizer specific information for the U.S.-licensed physicians and U.S. teaching hospitals ("Covered Recipients," as defined by applicable law) to whom Provider (sponsor) furnished payments or other transfers of value from the original independent grant awarded by Pfizer. Those payments or transfers-of-value include compensation, reimbursement for expenses, and meals provided to faculty (planners, speakers, investigators, project leads, etc.) and "items of value" (items that possess a value on the open market, such as textbooks) provided to faculty and participants, if those faculty and/or participants meet the definition of Covered Recipient. Provider (sponsor) must submit the required information during the reconciliation process or earlier, upon Pfizer's request, so Pfizer can meet Sunshine Act reporting commitments. Be advised that Pfizer will not make any payments to any individuals; grant funding shall be paid directly to Provider (sponsor).

7. No portion of a Pfizer independent grant may be used for food and/or beverages for learners and/or participants in any capacity. Provider (sponsor) will be required to certify during the reconciliation process and/or the periodic collection of Sunshine reporting that funds were not used for food and/or beverages for learners and/or participants.

8. In the performance of all activities related to an independent grant, the Provider (sponsor) and all participants must comply with all applicable Global Trade Control Laws. "Global Trade Control Laws" include, but are not limited to, U.S. Export Administration Regulations; the International Traffic in Arms Regulations; EU export controls on dual-use goods and technology; Financial Sanctions Laws and Restrictive Measures imposed within the framework of the CFSP - Treaty on European Union; and the economic sanctions rules and regulations administered by the U.S. Treasury Department's Office of Foreign Assets Control.

Appendix: Letter of Intent Submission Guidance

LOIs should be single-spaced using Calibri 12-point font and 1-inch margins. Note there is a 3-page limit in the main section of the LOI. ***LOIs not meeting these standards will not be reviewed.***

LOIs should include the following sections

Main Section (not to exceed 3 pages):

A. Title

B. Goal - 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).

C. Objectives - List the overall objectives you plan to meet with your project both in terms of learning and expected outcomes.

D. Assessment of Need for the Project
    1. 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 were analyzed to determine that a gap existed.

    2. 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

E. Project Design and Methods
    1. Describe the planned project and the way it addresses the established need.
    2. If your methods include educational activities, please describe succinctly the topic(s) and format of those activities.

F. Innovation
    1. Explain what measures you have taken to assure that this project idea does not duplicate other projects or materials already developed.
    2. 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.

G. Design of Outcomes Evaluation
    1. 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.
        - Identify the sources of data you anticipate using to make the determination.
        - Describe how you expect to collect and analyze the data.
        - Explain the method used to control for other factors outside this project (e.g., use of a control group or comparison with baseline data).
    2. Quantify the amount of change expected from this project in terms of your target audience.
    3. Describe how the project outcomes might be broadly shared or disseminated.

H. Anticipated Project Timeline

I. Requested Budget Amount
    1. A total amount requested is the only information needed for the LOI stage. Full Budget is not required. This amount can be adjusted at the Full Proposal stage as applicable.
    2. While estimating your budget please keep the following items in mind:
        - 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.
        - It should be noted that grants awarded through IGLC 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.

J. Additional Information
    1. If there is any additional information you feel Pfizer or SCLC should be aware of concerning the importance of this project, please summarize it in within the page limitations.

Organizational Detail (not to exceed 1 page)

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 at the Full Proposal stage only and should not be included with the LOI.

LOIs should be single-spaced using Calibri 12-point font and 1-inch margins. There is a 3-page limit for the main section and a 1-page limit for organizational detail. If extensive, references may be included on 1 additional page. **Final submissions should not exceed 5 pages in total** (3 pages for the main section, 1 page for organizational detail, and 1 page for references).

Make every effort to submit as **few** documents as possible—you are encouraged to include all required sections in one document. There is no need to submit the organization detail or references in a document separate from the main section of the LOI.

Please note the formatting and page limit for the LOI. The LOI is inclusive of additional information of any kind. A submission exceeding the page limit ***WILL BE REJECTED*** *and* ***RETURNED UNREVIEWED****.*