

# IGLC Extension Application

## Procedure for Continuation and/or Expansion of an Existing Grant-supported Initiative Where Additional Funding is Requested

This procedure is modeled after the NIH procedure for completing a supplemental application. A new grant application (an extension application) may be submitted to request support for a significant expansion of a project's scope. The extension application must be related to, and build upon, the prior grant.

Applications are **not appropriate** when the sole purpose is to restore awards to the full initial project budget amount, if they were administratively reduced by the original review panel at the time of approval.

Applications will only be considered when aligned with current clinical areas of interest and if funding is available (both can be found on [www.pfizer.com/IndependentSupport](http://www.pfizer.com/IndependentSupport)),

A extension application should not be submitted until after the original application has been awarded, and Pfizer has had the opportunity to evaluate the success of the original grant.

### Components of a extension application include:

#### Step 1: Letter of Request (to be submitted via the IGLC online grant system):

- A one-page *Letter of Request* that describes the nature of the funding request and how it will improve upon, extend or expand the specific aims, design, or methods of the current grant.
- Completion of the *Extension Application Worksheet*, which includes the following information (3-page maximum):
  - Original Grant ID Number
  - Original Program Title
  - Brief description and expected outcomes of original initiative
  - Current project status, results to-date, evidence of initial success, and plans for ongoing assessment and reporting.
  - Brief description of the high-level proposal or plan to extend or expand the original initiative.
  - Amount Requested

**Step2: Full Proposal** (Full Proposals to be submitted via the online grant system only following acceptance of a Letter of Request):



- Full Proposal (*see details outlined below in Full Proposal Submission Guidance*)
- Budget

**Additional Information:**

- All extension applications must be submitted by the same organization as listed on the original grant request via the IGLC online grant system, [www.pfizer.com/independentsupport](http://www.pfizer.com/independentsupport)
- Extension applications can only be submitted twice a year during posted windows.

Submission Window 1: November 1 to February 28

Submission Window 2: May 1 to August 15

- Application review and decision-making for extension applications will be at the sole discretion of a seated external review panel.
- All current grant requirements (signed LOA, transparency) and policies apply.

**Full Proposal Submission Guidance**

**Note Before Proceeding:** Applicants whose Letters of Request have been invited to move forward for full proposal submission will be informed of this decision in an email notification. Full Proposal extension applications should only be submitted by applicants whom have been invited following acceptance of their Letter of Request. .

Proposals must be single-spaced, using Calibri 12-point font and 1-inch margins. Note that the main section (section C, below) of the proposal has a 15-page limit and the organization detail (section D, below) has a 3-page limit. **All proposals must follow the outline detailed below.**

Proposal requirements will include the following sections:

- A. Cover Page** (Complete all required fields online in the Pfizer Grant Management system at [www.pfizer.com/independentsupport](http://www.pfizer.com/independentsupport); no page limit):
- B. Table of Contents** (no page limit):
- C. Main Section of the proposal** (not to exceed 15 pages):



1. **Summary of Original Initiative/Grant that the Revision Application is based upon.**
2. **Overall Goal & Objectives:** Describe the overall goal for this 'new' initiative. List the **key** objectives and how they are intended to address the established need for this initiative. Do not include learner objectives.
3. **Technical Approach:** Describe how this initiative will continue to meet or enhance the goals of the specific area of interest for the original RFP. Include information that impacts your specific intervention, linking regional or local needs to those identified on the national basis if appropriate.
  - a. **Current Assessment of need in target area**
    - i. *Please include quantitative baseline data summary, initial metrics (e.g., quality measures), or project starting point (please cite data on gap analyses or relevant patient-level data that describes the problem) in **your** target area. **NOTE:** These data should come directly from the original initiative/grant that this Revision Proposal is based upon. Describe the source and method used to collect the data. Describe how the data was analyzed to determine that a gap existed.*
    - ii. *Describe the primary audience(s) targeted for this intervention. Also describe who will directly benefit from the project outcomes.*
  - b. **Intervention Design and Methods:** Describe the way the intervention planned addresses the established need and produces the desired results.
  - c. **Evaluation Design**
    - i. *Describe how you will determine if the practice gap identified in the needs assessment was addressed for the target group in terms of the metrics used for the needs assessment.*
      - *Identify the sources of data that you anticipate using to make the determination.*
      - *Describe how you expect to collect and analyze the data.*
      - *Identify the method used to control for other factors outside this intervention (e.g., use of a control group)*
    - ii. *Quantify the amount of change expected from this intervention in terms of your target audience (e.g., a 10% increase over baseline or a decrease in utilization from baseline between 20-40%)*
    - iii. *Indicate how you will determine if the target audience was fully engaged in the intervention.*



- iv. Describe how you plan for the project outcomes to be broadly disseminated.
  4. **Detailed Workplan and Deliverables Schedule:** Include a narrative (which counts toward the 15-page limit) describing the work plan and outlining how the project will be implemented over the X-year period. Using a table format (no page limit), list the deliverables and a schedule for completion of each deliverable. In the budget, associate each of the deliverables to a specific dollar amount.
- D. **Organizational Detail** (not to exceed 3 pages)
  1. **Leadership and Organizational Capability:** Describe the attributes of the institution(s)/organization(s)/association(s) that will support and facilitate the execution of the project. For each institution/organization/association, identify the proposed leadership of the proposal, the specific role that they will undertake to meet the goals of this initiative and their qualifications for the specified roles.
  2. **Staff Capacity:** Include the name of the person(s) responsible for this project (healthcare provider champion, medical advisor, or PI). The project manager, whether a current staff member or someone to be hired, is essential to the work outlined in your proposal. Demonstrate the project manager's availability, commitment, and capability to plan, implement, and evaluate the proposed project; describe how the project manager will oversee the project activities, including ensuring that tasks are accomplished as planned. List key staff members proposed on the project, including their roles and expertise and knowledge of the field. Key staff members can be defined as those contributing at least 10% of their time to the initiative.
    - a. NOTE Regarding Proposed Speakers: Pfizer shall not provide funding of CME when Pfizer has knowledge at the time of the decision to fund CME that a proposed CME faculty member has conducted a promotional speaking engagement on similar topic(s) on behalf of Pfizer in the past 12 months.
- E. **Detailed Budget** (Refer to/Complete **Budget Template**; no page limit):
  1. Provide a detailed budget, using the template provided, **with a written narrative** that contains a detailed explanation of each cost element proposed. Budget narratives should include a justification for all personnel, indicating the percentage of time allocated to the initiative. The budget should demonstrate appropriate and reasonable costs for project expenses.
  2. Pfizer IGLC reserves the right to fund projects based on availability of funds and strength and quality of applications.
  3. Required deliverables can be listed in the budget template based on project particulars. Applicants are expected to customize the budget for their proposal, adding additional details and deliverables as appropriate.
  4. Pfizer maintains a company-wide, maximum allowed overhead rate of 28% for independent studies and initiatives. If your institution has a preexisting and published indirect overhead rate that exceeds this amount, please provide the



appropriate documentation. Exceptions may be reviewed on an initiative by initiative basis, but we cannot guarantee approval.

5. Some examples of what awarded funds may not be used for are listed below:

- Office equipment (e.g., furniture, computers)
- Day-to-day organizational operations
- Registration and travel costs for professional development meetings or courses not related to this initiative
- Health care subsidies for individuals
- Construction or renovation of facilities
- Pharmaceutical products, drugs, or alcohol
- Lobbying

**F. Staff Biosketches** (no page limit):

Applicants must provide the biosketches of key project staff members in an appendix.

**G. Letter(s) of Commitment** (no page limit):

Letter(s) must be provided from institutional authority or authorities and collaborators guaranteeing access, resources and personnel (as the case may be) for proposed project will be provided. Assurance that the resource(s) will be appropriately allocated is encouraged.

**H. Required Documentation** (no page limit, required upon approval of a Full Proposal):

Each organization must provide all required financial and contractual documentation as determined by Pfizer IGLC at the time of award (e.g., Letter of Agreement).

**Submission:** Proposals should be submitted online via the Pfizer Independent Grants for Learning and Change website [www.pfizer.com/independentsupport](http://www.pfizer.com/independentsupport) and click on the button “Go to the Grant System”.

You will be prompted to take the *Eligibility Quiz* to determine the type of support you are seeking.

Submit extension applications under the clinical area: Extension Application

**Requirements for submission:**

Complete all required sections of the online application and upload all mandatory documentation as outlined.



### Extension Grants – Table of Budget Availability (as of 6/1/13)

<u>Clinical Area of Interest</u>	<u>Funds Available – U.S. only</u>	<u>Funds Available - International</u>
Acromegaly	No	No
Cardiovascular Risk	No	<b>Yes</b>
Dietary Supplements	No	No
Epilepsy	No	No
Hemophilia	No	No
Infectious Disease (Bacterial, Vaccines)	No	No
Lysosomal Storage Diseases	No	No
Multiple Sclerosis	No	No
Oncology – Lung Cancer	No	<b>Yes</b>
Oncology – All other	No	No
Pain (DPN, Fibromyalgia, Chronic, Neuropathic, Migraine)	<b>Yes</b>	No
Respiratory (COPD, Cough and Cold)	No	No
Rheumatoid Arthritis	<b>Yes</b>	No
Smoking Cessation	No	<b>Yes</b>
Urology	No	No
Women’s Health	No	No



## **Appendix B**

### **Extension Application Worksheet**

*Provide the following requested information. Please keep your descriptions brief. There is a 3-page limit and formatting should be single spaced using Calibri 12-point font and 1-inch margins.*

I. Original Grant ID Number:

II. Original Program Title:

III. Brief description and expected outcomes of original initiative:

IV. Current project status, results to-date, evidence of initial success, and plans for ongoing assessment and reporting:

V. Brief description of the high-level proposal or plan to extend or expand the original initiative:

VI. Amount Requested:

