Pfizer and the Global Coalition on Aging Announces

Vaccines for All: Longevity Unleashed for Everyone (VALUE)

Competitive Grant Program to Increase Adult Vaccination Rates in Japan - using External Review Panel

I. Background

Pfizer Global Medical Grants (GMG) 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 GMG competitive grant program involves a publicly posted Request for Proposal (RFP) that provides detail regarding a specific area of interest, sets timelines for review and approval, and uses an external review panel (ERP) to make final grant decisions. Organizations are invited to submit an application addressing the specific gaps in practice 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.
Background (continued)

In 2019, Pfizer GMG entered into a collaboration agreement with the Global Coalition on Aging (GCOA) to implement an innovative learning and change strategy. GCOA aims to promote healthy and active ageing and has similar goals to GMG with respect to promoting high quality education and change management initiatives that enable healthcare professionals to practice at an appropriate standard of care, thereby improving patient outcomes.

GCOA approach is:

1) Educating and driving change among policymakers, thought leaders, health key opinion leaders, and the general public
2) Partnering with global organizations and institutions and governments to lead the private sector on change management aligned to 21st century healthy and active ageing
3) Aligning business strategies and workforce policies with ageing market opportunities
4) Creating platforms to demonstrate thought leadership on global, national, and community scales

Through this independent effort, our goals are to:

a) Incorporate learnings that address identified gaps and support increasing adult vaccination in Japan as it relates to healthy ageing
b) Implement a change strategy that enables HCPs to apply knowledge learned and translate it into practice; resulting in measurable improvements to patient health outcomes related to increasing adult vaccination rates in Japan
c) Implement a change strategy for Japan public health and economic policy that considers adult vaccination as a central strategy to achieve community and national public policy goals
## II. Eligibility

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<tr>
<th>Geographic Scope:</th>
<th>Japan</th>
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**Applicant Eligibility Criteria**

- Only organizations that demonstrate a partnership approach with a Japanese organization, or a local organization in Japan may submit Letters of Intent to this RFP.
- Only organizations are eligible to receive grants, not individuals or medical practice groups.
- The following may apply: medical, dental, nursing, allied health, and/or pharmacy professional schools; healthcare institutions (both large and small); professional associations; government agencies; and 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.
- For programs offering credit, the requesting organization must be the accredited grantee.

## III. Requirements

<table>
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<tr>
<th>Date RFP Issued</th>
<th>November 18, 2019</th>
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<tr>
<td>Clinical Area</td>
<td>Vaccines</td>
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**Specific Area of Interest for this RFP:**

It is our intent to support projects that focus on increasing the uptake of vaccines among the adult population aged 65 and older in Japan. Disease prevention through vaccines is a recognized feature of global public health, and adult vaccines are a critical prevention strategy in an era of super-ageing societies. Implementation of a quality improvement program for adult vaccines will consist of systematic and continuous actions that enable organizations to measurably increase the number of adults aged 65 and older that are immunized against at least one targeted vaccine-preventable disease.¹

We are seeking innovative quality improvement strategies, health services delivery tools, behavior change research, and/or educational or health communications applications for Japan that identify and evaluate a quality improvement methodology within hospitals and/or other healthcare and
community organizations that increases the number of adults receiving vaccinations against one or several targeted diseases. Multi-disciplinary collaborations are encouraged when appropriate, but all partners must have a relevant role.

The research and/or systems-change strategies should target barriers to vaccine uptake among adults that are relevant and salient for the specific hospital/clinic, organization, or community setting. The project proposals can identify and replicate existing best practices from other settings.

Projects could include but are not limited to:

- practice improvement strategies for relevant organizations engaging with the older adult population (which comprise physicians, nurses, pharmacists, trainers, administrative staff, caregivers, community health workers);
- innovative clinical processes;
- strategies to streamline care coordination among relevant organizations engaging with the adult population (which comprise physicians, nurses, pharmacists, trainers, administrative staff, caregivers, community health workers);
- communications and community outreach strategies, including with/through employers, targeting the adult population and their older adult family members;
- practices or methodologies that address challenges related to supply chain/procurement or cold storage of vaccines;
- improving measurement of clinical and/or health economic outcomes from increased vaccine uptake;
- implementation of new information technology tools for tracking of vaccines usage, modification of existing tools, or solutions to address interoperability challenges; or
- decreasing other barriers to vaccine uptake in the 65+ population relevant to the hospital/clinic, organization, or community setting, etc.

Initiatives that solely focus on knowledge improvement (e.g., journal clubs, grand round programs, lectures) will not be eligible for consideration. Programs must incorporate elements of measureable practice improvement and change or outcomes of an implemented program.

It is imperative for the program to have the support of hospital/organizational leadership, which includes leadership’s commitment to providing support that includes staffing, financial, evidence-based resources, and information technology to ensure an effective quality improvement program.

It is expected that projects will be evidence-based (e.g., Quality Improvement) and the proposed research/evaluation will follow generally accepted scientific principles. During review the intended outcome of the project is given careful consideration and, if appropriate based on the
project goal, projects with the maximum likelihood to directly impact patient care will be given high priority. Projects including an educational element can find more information on principles of learning and behavior change for health professionals at [www.pfizer.com/files/HealthProfessionalsLearningandBehaviorChange_AFePrinciples.pdf](http://www.pfizer.com/files/HealthProfessionalsLearningandBehaviorChange_AFePrinciples.pdf).

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.

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

Information on how to submit requests for support of clinical research projects can be found at [www.Pfizer.com/iir](http://www.Pfizer.com/iir).

### Target Audience:

- (Must have impact in Japan)
- Stakeholders at the intersection of ageing and health. Can include but is not limited to small and large hospitals, academic medical centers, community hospitals, ambulatory care settings, community and senior centers, other community settings where adults might access vaccines or information about vaccines (e.g. mobile clinics, community pharmacies, workplace), and local governments. The patient population of interest is adults ages 65 years and older.

### Disease Burden Overview:

- Vaccines, and childhood immunization in particular, are one of the great success stories of public health in the 20th century. While Japan is one of the world’s strongest economies, with a robust health system, researchers have noted that among developed countries a vaccine gap remains between Japan and other developed countries.\(^2\)

As the rapidly ageing global population places new pressures on our health and care systems and on our economies, immunization for adults can and should be our next great public health achievement, particularly for super-ageing societies like Japan. Japan has a recommended vaccine schedule but must facilitate initiatives to promote vaccination, both in children or adults. There are currently 2.5 billion over age 50 on the planet, and in Japan, adults over 55 make up 40.39% of the total population.\(^3\) This dramatic demographic realignment creates a health and economic need for initiatives which protect health and promote health and well-being among older adults and adult vaccines will have an important role to play in this. Among the public health “best buys,” adult vaccines will have a powerful role in reducing costs and keeping people healthier, independent and active.

Looking globally at levers to understand opportunities in Japan to improve uptake of adult vaccines:
Vaccines save 6 million lives worldwide every year. In the US, an annual average of 30,000+ die of vaccine-preventable diseases and more than 95% of these persons are adults.\(^4\,^5\).

**Vaccines can help to prevent other diseases common among adults.** In 2017 alone, lower respiratory infections led to more than 1.5 million deaths in those aged 60 and older globally and accounted for 23 million years of life lost.\(^6\).

**Vaccinations in ageing individuals improve quality of life.** Vaccines reduce the risks for morbidity and disability in ageing populations and have the potential to increase life expectancy. 15% of older adults hospitalized with influenza will suffer catastrophic disability and lose independence.\(^7\).

**Vaccines are integral to ongoing health and wellness.** When vaccines are skipped, vulnerability to several diseases increases, especially with age (e.g. vaccines against shingles, pneumococcal disease and influenza).\(^8\).

**Vaccines helps to mitigate the effects and severity of other diseases.** For older adults with weakened immune systems, vaccines can prevent complications from ongoing health conditions such as diabetes or heart disease, as they can protect from complicating factors.\(^9\).

**Vaccinations both benefit individuals and help to prevent the spread of epidemics.** In England, the influenza vaccine averts between 180,000 and 626,000 cases of influenza a year and helps save between 5,678 and 8,800 lives.\(^10\).

### Recommendations and Target Metrics:
- **Related Guidelines and Recommendations**
- The WHO provides a framework for creating a comprehensive vaccination program for countries to adopt and institute. [http://www.euro.who.int/__data/assets/pdf_file/0008/386684/vaccination-report-eng.pdf?ua=1](http://www.euro.who.int/__data/assets/pdf_file/0008/386684/vaccination-report-eng.pdf?ua=1) (page 11)
- **Recommendations to Improve Adult Vaccination Coverage in Latin America**
- **WHO publishes position papers**

### Gaps Between Actual and Target, Possible Reasons for Gaps:
Japan continues to close the vaccination gap with other developed countries through efforts by the Ministry of Health, Labour and Welfare and Professional associations. However, much still needs to be done to improve vaccination coverage particularly in adult populations.

### Barriers:
- Poor distribution and awareness about the need for adult vaccination, among the public as well as among healthcare providers and professionals who engage with older adults
- Lack of inclusion in care pathways or other systematic practices to
### Current National Efforts to Reduce Gaps:

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<th>Effort</th>
<th>Details</th>
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### Ensure Widespread Vaccination of Adults

- Strategic barriers that do not actively encourage vaccines at any age
- Lack of social awareness of the need and importance of adult vaccinations
- Confusion on what vaccines are needed for adults, and at what age these vaccines are needed
- Lack of public funding for vaccines to allow greater clinical choice
**Expected Approximate Monetary Range of Grant Applications:**

- Individual projects requesting up to $250,000 USD will be considered. Larger budget amounts will be accepted if justified.
- The amount of the grant Pfizer will be prepared to fund for any project will depend upon the external review panel’s evaluation of the proposal and costs involved, and will be stated clearly in the approval notification.

**Key Dates:**

- RFP release date: November 18, 2019
- LOI due date: January 31, 2020
  
Pleas note the deadline is midnight Eastern Time (New York, GMT -5).
- Review of LOIs by External Review Panel: Week of March 1st or March 8th
- Anticipated LOI Notification Date: March 20, 2020
- Full Proposal Deadline: * May 15, 2020
  
*Only accepted LOIs will be invited to submit full proposals
  
Pleas note the deadline is midnight Eastern Time (New York, GMT -5).
- Review of Full Proposals by External Review Panel: Weeks of June 22nd or June 29th
- Anticipated Full Proposal Notification Date: August
- Grants distributed following execution of fully signed Letter of Agreement
- Anticipated Project Start: After August 2020

**How to Submit:**

- Please go to [www.cybergrants.com/pfizer/loi](http://www.cybergrants.com/pfizer/loi) and sign in. First-time users should click “REGISTER NOW”.
- Select the following Competitive Grant Program Name: 2020 Japan VALUE
- 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 “Technical Questions” link at the bottom of the page.

**IMPORTANT:** Be advised applications submitted through the wrong application type and/or submitted after the due date will not be reviewed by the committee.
### Questions:

- If you have questions regarding this RFP, please direct them in writing with the subject line “2020 Japan VALUE RFP” to:
  - Pfizer Grant Officers Aki Kamina and Angelo Carter at [meg.japan@pfizer.com](mailto:meg.japan@pfizer.com)
  - and/or
  - Susan Wile Schwarz, Global Coalition on Aging at [sschwarz@globalcoalitiononaging.com](mailto:sschwarz@globalcoalitiononaging.com)

### Review and Approval Process

- A specific grant program RFP uses an external 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 or to make a summary presentation during the review period.

### References:


### IV. Terms and Conditions

Please take note every Request for Proposal (RFP) released by Pfizer Independent Grants for Learning & Change (IGLC), as well as a RFP released jointly with a Partner(s), is governed by specific terms and conditions. Click [here](#) to review these terms and conditions.
Appendix A

Letter of Intent Requirements

The Letter of Intent (LOI) will be accepted via the online application. When answering the LOI questions in the application please keep the following in mind:

| 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. The RFP includes a national assessment of the need for the project. Please do not repeat this information within the LOI (you may reference the RFP, if necessary). Only include information that impacts your specific project, linking regional or local needs to those identified on the national basis, if appropriate.] |
| 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. |
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<tr>
<td>Anticipated Project Timeline</td>
<td>• Provide an anticipated timeline for your project including project start/end dates</td>
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<tr>
<td>Additional Information</td>
<td>• If there is any additional information you feel Pfizer should be aware of concerning the importance of this project, please summarize here</td>
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<tr>
<td>Organization Detail</td>
<td>• 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.</td>
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| Budget Detail | • 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.  
• The budget amount requested must be in U.S. dollars (USD).  
• While estimating your budget please keep the following items in mind:  
  o 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.  
  o The inclusion of these costs cannot cause the amount requested to exceed the budget limit set forth in the RFP.  
  o 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 |