The Academic Health Science Networks (AHSNs) and Pfizer Independent Grants for Learning & Change (IGLC) on behalf of the Bristol-Myers Squibb – Pfizer Alliance [“the Alliance”]

Request for Proposals (RFP)

Improving Care of Patients with Atrial Fibrillation in Order to Reduce Stroke Risk

I.  Background

There are 15 Academic Health Science Networks (AHSNs) across England, established by NHS England in 2013 to spread innovation at pace and scale – improving health and generating economic growth (the “Network of AHSNs”). Each individual AHSN works across a distinct geography serving a different population in each region. The Network of AHSNs brings expertise, intellectual resources, credibility, and independent oversight to this initiative.

The mission of Pfizer Independent Grants for Learning & Change (IGLC) is to partner with the global healthcare community to improve patient outcomes in areas of mutual interest through support of measurable learning and change strategies. “Independent” means that the projects funded by the Alliance are the full responsibility of the recipient organization. The Alliance has no influence over any aspect of the projects and only asks for reports about the results and the impact of the projects in order to share them with their project partners and publicly.

The Alliance and the Network of AHSNs are collaborating on a joint project as improving care for patients with atrial fibrillation is an aligned area of interest. The geographic scope of this pilot initiative is England only due to the remit of the AHSNs. This RFP is being jointly issued by the Alliance and Network of AHSNs. It is posted on the Pfizer website http://www.pfizer.co.uk/content/pfizer-medical-and-educational-goods-and-services.

II. Eligibility

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<tr>
<th>Geographic Scope:</th>
<th>☑ England Only</th>
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<td></td>
<td>□ International(specify country/countries)________________</td>
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July 2016

PP-GIP-GBR-0409
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<tr>
<th>Applicant Eligibility Criteria:</th>
<th>Proposals are invited from institutions, organisations or associations that are comprised of healthcare professionals and/or that provide healthcare.</th>
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<td>Grants can only be awarded to organisations not individuals.</td>
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<td>Grants cannot be awarded to commercial for-profit organisations.</td>
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<td>To be eligible, proposals from healthcare organisations should include a letter of support from an AHSN but would not need to be from an AHSN team.</td>
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<td>Successful applications must comply with clause 19 of the UK ABPI Code of Practice (Medical and Educational Goods and Services).</td>
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<td>Collaborations within institutions (e.g., between departments and/or inter-professional), as well as between different institutions/organisations/associations, are encouraged. Please note all partners must have a relevant role and the requesting organisation must have a key role in the project.</td>
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### III. Requirements

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<tr>
<th><strong>Date RFP Issued:</strong></th>
<th>Monday 25th July 2016</th>
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<tr>
<td><strong>Clinical Area:</strong></td>
<td>Improving Care of Patients with Atrial Fibrillation (AFIB) in Order to Reduce Stroke Risk</td>
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| **Specific Area of Interest for this RFP:** | It is our intent to support innovative projects that focus on:  
- Improving the quality of patient care and  
- Increasing the rate of uptake of innovation |

It is expected that projects will be focused on evidence-based education and/or quality improvement and the proposed 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 principals of learning and behavior change for health professionals at [www.pfizer.com/files/HealthProfessionalsLearningandBehaviorChange_AFewPrinciples.pdf](http://www.pfizer.com/files/HealthProfessionalsLearningandBehaviorChange_AFewPrinciples.pdf).

There is a considerable amount of interest in receiving responses from projects that utilize system-based changes. Although educational efforts for providers and patients may be entirely appropriate components in responses to this RFP, projects that include an overt description of service evaluation, pathway implementation, or system changes will be given high priority.

The evaluation plan for the projects will also be important as successful projects will be expected to help with onward dissemination of learning.

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

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<tr>
<th><strong>Target Audience:</strong></th>
<th>General practitioners (GPs) and cardiovascular specialists, and other healthcare professionals or decision-makers involved in the care of patients with AFIB.</th>
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| **Recommendations and Target Metrics:** | **Related Guidelines and Recommendations**  
- NICE (National Institute for Health and Care Excellence) Atrial Fibrillation: Management Clinical guideline Published: 18 June 2014 [www.nice.org.uk/guidance/cg180](http://www.nice.org.uk/guidance/cg180)  
- RAND Europe The Future of Anticoagulation Management in Europe Published 1 June 2015 [http://www.rand.org/pubs/research_reports/RR1053.html](http://www.rand.org/pubs/research_reports/RR1053.html) |
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<th><strong>Expected Approximate Monetary Range of Grant Applications:</strong></th>
<th>Individual projects requesting up to a total of £100,000 will be considered. The total available budget related to this RFP is £400,000. The amount of the grant the Alliance will be prepared to fund for any project will depend upon the AHSN external review panel’s evaluation of the proposal and costs involved, and will be stated clearly in the approval notification.</th>
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| **Key Dates:** | RFP release date: Monday 25th July 2016  
**Full Proposal Deadline: Thursday 8th September 2016.** Please note the deadline is midnight UK time (GMT).  
Anticipated Full Proposal Notification Date: Monday 31st October 2016.  
Grants will be distributed following execution of fully signed Letter of Agreement.  
Period of Performance: Two years is the maximum project length. Projects should begin in December 2016 or January 2017. |
| **How to Submit:** | 1: Please go to Pfizer.co.uk: > Collaboration > Working with the NHS > Medical and Educational Goods and Services ([http://www.pfizer.co.uk/content/pfizer-medical-and-educational-goods-and-services](http://www.pfizer.co.uk/content/pfizer-medical-and-educational-goods-and-services))  
2: Select the “IGLC – AFIB Stroke Reduction” link. This will launch the online Pfizer Grant Management System.  
3: To submit your application, complete all required sections of the online application and upload a Full Proposal and Budget.  
Requirements for the Full Proposal and a link to the budget template can be found in Appendix 1 at the end of this document.  
If you encounter any technical difficulties with the website, please click the “Need Support?” link at the bottom of the page.  
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 to the IGLC Grant Officer, Jacqueline Waldrop ([jacqueline.waldrop@pfizer.com](mailto:jacqueline.waldrop@pfizer.com)), with the subject line “UK – AFIB Stroke Reduction”. |
| **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 the Alliance 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. The Alliance 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 the Alliance to do so.

3. In fairness to all applicants, all communications about the RFP must come exclusively to Pfizer IGLC. Applicants should not contact other departments within Pfizer or Bristol-Myers Squibb regarding this RFP. Failure to comply will disqualify applicants.

4. In line with the Association of the British Pharmaceutical Industry (ABPI) Code of Practice, the nature and terms of all IGLC grants will be publically disclosed by Pfizer. Recipient organisations are also encouraged to disclose receipt of industry grants to prevent conflict of interest with any third party.

5. Recipient organisations must acknowledge the Bristol-Myers Squibb and Pfizer Alliance’s financial support in the publication of any materials connected to the IGLC grant.

6. Consistent with its commitment to openness and transparency, Pfizer reports education grants provided to medical, scientific, and patient organizations. Pfizer reserves the right to announce the details of successful grant application(s) by whatever means ensures transparency, such as on the Pfizer website, in presentations, and/or in other public media. In the case of this RFP, all approved full proposals, as well as all resulting materials (e.g., status updates, outcomes reports, etc.) may be posted on the IGLC website and/or any other Pfizer document or site.

7. For projects involving U.S. entities or individuals, 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 the 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 U.S. faculty (planners, speakers, investigators, project leads, etc.) and “items of value” (items that possess a discernible 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 grant payments will not be made to any individuals; grant funding shall be paid directly to Provider (sponsor).

Frequently Asked Questions related to IGLC’s Sunshine Act Reporting Requirements are available on our website (http://www.pfizer.com/files/IGLCsunshineFAQ_updatedJan2016.pdf).
8. No portion of a Pfizer IGLC grant may be used for food and/or beverages for learners and/or participants in any capacity. Recipient organisations 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.

9. 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.

10. For any Dissemination and Implementation research projects the institution(s) must agree to assume all responsibilities as sponsor of the study as outlined in the proposal, which includes:
   - Obtaining institutional review board (IRB)/independent ethics committee (IEC) approval for studies involving human subjects or human tissue and obtaining a subsequent renewal of this approval as required by local regulations (e.g., yearly, biannually, etc.). In addition, obtaining any IRB/IEC approval for amendments to protocol as they pertain to the research.
   - Obtaining all required personal data privacy or informed consent documentation (as appropriate).
   - Obtaining all required regulatory approval(s) per local regulations.
   - Assuming all reporting obligations to local regulatory authorities.
   - A statement that the research will be conducted in compliance with relevant provisions of the International Conference on Harmonisation, Good Clinical Practice, or Good Pharmacoepidemiology Practice guidelines and all applicable local legal and regulatory Requirements.
Appendix 1: Full Proposal Submission Guidance

Proposals must be single-spaced, using Calibri 12-point font and 1-inch margins. Note that the main section (section D, below) of the proposal has a 15-page limit and the organization detail (section F, below) has a 3-page limit. Please limit the number of attachments uploaded in the system. There is no reason to submit the organization detail (section F) as a separate document from the main section (section D) of the proposal. All proposals must follow the outline detailed below.

Proposal requirements will include the following sections:

A. Cover Page (do not exceed 1 page):
   1. **Title**: Please include the project title and main collaborators.
   2. **Abstract**: Please include an abstract summary of your proposal including the overall goal, target population, methods and assessment. Please limit this to 250 words.

B. Table of Contents (no page limit)

C. Main Section of the proposal (not to exceed 15 pages):
   1. **Overall Goal & Objectives**: Describe the overall goal for this project. Describe how this goal aligns with the focus of the RFP, the goals of the applicant organizations and the proposed project. List the key objectives and how they are intended to address the established need for this project.
   2. **Current Assessment of need in target area**
      a. Describe the need for this project in your target area. Only include information that impacts your specific project, linking regional or local needs to those identified on the national basis if appropriate. Describe the need for your project in terms of “what is” versus “what should be”.
      b. 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. Describe the source and method used to collect the data. Describe how the data was analyzed to determine that a gap existed.
   3. **Target Audience**: Describe the primary audience(s) targeted for this project.
      a. Describe the level of commitment from the potential participants including your plan for recruitment as necessary.
      b. Demonstrate the scope of your target audience has a potential to impact the goal established in this proposal.
      c. Describe who will directly benefit from the project outcomes. Include in this description whom, beyond the primary target, would potentially benefit from the project in terms of this being a model for others to replicate or expand.
4. **Project Design and Methods**: Describe your project design and methods.
   a. Include a description of the overall strategy, methodology and analysis linking them to the goal of the project.
   b. Describe the way the project planned addresses the established need and produces the desired results.
   c. Indicate how you will determine if the target audience was fully engaged in the project.
   d. Include a description of the measures you have taken to assure that this project idea is original and does not duplicate other projects or materials already developed.
   e. If appropriate, show how this project builds upon existing work, pilot projects, or ongoing projects developed either by your institution or other institutions related to this project.
   f. If your project includes the development of tools note if they be available publicly at no cost.

5. **Evaluation Design**
   a. In terms of the metrics used to assess the need for this project, describe how you will determine if the practice gap was addressed for the target group.
      - Identify the sources of data that you anticipate using to make the determination.
      - Describe how you expect to collect and analyze the data.
      - Describe how you will determine if the results evaluated are directly related to the intervention described in this proposal.
   b. Quantify the amount of change expected from this project in terms of your target audience (e.g., a 10% increase over baseline or a decrease in utilization from baseline between 20-40%)
   c. Describe how you plan for the project outcomes to be broadly disseminated.

6. **Detailed Work Plan 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 time period. Using a table format (no page limit), list the deliverables and a schedule for completion of each deliverable.

D. **References (no page limit)**
E. Organizational Detail (not to exceed 3 pages)
   1. Organizational Capability: Describe the attributes of the institution(s)/organization(s)/association(s) that will support and facilitate the execution of the project.
   2. Leadership and Staff Capacity: Include the name of the person(s) responsible for this project (PI/ project lead (PL) and/or project manager). The project manager, whether a current staff member or someone to be hired, is essential to the work outlined in your proposal. Demonstrate the PI/PL and 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.
      a. List other key staff members proposed on the project (e.g., healthcare provider champion, medical advisor, statisticians, IT lead, etc.), if relevant, including their roles and expertise. Please list out key staff for each institution/organization/association the specific role that they will undertake to meet the goals of this project.
      b. When listing staff, please include staff first name, last name, professional credentials, and Country of Residence.
      c. NOTE Regarding Proposed Speakers: Pfizer IGLC 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.

F. Detailed Budget (Refer to/Complete Budget Template; no page limit for the Excel file or the narrative):  
   1. Upload a detailed budget, using the Excel template provided. (Click here for Budget Template)
      Applicants are expected to customize the budget for their proposal, adding additional details and deliverables as appropriate.
   2. Provide a written narrative in the budget description field that contains an explanation of each cost element proposed. Budget narratives should include a justification for all personnel, indicating the percentage of time allocated to the project. The budget should demonstrate appropriate and reasonable costs for project expenses.
   3. Some examples of what awarded funds may **not** be used for are listed below:
      - Office equipment (e.g., furniture, computers)
      - Registration and travel costs for professional development meetings or courses not related to this project
      - Health care subsidies for individuals
      - Construction or renovation of facilities
      - Therapeutic agents (prescription or non-prescription)
      - Food and/or beverages for learners and/or participants in any capacity
      - Lobbying

G. Staff Biosketches (no page limit):  
   Applicants must provide brief biosketches of all individuals listed in section F in an appendix.

H. Letter(s) of Commitment (no page limit):  
   Letter(s) must be provided from all organizations listed in section F documenting their support and commitment to the project. Letters should be issued from an institutional authority or
authorities and collaborators guaranteeing access, resources and personnel (as the case may be) for proposed project.

Important: A Letter of Support from the Academic Health Science Network (AHSN) for the region must also be provided.

Submission: Proposals should be submitted online by selecting “IGLC-AFIB Stroke Reduction” on the Pfizer UK website http://www.pfizer.co.uk/content/pfizer-medical-and-educational-goods-and-services.

Proposals should be single-spaced using Calibri 12-point font and 1-inch margins. Please adhere to the page limits listed for each section. There is no page limit for the reference section. Tables and Figures should be included in the main section of your proposal and do count to the page count. Only sample forms or other full page documents can be included as an appendix. Please consult with the Pfizer IGLC Grant Officer before submitting such additional documents.

All required sections (aside from the budget) should be combined in one document (MS Word or Adobe PDF). There is no need to submit the organization detail or references in a document separate from the main section of the full proposal. Budgets should be submitted in a separate excel file.