

2022 Independent Medical Education Request for Proposals

Issue Date: December 20, 2022

The *Independent Medical Education team at Genentech, a member of the Roche Group*, invites accredited educational providers to submit applications for independent, certified medical education grants subject to the terms described below. This Request for Proposals (RFP) provides public notice of the availability of funds in a general topic area for activities for which recognized scientific or educational needs exist and funding is available.

COVID-19 Notice: Please consider the national as well as state safety guidelines for vaccinated and unvaccinated individuals involved with in-person gatherings at the present time due to the ongoing COVID-19 pandemic.

Purpose: As part of Genentech’s scientific mission, Genentech supports grants for independent medical education that aim to improve patient care by focusing on the improved application of knowledge, competence, and performance among healthcare professionals. This mission is achieved by supporting quality independent education that addresses evidence-based, bona fide educational gaps in accordance with the ACCME, AMA, PhRMA Code, OIG and FDA guidance.

Notification: Genentech RFPs are made available through our online Genentech Funding Request System (gFRS) site (<http://funding.gene.com>) along with the websites for the Alliance for Continuing Education in the Health Professions (ACEhp). In addition, an email is distributed to all registered gFRS users who have previously applied for support of an independent education activity. The email distribution list may not always be up to date. Please periodically check our online Genentech Funding Request System (gFRS) site (<http://funding.gene.com>) to stay informed on current funding priorities. *There have been no predetermined approvals, nor any identified preferred educational providers. All submissions will be reviewed equally and thoroughly.*

Terms and Conditions

1. All grant applications received in response to this RFP will be reviewed in accordance with all Genentech policies and policy guidelines. (Please refer to the publicly available criteria on <http://funding.gene.com>)
2. This RFP does not commit Genentech to award a grant or pay any costs incurred in the preparation of a response to this request.
3. Genentech reserves the right to approve or deny any or all applications received as a result of this request or to cancel, in part or in its entirety, this RFP.
4. For compliance reasons, and in fairness to all providers, all communications about this RFP must come exclusively to Genentech’s department of Medical Education and Research Grants. Failure to comply will automatically disqualify providers.
5. Failure to follow the instructions within this RFP may result in a denial.

Instructions

Eligibility Criteria	<ul style="list-style-type: none"> ● U.S. based education provider ● Registered account in gFRS ● Accredited to provide CME/CE and in good standing (e.g. ACCME, ANCC, ACPE, etc.)
Geographical Scope	<ul style="list-style-type: none"> ● Educational initiatives must be U.S.-based only

Submission Directions	Application Process	Deadlines
Step 1	Providers who meet the eligibility criteria and are interested in submitting a response to this RFP will have 6 weeks to complete a full grant proposal through funding.gene.com . When submitting the application, please be sure to: <ul style="list-style-type: none"> • Select the Therapeutic Area (Neuroscience), and Disease State (Multiple Sclerosis) • Include “RFP Dec 2022 [Insert Program Title]” in the program title of the grant 	January 30, 2023
Step 2	Grant decisions will be made by Genentech by Feb 6, 2023 and decision notifications will be issued to the accredited educational provider through gFRS.	February 6, 2023
Step 3	If your grant is approved, one activity within the program must launch before March 31, 2023.	March 31, 2023

Additional Considerations

Provider(s) who are awarded grants are encouraged but not required to:

1. Demonstrate key findings via outcomes analysis and report the extent to which the education met the stated objectives and other key findings.
2. Describe how learners demonstrated competence, performance, or improved patient outcomes as a result of the educational activity.
3. Summarize (through written analysis) the provider’s understanding and interpretation of the outcomes data and identify any persistent educational gaps, unanticipated barriers and/or activity/outcomes limitations.

Currently Available RFP Focus Area:

Focus	Opportunity
<p>Therapeutic Area: Neuroscience</p> <p>Disease Areas: Multiple Sclerosis</p> <p>Learning Audience: US-based General/Community Neurologists</p> <p>Support Available: Up to \$500,000</p> <p>Multi-support and sole-support grants will be considered.</p> <p>Both live, in-person formats and online formats will be considered.</p> <p>Programs with a curriculum-based approach will be prioritized.</p>	<p>Disease progression is an important consideration for both healthcare providers managing patients with multiple sclerosis (MS) as well as for patients experiencing the disease themselves.</p> <p>Patients typically have their first medical encounter and evaluation with general neurologists as they experience neurological symptoms that are present with the MS disease course. General neurologist education around disease progression in MS is pertinent for patient care. This is especially true in rural areas where community based general neurologists must manage patients without disease specific knowledge and expertise due to lack of healthcare resources.</p> <p>It is important for this critical healthcare audience to be equipped with credible, unbiased educational resources so they can understand how to manage clinical outcomes that are important to both themselves and the patients they serve.</p> <p>In addition to understanding clinical guidelines for appropriate diagnosis, staging, and therapeutic treatment options, it is crucial for neurologists to be able to analyze the data of available treatment options to help recommend the appropriate therapies for patient desired outcomes, one of which is slowing disease progression and improving quality of life.</p> <p>Physicians also need education around tools used to assess progression and how to incorporate these formal assessments into their clinical practice.</p> <p>The scientific community has grown in the multiple sclerosis space over the years and there is a wealth of data being reported regularly to help neurologists and their patients personalize disease management in MS.</p> <p>It can be confusing and overwhelming to decipher the relevance of the various outcomes measured in clinical trials in MS, including confirmed disability progression and confirmed disability improvement, especially for general neurologists who are responsible for interpreting a wealth of information across neurological disease.</p> <p>We are requesting proposals that can help to address the educational gap in evaluating clinical trial outcomes in multiple sclerosis and aid in neurologists ability to translate these endpoints for themselves and their patients to achieve optimal management of multiple sclerosis in regard to disease progression, patient disability, and quality of life.</p> <p>References:</p> <ol style="list-style-type: none"> Gehr S, Kaiser T, Kreutz R, Ludwig WD, Paul F. Suggestions for improving the design of clinical trials in multiple sclerosis-results of a systematic analysis of completed phase III trials. EPMA J. 2019 Nov 22;10(4):425-436. doi: 10.1007/s13167-019-00192-z. PMID: 31832116; PMCID: PMC6883016. van Munster CE, Uitdehaag BM. Outcome Measures in Clinical Trials for Multiple Sclerosis. CNS Drugs. 2017 Mar;31(3):217-236. doi: 10.1007/s40263-017-0412-5. PMID: 28185158; PMCID: PMC5336539. Kister I, Chamot E, Salter AR, Cutter GR, Bacon TE, Herbert J. Disability in multiple sclerosis: a reference for patients and clinicians. Neurology. Mar 12 2013;80(11):1018-1024.

	<ol style="list-style-type: none"><li data-bbox="516 254 1365 323">4. Ernstsson O, Gyllensten H, Alexanderson K, Tinghög P, Friberg E, Norlund A. Cost of Illness of Multiple Sclerosis - A Systematic Review. PLoS One. 2016;11(7):e0159129-e0159129. https://pubmed.ncbi.nlm.nih.gov/27411042<li data-bbox="516 327 1406 451">5. Phillips JT, Giovannoni G, Lublin FD, et al. Sustained improvement in Expanded Disability Status Scale as a new efficacy measure of neurological change in multiple sclerosis: treatment effects with natalizumab in patients with relapsing multiple sclerosis. Multiple Sclerosis Journal. 2011;17(8):970- 979. https://journals.sagepub.com/doi/abs/10.1177/1352458511399611
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