

Issue Date: July 29, 2014

Call for Grant Notification: Genentech Medical Education & Research Grants – *Independent Medical Education*

The *Medical Education & Research Grants Team at Genentech, a member of the Roche Group*, invites accredited members of the educational provider community to submit applications for independent, certified medical education grants subject to the terms described below. This Call for Grants Notification (CGN) 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.

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 transfer of knowledge, competence, and performance of 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. Genentech CGNs are posted on the Genentech website (<http://funding.gene.com>) along with the websites for the Alliance for Continuing Education in the Health Professions (ACEHP) and SACME. In addition, an email is sent out to all registered users of the Genentech Financial Request System (gFRS) who have previously submitted an application for support of an independent education activity.

Eligibility Criteria: Applicant must be U.S.-based, registered on the Genentech Financial Request System (gFRS), and in good standing and accredited to provide CME/CE by an official accrediting agency (e.g. ACCME, ANCC, ACPE, etc.)

Geographical Scope: The educational initiatives must be U.S.-based only unless specifically identified as a **Global Grant**.

Submission Instructions: Submit applications online through gFRS, which can be accessed via <http://funding.gene.com>. When submitting the application, please be sure the following are completed:

1. Select the Therapeutic Area, and the Disease State for the grant(s) that you are submitting.
2. Include “CGN Aug 2014 [Insert Program Title]” in the Program Title of the grant application
3. Complete all sections of online grant request form
4. Upload all documentation as requested by the system

Deadline for Submission of Application(s): *extended to August 28, 2014 (11:59 PM Pacific Time).*

Award Decision Date/Mechanism: *There have been no pre-determined approvals, nor any identified preferred educational providers. All submissions will be reviewed equally and thoroughly.* Approvals and denials will be communicated via standard grant-submission means (email notifications) no later than:

- Breast Cancer CGN: October 3, 2014
- Chronic Lymphocytic Leukemia CGN: November 7, 2014

Educational providers should not respond to this CGN unless they have read and understand the terms, purpose, therapeutic landscape, and educational request identified below. Additionally, educational providers should not respond to any of the CGNs unless they have demonstrated expertise to successfully execute grants for independent medical education within the specified disease area(s) **AND** the recommended educational formats. Applicants will be expected to identify independent gaps that are clinically accurate and relevantly aligned to these CGNs.

Currently Available CGNs

Disease State (& Therapeutic Area)	Funding Available	Clinical Gap & Balanced Educational Gap	Requested Educational Audience and Educational Format	Integrated Learning Endpoint (for Consideration)
Breast Cancer (Oncology)	\$400,000	Breast cancer is the leading cause of cancer death among women worldwide. ¹ It is estimated that 232,340 US women will be diagnosed with breast cancer in 2014 and approximately 40,000 women in the US will die from their disease. ² Of those diagnosed, approximately 25% will have HER2+ disease, which is characterized by a more aggressive disease course. ³⁻⁵ In recent years, studies have demonstrated that treating more aggressive subtypes of breast cancer in the neoadjuvant setting can result in more favorable patient outcomes. However, within the oncology care team up to 50% of oncology surgeons are uncertain of the value of neoadjuvant therapy as optimal care, and over 40% of medical oncologists strongly believe that the decision to initiate neoadjuvant treatment is not entirely up to them. ⁶⁻⁸ The 2013 IOM report, Delivering High-Quality Cancer Care: Charting a New Course for a System in Crisis, emphasizes that the members of the cancer care team should coordinate with each other to implement patients' care plans and deliver comprehensive, efficient, and patient-centered care. ⁹ These facts point to the need for educating the oncology care team to ensure understanding of best available care and communication among the treatment decision stakeholders in deciding on the appropriate disease management approach.	As such, Genentech is seeking to support an educational initiative that addresses knowledge, confidence, and communication surrounding neoadjuvant treatment decisions. Based on external research, Genentech believes this educational initiative is best suited for members of the U.S.-based oncology care team (medical oncologists, surgeons, nurses and potentially patients).	<p>The initiative should aim to provide results that align to the <i>National Quality Strategy</i> priorities with a recommended focus on the following strategies:</p> <ul style="list-style-type: none"> • Prevention and/or treatment to halt progression • Improved and effective communication & clinical care coordination <p>By addressing emerging evidence, the educational initiative could lead to treatment considerations that will improve personalized patient care.</p>

Chronic Lymphocytic Leukemia (CLL) (Oncology)	\$400,000	<p>Non-Hodgkin's Lymphoma (NHL) is the most common hematologic malignancy, representing 4.3% (69,740) of the newly diagnosed cases of cancer and 3.4% (19,000) of all expected cancer deaths in 2013.¹⁰ In the U.S., B-cell lymphomas represent approximately 85% of all NHL cases with Chronic Lymphocytic Leukemia (CLL) being the third most common histologic subtype at 7%.¹¹⁻¹² With the rapid pace of scientific advancements, clinicians are being presented with an unprecedented number of new and emerging therapeutics for CLL. Due to nature of CLL, common treatment options are personalized and vary from introduction to continuation/maintenance or consideration of the "Watch and Wait" method. Resulting research indicates 1) clinicians and patients are confused about current and emerging options, 2) identified remaining inconsistencies in communication between CLL patients and their treatment teams specific to how Quality of Life (QoL) will be impacted by the treatment/method decision, and 3) patients continue to struggle in understanding whether or not their treatment team appreciates their perspectives of living with a chronic cancer.¹³</p>	<p>As such, Genentech is seeking to support an educational initiative that addresses 1) the personalized and optimal treatment selection in patients with CLL identifying all current and emerging evidence-based data that may address improved Progression Free Survival and/or Overall Survival, and 2) QoL and psychosocial sensitivity to patients living with CLL while or while not on treatment. Based on external research, Genentech believes this educational initiative is best suited for the <u>U.S.-based community oncology team (medical oncologists, hematologists, hematologists/oncologists, nurses, and potentially patients)</u>. Consideration <i>may be given</i> to educational providers who have demonstrated a partnership with an Accountable Care Organization (ACO) or closed healthcare system that can track direct impact after educational inception.</p>	<p>The initiative should aim to provide results that align to the <i>National Quality Strategy</i> priorities with a recommended focus on the following strategies:</p> <ul style="list-style-type: none"> • Patient and Family Engagement • Effective Communication & Care Coordination • Prevention & Treatment <p>By fairly/accurately weighing current and emerging treatment options, this educational initiative may result in improvements in personalized patient care and patient perspectives.</p>
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***Genentech is also committed to providing non-solicited grant support in all disease areas.**

Through the preferred educational formats, the identified audiences should have availability to the latest data that helps them evaluate and manage safety concerns in their patients while considering the evidence that leads to appropriate decision making. The selected educational provider must therefore show that learners 1) have demonstrated reflection upon the educational activity, 2) demonstrated a competence improvement as a result of it, and 3) will use evidence-based concepts to consider changing behavior where appropriate or relevant.

The Expected Outcomes Measurement Process

All grant submissions should provide a description of the proposed methodology that evaluates the reach and quality of program delivery, including methods for measuring each activity identified within the proposals and for ensuring ongoing improvements to the activities (Accreditation elements 12,13,14,15).

All grant submissions should describe how the educational provider plans to determine the extent to which the initiatives have met the stated objectives and closed the identified clinical/educational gap(s) (Accreditation Elements 10,11,12) including the qualifications of those involved in the design and analysis of the outcomes.

While not required, it is strongly recommended that the results of these educational initiatives aim to increase understanding around the elements identified within the chart within this CGN. Genentech will review ways the aforementioned information ties into the following components:

- Education that results in an improvement of quality metrics, quality of care, and/or quality of life
- Education that results in a way the helps to inform or better engage patients with their caregivers
- Additionally, a plan for publishing the results detailing the lessons learned would be welcomed

Genentech's Grant Decision-Making Criteria

Please refer to the publicly available criteria, which can be found at <http://funding.gene.com>.

Terms and Conditions

1. All grant applications received in response to this CGN will be reviewed in accordance with all Genentech policies and policy guidelines.
2. This CGN does not commit Genentech to award a grant or to 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 CGN.
4. For compliance reason, and in fairness to all providers, all communications about this CGN must come exclusively to Genentech's department for Medical Education & Research Grants. Failure to comply will automatically disqualify providers.
5. Failure to follow instruction within this CGN may result in a denial.

Transparency

Genentech, at its sole discretion, has the right to disclose the details of funded independent medical education activities, including those that may be required by federal, state, and/or local laws and regulations. This disclosure may include, but shall not be limited to, details of the activity and the grant amount. The information may be disclosed to the public in a manner including, but not limited to, disclosure on the Genentech website.

References

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13. CE Outcomes Needs Assessment, 2012-2014