

Issue Date: July 27, 2016

Call for Grant Notification: Healthcare-Related Charitable Support

The Advocacy Relations team at Genentech, a member of Roche Group, invites the non-profit community to submit applications for grants subject to the terms 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 needs exist.

<u>Purpose</u>: As part of our mission and commitment to philanthropy, Genentech supports non-profit organizations focusing on patient education, patient services and advocacy. The purpose of this CGN is to support initiatives focused on the patient and caregiver community. Support requests must be healthcare-related and consistent with therapeutic or technological area(s) in which Genentech and/or Roche is active. This CGN is intended to support initiatives that address broad cross-disease issues.

<u>Notification:</u> Genentech CGNs are made available through the online Genentech Funding Request System (gFRS) site (http://funding.gene.com). In addition, an email is distributed to registered gFRS users who have previously applied for healthcare-related charitable support. A WebEx detailing CGN funding priorities and the CGN application process will be available to those interested the week after posting on **Monday August 1, 2016**.

<u>Eligibility Criteria:</u> Applicants must be U.S-based and registered on the Genentech Funding Request System (gFRS). Each applicant's organization must be recognized by the IRS as a tax exempt, public charity under section 501(c)(3) of the Internal Revenue Code and must be located in the United States.

Geographical Scope: The programs and services **must be U.S.-based only.**

NEW! Submission Instructions for Executive Summary:

- 1. Applicants who meet the eligibility criteria and are interested in submitting a response to this CGN must first complete a brief *Executive Summary* through the following <u>link</u> or paste the URL (https://goo.gl/forms/ODTNrhARxLjFchC22) into a new browser.
- 2. Deadline for Executive Summary submission will be Friday September 9, 2016 (11:59pm Pacific Time). *Note: Do not submit your initial application through gFRS.*
- 3. By **Monday September 26, 2016**, a Genentech Grant Manager will contact (i.e. by email) those applicants whose Executive Summaries were selected for further review.
- 4. Those applicants who receive notifications of potential interest may then submit full grant proposal applications online through gFRS. Further instructions will be provided in the email notification. Deadline to submit full grant proposal will be **Monday October 3, 2016 (11:59pm Pacific Time).**

<u>Award Decision Date/Mechanism:</u> Final approvals and denials for those who are selected to submit a full application in gFRS will be communicated via standard grant-submission means (i.e. email notifications) no later than **Monday November 21, 2016.** There have been no pre-determined approvals. All submissions will be reviewed equally and thoroughly.

Applicants should not respond to this CGN unless they have read and understood the terms, purpose and requests identified below. Applicants are expected to identify and address issues that are aligned to this CGN.

Proposed projects with budgets between \$20,000-100,000 will be considered; this CGN will fund up to five projects in total. Please note that Genentech cannot be the sole sponsor for any given project.



Topic and Funding Priorities

Caregivers

As part of our commitment to philanthropy, Genentech supports nonprofit organizations focusing on patient education, patient services and advocacy. The purpose of this CGN is to support initiatives focused on the patient and caregiver community. Support requests must be healthcare-related and consistent with therapeutic or technological area(s) in which Genentech and/or Roche is active. Types of programs and services considered as part of this CGN include, but are not limited to the following: Patient Services, Patient Outreach, Patient Education, Disease Education, Fundraisers, and Health Screenings.

Introduction and Background

Currently, nearly 44 million U.S. adults serve as caregivers for family members¹ and the total number of non-professional caregivers in the U.S. has been estimated to be as high as 66 million.² Although caregivers are more likely to be women, ¹⁻³ a significant proportion are men (40%). ¹ Caregivers are a diverse group, coming from every age, gender, race/ethnicity and socioeconomic status. ^{1,2}

Caregivers spend on average 20 to 24 hours per week helping with activities like bathing, dressing, housework, and managing finances. ^{1,2} Caregivers for persons affected by cancer or dementia provide on average 30 hours of care weekly. ⁴ Higher-hour (>20 hours per week) caregivers are particularly susceptible to the physical, emotional, and financial burdens of caregiving. ¹⁻³

Nation-wide studies consistently demonstrate that caregiving impacts caregivers' physical and mental health, financial and social circumstances, and economic productivity. The more complex/demanding the patient's needs, the greater the impact on the caregiver. Caregivers need tailored support and resources that reflect their situation and their loved one's health needs.

Topic areas for increased support and education for caregivers include, but are not limited to:

- 1. *Informational Needs*: The majority of caregivers (84%) report wanting more information about caregiving, with some Hispanic and Asian American caregivers reporting more of an information gap. Caregivers most commonly want information about keeping their loved one safe at home and managing their own emotional/physical stress. 1,2
- 2. Health and Well-Being: Seventeen percent (17%) of caregivers report that their health is fair or poor.¹ By comparison, less than 12% of the general adult population in the U.S. describe their health as fair or poor.^{1,6} Caregivers in more complex/demanding care situations (e.g., caring for someone with a mental health issue) are more likely to report worsening health.^{1,7}
- 3. *Emotional Stress*: Two in five (38%) caregivers report high emotional stress from the demands of caregiving,¹ with stress often increasing over time.⁸ Emotional stress is more common among higher-hour caregivers.¹ The highest levels of emotional stress are reported by caregivers of individuals with mental health issues: 74% report high emotional stress.⁷



- 4. Financial Strain: About one in five caregivers reports experiencing financial strain (18%) as a result of their caregiving responsibilities. Financial strain is greater with higher-hour, coresident caregivers; 31% of these caregivers reported being financially strained. In 2007, average out-of-pocket expenses for caregivers was \$5,531 per year, representing ~10% of the caregiver's annual income. Furthermore, long-term financial impacts of caregiving include loss of savings for retirement. In 10% of the caregiver's annual income.
- 5. Impact on Employment: Thirty-four (34%) of caregivers have a full-time job, while another 25% work part time. Caregivers who work do so for ~35 hours per week on average. Of these, three out of five (61%) report having to make a workplace accommodation as a result of their caregiving responsibilities, such as cutting back on their working hours or taking a leave of absence.

Call for Grants Notice Requirements and Aim

Aim

Genentech is committed to addressing key barriers and challenges for caregivers. This CGN will support proposals focusing on programs/services to address documented unmet needs in the caregiver/patient community, such as, but not limited to:

- Development of programs that could beneficially impact caregivers' overall well-being and ability to continue providing care.
- Development of educational resources for individuals currently providing care to a loved one.
- Identification and prioritization of help for caregivers who are most at risk for deteriorating health, financial security, and quality of life.
- Development of tailored support services (e.g., hotline, peer programs, support groups) for caregivers.
- Creation of programs, services or awareness initiatives related to the burden of caregivers in the US.
- Creation of novel digital solutions to address documented emotional and educational needs of caregivers.

Call for Grants Notice Requirements

Proposals should define the unmet need being addressed in the project and utilize evidence from internal (e.g., surveys of constituents, qualitative data from front-line staff) and external (e.g., consensus reports, peer-reviewed journal articles) data sources to help establish a clear view on the unmet need.

Successful applications will include patient-focused solutions to documented unmet needs through a project that includes: an innovative program or service, well-defined process and outcome evaluation metrics, and a conceptual plan for expansion and sustainability.

Out-of-the-box and non-traditional models of service delivery are encouraged. Applicants are also encouraged to utilize a collaborative approach to this effort and work with other organizations, though each application must be submitted by one single organization selected to represent the project for this CGN.



Additional Considerations: Grant requests must be submitted at least 60 days prior to the project / program start date. The following uploads are required to submit your application: W-9 Form / W-8BEN form, promotional materials and/or event advertising (if applicable), meeting agenda (if applicable) and detailed / itemized budget.

<u>Genentech's Grant Decision-Making Policy:</u> 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 reasons, and in fairness to all applicants, all communications about this CGN must come exclusively to Genentech's department of Advocacy Relations. Failure to comply will automatically disqualify applicants.
- 5. Failure to follow instruction within this CGN may result in a denial.

<u>Transparency:</u> Genentech, at its sole discretion, has the right to disclose the details of funded healthcare related charitable support, 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:

- 1. National Alliance for Caregiving and American Association of Retired Persons. Caregiving in the U.S. 2015. June 2015. http://www.caregiving.org/caregiving2015/ (Accessed February 23, 2016)
- 2. National Alliance for Caregiving. Caregiving in the U.S. 2009. November 2009. (Accessed April 14, 2016) http://www.caregiving.org/pdf/research/Caregiving_in_the_US_2009_full_report.pdf
- 3. Adelman RD, Tmanova LL, Delgado D, Dion S, Lachs MS. Caregiver burden: a clinical review. *JAMA*. 2014 Mar 12;311(10):1052-60. http://www.ncbi.nlm.nih.gov/pubmed/24618967 (Accessed April 14, 2016)
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- 6. Centers for Disease Control and Prevention and National Center for Health Statistics. Summary Health Statistics: National Health Interview Survey, 2014. January–June 2014. (Accessed April 14, 2016) http://ftp.cdc.gov/pub/Health_Statistics/NCHS/NHIS/SHS/2014_SHS_Table_A-11.pdf
- 7. National Alliance of Caregiving. On Pins and Needles: Caregivers of Adults with Mental Illness. February 2016. http://www.caregiving.org/mentalhealth/ (Accessed February 23, 2016)



- 8. Grant M, Sun V, Fujinami R, Sidhu R, Otis-Green S, Juarez G, Klein L, Ferrell B. Family caregiver burden, skills preparedness, and quality of life in non-small cell lung cancer. *Oncol Nurs Forum.* 2013 Jul;40(4):337-46. http://www.ncbi.nlm.nih.gov/pubmed/23803267 (Accessed April 14, 2016)
- 9. Collins LG, Swartz K. Caregiver care. *Am Fam Physician*. 2011 Jun 1;83(11):1309-17. http://www.ncbi.nlm.nih.gov/pubmed/21661713 (Accessed April 14, 2016)
- 10. Girgis A, Lambert S, Johnson C, Waller A, Currow D. Physical, psychosocial, relationship, and economic burden of caring for people with cancer: a review. *J Oncol Pract*. 2013 Jul;9(4):197-202. http://www.ncbi.nlm.nih.gov/pubmed/23942921 (Accessed April 14, 2016)