Call for Grant Applications (CGA)

GlaxoSmithKline (GSK) intends to identify and fund innovative, high-quality, independent third-party educational activities that are designed to close healthcare professional (HCP) educational, quality, and performance gaps and improve patient health, enabling patients to *Do More, Feel Better, and Live Longer.*

I. Eligible Organizations

Prior to submitting a grant, organizations must first register and be approved as an eligible educational provider.

Educational providers must meet the below eligibility criterion:

- Accredited to provide HCP continuing education (ie, CME, CE) by a national accrediting body such as the Accreditation Council for Continuing Medical Education (ACCME), Accreditation Council for Pharmacy Education (ACPE), American Nurses Credentialing Center (ANCC), or American Association of Nurse Practitioners (AANP).

Organizations must be fully compliant with the ACCME (and other nationally recognized accrediting body) standards for commercial support and design and deliver all activities (including content, faculty, and speakers) independent from GSK control, influence, and involvement.

II. Disease Areas of Interest CGA Details

GSK accepts educational grant applications from eligible educational providers in response to a specific CGA.

Funding priorities will focus on independent educational initiatives designed to measure improvements/changes in HCP knowledge (Level 3*), competence (Level 4*), performance (Level 5*), and/or patient/community health (Level 6/7*).

Please click on the disease area of interest for more details regarding the specific CGA.

<table>
<thead>
<tr>
<th>GSK Disease Area of Interest</th>
<th>Submit Under Therapeutic Area</th>
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</thead>
<tbody>
<tr>
<td>Asthma</td>
<td>Respiratory</td>
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<tr>
<td><strong>COPD</strong></td>
<td>Respiratory</td>
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<tr>
<td><strong>Multiple Myeloma</strong></td>
<td>Oncology</td>
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<tr>
<td><strong>Eosinophilic Granulomatosis with Polyangiitis (EGPA)</strong></td>
<td>Rare Disease</td>
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<tr>
<td><strong>Systemic Lupus Erythematosus (SLE)</strong></td>
<td>Immuno-Inflammation</td>
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III. Grant Review Criteria
Grant applications are reviewed based on the following criteria:

1. Compliance
Grant requests are assessed for completeness of the application; compliance with all applicable laws, policies, and guidelines; and project management plan and budget.
   1.1 Compliant with guidelines for IME/CME
   1.2 Free of commercial bias/influence, non-promotional, and fair balanced
   1.3 Budget costs are reasonable and customary
   1.4 No GSK funds are used for food, beverage, meals, travel, or accommodation costs for attendees
Please do not include specific faculty names in the submitted grant applications.

2. Disease Area Alignment
Grant requests are prioritized based on optimal alignment with patient needs, HCP performance gaps, healthcare system quality gaps, and GSK clinical interests. Per GSK’s Scientific Engagement Standards, GSK funds medical education in disease areas where GSK has FDA-approved medicines or general broad based disease topics.
   2.1 Aligns with GSK's clinical disease interests and GSK’s Scientific Engagement Standards

3. Needs Assessment/Gaps
Grant requests should include an independent, evidence-based needs assessment that identifies the knowledge, competence, performance, and/or patient/community health gaps that exist. Utilization of multiple methods of assessing learning needs and gaps between current practice and evidence-based best practice provides an accurate and balanced prospective.
   3.1 Needs assessment is independent, evidence-based, and scientifically/medically accurate; educational/quality/professional practice gaps have been identified
   3.2 Educational/quality/professional practice gaps are HCP knowledge, competence, performance, and/or patient/community health
   3.3 Strategy used to identify needs/gaps (eg, survey/interview; focus group; peer-review published data; nationally recognized consensus sources for clinical performance/quality measures such as AHRQ, NCQA, NQF, PCPI, CMS-PQRS; patient chart/EHR data; medical claims data, etc)

4. Learning Objectives/Educational Design
Grant requests should provide measurable learning objectives that are aligned with the identified needs and expected improvements of the target audience. Bringing HCPs from various disciplines together in tailored learning environments can enable participants to learn both individually and as collaborative members of the healthcare team, with a common goal of improving patient health.
   4.1 Learning objectives are measurable and designed to close identified gaps

4.2 Educational design is interactive and considers appropriate target audience (including collaborative members of the healthcare team and patients, as appropriate) and learning preferences.

4.3 For curriculum-based initiatives, educational design incorporates an organized and hands-on approach to guide learners through longitudinal curriculum that focuses on performance/quality improvement (as appropriate).

4.4 Strategy to enhance change (eg, tools that support application of knowledge into practice such as algorithms, patient compliance materials, office compliance tools, reminder systems, patient feedback, system changes, etc) has been included to reinforce learning (as appropriate).

5. Educational Outcomes
Grant requests should have a strategic plan to measure educational outcomes. Using Moore’s 2009 expanded educational outcomes framework*, initiatives that are designed to measure improvements/changes in HCP knowledge and higher (Levels 3-7*) are funding priorities.

5.1 Strategic plan to measure educational outcomes is realistic for the scope of the initiative and designed to measure if the learning objectives were achieved.

5.2 Overall initiative is designed to measure changes in HCP knowledge (Level 3*), competence (Level 4*), performance (Level 5*), and/or patient/community health (Level 6/7*)

5.3 Strategy used to evaluate effectiveness of initiative (eg, direct and objective assessments, audience response system, pre/post tests, case studies, chart audits, patient surveys, EHR data, disease screening audits, medical claims data, etc)

5.4 Publication or communication strategy is designed for dissemination of educational outcomes results so that best practices and ways to improve can be shared to further improve patient health.

IV. Conflicts of Interest
Conflicts of interest must be identified and resolved. The educational provider is required to show that any organization, group, or individual who is in a position to control the content of an educational activity has disclosed all relevant financial relationships with any commercial interest. This includes, but is not limited to, educational partners and any of its affiliates, subsidiaries, or parent company. GSK accepts the ACCME’s definition of “‘relevant’ financial relationships” as financial relationships in any amount occurring within the past 12 months that create a conflict of interest. Failure to disclose and resolve all known conflicts of interest will disqualify the grant requestor.

V. Terms and Conditions
1. Grants should be submitted via the GSK website: www.GSKgrants.com
2. This CGA does not commit GSK to award a grant or to pay any costs incurred in the preparation of a response to this request.
3. GSK reserves the right to accept or reject any or all applications received as a result of this request or to cancel in part or in its entirety this CGA at any time without prior notification or permission.

4. GSK reserves the right to post submissions and announce the details of successful grant applications by whatever means ensures transparency, such as on GSK’s website, in presentations, and/or in other public media.

5. All communications about the CGA must come exclusively to GSK US Medical Affairs. Failure to comply may disqualify providers from receiving future grants.

**VI. Transparency**
Consistent with our commitment to transparency and in accordance with statutory requirements, GSK reports funded educational grants in the US. GSK reserves the right to post submissions and results on our website. Per GSK's Letter of Agreement, GSK funds are not permitted to defray or pay any costs for food, beverage, meals, travel, or accommodations for program attendees.

ASTHMA

Please refer to Section III Grant Review Criteria (above) for more details about how grant applications will be reviewed.

| Timeline: | Grants may be submitted between May 17, 2019 and June 24, 2019, with a grant start date of September 15, 2019 or later. |
| Healthcare Gap(s): | Our intent is to fund educational initiatives that are designed to close at least 1 of the following independently identified healthcare gaps; however, other independently identified healthcare gaps are also encouraged to be included: |
| | (1) Unmet need—asthma disease state, burden of disease, and comorbidities¹,² |
| | (2) Asthma diagnosis, assessment, and treatment¹,³ |
| | (3) Importance of medication adherence in severe asthma⁴,⁵ |
| | (4) Choice of pharmacotherapy in asthma with regard to patient subtypes (eg, eosinophilic) and phenotypes or endotypes⁶,⁷ |
| | (5) Asthma pathophysiology³ |
| | (6) Responder analysis by phenotype⁸ |
| | (7) Patient-reported outcomes and alternate control questionnaires⁹ |
| | (8) Biomarkers of severe asthma disease state, prognosis, and management¹⁰ |
| | (9) Healthcare inequalities and disparities in severe asthma¹¹,¹² |

More Information: Our intent is to fund educational initiatives that use multi-channel platforms and reach a national audience. Educational initiatives at a national respiratory conference will be considered. Preference is for educational initiatives that are accredited (eg, by the ACCME, ANCC, ACPE, AANP, AAPA, etc).

Educational Outcomes: Grants that are designed to measure improvements/changes in HCP knowledge (Level 3*), competence (Level 4*) performance (Level 5*), and/or patient/community health (Level 6/7*) are funding priorities.

Budget Available: Grant requests up to $300,000 will be considered for funding. The total available budget for this CGA is $2M.

References:


COPD

Please refer to Section III Grant Review Criteria (above) for more details about how grant applications will be reviewed.

<table>
<thead>
<tr>
<th>Timeline: Grants may be submitted between May 17, 2019 and June 24, 2019, with a grant start date of September 15, 2019 or later.</th>
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<tbody>
<tr>
<td>Healthcare Gap(s): Our intent is to fund educational initiatives that are designed to close at least 1 of the following independently identified healthcare gaps; however, other independently identified healthcare gaps are also encouraged to be included:</td>
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<tr>
<td>(1) Appropriate choice of inhaled maintenance treatment in COPD based on treatable traits of symptoms and exacerbation risk (role of dual bronchodilator and triple therapy in COPD) 1-4</td>
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<td>(2) COPD exacerbations: identification, patient burden of moderate and severe exacerbations, and defining patients at risk for future exacerbations 5</td>
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<tr>
<td>(3) Inhaler considerations: the impact of device selection for individual patients and the importance of patient education and training in proper inhaler use 1,6-7</td>
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<tr>
<td>More Information: Our intent is to fund educational initiatives that use multi-channel platforms and reach a national audience. Educational initiatives at a national respiratory conference will be considered. Preference is for educational initiatives that are accredited (eg, by the ACCME, ANCC, ACPE, AANP, AAPA, etc).</td>
</tr>
<tr>
<td>Educational Outcomes: Grants that are designed to measure improvements/changes in HCP knowledge (Level 3*), competence (Level 4*), performance (Level 5*), and/or patient/community health (Level 6/7*) are funding priorities.</td>
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<tr>
<td>Budget Available: Grant requests up to $300,000 will be considered for funding. The total available budget for this CGA is $1M.</td>
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MULTIPLE MYELOMA

Please refer to Section III Grant Review Criteria (above) for more details about how grant applications will be reviewed.

| Timeline: | Grants may be submitted April 23, 2019 through May 24, 2019. |
| Healthcare Gap(s): | Our intent is to fund educational initiatives that are designed to close at least 1 of the following independently identified healthcare gaps; however, other independently identified healthcare gaps are also encouraged to be included: (1) Multiple Myeloma diagnosis, classification, and clinical features\(^1,2\) (2) Therapeutic management of Multiple Myeloma\(^3,4\) (3) Therapeutic targets for relapsed/refractory Multiple Myeloma\(^5,6\) |
| More Information: | Our intent is to fund educational initiatives that use multi-channel platforms and reach a national audience. Educational initiatives at a national oncology conference will be considered. Preference is for educational initiatives that are accredited (eg, by the ACCME, ANCC, ACPE, AANP, AAPA, etc). |
| Educational Outcomes: | Grants that are designed to measure improvements/changes in HCP knowledge (Level 3\(^*\)), competence (Level 4\(^*\)) performance (Level 5\(^*\)), and/or patient/community health (Level 6/7\(^*\)) are funding priorities. |
| Budget Available: | Grant requests up to $250,000 will be considered for funding. The total available budget for this CGA is $250,000. |

EOSINOPHILIC GRANULOMATOSIS WITH POLYANGIITIS (EGPA)

Please refer to Section III Grant Review Criteria (above) for more details about how grant applications will be reviewed.

<table>
<thead>
<tr>
<th>Timeline:</th>
<th>Grants may be submitted December 6, 2018 through June 24, 2019.</th>
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<tbody>
<tr>
<td>Healthcare Gap(s):</td>
<td>Our intent is to fund educational initiatives that are designed to close at least one of the following independently identified healthcare gaps; however, other independently identified healthcare gaps are also encouraged to be included:</td>
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<tr>
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<td>(1) EGPA clinical features, diagnosis, and treatment¹,²,³</td>
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<td></td>
<td>(2) EGPA pathophysiology²</td>
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<tr>
<td></td>
<td>(3) EGPA patient journey and burden of disease⁴,⁵,⁶</td>
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<tr>
<td></td>
<td>(4) Diagnostic approaches (eg, eosinophilia, differential diagnosis from other eosinophilic disorders, or ANCA-associated vasculitis)⁶,⁷,⁸</td>
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<tr>
<td>More Information:</td>
<td>Our intent is to fund educational initiatives that use multi-channel platforms and reach a national audience. Educational initiatives at national conferences will be considered. Preference is for educational initiatives that are accredited (eg, by the ACCME, ANCC, ACPE, AANP, AAPA, etc).</td>
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<tr>
<td>Educational Outcomes:</td>
<td>Grants that are designed to measure improvements/changes in HCP knowledge (Level 3*), competence (Level 4*) performance (Level 5*), and/or patient/community health (Level 6/7*) are funding priorities.</td>
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<td>Budget Available:</td>
<td>The total available budget for this CGA is $800,000.</td>
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**SYSTEMIC LUPUS ERYTHEMATOSUS (SLE)**

Please refer to Section III Grant Review Criteria (above) for more details about how grant applications will be reviewed.

### Timeline:
Grants may be submitted December 6, 2018 through July 15, 2019.

### Healthcare Gap(s):
Our intent is to fund educational initiatives that are designed to close at least one of the following independently identified healthcare gaps; however, other independently identified healthcare gaps are also encouraged to be included:

1. SLE diagnosis, assessment, and treatment (e.g., biologics, combination therapy)1-3
2. SLE pathophysiology4,5
3. Patient-provider communication6,7
4. Adherence to SLE treatment regimens8-10
5. Organ damage and impact of disease activity11,12
6. SLE flare recognition, treatment, and prevention13,14

### More Information:
Our intent is to fund educational initiatives for primary care physicians, rheumatologists, other specialists who care for adult and/or pediatric patients with SLE (e.g., dermatologists, nephrologists, OB/GYNs, etc), and allied health professionals that use multi-channel platforms and reach a national audience. Educational initiatives at national and regional conferences will be considered. Preference is for educational initiatives that are accredited (e.g., by the ACCME, ANCC, etc).

### Educational Outcomes:
Grants that are designed to measure improvements/changes in HCP knowledge (Level 3*), competence (Level 4*) performance (Level 5*), and/or patient/community health (Level 6/7*) are funding priorities.

### Budget Available:
The total available budget for this CGA is $4M.

### References:
4. Mok CC, Lau CS. *J Clin Pathol.* 2003;56:481-490. [http://dx.doi.org/10.1113/jcp.56.7.481](http://dx.doi.org/10.1113/jcp.56.7.481)
5. Cancro MP, D’Cruz DP, Khamashta MA. *J Clin Invest.* 2009;119:1066-1073. [https://doi.org/10.1172/JCI38010](https://doi.org/10.1172/JCI38010)
