

2020 Independent Medical Education Call for Grant Notification

Issue Date: **March 27, 2020**

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 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.

COVID-19: Genentech understands that program development timelines and live events may be impacted by the current national and local advisories discouraging travel and large gatherings. Current advisories will be considered during Genentech's review of proposals submitted under this CGN.

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 CGNs 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) and the Society for Academic Continuing Medical Education (SACME). In addition, an email is distributed to all registered gFRS users who have previously applied for support of an independent education activity. *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 CGN 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 CGN 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 CGN.
4. For compliance reasons, and in fairness to all providers, all communications about this CGN 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 CGN 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 CGN will have 3 weeks to complete a brief Executive Summary through the following link	April 17, 2020
Step 2	After 2 weeks, respective Genentech Medical Education Managers will notify (via email) those providers whose Executive Summaries were selected for further review.	May 1, 2020
Step 3	Those providers who receive notification of potential interest will have 3 weeks to submit full grant application(s) online through gFRS. Further instructions will be provided in the email notification.	May 22, 2020
Step 4	Notification of final decisions will occur via email	June 5, 2020

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 patient outcomes improvement 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 CGN Focus Area(s):

Focus	Opportunity
<p>Therapeutic Area: Oncology</p> <p>Disease: Prostate Cancer</p> <p>Learning Audience: Urologists (general/urologic-oncologists) Oncologists (community/academic) Pathologists</p> <p>Support Available: Up to \$150,000</p> <p>Knowledge- and Competence-based Emerging Education (<i>Understanding & Addressing national or local gaps</i>)</p>	<p>Prostate cancer is the most commonly diagnosed solid organ malignancy in U.S. men and remains the second leading cause of cancer deaths for this population. Approximately 165,000 new diagnoses of prostate cancer and nearly 30,000 deaths were estimated in the U.S. in 2018. Prostate cancer deaths are typically the result of metastatic castration-resistant prostate cancer (mCRPC), and historically the median survival for men with mCRPC has been less than two years. The recent availability of novel treatments for mCRPC has given a resurgence of hope for these men as studies now demonstrate improved survival with a variety of new agents. However, the unfortunate reality is that mCRPC remains an incurable disease and with the rapidly changing oncology environment, healthcare providers treating patients with prostate cancer must be aware of new clinical data in the space as well as keeping abreast of standards of care and guidelines.¹</p> <p>Treatments for prostate cancer vary depending on type and stage with a range of treatment options including observation, surgery, radiation therapy, chemotherapy, immunotherapy, and most commonly hormone therapy. Specifically in mCRPC, treatment has dramatically changed over the past decade. Prior to 2004, once patients failed primary androgen deprivation, treatments were administered solely for palliation. With the increase in clinical understanding and development in oncology, more trials interested in targeting non-androgen suppression pathways in prostate cancer progression is growing, along with understanding genomic testing.^{1,2,3}</p> <p>We are looking to support education that facilitates the understanding of new treatment pathways in prostate cancer as well as new targeted therapies for urologists, oncologists, and pathologists so that they can best understand and guide treatment decisions for prostate cancer patients.</p> <p>References:</p> <ol style="list-style-type: none"> 1. Lowrance WT, Murad MH, Oh WK, Jarrard DF, Resnick MJ, Cookson MS. Castration-Resistant Prostate Cancer: AUA Guideline Amendment 2018. J Urol. 2018;200(6):1264–1272. 2. Initial Treatment of Prostate Cancer, by Stage.” The American Cancer Society. Aug 2019. Web. Mar 2020. 3. P Toren, A Zoubeydi. Targeting the PI3K/Akt pathway in prostate cancer: Challenges and opportunities (Review). Int. J. Oncol. 2014.