



Request for Proposal (RFP) for Independent Medical Education (IME)

Using Precision Medicine Approaches in Diagnosis and Management of Patients with Inflammatory Bowel Disease (IBD)

Therapeutic Area	Immunology
Sub-area of Interest	IBD
Intended Learners	General Gastroenterologists; IBD Specialists; Specialty Nurse Practitioners and Physician Associates; Pharmacists
Budget	\$250,000
Geographic Coverage	US
References	Supportive citations are provided beginning on page 4.
Submission Deadline	October 15, 2024, 11:59 pm Eastern Time
Submission	www.msddgrant.com
Submission code	IBD2024MDT



Background

Our values represent the core of our character and guide every decision and action we take, leading with patients first. We support quality IME for healthcare professionals (HCPs) designed to improve patient health outcomes, across a variety of scientific areas. Global Medical Proficiency and External Affairs (GMPEA) aims to be the world class industry leader collaborating with professional organizations to support innovative IME, advancing knowledge, competence, and performance of HCPs to help improve patient care and health outcomes. Education which allows for reinforcement of the learning objectives is key to long-term performance optimization, as is the incorporation of tools and ongoing reminders for HCPs that help them apply their knowledge. The best way to improve patient care is through the application of relevant and appropriate medical education.

In the United States (U.S.), Inflammatory Bowel Disease (IBD), which includes Crohn's disease and ulcerative colitis, affects a significant portion of the population. According to the Centers for Disease Control and Prevention (CDC), the prevalence of IBD in the U.S. is estimated between 2.4 and 3.1 million. The incidence of IBD continues to rise, making it a significant public health concern. Despite advancements in diagnostics, medical research, and treatment options, substantial unmet needs related to the diagnosis, treatment, and management of IBD persist. Challenges include delays in diagnosis, limited access to specialized care, variability in treatment response among patients, and the need for personalized, multidisciplinary approaches to care. Delayed diagnosis and stepwise treatment approaches have been associated with negative outcomes and poor prognosis for some patients. These unmet needs highlight the importance of furthering medical education and collaborative efforts among HCPs to help enhance the care and outcomes of patients with IBD.

A range of highly skilled medical professionals, including IBD specialists, gastroenterologists, specialty nurse practitioners, physician associates, and pharmacists, provide care for patients with IBD. Each healthcare team may have different approaches to care based on available resources. Therefore, it is essential to coordinate these roles to ensure that they are up to date with the latest scientific advancements, incorporating diagnostic and treatment advances to impact diagnostic delay, disease progression, and complications. Interprofessional education aims to promote a collaborative, team-based approach to address knowledge and performance gaps, ultimately enhancing clinical practice. Collaboration among HCPs supports the delivery of optimal interventions for patients and fosters respectful workplaces.

Identified Educational Gap(s)

The GMPEA team at Our Company identified several practice gaps surrounding knowledge and competence deficiencies of HCPs working within an IBD multidisciplinary teams through published literature. These gaps can be effectively addressed through IME for HCPs working to advance patient health outcomes across a variety of disciplines. Our Company would like to support the following educational gaps:

- *The need to shift from a reactive treatment approach driven by complications to a proactive treatment approach aimed at preventing disease complications to improve quality of life.*
- *The need for a precision medicine approach using biomarkers and/or imaging to determine the most appropriate treatment, replacing stepwise therapy with an evidence-based approach.*

Our Company is looking to support education to narrow or close these gaps; however, depending on the needs identified by the providers, the education may not be able to address all these educational gaps in a single proposal.

Eligibility Criteria

- **U.S. based** professional associations and medical societies, healthcare institutions, medical education companies, and other organizations committed to improving the quality of healthcare delivered to individuals, through the education of HCPs, may apply for this grant.
- The applicant must be an accredited provider in good standing by the Accreditation Council for Continuing Medical Education (ACCME), American Nursing Credentialing Center (ANCC), American Council for Pharmacy Education (ACPE), or have Joint Accreditation for interprofessional continuing education.
- The selected grant recipient will need to attest to the terms, conditions, and purposes of the independent educational grant as described in Our Company's Letter of Agreement and comply with current ethical codes and regulations.

Prioritization of Grant Applications

Our Company will evaluate all complete grant applications and will give priority to those most likely to independently validate the aforementioned educational and performance gaps specific to the needs of specific cohorts of learners. Proposals should be built around the educational or performance need (including an identification of current knowledge or practice of targeted learners contrasted with ideal knowledge and practice), supported with aligned learning objectives, constructed with appropriate instructional design and adult learning theory, and evaluated using Moore's scale of educational effectiveness. Our Company encourages application submission to additional commercial supporters with similar scientific interests.

Our Company appreciates the complexity of education required for HCPs to help improve patient health outcomes. In our experience, collaboration between medical education providers may yield better educational outcomes by enabling multi-modal education and developing tools and resources for a broader group of learners.

Terms and Conditions

The selected grant recipient shall be bound by the terms and conditions found in the Our Company's Letter of Agreement.

References

- Moore DE, Green JS, Gallis HA. Achieving desired results and improved outcomes: integrating planning and assessment throughout learning activities. *J Contin Educ Health Prof.* 2009;29(1):1-15.
- CDC Inflammatory Bowel Disease: IBD Facts and Stats. Available at: [IBD Facts and Stats | IBD | CDC](#) Accessed September 3, 2024.
- Joint Accreditation. Benefits of Interfessional Continuing Education (IPCE). Available at: [Interprofessional Continuing Education Benefits | Joint Accreditation](#). Accessed September 3, 2024.
- Cantoro L, Monterubbianesi R, Falasco G. et al. The earlier you find, the better you treat: red flags for early diagnosis of inflammatory bowel disease. *Diagnostics (Basel)* 2023; 13(20): 3183.
- Jayasooriya N, Saxena S, Blackwell J. et al. Associations between prior healthcare use, time to diagnosis, and clinical outcomes in inflammatory bowel disease: a nationally representative population-based cohort study. *BMJ Open Gastroenterol* 2024; 11(1) e001371
- Vieujean S, Louis E. Precision medicine and drug optimization in adult inflammatory bowel disease patients. *Therap Adv Gastroenterol* 2023; 16: 17562848231173331.
- Canadian Society of Intestinal Research Report: Unmet Needs in Inflammatory Bowel Disease Survey Report, June 2024. Available at: [Unmet-Needs-of-IBD-2024.pdf \(badgut.org\)](#) Accessed September 3, 2024.