

How GSK supports independent medical education



GlaxoSmithKline's mission is to help people do more, feel better, live longer. As part of this mission we are embarking on a new initiative in how we support third-party independent medical education. We want to enable those closest to the patient and educational experts to collaborate and innovate; to close healthcare gaps, achieve evidence-based standards of best practice and ultimately improve patient health.

Through this programme we aim to fund outcomes-driven education initiatives in disease areas in which there is patient need and mutual scientific interest.

GSK supports independent medical education at arm's-length; we have no control, involvement or influence over the content development, logistics, faculty, speaker or participant selection. The educational need, design and assessment are developed independently and we do not seek to know which individuals receive the funded education.

We have revised our selection criteria for educational grant funding and request that independent providers demonstrate that their programmes are designed to improve healthcare professional practice and patient health using objective data to measure these improvements. While we realise that all programmes are designed to improve clinical knowledge we are focusing our financial resources on those that we believe have the greatest potential to improve patient health and enable people to do more, feel better, live longer.

Please read the following information on GSK's approach to supporting independent medical education to better understand our standards for educational grant proposals as well as details on how to apply.

Eligible independent medical education providers

The following organisations are eligible to apply for an educational grant:



Healthcare service provider



Professional medical society



Patient group or medical education charity



Academic institution that trains healthcare professionals



Not-for-profit medical education company that is an accredited independent provider

Eligibility:

- Eligible independent medical education providers, or the independent medical education function of the provider, must be independent from industry influence and must not provide non-independent services to pharmaceutical industry.
- Independent medical education providers that provide both marketing and independent education services will need to demonstrate how their independent education services are free from commercial interest from the pharmaceutical, biotechnology or medical device industry in their application.
- Providers must also commit to transparency by:
 - Agreeing to publicly disclose GSK as a source of funding
 - Agreeing that GSK may disclose the funding provided where disclosure requirements are applicable
 - Outlining a strategy to make the education or outcomes available to a wider healthcare professional audience
- Collaboration amongst providers to capitalise on each other's areas of expertise is encouraged.

Ineligibility:

- Providers that have a decision-making role in the regulation of medicines or prescribing policy are ineligible for educational grant support by GSK UK.
- Please note that applications for individual HCP educational support will not be accepted.

Disease areas of interest

All submitted proposals must be aligned with a minimum of one GSK UK disease area of interest outlined below. We will periodically review and update our disease areas of interest in accordance with patient need and any marketing authorisation changes. Any changes or updates to our disease areas of interest will be communicated through updates to this document as well as on our website <http://uk.gsk.com/en-gb/healthcare-professionals/>.



Respiratory

Asthma
COPD
Allergic rhinitis



Dermatology

Acne
Eczema
Psoriasis



Communicable diseases and agents of disease

Diphtheria	Pandemic Influenza
Haemophilus Influenzae	Pneumococcal disease
Hepatitis B	Polio
Herpes Zoster	Rotavirus
Human Papilloma Virus	Rubella
Influenza	Tetanus
Measles	Varicella Zoster
Meningitis	Whooping cough
Mumps	



Travel Health

Malaria
Typhoid
Hepatitis A
Hepatitis B

Proposals may address more than one disease area and may cover the therapeutic area more broadly but the focus of the education must be in a GSK UK disease area or areas in which we have an authorised medicine or vaccine. GSK will not fund proposals in disease areas in which we only have a product under development or no authorised product.

Educational grant proposal review

The panel will review all submitted proposals against standardised criteria. All educational grant proposals must address the following areas:



Identified healthcare professional education need

Proposals must highlight and address evidence-based clinical performance gaps that impact patient health in the selected disease area. This should include a rigorous assessment of the gaps between current practice and evidence-based best practice that identifies healthcare professional learning needs.

Examples of an educational need assessment include expert interviews, a healthcare professional survey, a review of peer-reviewed scientific literature, an audit of patient records or a national consensus.



Educational initiative design

Initiatives should clearly define specific, measurable learning objectives that are aligned to the identified healthcare professional educational need and expected knowledge or practice change. Proposed initiatives should incorporate interactive and innovative formats that are appropriate for the intended audience and designed to improve healthcare professional knowledge, skill, practice and patient health.

Initiatives should target the intended audience's learning preferences; they may be multiple curriculum-based initiatives or tailored multidisciplinary learning environments.

A compelling rationale should be provided for the educational design selection.



Educational outcomes

Proposed initiatives must demonstrate how they aim to improve patient health and strive to objectively measure a change in healthcare professional performance.

Providers therefore need to be able to design and deliver high quality multidisciplinary education initiatives and be able to measure either:

1. A change in healthcare professional knowledge (**Level 3** in Moore's model below) with UK reach
Or,
2. A change in healthcare professional practice or patient outcome (**Level 4** or above) with a regional or significant local reach

Education outcomes	Description	Source of data
Community Health (Level 7)	The degree to which the health status of a community of patients changes due to changes in the practice behaviour of participants	Objective: epidemiological data and reports Subjective: community self-report
Patient Health (Level 6)	The degree to which the health status of patients improves due to changes in the practice behaviour of participants	Objective: health status measures recorded patient charts or administrative databases Subjective: Patient self-report of health status
Performance (Level 5)	The degree to which participants <i>do</i> what the CME activity intended them to be able to do in their practices	Objective: observation of performance in patient care setting, patient charts; administrative databases Subjective: self-report of performance
Competence (Level 4)	The degree to which participants <i>show</i> in an educational setting <i>how</i> to do what the CME activity intended them to be able to do	Objective: observation in educational setting Subjective: self-report of competence; intention to change
Learning procedural knowledge (Level 3b)	The degree to which participants state <i>how</i> to do what the CME activity intended them to know how to do	Objective: pre- and post tests of knowledge Subjective: self-report of knowledge gain
Learning declarative knowledge (Level 3a)	The degree to which participants state <i>what</i> the CME activity intended them to know	Objective: pre- and post tests of knowledge Subjective: self-report of knowledge gain
Satisfaction (Level 2)	The degree to which the expectations of the participants about the setting and delivery of the CME activity were met	Questionnaires completed by attendees after a CME activity
Participation (Level 1)	The number of physicians and others who participated in the CME activity	Attendance records

Table adapted from Moore, D., 2009

A strategy to make the educational design or outcomes that have been measured available to a wider healthcare professional audience should also be included.



Compliance

All educational grant applications will be reviewed on the completeness and quality of the application as well as the potential impact the proposal could have in enabling patients to do more, feel better and live longer. Providers must comply with the following to qualify for consideration of funding:

- Proposals must be free from commercial influence from the pharmaceutical, biotechnology or medical device industries. Educational content must be non-promotional, fair and balanced.
- Proposals must include details on how conflicts of interest will be identified and resolved. Anyone who is involved in developing educational content must disclose any relevant financial relationship with a commercial body that creates a potential conflict of interest. Failure to disclose and resolve known conflicts of interest will disqualify the grant applicant.
- The budget must be in line with fair market rates and line items allocated to appropriate categories.
- Where possible the educational content should be accredited by a nationally, or internationally, recognised accreditation body that requires content development and activities to be independent from commercial interest.
- GSK UK is a voluntary member of the ABPI and thus will not support a request that contravenes the ABPI code of practice.
- Providers must comply with GSK's transparency initiative and the Association of the British Pharmaceutical Industry's (ABPI) disclosure requirements.
- Funded organisations must provide an executive summary of the education provided and the aggregate educational outcomes achieved. GSK UK reserves the right to post these summaries on its website.

How to apply

Please review our website <http://uk.gsk.com/en-gb/healthcare-professionals/> to find information about application deadlines

- Information on the timing of decisions for funding requests will be made available to applicants following the submission deadline
- GSK UK will hold two funding rounds for independent medical education annually. The decision making panel will consist of both GSK and independent members.



Read each section of this document to ensure you are eligible to apply for funding



Complete the following application check list:

- Your organization is an eligible independent medical education provider per GSK requirements
 - If your organization provides both marketing and educational services, evidence must be attached to demonstrate that independent education services are free from commercial interest, for example, organization charts showing separation of business units
- The following compliance criteria are fulfilled:
 - Education development is free from commercial influence and content is non-promotional, fair and balanced
 - Conflicts of interest have been sought and disclosed
 - Budget is customary, itemised and aligned to appropriate categories
 - Provider agrees to GSK's requirement for transparency
- Proposal is in a GSK disease area of interest for the current funding year
- Proposal includes a comprehensive, evidence-based education need assessment
- Proposal includes rationale and detail on the design of the education initiative
- Proposal seeks to measure educational outcomes that meets GSK criteria for funding
- Proposal outlines a strategy to make the education or outcomes available to a wider healthcare professional audience



Attach any evidence required to demonstrate that criteria have been met



Email **Gsk.grant-request@gsk.com**
Mail **Medical Executive, GlaxoSmithKline UK Ltd, Stockley Park West,
Uxbridge, Middlesex UB11 1BT**

Thank you for your interest

Reference:¹ Please refer to Moore D. E., *Journal of Continuing Education in the Healthcare Professions*, 2009, vol. 29, issue 1, page 3; http://www.sacme.org/Resources/Documents/Virtual%20Journal%20Club/Moore_evaluation_article.pdf