Davos
Alzheimer's
Collaborative

REQUEST FOR PROPOSAL

Healthcare System Preparedness Project

**Increase Cognitive Assessment
Rates for Older Adults**

OCTOBER 2021

Healthcare System Preparedness Project

Increase Cognitive Assessment Rates for Older Adults

Contents

Calendar

October 1, 2021
Registration period opens

December 1, 2021
Concept paper submission deadline

January 15, 2022
Concept paper decision communicated

March 1, 2022
Full proposal deadline

April 1, 2022
Full proposal decision communicated

May 1, 2022
Project kick-off

November 2022
Progress evaluation check-in

December 1, 2022
Community of practice

May 2023
Progress evaluation check-in

June 1, 2023
Community of practice

Q3 2023
Results shared through learning laboratory convening
and supporting communications

Overview of the Davos Alzheimer's Collaborative

Initiated in Davos, Switzerland, during the World Economic Forum's Annual Meeting in 2020, the Davos Alzheimer's Collaborative (DAC) is a collaboration to aligning stakeholders with a new vision for our collective global response against the challenges Alzheimer's presents to patients, caregivers, and healthcare systems. Led by The World Economic Forum (WEF) and The Global CEO Initiative on Alzheimer's Disease (CEOi) and fueled by a mission of service to the 150 million families and half a billion people inevitably impacted by this disease by 2050, DAC is a collaborative for the benefit of all people, in all places. Advised by top thought leaders in science, finance, and healthcare across the globe, the lead organizations have formed critical partnerships with international organizations and governments to drive innovation – with a particular focus on learning from and building opportunities with experts in parts of the world not often included in research and collaboration. Once globally integrated, these collaborative partnerships will rapidly advance the treatment and management of Alzheimer's disease for a wider subset of the world's population.

For more information, please visit:
davosalzheimerscollaborative.org

Three Key Initiatives of DAC

DAC has launched three initial initiatives to demonstrate that global collaboration across sectors, nations and regions can broaden and accelerate scientific discovery and therapies:

1 **Global Cohort Development**
DAC aims to build a global cohort with high-quality, detailed data on a well-characterized, diverse population.

2 **Global Clinical Trials Support Platform**
DAC aims to build a global clinical trial network that engages Europe, Asia, Central and South America, leveraging on the success of The Global Alzheimer's Platform (GAP) in North America over the last five years.

3 **Healthcare System Preparedness**
DAC aims to facilitate the implementation of global commitments and strategies for healthcare system preparedness for Alzheimer's that can be scaled and implemented locally.

This is a Request for Proposal focused on furthering efforts of the Healthcare System Preparedness project. The Davos Alzheimer's Collaborative is seeking proposals for a project to implement and evaluate a solution that increases rates of cognitive assessment for older adults. DAC is looking to work with multiple grantees, aiming to launch 3-5 different projects.

The Focus of the Health System Preparedness Initiative

Challenges in Alzheimer's Disease Detection

» Lack of broad screening for cognitive impairment in primary care physician

» Testing that is not highly sensitive and specific to detect early stage Alzheimer's Disease, including Mild Cognitive Impairment

» Current PCP approach to NC Screening is subjective and not standardized

» Limited time in annual patient visits to focus on cognitive assessment or diagnostic work-up

The world faces an emerging pandemic, but we have no global preparedness plan.

Alzheimer's disease and other forms of dementia threaten global health and wealth at a time when caregiving and working-age populations are shrinking, when national fiscal budgets needed to support aging-related healthcare costs are under stress, and when the monetary policy mechanisms to drive economic growth in the face of a declining global workforce are exhausted.

Already, more than 2.4 million people die from dementia every year, and dementia care costs the world $1 trillion annually, a figure that will double by 2030. On our current course, global dementia prevalence is projected to triple from 50 million to 152 million by 2050. Stemming the tide of disease requires a trans-national strategy in which every country collaborates to develop and implement a global preparedness plan.

Through DAC's Healthcare System Preparedness Project and our inaugural Request for Proposal, *Increase Cognitive Assessment Rates for Older Adults*, in our foundational phase, we will take steps toward facilitating the implementation of global, regional and national commitments and strategies to provide access to future innovations in diagnosis, treatment and care.

Requirements and Favorable Attributes of Proposals

Proposals should address the following requirements and favorable attributes:

Proposal Requirements

- Proposed approach should aim to **increase the percentage of patients age 65+ who are provided with a standardized cognitive assessment** in selected health system(s) or implementation site(s).

- Proposal should **indicate which health system(s) or other implementation partner(s)** your team plans work with.

- During the period of the RFP, documenting an increase in patients receiving a test does not need to occur, but the **approach should indicate this potential**.

- Proposed approach can **utilize any cognitive assessment solution, technology or tool** with clear evidence of efficacy and potential for sustainability. DAC is agnostic on the exact mechanism for cognitive assessment. Teams can **develop a novel solution or implement an existing solution** with a focus on improvement of quality of care.
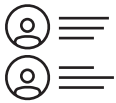
Favorable Attributes

- Be **pragmatic, affordable and feasible** to implement in health systems

- Demonstrate ability or vision for being a **sustainable** solution

- Show a **track record of success** (not confined to success in the dementia, health or even life sciences field), such as publications, established partnerships and organizational maturity

- Be **administered by non-specialists**, such as primary-care providers and should have **pragmatic utility** in daily clinical practice

- Have potential to **monitor change over time** to track rate of cognitive decline, beyond the length of the project

- Include **mechanisms to evaluate the success** of the project and of the solution's implementation (e.g., increase over baseline rate of cognitive assessment; other criteria and metrics where appropriate), determine insights/best practices, and include elements of design/systems thinking

- Yield **evidence and insights that lead to publication** in peer-reviewed academic journal

Getting Started: Concept Paper Requirements

As the first step of responding to the Request for Proposal, Concept Papers should address the requirements below.

Applicant Biographies

Submissions must include a brief biography of each team member and their relevant experience that would contribute to the success of the proposal.

- Teams should include at least **one healthcare systems professional / key stakeholder** to lead implementation efforts of the solution.

- If teams do not have a committed HCS key stakeholder at this stage, they must **identify potential candidates**, along with the status of communication and likelihood of participation. Teams must be complete before the full proposal deadline.

Description of Project

Submissions must include a brief overview of the approach and solution for which you are seeking funding, including the following components:

- Description of organization.

- Objectives of project.

- Description of how project will advance the goal of increasing early detection of mild cognitive impairment and Alzheimer's disease.

- Proposed implementation partner(s) (e.g., health systems).

- High-level timeline.

- High-level budget.

- Supporting files, including diagrams, graphs, spreadsheets or other elements to support the proposal.

- Literature to support the approach.

- Detailed project plan, including timeline and key milestones.

Components of Full Proposal

Based on the initial concept papers, DAC will invite applicants to submit a full proposal for their project. This proposal should include the following elements:

☑ **Applicant biographies:** Submissions must include a brief biography of each team member and the relevant experience that would contribute to the success of the proposal.

☑ **Description of project:** Submissions must include a detailed description of the solution and implementation approach for which you seek funding, including the following:

- Description of organization.
- In-depth description of solution.
- Primary and secondary research that support the solution.
- Description of approach to implementing solution in health system(s).

☑ **Detailed budget:** Submissions much include a full project budget, showing how the grant would be used, as well as any other funding requirements:

- Funds requested from DAC.
- Detailed budget spreadsheet, breaking down the proposed project into subsections to show the costs of resources required.
- If additional funding beyond the DAC funds will be required (or if resources have been secured already), describe them here, along with fundraising strategy.

☑ **Description of current stage of readiness:** Submissions must include a description of the team's current stage of operational readiness, including:

- Organizational capabilities to implement solution.
- References from potential implementation partners.

☑ **Operational plan, timeline and expected impact:** Submissions must include an operational plan, mapping key milestones on a timeline, as well as a plan for expected impact and success assessment.

Roles and Responsibilities

Teams are expected to meet the requirements below for the development and submission of their proposal. DAC will assess proposals with the Judging Panel described below:

Teams

Good standing

Participants must register their intent to submit a proposal and sign the Participant's Agreement ahead of the deadline of concept paper submission to be eligible.

Fundraising

All costs of developing and submitting a proposal are the responsibility of the team, regardless of their proposal's outcome.

Safe and ethical behavior

Teams must comply with all laws and regulations which apply to their participation in this grant.

Members

Teams must include a Healthcare Systems profession to lead implementation efforts of the solution, such as a primary care physician or geriatrician.

Judging Panel

Selection of Judges

The Judging Panel will be composed of highly qualified experts from a diversity of fields and professional backgrounds such as: clinical, operations and strategy, policy, technology, etc. The Judging Panel will be selected and vetted by the Davos Alzheimer's Collaborative team.

Role of Judging Panel

- Evaluating team's compliance with the Participant's Agreement, ensuring eligibility of team and individual team members.

- Evaluating the content of the proposal based on the Evaluation Criteria.

- Conducting performance review on a quarterly basis to ensure teams are respecting proposed project timelines.

Decisions of the Judging Panel are final.

Performance Review and Expectations

The selected team will be required to meet the following expectations and performance review criteria.

Expectations

- Meet all deadlines.
- Complete project within budget and timeline.
- Participation in the DAC "Community of Practice."
- Participation in the DAC Learning Lab.
- Publish insights and learnings from DAC-funded project in a reasonable amount of time.

Performance Review

- Regular touch points with DAC as established in contract.
- Quarterly check-in performance reviews with DAC, assessing success metrics as identified by DAC and team.
- Final performance review to assess overall success of implementation and potential for expansion.