RISING TIDE.
Foundation for Clinical Cancer Research

FUNDING GUIDELINES

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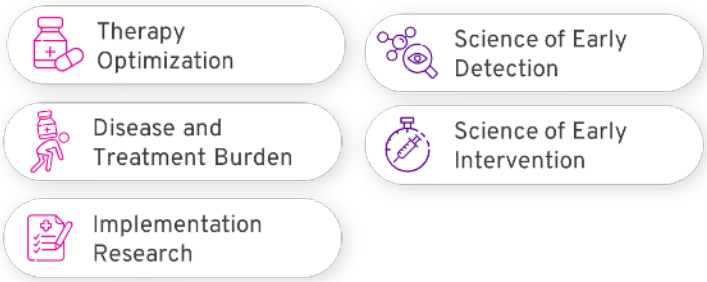
Introduction

Rising Tide Foundation for Clinical Cancer Research (RTFCCR) supports innovative and unique patient-centered clinical trials with the potential to impact the lives of cancer patients timely. Our overall goal is to improve cancer patients' treatment options and quality of life by funding clinical studies focused on therapy optimization, disease and treatment burden, and early detection and intervention. We fund phase I to phase III interventional clinical trials. Please note we do not support basic research, observational or epidemiological studies, or trials that could generate revenue for start-ups or pharmaceutical companies.



RTFCCR focus areas. For more information, please refer to our website.

Who can apply

Applicants must hold a doctoral degree and have a faculty appointment (or equivalent) with an academic institution, including research institutions that are not formally associated with a university, at the time of the award term. Both early-career and established investigators are encouraged to apply.

An applicant must be an independent investigator with demonstrated experience and training to be able to organize, manage, and implement the clinical trial to meet milestones and timelines, and to protect the rights and welfare of the human subject participant. The application must convey the institution's commitment to both the applicant and the proposed research activities.

RTFCCR does not have any geographical or cancer type restrictions. International teams are welcome.

Typically, a grantee can only have one active grant at a time.

Project eligibility

To be eligible for funding, proposed clinical trials must meet the following criteria:

- Clinical trials must be interventional, early to late stage (Phase 1, 2, and 3); they may include secondary non-clinical endpoints.
- Applications must have patient partner involvement (see the section “Patient partner involvement in research” on page 6 for more information). If this is not the case, you can apply for a pre-application grant. Please find more information here (Pre-application Grants - Rising Tide Foundation).
- The application must be submitted in English.

Pharmaceutical agents

- Pharmaceutical agents used in the study can be generic (off-patent repurposing), registered for this indication, or under development by an academic institution.
- On-patent drug repurposing applications will be assessed on a case-by-case basis and considered for funding only for rare cancers with no treatment options.

Immunotherapy

- Clinical trials testing immunotherapies should be discussed with RTFCCR staff before application submission.

Pediatric clinical trials

- Clinical trials testing new drugs with potential pediatric applications
- Innovative, less toxic treatments for childhood cancers
- Phase 1 high-risk, high-reward interventional clinical trials in the pediatric cancer population
- No survivorship research

Early detection and intervention

- Applications aimed at detection of and intervention on early cancer or pre-cancerous changes to try to slow or prevent cancer development and lethality. These applications can be either interventional clinical trials, or pre-clinical validation studies.
- The application needs to include preliminary data proving the correlation between the proposed detection/intervention method and the cancer of interest
- The application should be aimed at populations at high risk of diagnosis or progression of pre-cancer to cancer.
- The applying investigator or institute should own the new detection/intervention method.
- Applications with clinical intervention and clinical endpoint will be prioritized.
- RTFCCR does not support population screening nor companion diagnostics studies.

Applicants can reach out to rtfccrteam@risingtide.ch for any questions.

Maximum award and duration

Please be aware that RTFCCR does not cover the full clinical trial cost. RTFCCR normally funds USD 100,000 per each year of the trial duration. Awarded funds will be paid on a milestone-driven basis. Funds should be used for non-reimbursable approved treatment and study-related patient-care costs, including patient participation costs such as travel and parking, extraordinary translational and imaging studies, and supplies. Funds may also be used to support the salary of the principal investigator, patient partner, and other key personnel. Equipment costs will be funded only if use is demonstrated to be entirely related to the project financed by RTFCCR.

A grant usually lasts up to five years. RTFCCR will disburse the funds only if the recipient follows reporting and participating in accrual requirements outlined in the grant agreement.

Please note that indirect costs, such as overhead, are not covered.

Application process

The application process involves the following steps:

- **Step 1—Letter of Intent (LOI):** LOIs are accepted on a rolling basis with three deadlines per year. They are submitted through our online grant management system, SmartSimple (SmartSimple | Rising Tide Foundation), and assessed by internal staff and advisory board members.
- **Step 2 - Full Application:** Only the most promising applications that align with our focus areas and have the highest potential for sustainable, transformative, and direct patient impact in the shortest possible time will be invited to submit a full grant application.
- **Step 3 — Grant Review Committee:** Full grant applications are reviewed by an independent grant review committee consisting of two scientific experts, one biostatistician, and one patient partner.
- **Step 4 - RTFCCR Board of Directors Meeting:** Recommendations made by the grant review committee and RTFCCR advisory board are submitted to the RTFCCR Board of Directors for final decision based on alignment of the proposed project with the foundation funding scope and strategy. The Board of Directors' decision will be communicated in a timely manner. Board meetings take place three times a year.
- **Step 5** - Upon approval for funding, we will initiate the contracting phase by defining the milestones and payment deliverables.

Full application requirements

Full applications should include the following information as requested in the SmartSimple platform:

- The curriculum vitae (CV) of the principal investigator and co-investigators (max 2 pages each; please upload all CVs as PDF files to SmartSimple platform)
- A description of the proposed clinical trial/research project (organized in a manner similar to that required by the US National Institute of Health [PHS 398]), including:
    - Specific aims
    - Background and significance

  - Preliminary results, studies explaining the significance and potential for success
  - Experimental design and methods
  - Statement of objectives regarding how the study can change the current standard-of-care or how it will create evidence to improve prevention and early detection of cancer
  - Description of criteria used in determining positive results and how quality-of-life improvements will be quantified
  - Statistical analysis section outlining approach taken to make study scientifically valid
  - Amount of time before the opening of the study upon approval for funding
  - Statement of the next steps for research upon achieving positive or negative results
  - Description of how milestone achievements for the study are achieved
- Completed Patient Partner Involvement Plan
- Current, active Institutional Review Board (IRB) or Ethical Committee (EC) approval letter for the study (if the IRB/EC has not been obtained at the time of proposal submission, please indicate the expected timeline for obtaining the approval)
- Letter from department head stating institutional commitment to the project, no competing studies, and verification to accrue a valid patient population
- Explanation of alignment with RTFCCR Focus Areas
- Breakdown of costs of the trial, detailing the amount of the total costs, the amount requested from RTFCCR (including expenses related to patient partner involvement), and the plan for acquiring the remaining funds (fundraising plan)
- List of other sources of financial support for the project (include all sources applied – pending and/or active with dates of start and expected end)
- Industry letter stating permission for the use of the investigational agent, who is supplying that agent for the study, and the in-kind amount of that contributed agent [if applicable]
- List of literature cited.

Royalties and Intellectual Property (IP)

Please note that the RTFCCR grant award terms and conditions foresee the sharing of royalties and intellectual property revenue when relevant. Please refer to our Terms and Conditions (link).

Scientific review criteria applied during the Grant Review Committee

An application receives a priority score based on a 9-point rating scale (9=most meritorious; 1=least meritorious) during the grant review committee meeting using the following criteria:

- **Significance:** The proposed research can potentially significantly impact the treatment or prevention of cancer(s).
- **Rationale:** The scientific and/or clinical rationale is sound and based on high-quality and relevant data.

- **Plan/Impact:** The project plan includes a clinical trial, which is well planned to achieve a meaningful outcome. The study's potential impact on patients' quality of life and the timeframe in which patients might realize a benefit is meaningful. Proposed project milestones are appropriate in their relationship to the research plan.
- **Feasibility:** The proposed clinical trial is feasible and achievable within the project timeline.
- **Patient Partner Involvement Plan:** The proposal requires patient partners' participation plans. Patient partner involvement activities are appropriately planned and resourced to achieve meaningful involvement. The patients' needs (both unmet medical needs and first-hand experiences) are reflected in the design of the clinical trial.

Strategic review criteria applied during the Board of Directors Meeting

An application receives a strategic score based on a 3-point rating scale (1=strong fit; 3=weak/limited fit with strategy) during the Board of Directors meeting using the following criteria:

- **Patient community perception:** Evaluates the value of the proposed research from the patient community's perspective (human factor), considering its relevance and the perception that it will bring significant benefits (quality of life, reduced costs, increased access).
- **Focus areas priorities:** Evaluates the adequate fit with focus areas priorities established by strategic and portfolio fit selection performed by the Board every 2 years.
- **Portfolio fit:** Evaluates the adequate fit with active grants. It indicates how much the grant aligns with our strategy and how important it is for our portfolio.
- **Innovation:** Indicates how innovative the approach is regarding trial design, challenges existing treatment options, and/or employs innovative methodologies, endpoints, or hypotheses. It should not overlap with ongoing trials.
- **Reach patients:** Measures the complexity of steps required for the research to be applied in the clinic. This criterion takes into consideration the following components:
  - Technical and Logistical potential
  - Time to Patient Impact
  - Adoptability- likelihood to practice changing, adoption, scalability, and accessibility
- **Researcher and team reputation:** Reputation indicates the added value for CCR's reputation that the association with the research group brings.
- **Positioning as funder:** Evaluate the potential for leveraging additional resources and fostering collaborations; the importance CCR funding will have in relation to other funders and the current fundraising stage the applicant is at (early or late).

Conditions of continued funding upon approval

- Demonstration of satisfactory progress as defined in grant award documentation (milestones met as officially agreed, approved, and expected proof and explanation of each patient's status and response).
- Agreement to and compliance with RTFCCR's Research Funding Terms & Conditions.

- Regular communication with RTFCCR staff regarding the funded clinical study.
- Notification of any modifications to the approved study, its Patient Partner Involvement Plan, protocol, timeline, expectations, funding sources, patient status, and exact reason for any patient's discontinuation of study participation, etc. (including copies of documents supplied to IRB/EC, the FDA, and/or any other funding sources for the study.

Patient partner involvement in research

We adopt the patient partner definition provided by the Patient-Centered Outcomes Research Institute (PCORI). PCORI's definition includes patients (those with lived experience), family members, caregivers, and organizations representative of the population of interest in a particular study.

It is important that patient partners are not confused with trial participants. Patient partners are members of the research team and involved in the planning, conducting, and dissemination of the research, whereas trial participants are individuals enrolled in the study.

We define patient involvement as meaningful involvement of patient partners in the development of detection, therapeutic, or symptom management approaches. It encompasses the active, meaningful, and collaborative interaction between patient partners and researchers across all stages of the research process, where research decision-making is guided by patient partners' contributions, recognizing their specific experiences, values, and expertise.

The strategy, modalities, and budgets for patient partners' involvement, related deliverables, and expected outcomes can be included in the grant budget, as long as they are clearly described in the grant application.

Guidance for planning patient partner involvement in research

Early involvement of patient partners, based on co-design principles, allows for a better formulation of relevant research questions, more credibility of the knowledge produced, identifying, and solving potential challenges faced during the trial, and better application of outcomes to specific contexts.

Here is a checklist to help plan patient partner involvement and complete the Patient Partner Involvement Plan required with the Letter of Intent (LOI). It encompasses points that should be considered during the application phase, during the project's implementation, and beyond the project.

Before the project starts:

- Patient partner involvement is planned across the entire project lifecycle.
- The most appropriate patient partner involvement model is selected.
- The appropriate patient partners are involved early in formulating the concept and hypothesis of the study.
- The appropriate budget for patient partner involvement activities and compensation of patient partners is reflected in the patient partner involvement plan and the overall grant budget request.

During the project:

- The assessment of the needs of trial participants by patient partners is included.
- The trial procedures are adapted where necessary to meet trial participants' needs.

- An assessment of the impact of Patient Involvement is considered at the mid-term and end of the project.

Beyond the project:

- Communication and dissemination of study outcomes with patient/public partners is planned after the project ends.
- Collaboration with the patients' community on trial outcomes is planned.

Please find more information here.

Choice of model of patient partner involvement in research projects

Research teams should think carefully about activities across the whole project lifecycle that patient partners could undertake. Short term activities are easy to define upfront, but it is more challenging to consider sustained involvement across the entire project. Therefore, depending on the research project, it is important to consider the most applicable role of a patient partner for contributing to the clinical research project. Applicants will be asked in the full application to provide a detailed explanation to justify the patient role selected for the project.

Patient partner role	Examples	Involvement level
CONSULTANT	• Patient partners provide priority and continuous consultation on outcomes of importance, study design, etc. • Patient partners are paid investigators or consultants. • Patient partners have a governance role – "a seat at the table".	High
ADVISOR	• Patient partners serve as advisory committee members or provide a priori consultation on outcomes of importance and study design but have no leadership role or governance authority.	Moderate
REACTOR	• Patient partners' input is collected distally through surveys, focus groups, or interviews. Still, patients are not consulted directly or a priori on such things as study design and outcomes of importance. • Patient partners are asked to react to what has been put before them rather than being the origin of the concepts of interest.	Low

Patient Partner Involvement Plan

We require the submission of a Patient Partner Involvement Plan as part of the LOI. It should then be revisited or adapted for the Full Application. The plan should describe patient partner involvement processes during the generation of the project application and during the implementation of your project. It describes involvement, such as how you engage with the patient community when your research question is defined, while the proposal is written, when it is being submitted and resubmitted, and which patient partner involvement model you chose to implement the project.

When developing the project budget, please ensure that adequate and realistic resources for patient partner involvement are reflected in the Patient Partner Involvement Plan and the overall grant budget request. This could include an appropriate budget for work time (staff or contractors inpatient organizations) and project-related pass-through costs (e.g., travel expenses, meeting venue costs).

In summary, different phases of research will need different activities to ensure patient partner involvement is implemented in the way defined in this document.

Clearly state how the patient partner's input has been used to design the application and how it will be implemented throughout the project activities.