

Quality Improvement Initiative in Subcutaneous Immuno-Oncology (QI3-SC)

Applicant Guide

Numerous clinical trials have demonstrated the benefit of intravenous immuno-oncology (I-O) agents across various solid tumour types. Recently, subcutaneous (SC) administration has emerged as an alternative route to intravenous infusion for some I-O agents across solid tumors, which may reduce patient treatment burden and improve health care efficiency (Burotto M et al, Annals of Oncology, 2023; Albiges L et al. Annals of Oncology, 2025).

The QI3-SC Initiative supports quality improvement projects aimed at **transforming workflows** to enhance the treatment experience for patients receiving subcutaneous immune checkpoint inhibitors. Project supported should focus on sustainable changes that **optimize healthcare resource utilization** and could have a broader impact across hospital centers.

Objective	<p>The purpose of the BMS Quality Improvement Initiative in Subcutaneous Immuno-oncology (QI3-SC) is to support hospitals and health care providers adapt to the increasing use of subcutaneous I-O agents through the support of quality improvement projects. The Initiative specifically supports projects with a focus on workflow transformation initiatives that have the potential to directly impact the experience of patients receiving subcutaneous ICIs, largely through the optimization of healthcare resource utilization.</p> <p>The QI3-SC project should be sustainable and could have broader impact across hospital centers or the healthcare community.</p>
Important dates	<ul style="list-style-type: none"> • Request for Proposal (RFP) launch: April-2025 • Application deadline: 15-Aug-2025 • Anticipated notice of decision: 15-Sep-2025 • Funding will be distributed following a fully executed agreement signed by 15-Nov-2025 • Anticipated project start date: Dec-2025
Eligibility	<p>The BMS QI3-SC is open to all health care organizations. Healthcare professionals employed by or holding a position in a hospital, and actively involved in the delivery of health care to cancer patients treated with SC I-O agents are eligible to apply on behalf of their Institutions.</p> <p>The list of eligible professionals includes, but is not limited to:</p> <ul style="list-style-type: none"> • Physicians • Pharmacists • Nurses and all nursing-affiliated personnel • Allied health professionals • Other hospital-based professionals that participate in or who have an interest in improving the delivery of care to cancer patients treated with SC ICIs <p>The QI3-SC proposal shall be a new quality improvement project or a new aspect of an existing project.</p> <ul style="list-style-type: none"> • Funds will not be awarded for projects currently funded by BMS or via other funding

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	<p>sources (ex. other pharma, private foundations, hospital quality initiatives, etc).</p> <ul style="list-style-type: none"> Applicants may have received funding from other sources to increase the budget available to their project, as long as the applicant <u>agrees to the conditions of funding</u> and the QI3-SC funds are used to support <u>a new aspect of the larger project</u>. <p>Research proposals will not be eligible for funding.</p>
Funds available	Individual projects requesting up to \$50,000 will be considered. The number of projects funded will depend on the number, quality and budget requested for the applications received.
How to submit	<p>Applicants should download and complete the QI3-SC Application Form available and return the completed form to QI3@bms.com by August 15th, 2025.</p> <p>Applications received after the deadline will not be reviewed.</p>
Conditions of funding	<ul style="list-style-type: none"> Funds for winning projects will be provided to the Applicants' Institution (not-for-profit institutions only). The Institution will be required to enter into a standard written agreement with BMS. An initial payment will be provided at the time of contract execution, followed by one or more interim payments triggered by achievement of progress milestones (if applicable), and a final payment upon receipt of the project report. BMS reserves the right to use some sections of the project summary provided in the application (Project Title, Applicant Name and Organization, Unmet medical need, Proposed Intervention) for visibility purposes (ex. public post on the BMS website). Upon completion of the project, all applicants of winning projects are required to complete a short final project report to BMS. This final report may be used by BMS for visibility purposes (ex. public post on the BMS website) to help the broader healthcare community through knowledge transfer and dissemination. All presented material (oral presentations, posters, publications) must acknowledge BMS as a source of funding.
Use of funds	<ul style="list-style-type: none"> QI3-SC funding must be used exclusively for the achievement of the approved QI3-SC project. Applicants of winning projects <u>may not use the funding</u> to: (i) pay travel, lodging, registration fees, or personal expenses; (ii) supplement or replace missing hospital operational resources or human resources; (iii) supplement or replace institutional /clinical operating budgets or (iv) purchase capital equipment such as computers, iPhones, tablets, appliances, machinery, camera equipment, sensors, etc (v) support research projects (clinical research or basic science projects). Institutional overhead costs should be included in the total budget.

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Review process

Submissions will be independently evaluated and scored by members of a BMS Review Committee based on the criteria listed below. This will be followed by a group review discussion if needed.

All applicants will receive a summary of the panel's scoring and comments. A notice of decision is anticipated to be sent by email by September 15, 2025.

Please note that research proposals will not be scored. Only Quality Improvement projects will be retained and evaluated.

CRITERIA	SCORE
RELEVANCE <ul style="list-style-type: none"> The project addresses an unmet medical need (ex. health care resource constraints) An aspect of the project involves workflow transformation that will directly impact cancer patients receiving subcutaneous ICIs The project does not duplicate other projects/materials already developed or available The project targets rapid cancer care quality improvement 	/25
FEASIBILITY <ul style="list-style-type: none"> The project is realistic within the proposed health care environment, with realistic timelines The team has the necessary expertise for the success of the project Identified risks can be mitigated The proposed budget is realistic The project has received support from relevant Departmental Leadership and other project stakeholders (ex. Nursing, Pharmacy, etc) 	/25
EVALUATION OF IMPACT <ul style="list-style-type: none"> There is a plan for evaluating the impact of the project 	/10
SUSTAINABILITY <ul style="list-style-type: none"> The sustainability plan is realistic within the healthcare context There is a plan to financially sustain this solution in the short and long-term (if applicable) Consideration has been given to other domains of sustainability beyond financial (ex. people, health policy, socioeconomic/culture, environmental) 	/20
TRANSFERABILITY <ul style="list-style-type: none"> The experience gained, or knowledge obtained from the deployment of this project has the potential to be a spread initiative to other disease sites, healthcare teams, or hospitals There is a plan for knowledge transfer 	/20
TOTAL SCORE	/100

Contact

For additional inquiries, please contact:

Caroline Rousseau, PhD
 Scientific Advisor, Immuno-Oncology
QI3@BMS.com