CF AMR Syndicate

FAQs

Please see below frequently asked questions regarding aspects of the Collaborative Discovery programme funding call

Where is the link to the application portal?

Please see the link on the funding page this is now live. (CF AMR Syndicate Submission Manager (submittable.com))

I'm not based in the UK, can I apply? *Yes, this is a global call you can apply.*

Are academics eligible to apply? Yes, we welcome applications from academics and SMEs.

What is the nature of the funding? Is it 100% non-dilutive? Yes, funding is non-dilutive please see T&Cs for full details.

Will feedback be provided on EOIs?

Yes, we will provide feedback following the review process and applicant notification.

Will the Syndicate offer support to applicants for the EOI stage?

We would always encourage you to talk to us ahead of submitting an application where we would be happy to advise. Please use the funding call contact page. (Collaborative Discovery Programme at CF AMR Syndicate)

Are non-traditional approaches in scope including host targeting?

Yes, non-traditional approaches are acceptable; could include anti-virulence, host targeting, and any novel approaches related reduction and treatment of lung infections in people with CF.

Our project is not in scope - is there anything the Syndicate might be able to support with anyway? We would always welcome enquiries and maybe able to help or advise. Please sign up for the network and contact us with any requests. (CF AMR Network | CF AMR Syndicate)

Where can we find the TPPs for the call? Please see link. (Patient-Focused Target Product Profiles for CF-Related Infections (cfamr.org.uk))

When can we expect a decision on whether we are selected for the next application stage?

Timelines for the whole application process can be found on the funding page. <u>(Collaborative Discovery Programme at CF AMR Syndicate)</u>

If my application is rejected, will I be eligible for future funding calls?

We want to support innovators and would encourage you apply for other calls, resubmission of the same proposal without addressing feedback would be likely rejected.







Do you anticipate future funding calls?

We are expecting further funding calls, the exact nature and timings are to be determined and will depend on the types of applications we receive_as part of this call. We want to be able to respond to the translation gaps experienced by the community.

Who will see my application?

Representatives from partner members (MDC, Cystic Fibrosis Trust and LifeArc) will review the application. All partners will abide by Syndicate privacy, conflict of interest policies and procedures. Where any external panel members are used within the process CDAs, and full conflict of interest disclosures will be in place throughout.

Do I need to have the tools and facilities to deliver the project in house? *No, we envisage the project as collaborative and do not expect all resources to be run in-house with the applicant.*

Can I add references into my application? Any data or material to support the application can be included such as peer-reviewed publications.

When would I hear if my application has been successful, and when would you expect successful projects to start? Timelines for the whole application process can be found here (provide link). The exact start time of the project may vary depending on the nature of the project, applicant timelines and contracts being confirmed for all parties. Projects may likely start at the end of 2023 and start of 2024.

Can I save the EOI as a draft? *Yes, you can once you log into submittable link and fill in the application section.*

How do you define SMEs?

We define small to medium sized enterprises to a staff level of <250.

Can a consortium apply?

Yes, but would need a lead applicant and co-applicants would need to be from SME or academic institutes.

Can investigators/applicants be on multiple applications?

Yes, if the projects are distinct and unrelated.

Are there budget caps for different stages of development?

No, the overall maximum funding award value for each project is up to £500,000 GBP and not limited within stages.

What expenses are covered? Are salary costs eligible?

This is discussed in the webinar presentation – but could be used for: An appropriate %FTE of staff (Post Docs), plus consumables, directly related to funded work; Access to specialist equipment/reagents; Contract Research Organisation work; Use of centralized platforms enabled by the CF AMR Syndicate; Defined lab activities at the Medicines Discovery Catapult or LifeArc

When and how are funds transferred to a company/academic after entry into the portfolio?

Payments will made based on milestone criteria; payment timing may be adjusted on a case-by-case basis such as advance payment made in certain circumstances.







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Who will own the IP generated in a funded project? Do I need to have patents in place before applying?

Background IP and IP generated will reside with the applicant/recipient. No, but we would be looking at your exploitation plan and whether you have freedom to operate.

Does this call only provide funding or does it also provide access to Syndicate enabling tools and resources? Am I restricted to working with CF AMR Syndicate partner organisations for resources?

The CDP is designed to be collaborative we expect access to Syndicate enabling tools and managing partners resources to be part of the project. All options will be considered, but the funded organisation would have freedom of choice.

Is there a requirement for a novel mechanism of action? Or are best-in-class agents in scope? Does the target have to be completely new?

We are looking for novelty and not just me too, this could include novel approaches to existing targets may well be in scope (e.g., new binding site or new modality etc.). We encourage you to reach out for further discussion on your project if needed.

Are there minimally accepted criteria for projects submitted at each phase i.e., validated target/mechanism, hits, leads? Yes, these are in line with those discussed in the webinar and are based on the published CARB-X criteria, but we would always encourage you to talk to us ahead of applying where we would be happy to advise.

We have an asset which is about to enter IND-enabling studies for *E. coli* and *K. pneumonia* UTI studies. We have some very positive data in clinical isolates of *P. aeruginosa* so we may be able to expand the indication into CF. Would this type of project have a realistic chance of getting funded in this call?

Whilst this call will not fund solely IND enabling studies, carrying out preclinical studies to further validate and align the asset for CF indications would certainly be in scope. For example, in vivo PK/PD lung infection models and extensive microbiology testing in wider panels of CF pathogens. We would therefore encourage you to apply for this call and arrange a meeting with us to discuss in more detail. In your EOI submission, you will need to convey that there is a credible strategy to advance your asset all the way to clinical trials in CF patients.

I have a compound from a repurposing screen would this be in scope?

This would depend on the novelty of repurposing. We would always encourage you to talk to us ahead of applying where we would be happy to advise.

Would hits from a virtual screen be considered? I have a non-traditional novel phenotypic screen which includes target engagement and cell permeability components de-risking standard HTS approaches would this be in scope?

Hits from a virtual screen that has already taken place would be OK so long as these have been validated in appropriate (micro)biological assays and not purely based on in silico predictions. A non-traditional novel phenotypic screen would also have to be validated in that the screening provided useful hits, we are not funding pure screening activities. We would always encourage you to talk to us ahead of applying where we would be happy to advise.

Where can we find a list of CF-relevant pathogens as referred to in Syndicate Biorepository?

Please refer to the Biorepository FAQs section on our website. (Biorepository FAQs | CF AMR Syndicate)

How can the CF community engage with the programme?

We are very keen that everything we do is directed on the needs and priorities of people with CF - we hope that by using the TPPs, which were developed with input from the community, as a guide around what we are looking for in the call projects this will help. Our plan is to actively work with the community throughout the programme and we are very appreciative of people looking to get involved. In addition, the CF Trust are engaged in all stages of the review process, and it is our intention to involve people living with CF in the final selection panel.





