

| | |
|-----------------------------------|--|
| Bayer Head Office Use Only | |
| Date request received:* | |
| Job Bag Number:* | |
| Agreed Funding Amount:* | |



APPLICATION FORM FOR DONATIONS AND GRANTS: AUDIT SUPPORT FOR MEDICAL RETINA SERVICES

Disclaimer

This form should only be used for Donation and Grant applications as set out in this document. For all other Donation and Grant applications, please visit the Bayer [Donations and Grants](#) page where you can find relevant guidance and application forms.

Overview

Clinical audit is a method to determine whether healthcare is being provided in line with current best practice. Audit is encouraged in the NHS to highlight areas for service improvement and to assess whether changes in a service are meeting the needs of patients in terms of capacity management and clinical outcomes. Clinical audit is not the same as clinical research: research is designed to generate new knowledge and/or test hypotheses, whereas audit is designed to assess whether a service is meeting the required standards.

Bayer recognise the importance that auditing of services can bring. We are pleased to offer this Donation and Grant scheme to support NHS medical retina services to overcome the barriers to conducting audits and the sharing of best practice.

Scope

This scheme can be used to apply for support with:

- the analysis of audit data
- and/or
- the development of a slide deck or a poster to share the outcomes of an audit

Applications under this scheme will only be considered where the following conditions are met:

- The outcomes being audited are related to; the treatment of neovascular age-related macular degeneration and/or visual impairment due to diabetic macular oedema, or visual impairment due to macular oedema secondary to retinal vein occlusion (branch, central and hemi retinal RVO).
- There is a clear rationale provided for the audit in terms of potential to improve NHS services and patient outcomes or experience
- A decision to conduct an audit has already been taken by the centre
- The results of the audit are not yet known

Any requests for support that fall outside of these definitions should be applied for using the general Donations and Grants form (available at the Bayer [Donations and Grants](#) page).



Format

Support is offered under this scheme either as:

- the donation of the services of an independent medical education agency
- or
- a financial grant for the applicant institution to engage the services of a medical education agency

Bayer will have no involvement in the design, conduct or analysis of the results of any audit that is supported via this scheme. Where applicable, Bayer will provide our recommendation for an independent medical education agency. There is no obligation to use Bayer's recommended agency and applicants are free to engage the services of an alternative medical education agency of their choosing. Audits supported by Bayer under this scheme will remain wholly the responsibility of staff within the NHS organisation(s) concerned. Donations and grants under this scheme will be offered in the order that they are received, subject to the availability of funding. It may not be possible to fulfil every request that we receive. Detailed estimates of NHS audit costs must be provided by the applicant when requesting a grant, with documentation to provide evidence of quotation where applicable.

About Donations and Grants

Bayer are proud members of the Association of the British Pharmaceutical Industry (ABPI). Under the ABPI Code of Practice, Donation and Grants are funds, benefits-in-kind or services freely given for the purpose of supporting healthcare, scientific research or education, with no consequent obligation on the recipient organisation, institution and the like to provide goods or services to the benefit of the pharmaceutical company in return.

Donations and Grants to individuals are prohibited.

Important information

All fields marked with an asterisk (*) are mandatory and must be completed. Incomplete request forms cannot be processed. You may be contacted for further information before your application is fully assessed.

Applications must be submitted at least 8 weeks ahead of estimated project start date to allow sufficient time for your request to be reviewed and processed. If you have not heard from us within 6 weeks of the date of your application, you may wish to contact us via the email address below to request an update.

Please note that we will not consider Donation and/or Grant requests that are:

- **retrospective in nature, or any parts of the audit that are applied for retrospectively**
- **to an individual or for individual benefit**
- **to a private, for-profit organisation (including private companies treating NHS patients); the recipient must always be an NHS organisation**
- **related to projects/activities outside of the UK**
- **linked to specific medicines/products/devices**

Requests that do not adhere to these criteria will be rejected.

Bayer plc. Is registered in England No. 935048
Registered Office: 400 South Oak Way, Green Park, Reading, Berkshire, RG2 6AD



| | |
|---|---|
| When completed, please return this form to: | MOST@bayer.com Applications can only be accepted via this email address. |
|---|---|

Organisation and requestor details:

| | |
|-----------------------------|--|
| Organisation Name: * | |
| Organisation Address: * | |
| Organisation Postcode: * | |
| Requestor Contact Name: * | |
| Requestor Contact Email: * | |
| Requestor Contact Number: * | |

Request details:

The following are examples of audit criteria from the Royal College of Ophthalmologists' Commissioning Guidance for Age Related Macular Degeneration Services adapted by Bayer Plc for ease of use and general applicability. We advise review of the original guidelines (<https://www.rcophth.ac.uk/resources-listing/commissioning-guidance-age-related-macular-degeneration-services/>) prior to completion of this form.

Please click to select any criteria that are/will be examined in your audit. Space is provided at the end for customised audit criteria.

| | |
|--------------------------|---|
| <input type="checkbox"/> | Percentage of patients with confirmed Late AMD (wet active) starting treatment (or being offered treatment) within 14 days of referral from primary care. |
| <input type="checkbox"/> | The proportion of eyes completing the initial loading phase of three-monthly injections as applicable to the licensed posology of the anti-VEGF agent, within 10 weeks. |
| <input type="checkbox"/> | The proportion of eyes with more than 1 follow-up delay of at least 14 days within the first 12 months of treatment. |
| <input type="checkbox"/> | Visual acuity change from baseline to 12 months, both crude and adjusted (taking account of age and visual acuity at the start of treatment). |

Bayer plc. Is registered in England No. 935048
Registered Office: 400 South Oak Way, Green Park, Reading, Berkshire, RG2 6AD



| | |
|---|---|
| <input type="checkbox"/> | The proportion of eyes with “good” visual acuity (≥ 70 ETDRS letters) after one year of treatment. |
| <input type="checkbox"/> | The incidence of intraocular inflammation or presumed infectious endophthalmitis within 42 days of a prior intravitreal injection. |
| <input type="checkbox"/> | The median number of injections in the first 12 months of treatment. |
| <input type="checkbox"/> | Follow-up to months 12 and 24 (Persistence with treatment). |
| <input type="checkbox"/> | Monitoring of “did not attend” (DNA) and appointment cancellation rates at yearly intervals. |
| <input type="checkbox"/> | Other (please specify): |
| Please provide a justification of how this Donation or Grant will improve NHS services and patient outcomes or experience: * | |
| Please provide audit timelines, including the estimated start and end dates:* | |
| Please provide any additional information that you feel will support your application | |
| Please disclose full details regarding additional applications to other organisations for this Donation or Grant: * | [Include the name of company, funding amount requested, including whether total or part funding has been requested from an additional organisation] |
| Please provide full details, to the best of your knowledge, regarding any previous funding that your organisation has received from Bayer within the last two years: * | |



| | |
|--|---|
| <p>Please specify whether you are applying for donation of services or a financial grant:</p> <p>(Please note services provided by a medical writing company will remain confidential between the NHS centre and medical writing company and will not be shared with Bayer)</p> | <p><input type="checkbox"/> Donation of Services</p> <p><input type="checkbox"/> Financial Grant</p> <p>Value of grant applied for</p> <p>(For grant applications, please provide details of audit costs with supporting documentation e.g. quotations)</p> |
| <p>Please specify the level of support being sought:</p> <p>(The analysis of audit data and/or the development of a slide deck or a poster)</p> | <p><input type="checkbox"/> Analysis of audit data</p> <p><input type="checkbox"/> Development of a slide deck and/or poster to share audit outcomes</p> <p>(Tick one or both)</p> |

Please mark the following boxes to confirm your understanding (please note: your application cannot be processed unless all boxes have been ticked and your signature has been provided below):

- I understand that information provided on this form will be used for the purposes of assessing and processing the application and will be retained on file for recording and auditing purposes.
- I confirm that the information provided is accurate and I have authorisation from my employers to approach Bayer for this support.
- I understand that if the application is successful, Bayer reserves the right to release details regarding the support provided if requested to do so, and Bayer will, in accordance with the requirements of the ABPI Code of Practice, make public disclosures of any payments, benefits in kind or other transfers of value provided.
- I confirm that if my application is successful, a clear and prominent declaration of Bayer's Donation or Grant in relation to the resulting material/activity must be made clear.

Data Privacy:

I acknowledge that Bayer and its agents may collect, store and process my personal data for the purposes of assessing and following up on your donations and grants request. I acknowledge my personal data may be transferred to the members of the Bayer group for such purposes (including for the avoidance of doubt, outside the United Kingdom and the European Economic Area (EEA). Bayer will treat such personal data in compliance with all applicable data protection legislation. It is in Bayer's legitimate interests to process your personal data for these purposes and this is the legal basis for such processing. For further information about this and your rights, please refer to our Privacy Policy (link below).

| Name * | Title * | Signature * | Date * |
|--------|---------|-------------|--------|
| | | | |

Bayer plc. Is registered in England No. 935048
Registered Office: 400 South Oak Way, Green Park, Reading, Berkshire, RG2 6AD



PRIVACY NOTICE

All of the information and personal data shared with us will be protected and kept confidential and otherwise processed, in line with our Privacy Statement (accessible at <https://www.bayer.co.uk/en/abpi-code-relevant-contracts-and-forms-privacy-statement>) and local regulations, including for the purposes of any financial disclosures required by the ABPI Code of Practice.

Bayer plc. Is registered in England No. 935048
Registered Office: 400 South Oak Way, Green Park, Reading, Berkshire, RG2 6AD

Non-Promotional

Number: PP-PF-OPHT-GB-1367

Owner: Mayhul Patel

Name: Audit Support Donations and Grants Form for Ophthalmology

Product: Ophthalmology Portfolio

Document Type: Material

Classification (UK): Donations and Grants

Material Type: Questionnaire

Audience: Health Administrator Nurses Pharmacists Physicians Specialty Pharmacy

Distribution Mode: Website

Signatory Approvals

Medical Practitioner Certification - Non-Promotional
I certify that I have examined the final form of the material and that in my belief, it is in accordance with the relevant regulations relating to advertising and the Code.

In the case of activities, I certify that I have examined all proposed arrangements and that in my belief they are in accordance with the relevant regulations relating to advertising and the Code.

I certify the above is true

Timothy Schrire
timothy.schrire@bayer.com
Medical Practitioner
11-Mar-2026 14:28:45 GMT+0000