Applicant: XXXXX

Organisation: XXXXX Funding Sought: £XXXXX

# IAI-25-106

### **Project title**

Provide a clear and concise scientific summary of the research and proposed methods. We may send it to relevant expert reviewers to invite them for comment on your application. Take care not to include anything confidential or commercially sensitive. (350 words).



# IAI-25-106

Project title

# **Section 1 - Application Summary**

#### **Proposal title**

Project title

#### **GMS ORGANISATION**

**NHS Trust/Research organisation Type** 

Name

Phone (Work) **Email (Work) Address** 

### **Department/clinical service**

Department/clinical service

# Primary location(s) where work will be carried out

**Primary location** 

#### **Secondary location**

Yes/No

### **Secondary location details**

Secondary location

### Project delivery team

Input the roles that will make up the project, including names where possible. Role title options are: Project lead, Clinical lead, Organisational lead, Subject matter expert, Project SRO, Additional project team member.

Role	Name, if known	Responsibility	Status
Project Lead	Name	Responsibility	In place
Additional project team member	Name	Responsibility	New, required

#### CV and statement of support (PDF)

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#### **Collaborators (not mandatory)**

Collaborator name	Collaborator name Current organisation	Role on proposal	Upload collaborator letter of support
Name	Organisation	Role	Upload (PDF)

#### **Material Transfer Agreements**

Yes/No

### **Proposed start date**

Date

#### **Proposed length of support (months)**

Months

#### **Total budget requested**

£0.00

# **Section 2 - Proposal summary**

### **Plain English summary**

Provide a summary of this proposal, including key goals, for a non-expert audience. We may use it to describe your work on our website and elsewhere (we publish summary details of all our awards). If your application is successful, this summary will be automatically uploaded, without editing, to our website. Take care not to include anything confidential or commercially sensitive. (350 words)

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### **Scientific Abstract**

Provide a clear and concise scientific summary of the research and proposed methods. We may send it to relevant expert reviewers to invite them for comment on your application. Take care not to include anything confidential or commercially sensitive. (350 words).

#### Fit to Moorfields Eye Charity's strategy

Create a world class integrated centre for advancing eye health teaching and research in 2026-27

#### Strategic fit statement

Provide a statement that illustrates how this proposal aligns with Moorfields Eye Charity's strategy. (350 words max)

### Impact, outcomes and outputs statement

Provide a statement that outlines the impact, outcome and outputs of this proposal. Be as specific as possible and provide information that the trustees, the charity and external reviewers will find helpful in assessing the potential of the proposed activity. For example, relevance of the work/research, changes to the state of knowledge within a field, collaborative projects, problems solved, documented changes to public policy or guidelines or improvements in public health, industrial interest in past or current work, companies formed. (350 words max).

### **Primary clinical condition**

Drop down menu options are: Adnexal/extra-ocular; Age related macular degeneration; Corneal/ocular surface disease; Diabetic retinopathy; Glaucoma; Inherited eye conditions; Lens/cataract; Macular degeneration (excluding AMD); Multiple conditions; Neuroophthalmology/optic neuropathies; Non-ocular conditions; Ocular cancer; Ocular motility/

Secondary clinical condition visual processing; Paediatrics/young adults; Vasular disease and inflammation

Same drop down menu as previous

#### Category of work

Discovery science

Drop down menu options are: Building, capital; Clinical trials phase 0-1; Clinical trial phase 2-4; Clinical trial post phase 4; Discovery science; Education, training; Equipment, resource; Feasibility, pilot trial, natural history studies; Patients, public; Service improvement; Staff; Technology, devices; Treatment evaluation, management.

#### **Primary focus area**

Drop down menu options are: Genetics; Genomic discovery and therapeutics, Artificial intelligence; Imaging; Translational data science/informatics; Cell and gene therapies; Digital innovation; EDI widening participation.

### Named gene(s)

If you have selected genetics then please specify the primary genes / mutations your work is focused on.

#### Secondary focus area

Genomic discovery and therapeutics

#### Resubmission

Yes/No

#### Resubmission detail

If yes, provide details (500 words max)

# **Section 3 - Proposal details**

#### **Aims**

Aims are broad statements of desired outcomes, or the general intentions of the activity, which 'paint a picture' of your project. Emphasise what is to be accomplished (not how it is to be accomplished) (100 words max).

#### **Objectives**

Objectives are the steps you are going to take to answer your questions or a specific list of tasks needed to accomplish the goals of the proposal. Emphasise how aims are to be accomplished. (100 words max).

#### Background and rationale for project

Provide a clear and succinct overview of the importance of the project, including background and progress to date related to the questions being presented in the application. Details of gaps in current e.g. knowledge, practice, policy, research or service delivery should be included.

Applicants should include all pertinent information and/or links to referenced papers which contain critical information underpinning the work. (2000 words max)

### **Project plan**

Detail the actual work that will be carried out to deliver this project. It should directly link to aims, objectives, KPIs and/or milestones stated in the proposal. (2000 words max).

# Preliminary data (PDF)

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#### References

Please give full citation and list all authors (use of et al., is only appropriate when there are more than 5 authors).

# Section 4 - Proposal details continued

### Innovation and improvement phase

Assessment	Tick box
Dissemination	Tick box
Adoption	Tick box
Implementation	Tick box

# What is an estimated timescale to patient benefit, positive change?

Please provide an estimate of timescale in months and detail how the pathway to delivery of the impact of this proposal will be achieved in this time. (100 words max)

#### **Milestones**

Details	Target start date	Estimated completion date
Details	Date	Date
Details	Date	Date

### Risks

Include the risks identified i.e. an event or condition that hasn't happened yet but has a probability of occurring, and what actions you plan to mitigate these risks. (300 words max).

### **Assumptions**

List any key assumptions made and which have a major impact on the success of the project (300 words max)

#### Issues

Include any issues, risks that have already occurred, that need to be resolved before the project can proceed further. (300 words max).

#### **Dependencies**

List any projects or activities that this project is dependent on for successful delivery, or other projects which are dependent on this project. (300 words max)

# **Key performance indicators**

Outcome measures	Process measures	Balancing measures
Text	Text	Text
Text	Text	Text

#### **Gantt chart (PDF)**

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#### **Stakeholder involvement**

Stakeholder group drop down menu contains: Patients; Advocacy groups/communities; Project participants; Public; Staff; Other; Not applicable

Stakeholder group	Develo	pment of this proposal	Delivery of the project
Select	Text	70	Toyt
Patients	rext		Text
Select	Text	~(0	Text (add more lines as needed)
Staff	Text	(0)	rext (add filore lines as fleeded)

# Dissemination, sharing of knowledge

Provide detail on plans to share outcomes of the project with e.g. known stakeholders, the public, policy makers. (free text)

# **Organisational approvals**

Approval	Details of requirement	Submitted	Outcome
UCL Equipment committee	Text or N/A	Yes	Approved/pending/declined
Space, location	Text or N/A	Yes	Approved/pending/declined
Capital planning and oversight committee (CPOC)	Text or N/A	Yes	Approved/pending/declined
ManEx	Text or N/A	Yes	Approved/pending/declined
IT	Text or N/A	Yes	Approved/pending/declined
Estates	Text or N/A	Yes	Approved/pending/declined

Electro-biomedical engineering (EBME)	Text or N/A	Yes	Approved/pending/declined
Medical Devices Management Committee	Text or N/A	Yes	Approved/pending/declined

# Supporting documents, if applicable

(PDF upload)

# Moorfields excellence portfolio

Yes/No

# If yes, provide details

Free text

# **Section 5 - Proposal costs and justification**

# **Related grant applications**

Funding body	Date of submission Outcome/Expected outcome date
Text	12 March 2025 Date

# How do any of your current grants complement and/or overlap?

Provide a description of how any related grants complement or contrast with the funding sought in this application (if applicable). (Free text)

# **Funding requested**

Budget hea	ding	Year 1	Total
Salaries			
Post 1	Cost	£0.00	£0.00
Post 2	Cost	£0.00	£0.00
Salaries Total	Cost	£0.00	£0.00
Consumables			
Item 1	Cost	£0.00	£0.00
Item 2	Cost	£0.00	£0.00
Consumables Total	Cost	£0.00	£0.00
Equipment			

Budget heading		Year 1	Total	
Item 1	Cost	£0.00	£0.00	
Item 2	Cost	£0.00	£0.00	
Equipment Total	Cost	£0.00	£0.00	
Other	Other			
Item 1	Cost	£0.00	£0.00	
Item 2	Cost	£0.00	£0.00	
Other Total	Cost	£0.00	£0.00	
Grand Total	Cost	£0.00	£0.00	

# Justification for requested costs

#### **Salaries**

#### **Salaries**

Justification fo	or requested	d costs	on	
Salaries			0,	
<b>⊙</b> Yes/No				
Salaries		. Q		
Role	Name if known	% time	Salary/grade	Salary cost
Role	Name	time	XXXX	000000

#### **Salaries**

Provide details (300 words max).

#### **Consumables**

Provide details (300 words max).

# **Equipment**

Provide details (300 words max).

### Other

Provide details (300 words max).

# **Section 6 - Principal applicant CV**

# **Current salary source**

Current salary source

#### **Contract type**

Fixed-term/Tenured/Permanent

#### **Contract start date**

Date

#### **Contract end date**

Date

#### Time spent on

# Research (% per week)

%

# Clinical (% per week)

%

#### This project (% per week)

### **Honorary contract**

### **Honorary contract organisation**

# **Career history**

This project (% per w	reek)			14
70				$U_{i,j}$
lonorary contract				
<b>⊙</b> Yes/No			60	
Honorary contract or	ganisation			
If yes, Honorary cont	ract organisatio	n details	10,	
areer history		66		
Date from	!	Date to	Position	Organisation
Date	Date		Position 1	Organisation 1
Date	Date		Position 2	Organisation 2

### **Education and training**

Date awarded	Qualification	Subject	Organisation
Date	Qualification	Subject	Organisation

# Currently held (open and active) grants

Provide details on your currently held (open and active) grants. Please include the funder name, project title, amount of support provided, project dates. (free text)

#### **Previously held grants**

Provide details on previously held grants which you consider most significant or relevant to this application. (free text)

#### Innovation grants experience

Please provide details of how you have led or supported similar innovation or improvement grants and what expertise, and time commitment, you will bring to the current application. (free text)

#### **ORCID ID number**

ORCID ID number

#### **Publications**

Provide details of up to three of your publications, which you consider the most significant or relevant to the application. Please use Harvard referencing (or similar referencing format) and highlight your name within the list of authors by labelling with an asterisk (\*).

#### **Additional publications**

Provide up to ten additional publications you want to highlight. Please use Harvard referencing (or similar referencing format)

#### **Career breaks**

Have you taken any career breaks which you wish to be taken into consideration? This can include periods of parental or long-term sick leave, caring responsibilities, secondments, time spent in clinical training or periods where you were unable to work because of the COVID-19 pandemic. Please note answers will be viewed by panel members and peer reviewers, so please do not name third-party individuals or include anything which might identify the third party. (free text).

# Section 8 - Human participants, biological material / data

#### Human participants, biological material/data

• Only human participants / Only human biological material or identifiable or potentially identifiable data / Involves both human participants and human biological material or identifiable data / None.

#### Will this proposal use human embryonic stem cells?

Yes/No

#### Has an organisation(s) agreed to act as the formal sponsor(s) for your project?

Yes/No

# If yes, give details

Details

#### **Ethics review**

Who has, or will, review the ethics of the project and when? Detail any other regulatory approvals you have, or will try to get. (free text)

#### Consent to use any potentially commercially exploitable results

Confirm you have, or you will try to get, appropriate informed consent to use any potentially commercially exploitable results from tissues or samples derived from human participants. Where data has the potential to be

used beyond its initial purpose or beyond the end of the study, include details for how the consent will be managed. (free text)

#### **NHS Facilities**

Yes/No

#### **NHS** permission

Yes/No

#### Have you completed a Schedule of Events Cost Attribution Tool (SoECAT)?

Yes / No/ Not required

#### Will this project be adopted onto a NIHR portfolio?

Yes /No/ Not applicable

#### If yes, provide number

Number

# Section 9 - Data and outputs management

#### Data, software and materials outputs

Provide details on the type of data, software or materials which will be generated by this project. Describe the management and sharing plan with reference to FAIR principles (free text).

### Approach used to maximise impact of outputs

• Outputs available for access and re-use

# Section 10 - Intellectual property, commercialisation

Does this application involve the development of pre-existing intellectual property (background IP) whether belonging to the PI, co-applicant(s), collaborators, or through any contract or agreement by other individuals, public or commercial organisation?

Yes / No

#### If yes, give details

Details (free text).

#### Do you have the full rights to access and use the background IP?

Yes / No

# **Provide details**

Details (free text)

#### Are there any expected funded outputs of this project?

Yes / No

#### Please provide further detail.

Details (free text)
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### IP protection, commercialisation contact

Provide details for the contact person in your organisation for IP protection, commercialisation (e.g. TTO officer).

# **Section 11 - Peer reviewer suggestions**

### Suggested external peer reviewers

Reviewer name	Reviewer organisation	Reviewer email address
Name	Organisation	email address

#### **Peer reviewer restrictions**

If you do not wish MEC to approach certain people or institutions, please provide the name/details below.

# Section 12 - Additional information and declaration

# **Consultancies, equities and directorships**

Yes / No

### If yes, give details

Details (100 words max).

#### **Declaration**

Tick box