

# SBRI Healthcare

**Competition 27:** Work-related digital innovations for individuals with poor mental health

**Getting Ready to Apply**

Chaired by:  
Michelle Edye



Time	Item	Presenter
5 min	Welcome and introductions	Michelle Edge, SBRIH PMO
25 min	Application tips	Danilo Villanueva Navarrete, SBRIH PMO
60 min	Q&A session	Rebecca Stevens, SBRIH PMO James Woollard, NHSE and Consultant Psychiatrist Katharine North, Emma Hughes, Anne Oyewole, NHSE Digital Innovation Team

# Housekeeping

- Please set your name to ‘Your First Name - Organisation Name’
- Ask questions in the Q&A box as we go along, and we will aim to answer them during the Q&A session
- Please keep your microphone muted if not speaking
- During the Q&A session, we will aim to answer as many questions as possible. If you do not want to share certain information with the meeting, you may contact us via email (below)
- The **slides will be added to the website** after the event
- Please flag any technical issues in the chat box
- For further enquiries: [sbri@lgcgroup.com](mailto:sbri@lgcgroup.com)

# Key dates



# Key dates

Competition open	9 <sup>th</sup> October – 1pm 13 <sup>th</sup> November 2024
Assessment	November - December
Contracts awarded	January 2025

## What this is for:

### Innovation type -

Digital innovations  
(work-related; for individuals with poor mental health)

### Entry point -

The competition is open to innovations at any stage of development.

### Scope -

Activities from testing the technical and commercial feasibility to generating evidence in real-world settings.

## What this is not for:



**Innovation type -** Non-digital solutions, physical health innovations, innovations targeting comorbidities, wellness or wellbeing applications, symptom monitoring, technology for under 16 years of age.



### Entry point -

N/A



### Scope -

Proposals that do not address the specific competition brief

# Competition 27 example exit points

From testing the technical and commercial feasibility to generating evidence in real-world settings:

- Demonstrated technical feasibility and minimum viable product developed
- Evidence gathered towards regulatory documentation
- Demonstrated impact that the proposed technology / solution or project would have on the care pathway it is intending to operate in
- Implementation plans and model for potential regional and national scale up
- Clear identification of barriers and enablers to implementation and scaling up
- Market validation on proposed users and strategy for commercial viability and scalability
- Engagement with relevant partners and key stakeholders (including PPIE) to achieve a sustainable spread of the proposed innovation
- Business plan developed
- Health inequalities impact assessment and steps towards equality, diversity and inclusion, and commitment to reduce inequalities
- Steps towards the carbon neutral strategy and objectives for the NHS

# Tips for written application & 3 min video

Danilo Villanueva Navarrete  
SBRI Healthcare PMO

# The application form sections



- Application Summary
- Host Organisation Details
- Plain English Summary
- Project Plan
- Team
- Budget
- Supporting Information (including 3-minute video)
- Administrative Contact Details



Please consult [Competition 27 Applicant Guidance](#) and further information on the [website](#) including [briefing webinar](#)



# The plain English summary



A plain English summary is a clear explanation of your project. The plain English summary may be used to inform reviewers, including experts who might not have specialist knowledge of your field as well as public members/patients who might review your funding application.

- We could use it to disseminate your project
- Legible to anybody
- No jargon
- Spell out your acronyms
- If technical language is necessary, explain in lay words
- Ask a public member you have interacted with to review the summary

# The assessment criteria

1. How well does the application address the challenge brief and does the proposed solution benefit patients, the NHS and/or Social Care Sector and the wider market? 20%
2. Are the project plan, deliverables and risk mitigation strategy appropriate? 15%
3. Is the product innovative, will it have a competitive advantage over existing and alternative solutions and are the arrangements surrounding the use and development of Intellectual Property appropriate? 15%
4. Does the proposed project have appropriate commercialisation and implementation plans? 15%
5. Does the proposed innovation have potential to enhance equity of access and does the project include consideration towards patient and public involvement? 10%
6. Does the proposed technology have potential to contribute to net-zero emission? 5%
7. Do the host organisation and project team appear to have the right skills and experience to deliver the project? 15%
8. Are the costs justified and appropriate? 5%

# How well does the application address the challenge brief and does the proposed solution benefit patients, the NHS and/or Social Care Sector and the wider market? 20%



- Describe your technology and its stage of development
- What is the problem the technology aims to address
- How does it meet the challenge brief
- What are the expected outcomes
- What are the benefits to patient/NHS/wider market
- What is the stage of development



Please read the [challenge brief](#)

# Are the project plan, deliverables and risk mitigation strategy appropriate? 15%



- Detail your work packages (including PPIE and net zero) and for each one include measurable deliverables, who will lead on it, and timelines
- Ambition is great but timelines must be realistic
- Do not shy away from articulating key project risks (technical, clinical, commercial, trial recruitment rate, governance, etc). SBRI is a risk-oriented programme but mitigation strategies must be articulated
- Milestones should help de-risking the project, what success criteria you would like to achieve that are key to progress your project?

# Is the product innovative, will it have a competitive advantage over existing and alternative solutions and are the arrangements surrounding the use and development of Intellectual Property appropriate? 15%

## Who are your competitors and how does your innovation differ?



- Include the maturity of your competitors (e.g., early development, clinical validation, market ready).
- What sets your innovation apart from the competitors?
- How does your solution compare against the competitors and/or standard of care? Be explicit if you have the evidence to support your claim.
- It is very unlikely you do not have competitors!



## What is your IP position?

- More than just patents (e.g., trademark, copyright, know-how, etc).
- Be explicit on who owns the background IP and if you have the rights to use it!
- Have you done a freedom to operate (FTO) search, and what does it tell you?
- How will you protect and exploit the new IP generated in this project?

# Does the proposed project have appropriate commercialisation and implementation plans? 15%

## Market size and potential growth



- Which markets are being explored and how (UK, EU, and beyond)?
- Who are the target users and potential barriers to market entry?
- Pricing and margins anticipated for your product
- Do you know the cost of your innovation, and the realistic health and cost benefits to buyers? Is it affordable?

## Business model for sales and adoption



- Provide your business model for adoption and spread (within the NHS or beyond) – consider cost of implementation/sales, resources required and barriers
- Who are the buyers?
- What is your engagement strategy with the buyers.
- Are there relevant procurement frameworks?
- How will you ensure the continued use of the innovation following project completion?

# Does the proposed innovation have potential to enhance equity of access and does the project include consideration towards patient and public involvement? 10%



How will PPIE members feed into the product development and project as a whole?

- Co-design is key
- What PPIE had been performed to date?
- Which groups (region, representation) and numbers of patients will be consulted? Consider appropriate ways to engage users (e.g., patients, carers, clinicians)
- What are the planned activities and are they inclusive?
- How will the PPIE members be reimbursed? Make sure this is properly resourced.
- Be mindful of the distinction between involvement and engagement



# Health inequalities and equity of access



## Underserved communities

- Which groups/population are likely to be most affected by the clinical problem?
- Recognise the barriers and impact to access and/or adoption. Who might miss out from the proposed solution and why?



## Affordability

- Cost of innovation
- Work patterns
- Housing



## Addressing the problem

- How to best mitigate exclusion (e.g., digital, translators, community reach, alternatives to digital access)
- What additional resources are needed to address the problem
- Solutions during the project and beyond



## Language and culture

- Language barriers
- Cultural perception
- Stigmatisation
- Geography



## Digital exclusion

- Wi-Fi and data
- Digital literacy
- Device accessibility



# Health inequalities and equity of access



- What evidence of inequity exists? Are there provisions for ongoing data collection?
- Does the solution address root causes of inequity? If not, how could it?
- How will impact be documented and evaluated?
- How will adverse financial impacts be prevented to increase access?
- Has there been an assessment of the suitability of the service delivery environment?
- Is the innovation team diverse and inclusive?



- Have appropriate stakeholders been involved in co-design? Who can support you in engaging with diverse populations?
- How will this innovation reduce disparities of discrimination in clinical practice? Staff training?
- Solutions during the project and beyond

# Applying a Health Equity Framework

PEOPLE – UNDERSERVED  
POPULATIONS

DATA – MEASURING AND  
DEFINING GAPS

CARE – CODESIGN SOLUTIONS

CLINICAL – ENGAGING THE  
WORKFORCE IN EDI

DIGITAL – ENABLING DIGITAL  
INCLUSION

FINANCE – REDUCING FINANCIAL  
BARRIERS

PLACE – INCLUSIVE ACCESS

CLIMATE – IMPACT ON HEALTH

POLICY – EQUITY IN DECISION  
MAKING

COMMS - INCLUSIVE MESSAGING



The Health Innovation Kent Surrey Sussex (KSS) have developed a [Health Equity Toolkit for Innovators](#) – based on 10 core principles to consider when designing or implementing an innovation.

# Have the applicants considered the carbon footprint associated with the proposed innovation and does it support the NHS' net zero ambition? 5%

## Demonstrating carbon impact is more than assumed savings!

- Ensure your proposed technology/solution is considering steps towards the carbon neutral strategy and objectives for the NHS – this may include a dedicated work package and ensure you have appropriate expertise on board.
- Describe the environmental impact that your innovation may have in the care pathway / care setting it is intending to operate in, including how it may contribute in reducing the NHS carbon emissions (as explained in the [Delivering a net zero NHS](#) report, pages 11 and 12).
- Digital products can have a carbon impact – consider energy efficiency of digital equipment and how it compares against alternatives
- Consider the impact of different materials, manufacturing and production processes, and if there are more carbon neutral alternatives.
- Determine the supply chain.
- Consider whether it can lead to travel savings.



Please consult [STEPS to Low Carbon Care Delivery Guidance](#)



# Do the host organisation and project team appear to have the right skills and experience to deliver the project? 15%

**Ensure all relevant expertise needed to deliver project activities are included and clearly described!**



Consider the appropriateness of the team commitment (FTE's) and "subcontractors" assigned to work packages

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Low FTEs should be ok for an advisor but unlikely so for a team member heavily involved in the project delivery

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Unlikely that a single organisation has all expertise in house. Select your partners and engage as soon as possible

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Team members: those involved in the delivery of the project who belong to the host organisation

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Subcontractors and advisors: collaborators to which you will outsource services and/or key experts who will provide advice

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Clinical partners: NHS Trusts, GPs, Pharmacies, etc. Please note that it is mandatory for late-stage implementation projects to have at least one clinical partner

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# Are the costs justified and appropriate? 5%

**All costs should be necessary for the project and fully justified!**



Is the project cost proportionate to the proposed activities and perceived benefits?

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Keep in mind that SBRI is an INVITATION TO TENDER: Costs, including salaries, must reflect actual cost at a “fair market value”.

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A clear breakdown of costs and justification should be provided.

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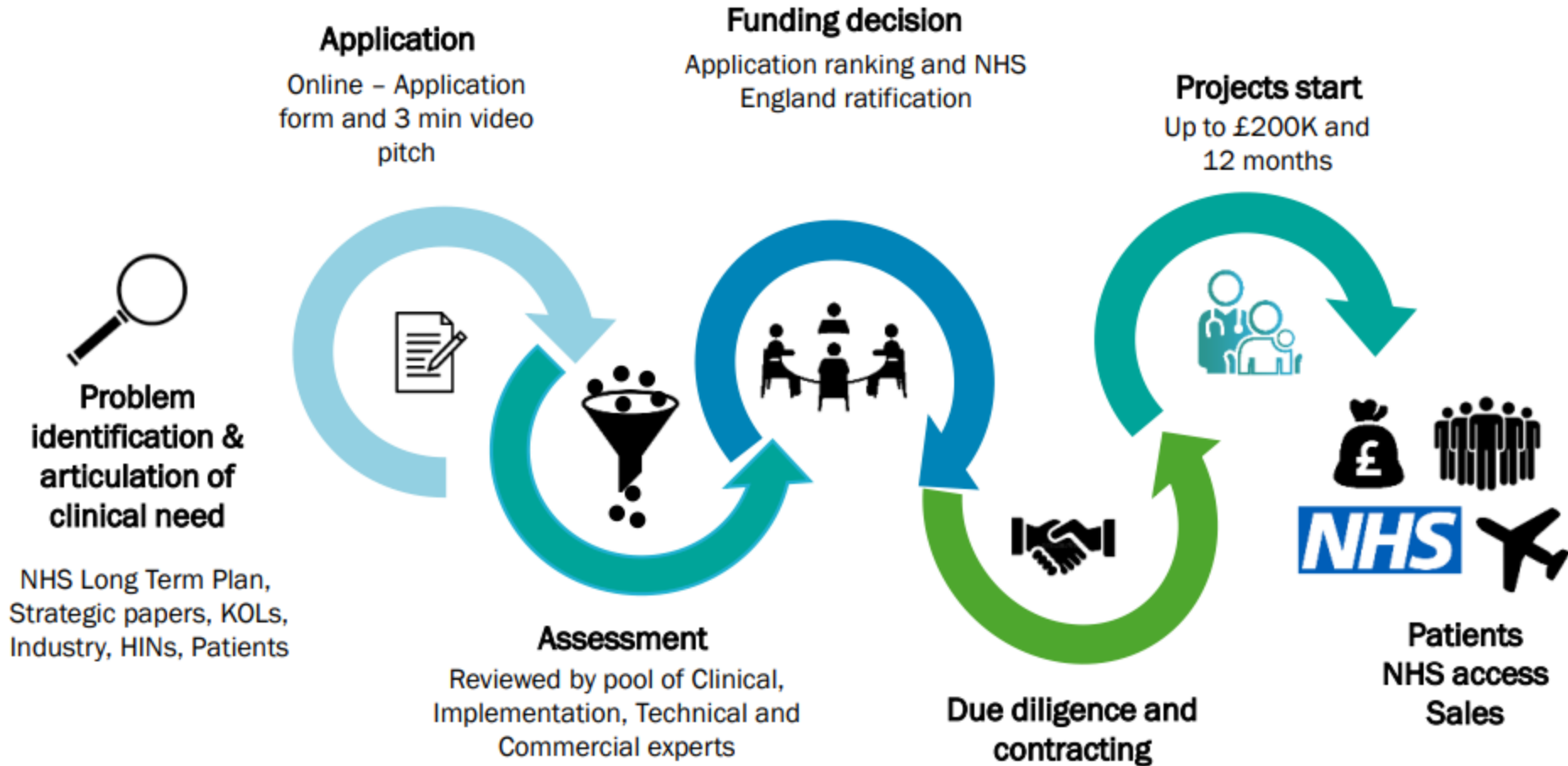
Be mindful staff commitment is not too much or too little, it should be proportionate to the size of the project.

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# 3 min video pitch

- in MP4 format
- Maximum file size of 40MB
- Please upload the video to the Dropbox folder provided in the application form, ensuring the lead applicant and host organisation name is in the file name.
- We do not expect professionally produced videos (you can use your smartphone), however, please ensure the visual and audio are of good quality. Our website contains advice on [how to create an accessible video](#).
- Please ensure that your video submission is not longer than 3 minutes as it will be truncated at exactly 3 minutes and only the first 3 minutes will be available to reviewers.
- Be to the point:
  - What is the problem
  - What is the solution
  - Why your solution and what is the impact that it could generate

# Assessment process



# Assessment process

- Applications will be reviewed against the assessment criteria by a selected pool of experts (technical, commercial, clinical, implementation)
- Scores will be averaged and applications ranked
- Applications will be recommended for funding based on quality
- In case of equal score, proposals will be further assessed by the Digital Innovation Board which will recommend those that best align with NHS England priorities
- Funding recommendations are submitted to NHS England for ratification
- Feedback will be provided, including from patient and public reviewers for recommended applications
- There is no appeal process



Consult the [Invitation to Tender](#)



# Final tips and reminders



Consult the Challenge Brief, Guidance for Applicants, ITT and launch event video



Provide a detailed Project Plan (including PPIE and net zero) & risk mitigation strategy



If your innovation is late-stage, provide robust evidence of feasibility and efficiencies and include an independent evaluation plan



Engage with your partners as early as possible and get them registered on RMS



Define your USPs, think about IP strategy and outline your plan for NHS adoption and wider commercialisation



Submit on time

# Q&A

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## SBRI Healthcare

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