



NHS Innovation Accelerator 2026 Intake Recruitment Call

FOR INFO: These will all appear as separate sections in the "main apply" area on SMA, so applicants need to complete each section. This is an offline version of the application form. You MUST complete the online application form as stated on our website.

If you have any queries, please contact the NHS Innovation Accelerator Team at nia@uclpartners.com, quoting the name the account was registered with (found on the top right of the screen).

Introduction

It is strongly advised that you read the documents within the <u>Resource Library</u> on the NIA website, particularly the <u>Guide for Applicants</u>, before completing your application.

Please keep the use of acronyms to a minimum. Only use acronyms where a term is used frequently throughout the application. If you do choose to use an acronym, do not assume that the reader knows what it means, and be sure to define it when first used.

You are strongly advised to structure the longer sections of the application form in such a way that they can be read easily by reviewers. **The use of long passages of dense, unstructured text should be avoided.**

ELIGIBILITY (Screening Questions)

- 1. Is there a single named Applicant?
- 2. Whilst the 2026 Intake call does not cover a specific theme, stakeholders have highlighted the below challenges as being particularly pressing. Which of the below, if any, does your innovation address:
 - Improve training, and delivery of education to a more diverse group of people,
 - Help in the gender dysphoria space
 - Help in critically analysing and searching for up to date, accurate and trustworthy health information
 - Help patients in patient centred decision making, modelling risks themselves
 - Improve vaccine uptake in children and cancer screening in adults
 - Information governance workforce training and education in relation to personal data



- Making skill competencies digital and having ability to have multiple signatures and tick boxes.
- Digital preceptorship
- Digitalised and remotely accessible mandatory trainings
- Remote clinical systems
- Self-management digital therapeutics for adults with common mental health problems that can be accessed by self-referral or following clinician referral
- Digital support for children and young people with eating disorders
- Platforms for the digital self-management of asthma
- Al and novel technologies in lung function measurement
- DHTs to support the wider access to diabetes digital information, self management and structured education services
- Wider access to digital technologies that support weight management with evidence of impact and effectiveness
- DHT's to help support manage the menopause
- CYP Digital tools to support diagnosis of ASD and ADHD
- Digital tools to provide psychological therapies for people with Serious Mental Illness as part of Community Mental Health services, including bipolar disorder and schizophrenia.
- DHTS for patients in the community with heart failure, high blood pressure, cardiac arrhythmia or awaiting definitive cardiac interventions to guide treatment and signal any early signs of clinical deterioration.
- Digital personalised exercise and outcome platforms for people living with Axial Spondyloarthritis and their physiotherapists to work together to monitor care
- Pre/post-op rehab for patients undergoing hip or knee surgery
- Tests and platforms to support the diagnosis and management of sleep problems
- Priorities from the NHS Ten Year Health Plan, such as:
 - Analogue to digital innovations
 - Hospital to community
 - o Sickness to prevention
- Digital health technologies to support people living with kidney disease
- Priorities from the Life Sciences Healthcare Goals, such as:
 - o Dementia
 - o Cancer
 - Obesity
 - Addiction
 - mental health
- Al that can be applied to imaging to identify films/scans etc that are very likely normal. Potential benefits of this:
- Faster issuing of 'likely normal' reports giving people their result more quickly
- Freeing up human time to focus on potentially abnormal films where they add most value



- Removing repetitive work from humans looking at low risk films which should improve job satisfaction, retention etc
- Platforms for the digital self-management of asthma
- Innovations that integrate AI and novel technologies in lung function measurement
- Asthma + Lung UK has identified where we could see drastic progress in respiratory disease diagnosis:
 - Development of a lung health indicator for early risk detection enabling people to understand their lung health and monitor and measure changes to predict their risk of developing a respiratory illness.
 - A simple, accurate, low-cost diagnostic tool a test that can be adopted at scale in primary care or other community settings to identify patients who require referral to appropriate clinical pathways.
 - Patient stratification tools tools that can distinguish between different endotypes within a lung condition and be used to guide treatment decisions.
 - Disease monitoring tools patient–centric and user–friendly tools for monitoring disease progression and predicting exacerbations or deteriorating symptoms.
- 3. Does your innovation impact a particular disease or condition?
 - Yes (please specify)
 - No
- 4. Select all the categories that can be used to describe your innovation:
 - Medical device
 - In vitro diagnostic
 - Digital (including apps, platforms, software)
 - Artificial intelligence (AI)
 - Education or training of workforce
 - Personal protective equipment (PPE)
 - Models of care and clinical pathways
 - Estates and facilities
 - Data and monitoring
 - Reduces carbon emissions and supports the NHS to achieve net zero.
 - Healthcare inequalities improvement
 - Other: [free text input]
- 5. Select a primary category to describe your innovation:
 - Medical device
 - In vitro diagnostic



- Digital (including apps, platforms, software)
- Artificial intelligence (AI)
- Education or training of workforce
- Personal protective equipment (PPE)
- Models of care and clinical pathways
- Estates and facilities
- Data and monitoring
- Reduces carbon emissions and supports the NHS to achieve net zero.
- Healthcare inequalities improvement
- Other: [free text input]
- 6.Do you have any evidence to show the impact or benefits of your innovation?
 - Yes
 - Not yet
- 7. Is your innovation ready for wider adoption across the health and care system?
 - Yes
 - No
- 8. Has your innovation been deployed in an NHS or care setting in the UK or internationally?
 - Yes
 - No
- 9. Has your innovation met the regulatory requirements for its expected use in the NHS?
- 10. Are you able to commit at least two days per week during the initial 12 months of the NIA to scale your innovation in the NHS in England?





A. Equal Opportunities Monitoring Form

This form is compulsory, but applicants can indicate at the start of the form if they do not wish to complete it.

B. GDPR

Applicants must confirm they accept the use of their data as stated in the GDPR form prior to entering the full application.

C. Due Diligence

Please be aware that the NIA will:

- Carry out checks on social media and other searches to identify negative feedback related to the reputation/public perception of a Fellow and/or organisation being supported by the NIA.
- Complete a basic review of your innovation's competitors in the market.
- Consider your application in light of these findings.

If successful, SMEs will also be required to provide the following (NHS organisations/public sector organisations do not need to provide this):

- 3 years of annual accounts.
- · List of directors/advisors.
- Annual report.
- 1. Do you have any unspent criminal convictions?
- 2. Is your organisation an NHS or a public sector organisation?
- 3. Do any of the following apply to your organisation (If yes, please provide details and outcomes):
 - Bankruptcy, insolvency, compulsory winding up, receivership, an arrangement with or for the benefit of creditors, a county court administration order made under the County Court Act 1984 or subject to relevant proceedings;
 - Legal or administrative finding of commission of an act of grave misconduct in the course of business;
 - Failure to obtain and maintain relevant licenses or membership of an appropriate trading or professional organisation where required by law;
 - Current, pending or threatened lawsuits and/ or litigation and/ or regulatory actions against the organisation?
- 4. The following questions apply to the last three years.



- Has any finding of unlawful discrimination been made against your organisation by any court or industrial or employment tribunal or equivalent body?
- Has your organisation been the subject of a formal investigation by the Equality and Human Rights Commission or an equivalent body on grounds of alleged unlawful discrimination?

D. Applicant Information

- 1. Applicant's first name
- 2. Applicant's surname
- 3. Job title of applicant
- 4. Employing organisation/other
- 5. Applicant postal address
- 6. Applicant town/City
- 7. Applicant postcode/Zip Code
- 8. Applicant Country
- 9. Applicant contact email
- 10. Applicant contact telephone number
- 11. Alternative contact name (Must be someone who also works for the innovation)
- 12. Alternative contact email address
- 13. Alternative contact telephone number
- 14. Where did you hear about the NIA 2026 Intake call? Please note, your response is for NIA information purposes only and will not have an impact on your application assessment.





- Through a Health Innovation Network (HIN)
- The NIA website
- The NIA X (formerly Twitter) feed or INSIGHTS e-newsletter
- Word of mouth from an NIA Fellow, Mentor, or member of the NIA team
- At a conference where the NIA was present (e.g. NHS ConfedExpo or HETT)
- From another accelerator programme or organisation
- Other
- Prefer not to say
- 15. Reasonable adjustments: Please state any reasonable adjustments based on a disability or long-term health need that you might require during the recruitment process or if you are successful in gaining a Fellowship place (no word count).

E. Company / Employing Organisation information

- All that can be applied to imaging to identify films/scans etc that are very likely normal. Potential benefits of this:
- o Faster issuing of 'likely normal' reports giving people their result more quickly
- Freeing up human time to focus on potentially abnormal films where they add most value
- Removing repetitive work from humans looking at low risk films which should improve job satisfaction, retention etc
- 1. Company / Employing organisation/ other.
- 2. About your Company / employing organisation Is your organisation NHS or a public sector organisation?

Yes/No

The following questions (3 - 14) are relevant to those applicants that represent a registered company whether for profit or not for profit. This does not need to be completed for NHS or public sector organisations.

3. Company / Employing Organisation Postal address.



- 4. Company / Employing Organisation Town/ City.
- 5. Company / Employing Organisation Postcode / Zip Code.
- 6. Company / Employing Organisation Country.
- 7. Company / Employing Organisation Website Address.
- 8. Please provide a summary of your Company / Employing Organisation (max 100 words).
- 9. Company/ charity registration number.
- 10. Date incorporated.
- 11. Company type (tick box from following options):
 - Private Limited by Shares
 - Private Limited by Guarantee
 - Limited Liability Partnership
 - Community Interest Company
 - Charity
 - Other (please specify)
- 12. How many employees does your Company / Employing Organisation have?
- 13. Please provide details of the following for your Company / Employing Organisation for the current financial year:
 - projected revenue
 - projected costs
 - projected profit/loss after Tax
 - net assets/liabilities
- 14. What is your Company / Employing Organisation's funding/ownership structure? (max 100 words)

F. Main application

Please complete all questions on the application form online at nia.smapply.org. The application form is divided into 2 sections to capture information about:



Applicant

- Pitch
- Experience and Expertise
- Support needs
- Commitment
- Support to Date

Innovation

- Basic information
- Market research
- Current care pathway
- Testing with stakeholders
- Regulations, standards and certifications
- Intellectual property
- Revenue model
- Cost and savings
- Deployment
- Evidence

Each question has a maximum word limit that you will not be able to exceed when entering your response into the system. Your application should demonstrate criteria in all sections of the application.

APPLICANT

1. Applicant's Pitch

As this is a Fellowship, please explain why you are applying to the NIA and why you should be selected as an NIA Fellow? (max 200 words)

2. Experience and expertise

Please describe with examples/evidence how you meet the characteristics, skills and competencies as detailed in the Call for Applications document in our Resource Library. (max 300 words)

3. Applicant support needs

Please summarise the support you hope to receive from the NIA to enable you to spread your innovation. (max 200 words)



4. Commitment

Please detail exactly how much time you will have to participate in the programme (see requirements within the Call for Applications document in our Resource Library) and how you will manage your existing commitments to enable this. (max 200 words)

- 5. Support to date
 - 5.1 Are you currently receiving any support for your innovation?
 - Yes
 - No
 - 5.1a Please specify the support you are receiving (150 word limit)
 - 5.2 Have you received support from any of the Health Innovation Networks (HINs) below?

Please select all that apply

- No.
- Health Innovation East
- Health Innovation East Midlands
- Health Innovation Kent Surrey Sussex
- Health Innovation North East and North Cumbria
- Health Innovation Manchester
- Health Innovation Network (South London)
- Health Innovation North West Coast
- Health Innovation Oxford and Thames Valley
- Health Innovation South West
- Health Innovation Wessex
- Health Innovation West Midlands
- Health Innovation West of England
- Health Innovation Yorkshire & Humber
- Imperial College Health Partners (North West London)
- UCL Partners (North London to Essex coast)
- 5.3 Are you currently involved with any other support programmes? Select all that apply.
 - No
 - Health Innovation Network
 - Artificial Intelligence in Health and Care Award
 - Clinical Entrepreneur Programme
 - Early Access to Medicines Scheme



- Innovation for Healthcare Inequalities Programme
- Innovation and Technology Payment Programme
- NHS Innovation Accelerator
- NHS Insights Prioritisation Programme
- Pathway Transformation Fund
- Rapid Uptake Products Programme
- Small Business Research Initiative for Healthcare
- Test beds
- DigitalHealth.London
- Other (please specify)

INNOVATION

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6. Healthcare issues addressed

This field is pre-populated by the answer supplied in the Eligibility task.

7. Type of Innovation

This field is pre-populated by the answer you supplied in the Eligibility task.

- 8. What problem is your innovation trying to solve? (max 500 words)
- 9. Give an overview of how your innovation works. (max 300 words)

If this is or might be a medical device, include the intended purpose statement (opens in new window).

For example, GPs will identify patients with suspected atrial fibrillation from their history and reported symptoms. This innovation is a portable device that patients wear over a 7-day period. The device will monitor the patient's heart rate continuously whilst they are wearing it. GPs will need to be trained in using the device and interpreting the results. GP practices will need to store the device and consumables.





- 10. What are the benefits or impact of your innovation for patients and people? Select all that apply.
 - Reduces mortality
 - Reduces need for further treatment
 - Reduces adverse events
 - Enables earlier or more accurate diagnosis
 - Reduces risks, side effects or complications
 - Prevents a condition occurring or exacerbating
 - Avoids a test, procedure or unnecessary treatment
 - Enables a test, procedure or treatment to be done non-invasively
 - Increases self-management
 - Increases quality of life
 - Enables shared care
 - Alleviates pain
 - Reduces inequalities
 - Other benefits for patients and people
 - Not applicable
- 11. What are the benefits or impact of your innovation for NHS and social care? Select all that apply.
 - Reduces the length of stay or enables earlier discharge
 - Reduces need for adult or paediatric critical care
 - Reduces emergency admissions
 - Changes delivery of care from secondary care (for example hospitals) to primary care (for example GP or community services)
 - Change in delivery of care from inpatient to day case
 - Increases compliance
 - Improves patient management or coordination of care or services
 - Reduces referrals
 - Takes less time
 - · Uses no staff or a lower grade of staff
 - Leads to fewer appointments
 - Is cost saving
 - Increases efficiency
 - Improves performance
 - Reduces carbon emissions and supports the NHS to achieve net zero
 - Other environmental benefits (please specify)
 - Other benefits for the NHS and social care (please specify)





12. Is your innovation relevant to any of the following areas? (select all that apply)

- COVID-19
- Data, analytics and research
- Digitalising the system
- Improving system flow
- Independence and prevention
- Operational excellence
- Patient activation and self-care
- Patient safety and quality improvement
- Workforce resource optimisation
- Net zero NHS or greener innovation

13. In which care settings is your innovation relevant? (select all that apply)

- Academia
- Acute trust inpatient
- Acute trust outpatient
- Ambulance
- · Care homes or care setting
- End of life care (EOLC)
- ICS
- Industry
- Local authority education
- Mental health
- Pharmacies
- Primary care
- Social care
- Third sector organisations
- Urgent and emergency
- Other

14. What is the main purpose of your innovation? (select all that apply)

- Preventing a condition or symptom from happening or worsening
- Predicting the occurrence of a condition or symptom
- Diagnosing a condition
- Monitoring a condition, treatment or therapy
- Providing treatment or therapy
- Managing a condition



- Enabling care, services or communication
- Supporting the NHS to mitigate the risks or effects of climate change and severe weather conditions
- Reducing bias in healthcare processes
- 15. Please provide, in simple terms, 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 <u>Delivering a net zero NHS report</u>, pages 11 and 12). Please use the SBRI's <u>low carbon care STEPS guidance</u> to help with your assessment of the impact of the innovation on the care pathway. (max 200 words)
- 16. The NHS has committed to <u>becoming net zero by 2045</u>. Have you considered the carbon emissions associated with your organisations and steps to reduce them?
 - Yes
 - Not yet, but I have an idea

16.1. Please provide further details about your carbon emissions and plans to manage them (max 150 words)

- 17. Have you estimated the carbon reduction or savings that your innovation will bring?
 - Yes
 - Not yet, but I have an idea

17.1 (If yes) Provide the estimates and how this was calculated (max 75 words)

17.2 (If no) Explain how you plan to calculate this (max 75 words)

- 18. Do you have or are you working on a carbon reduction plan (CRP)?
 - Yes, I have one
 - I am working on one
 - No, I do not have one
 - 18.1. Please provide further details about your Carbon reduction plan. (max 150 words)



- 19. Have you completed a health inequalities impact assessment?
 - Yes
 - No

19.1 (If yes) Upload the health inequalities impact assessment, or any relevant documents

- 20. Please explain how you have considered the accessibility and impact of your innovation on health inequalities and describe the activities you are currently carrying out to address these. (max 300 words)
- 21. Please provide the names of all individuals and organisations jointly supporting this application and their specific roles. (max 150 words)
- 22. Subcontractors: If you subcontract any of your work to other providers, what mechanisms do you have in place to assure the quality of these suppliers and their ability to meet your demands during the delivery of your scaling ambitions (as detailed in E14)? (max 150 words)

MARKET RESEARCH

- 23. Have you conducted market research to determine the demand and need for your innovation in the UK?
 - Yes
 - I am currently doing market research
 - Not yet

23.1 Describe the market research you have done, or are doing, within the UK market. (max 200 words)

- 24. Which option best describes your innovation?
 - A one-off innovation, or the first of its kind
 - A better alternative to those that already exist





- An equivalent alternative to those that already exist
- A more cost-effect alternative to those that already exist
- I am not sure
- 25. What competitors or alternatives exist, or how is the problem addressed in current practice? (max 250 words)

CURRENT CARE PATHWAY

- 26. Does your innovation relate to a current NHS care pathway?
 - There is a pathway, and my innovation changes it
 - There is a pathway, and my innovation fits in to it
 - There is no current care pathway
 - I do not know
 - Does not form part of a care pathway
- 27. Describe the potential care pathway with your innovation in use. (max 200 words)

ENGAGEMENT WITH STAKEHOLDERS

- 28. Who are the intended users of your innovation?
 - Clinical or social care professionals working in the UK health and social care system
 - Clinical or social care professionals working outside the UK
 - Non-clinical healthcare staff
 - Patients
 - Service users
 - Carers
 - Other: [please specify free text entry]
- 29. Have you involved stakeholders in the design process?
 - Yes
 - I am in the process of involving users in the design
 - Not yet



- 30. Have you tested your innovation with its intended users in a pilot / clinical trial / real life setting?
 - Yes
 - I am in the process of testing with users
 - Not yet
- 31. Which groups of intended users have you engaged with?
 - Clinical or social care professionals working in the UK health and social care system
 - Clinical or social care professionals working outside the UK
 - Non-clinical healthcare staff
 - Patients
 - Service users
 - Carers
 - Other: [free text entry]
- 32. Please describe the kind of testing and/or engagement undertaken through the life of your product with the following stakeholders:
 - healthcare professionals [free text entry; max 200 words]
 - patients, service users and carers [free text entry; max 200 words]
- 33. Upload any documents that showcase your user testing

REGULATIONS, STANDARDS, CERTIFICATIONS

- 34. Do you know which regulations, standards and certifications apply to your innovation?
 - Yes, I know all of them
 - Yes, I know some of them
 - No
 - Not relevant
- 35. Which regulations, standards and certifications apply to your innovation?
 - UKCA / CE Non-medical device
 - UKCA / CE Class I medical device
 - UKCA / CE Class IIa medical device





- UKCA / CE Class IIb medical device
- UKCA / CE Class III medical device
- In-vitro diagnostics IVD general
- In-vitro diagnostics IVD self-test
- In-vitro diagnostics IVD Annex II List A
- In-vitro diagnostics IVD Annex II List B
- Marketing authorisation for medicines
- Care Quality Commission (CQC) registration, as I am providing a regulated activity
- Digital Technology Assessment Criteria (DTAC)
- Other: [free text input]

35.1 Do you have a certification for UKCA / CE or In–vitro diagnostics?

- Yes
- I am actively working towards it
- Not yet

35.2 Upload all certification documents

INTELLECTUAL PROPERTY

36. Do you have any patents for your innovation?

- I have one or more patents
- I have applied for one or more patents
- I do not have any patents, but believe I have freedom to operate

36.1 Please supply patent number(s)

37. Do you have any other intellectual property for your innovation?

- Yes:
- No

37.1 (If yes) please specify, max 50 words

REVENUE MODEL

38. What is the revenue model for your innovation?

- Advertising
- Direct product sales
- Fee for service





- Lease
- Sales of consumables or accessories
- Subscription
- I do not know
- Other: [free text input]
- 39. Which NHS or social care organisation and department do you think would **pay for** the innovation? (max 100 words)
- 40. Which NHS or social care organisation and department would **benefit from** the innovation? (max 100 words).
- 41. Have you secured funding for the next stage of development?
 - Yes (go to question 41.1)
 - No
 - Not relevant (go to question 41.2)

41.1 If yes, describe the funding you have secured for the next stage of development.

For example, venture capital, angel investor, seed funding, grant funding, government funding or similar. (max 100 words)

41.2 Please explain why you do not need to secure funding (max 100 words)

COST AND SAVINGS

- 42. Do you know the cost of your innovation?
 - Yes, I have a detailed estimate
 - Yes, I have a rough idea
 - No
- 43. What is the cost of your innovation? (max 100 words)



- 44. Roughly how many patients would be eligible for your innovation in the UK?
 - Up to 10,000 per year
 - 10,000 to half a million per year
 - More than half a million per year
 - Not relevant to my innovation
- 45. What is the eligibility criteria for your innovation? (max 200 words)
- 46. How many units of your innovation would you expect to sell in the UK per year? (max 50 words)
- 47. Approximately how long do you expect each unit of your innovation to be in use? (max 100 words)
- 48. What are the costs associated with the use of your innovation, compared to current practice in the UK?
 - My innovation is cheaper to purchase
 - My innovation costs more to purchase, but has greater benefits that will lead to overall cost savings
 - My innovation costs more to purchase and has greater benefits, but will lead to higher costs overall
 - I am not sure

DEPLOYMENT

- 49. Where have you deployed your innovation? Please specify the name(s) of the organisation(s) in full (max 150 words)
- 50. What was the commercial basis for deployment? (max 400 words)
- 51. How did the deployment of your innovation affect the organisation(s)? (max 400 words)



- 52. Does your team have the resources for scaling up to national deployment?
 - Yes
 - No
- 53. Upload any relevant implementation planning documents



EVIDENCE FOR YOUR INNOVATIONS

- 54. Do you have any evidence to show the impact or benefits of your innovation?
 - Yes
 - Not yet
 - 54.1 (if yes) What type of evidence or research do you want to submit?
 - Evidence of clinical or care outcomes
 - Evidence of cost impact, efficiency gains and/or economic modelling
 - Other evidence of effectiveness (for example environmental or social)
 - Pre-clinical evidence
 - Real world evidence
 - In what form is the evidence presented?
 - Data published, but not in a peer reviewed journal
 - Non-randomised comparative data published in a peer reviewed journal
 - Non-randomised non-comparative data published in a peer reviewed journal
 - Poster or abstract presented at a conference
 - Randomised controlled trial published in a peer reviewed journal
 - Unpublished data
 - Other (please specify)
 - 54.3 Write a short summary of the evidence. (max 500 words)
 - 54.4 Upload any documents that support this evidence
- 55 Are you currently collecting evidence, or have plans to collect evidence?
 - Yes
 - No
 - 55.1 (If yes) Write a short summary of your ongoing or planned evidence gathering. (max 200 words)





55.2 Upload any documents relevant to this evidence collection

G. Signature from Employing Organisation

This section must be completed for the application to be submitted.

H. References

This section must be completed for the application to be submitted.

I. Additional Supporting Information (where applicable)

This section is not compulsory and does not need be completed for the application to be submitted.