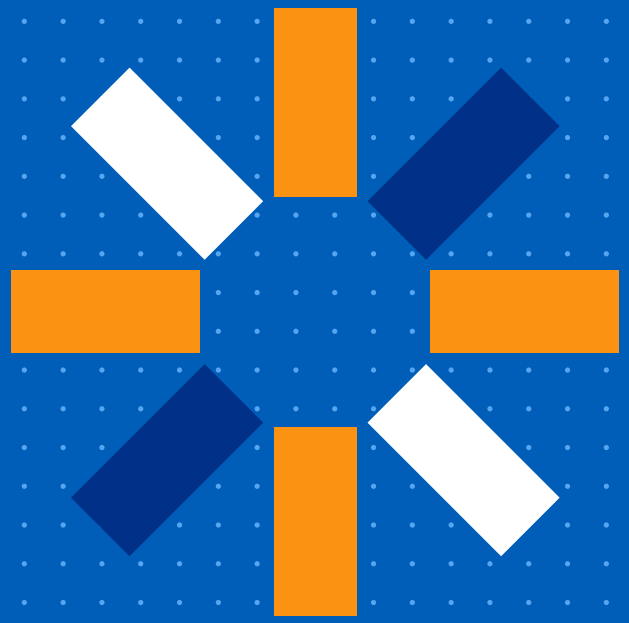
Health Innovation Network

NHS England

NHS Innovation Accelerator

NHS Innovation Accelerator 10-year impact report

2015-2025



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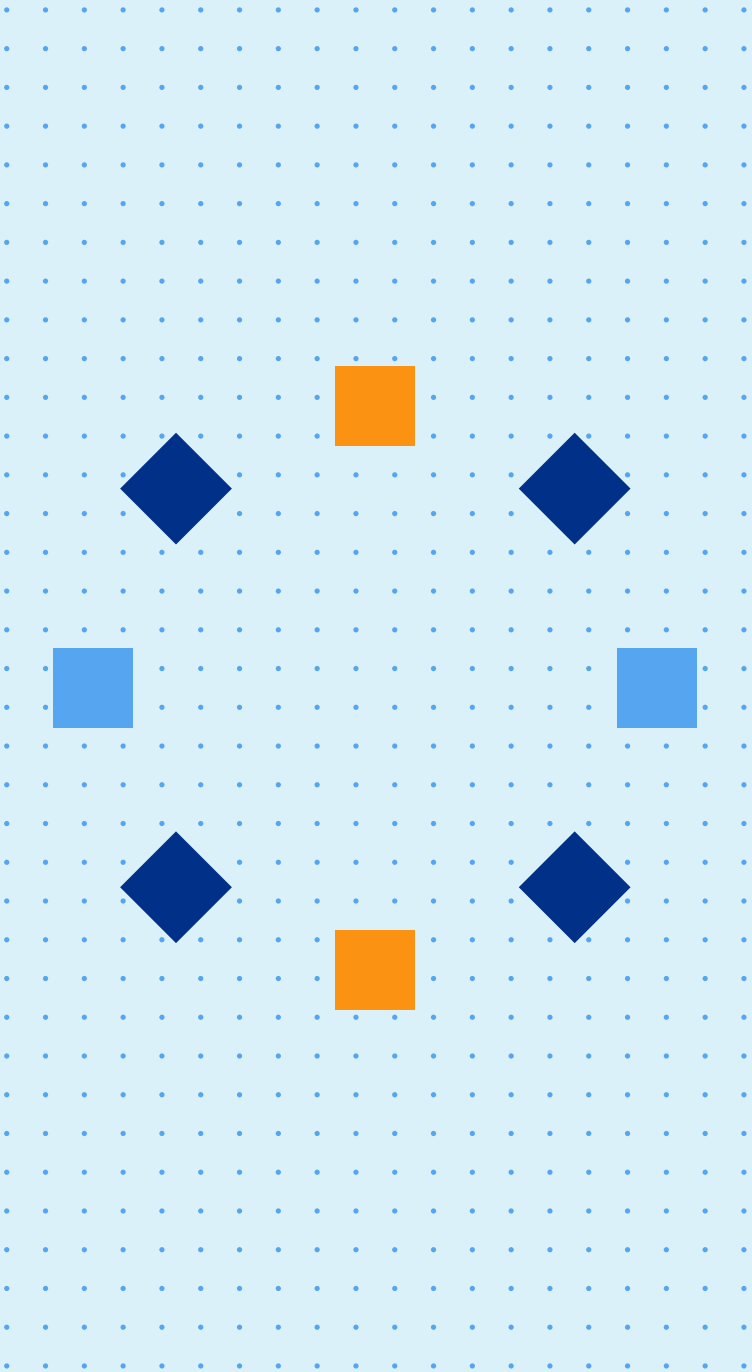


Foreword

This year marks just over ten years of the NHS Innovation Accelerator (NIA). Since it was founded, we have supported exceptional individuals in scaling 140 evidence-based solutions across the NHS. These innovations have now reached over 10 million patients and enhanced the care and efficiency of over 3,500 NHS sites.

As the NHS faces unprecedented pressures, particularly from rising demand and workforce challenges, the government's 10 Year Health Plan sets out a clear call for transformational change. Meeting this ambition will require innovation now more than ever.

Standing on a decade of experience, we have shown what is possible with the right support and a collective approach. We have worked alongside pioneering organisations to shape and standardise the innovation landscape. Our fellows have navigated the complexity of scaling in the NHS, shared insights with one another, and helped foster a more open, innovation-ready health and social care system.

This report celebrates a decade of achievement, offering insights that will inform and strengthen our impact in the years to come. We share compelling real-world examples that demonstrate how innovation is helping to address the 10 Year Health Plan's three shifts: analogue to digital, hospital to community and treatment to prevention. You'll also hear from a patient representative who found her voice through the NIA – a reminder that innovation must be shaped with the people it serves.

We would like to thank everyone involved in delivering and supporting the programme, as well as our fellows and alumni, for their hard work and dedication over the past years.

The NIA team

> ***"Working with the NIA has meant that we can quickly identify innovations that meet our system's priorities and needs. The NIA team have been so responsive to our needs and to have a curated menu of innovations that make our jobs much easier in reviewing and promoting impactful innovations."***
>
> **Dr Tim Clarke**
>
> *Head of Innovation, Norfolk & Waveney Integrated Care System*

> ***"Our goal is to provide better outcomes and care for patients. Initiatives like the NIA give us the opportunity to supercharge the brilliant ideas being brought through by our colleagues, academics and partners in industry, to offer modern, accessible solutions that can streamline treatment, save time and resources, and ultimately improve health outcomes in Leeds."***
>
> **Dr Ai Lyn Tan**
>
> *Medical Director, Research and Innovation, Leeds Teaching Hospitals*

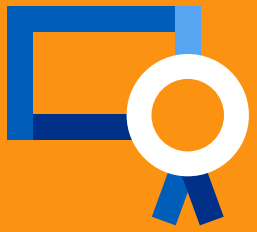
Our impact in numbers over the last 10 years

These metrics highlight the tangible, nationwide impact of the NIA over the past decade (from inception to December 2025).*

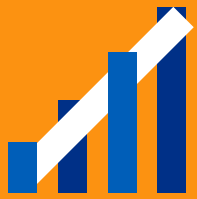
140
innovations supported

3,500
new NHS sites reached

Over
10 million
patients impacted by NIA supported innovations



261
awards won by our fellows



Over
£243 million
in investment raised

**The metrics are self-reported and collected while fellows are live on the programme.*

About the NHS Innovation Accelerator

The NIA exists to accelerate the uptake of high-impact, evidence-based innovations across the NHS and wider health and care system in England. Formed in 2015, we are now funded by NHS England and delivered in partnership with the 15 Health Innovation Networks.

Sitting at the intersection of health, innovation, and systems, we connect innovators with NHS stakeholders, patients, and decision-makers to unlock scalable solutions. Through tailored support, expert mentoring, and shared learning, we help overcome barriers to adoption and embed innovation where it's needed most.

Our mission is to drive meaningful change by improving patient outcomes, supporting workforce sustainability, and enabling a more efficient, collaborative system that learns from what works and scales it effectively. This is achieved through our three programme pillars: Access, Learn and Connect.

Access

We offer unparalleled market intelligence on innovations solving recurring NHS challenges. Through our robust recruitment process and seven-point maturity matrix, we source and assess innovations, allowing the health ecosystem quick access to proven, scalable solutions, reducing duplication and saving transformation teams time and money.

Learn

We prioritise individual and organisational learning by creating space for healthcare colleagues to discover impactful innovations, and for fellows to benefit from an intensive three-year programme of tailored support and mentoring.

Connect

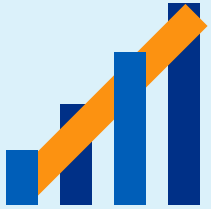
We start with the problem, connecting commissioners with proven solutions to save time and money, and innovators with thought leaders and decision makers for visibility.

The legacy of the NHS Innovation Accelerator

The NIA is a proven catalyst for success during an innovation's three years on the programme and beyond.

Analysis of NIA fellows since 2019 shows major economic impact:

£985 million
in investment



£303 million
in annual revenue

3,300+
jobs created

Post programme completion, alumni continue to achieve striking growth:

- Amount of investment received more than doubles (£528m post-programme vs £212m during programme)
- 90% of revenue is generated after completing the NIA programme
- 71% increase in new jobs created

Retrospective analysis based on data from publicly available databases.

Delivering on the 10 Year Health Plan

The 10 Year Health Plan was clear in its intentions:

> ***The choice for the NHS is stark: reform or die. We can continue down our current path, making tweaks to an increasingly unsustainable model, or we can take a new course and reimagine the NHS through transformational change that will guarantee its sustainability for generations to come. This Plan chooses the latter. It represents a break with the past.***

Fit for the future: 10 Year Health Plan for England.
Department of Health and Social Care; Prime Minister's Office, 10 Downing Street. Published 3 July 2025.

We embody this commitment to change by accelerating the adoption of new technologies, digital pathways and innovative models of care that enable the NHS to modernise at pace, protect its future resilience, and deliver better outcomes for generations to come.

Just a few examples of this are:

- Clinical collaboration platform, Bleepa, has led to a 90% reduction in first and follow up outpatient appointment requirements at Queen Victoria Hospital NHS Foundation Trust.
- A time saving of four minutes per 12-minute primary care consultation using the Tortus AI assistant.
- 500% increase in patient throughput due to teledermatology appointments provided by Isla Health.
- Dynamic scheduling producing a £30:1 Return on Investment (ROI), with 152,000 extra patients seen using Deep Medical at Mid and South Essex NHS Foundation Trust.
- AI-powered dynamic scheduling system, Doc Abode, has been rolled out across Central and North West London NHS Foundation Trust resulting in a 120% increase in patient visits per shift, 71% increase in patient contacts, and 50% decrease in bank staff costs.

Shifting from hospital to community with Holly Health

NHS challenge

Multimorbidity affects 23-27% of UK patients, yet drives 53% of GP consultations, 79% of prescriptions, and 56% of hospital admissions. While increased patient activation and coaching improve outcomes, primary care teams lack the time and resources to deliver personalised lifestyle support to everyone in need. Consequently, many patients remain unsupported, leading to gradual health decline and mounting pressure on the healthcare system.

Innovation in action

Kirkby PCN, covering five GP practices, implemented Holly Health, a personalised digital habit coaching app (and class 1 medical device) designed to enable sustainable physical and mental health habit changes. The platform uses a personalised conversational chatbot and AI nudges, to suggest and develop sustainable habits, supporting patients to proactively self-manage their health, without requiring additional practice or GP time. This frees up capacity for clinicians to focus more time on highest-need patients.

In the first eight months, 1,921 local patients signed up, with over 1,000 receiving ongoing tailored coaching. After eight weeks, users reported statistically significant improvements in exercise, stress, and self-confidence, while those with weight-management goals saw a median loss of 1.9kg. The service reduced GP demand by an average of 1.43 appointments per person annually, equating to a 4x ROI on license costs, while wider system savings from improved health outcomes are estimated at a 16.5x return on investment.

Holly Health has now been deployed in more than 200 GP sites across 18 Integrated Care Systems (ICSs).

"The NIA is a truly unique programme which arms fellows like myself with years of unreplicable NHS insights, peer support, and a platform for growth. Having taken part in multiple health focused UK accelerators, the longevity, infrastructure and passion from the NIA stands out a mile, and I'm proud to be part of it."

Grace Gimson
Co-Founder & CEO, Holly Health

Holly HEALTH

"Scaling Pathpoint eDerma through the NIA has allowed us to demonstrate the power of integrated care on a national stage. By aligning primary and secondary care into a single, seamless pathway, we are not only hitting critical cancer targets but also creating a sustainable model for the NHS that optimises specialist resources and delivers faster, more equitable care for all. The NIA's Delivery team in particular have helped broker direct engagements with systems looking to go on the transformation journey with us."

Piyush Mahapatra
CEO, Open Medical

OpenMedical

Driving analogue to digital with Open Medical

NHS challenge

Lancashire and South Cumbria Integrated Care Board (ICB) received around 23,000 urgent skin cancer referrals each year (2023–24), increasing by 8% annually. Limited dermatology capacity led to long waits for first appointments, in some cases up to 18 months. As only 2.21% of referrals resulted in a cancer diagnosis, there was a clear need to better prioritise high-risk patients, reduce pressure on specialists, and ensure non-urgent patients were directed to the right care first time.

Innovation in action

Pathpoint eDerma, Open Medical's cloud-based teledermatology platform, was rolled out across four NHS trusts and a new primary care Skin Hub using a centralised virtual triage (CVT) model. High-quality images and digital questionnaires were reviewed remotely by specialist clinicians, directing patients to the right care first time and reducing waits and unnecessary hospital visits.

The model delivered faster diagnoses and more efficient pathways, achieving 90.5% compliance with the 28-day Faster Diagnosis Standard, increasing teledermatology review of urgent cancer referrals from 68% to 77%, and determining next steps for most patients within 48 hours. Only 12.6% of patients required urgent cancer referral, while 73% were managed safely in primary or community care. Shifting care into the community freed up specialist capacity and helped the system stay within budget, contributing to projected savings of £1.2m in year one and £6.3m over five years.

Pathpoint eDerma has now been commissioned by 12 Trusts and across two ICSs.

Moving from treatment to prevention with myHappymind

NHS challenge

Rising mental health needs among children and young people, alongside sustained workforce pressure in Mental Health Support Teams and CAMHS, left the Bradford District and Craven Health and Care Partnership facing long waiting lists and significant unmet need. These challenges were most acute in areas of higher deprivation, contributing to widening health inequalities.

Schools reported feeling ill-equipped to meet growing levels of neurodiversity, social, emotional and mental health needs, and special educational needs. In response, the Partnership sought a preventative, community-based, digital and evidence-informed approach to support schools in the most deprived areas (IMD deciles 1–3), strengthen early intervention, and reduce escalation into specialist services.

Innovation in action

myHappymind is an NHS-backed, school-based mental health programme delivered through weekly 20-minute digital lessons. It supports children to build evidence-based skills including self-regulation, resilience and self-esteem, with minimal teacher preparation. The programme is supported by a parent app, staff wellbeing resources, and targeted tools addressing challenges such as emotionally based school avoidance, speech and language development, school readiness, and inclusion.

Implemented in 95 schools across Bradford and Craven, myHappymind reached over 35,000 children and demonstrated measurable system impact. This included 673 CAMHS referrals prevented, equating to almost £6m in cost avoidance (14x return on investment), reduced referrals to SENCOs and Mental Health Support Teams, improvements in school calm, attendance and inclusion, and prevention of over 360 exclusions. All schools reported improved mental health understanding among staff and parents, helping to free capacity to support children with more complex needs.

The programme is now used in over 2,000 schools and 42 sites across 15 Integrated Care Boards.

> ***"I've had the most incredible journey since I became an NIA fellow. Since joining, we have expanded from 10 place-based contracts to over 40! We've been awarded the Kings Award for Enterprise, received national recognition from NHS Confed and the BETT awards for our impact, and grown our team from 8 to 30. The programme has been transformational in making this happen. Jack, Mindy and the whole team's mentorship and insights have been critical to our journey and we're grateful for the ongoing support."***
>
> **Laura Earnshaw**
> *Founder & CEO, myHappymind*

myHappymind

An alumni’s perspective

Before 2017 I would not have described myself as an innovator. It wasn’t even a word I was aware of.

I was an Approved Mental Health Professional (AMHP) with a deep passion for improving mental health care. I loved my work but after years in health and social care, I began noticing gaps – processes that slowed us down and kept us from delivering the best possible care. I had an idea for how to do things differently, but no understanding of how to make it a reality.

I began asking questions of managers and leaders – local, regional, and national – across a range of organisations and roles, looking to understand how real change happens. Those conversations sparked something: perhaps it was possible for me to create a new way of working. It sounds obvious now, but at the time I hadn’t even considered that a product developed in the private sector could be adopted by the NHS.

Convinced that technology could offer a solution, I made the difficult decision to leave my job and leap into the unfamiliar world of software development and private enterprise. That was the moment my journey as an “innovator” truly began.

With the help of my brilliant business partner, we developed a digital platform connecting AMHPs with available Section 12 doctors: S12 Solutions.

We piloted the platform in Cumbria and South West London, using basic tools like SurveyMonkey, thinking success would naturally lead to rapid adoption. In my naivety as an enthusiastic new entrepreneur, I thought if those pilots were successful then that would be the happy end of this journey and our solution could be handed over to the system. I quickly learned that proving the concept was like reaching the foothills of a very steep mountain range – one that I didn’t have the resources to traverse.

That’s where joining the NHS Innovation Accelerator (NIA) in 2019 proved to be a real game changer. As an NIA fellow I gained the business skills, confidence, and deep understanding of NHS systems, procurement, and evaluation I desperately needed. More than that, I found a community of like-minded innovators – people who understood the highs, the lows, and the persistence required to keep showing up each day. For me, the NIA was more than a badge. It was a bridge that led me to the expertise, peer support and system credibility I needed to have a bigger impact.

By 2020, S12 Solutions was in use across 70% of England’s Mental Health Trusts. Then, in 2021, the business was acquired by global software company VitalHub.

Today, I work to support the next generation of innovators. My journey wasn’t smooth so if I can help make their road less bumpy, it’s my way of giving back. I know firsthand that creating change in the NHS is made possible by the people and programmes that believe in what innovation can do when it’s supported.

By Amy Manning

Founder of S12 Solutions and Managing Director at Amity Consulting

Spotlight on the patient

I came into patient and public involvement through lived experience, both as a patient and as a carer for my children and older relatives. I'd seen, far too often, how health and social care systems failed to put people's real needs and priorities at the centre of their care. I became frustrated, and that frustration led to a determination to change the system.

Innovations shaped by lived experience from the start are more likely to meet real needs, work in real-world settings, be adopted more quickly, and reach more people. Without it, innovations risk excluding whole groups, missing vital features, or failing in practice. True involvement means working with the right people, those most affected by a condition or likely to benefit from an innovation, from the earliest stages and staying connected with them throughout development and beyond.

Over the last 13 years, my role has been about making sure that the patient voice is not only heard but genuinely influences health and care innovation. A big part of that has been through my work with the NHS Innovation Accelerator (NIA), where I've been involved since its earliest days.

In the beginning, I had the passion, but I didn't necessarily understand how the NHS worked with innovation. Being a member of the NIA Programme Board provided valuable learnings about the innovation ecosystem and how people with lived experience can fit within it. I've then been able to share my insights and guidance with fellows, supporting them to embed patient and public involvement not just as a formality but as a genuine partnership that shapes their work. Sometimes my role is to connect innovators with the right communities, sometimes it's to challenge their approach, and often it's to help them create the right environment for patients to feel comfortable, confident, and able to contribute meaningfully.

For me, supporting innovation is about being a bridge between innovators and the people they aim to help, and making sure those voices have real weight in decision-making. Patients may have historically had the smallest voice in the room, but when they are true partners, the entire system benefits. My work with the NIA has shown me that when innovators take that approach they don't just improve their products, they build trust, widen access, and increase the chances of long-term success.

By Joyce Fox

Independent Public Advisor for Patient and Public Involvement and Engagement

Look ahead

As we celebrate 10 years of impact, our sights are set firmly on the future. The next decade will bring new challenges for the NHS, but with challenge comes opportunity. The government's 10 Year Health Plan signals a bold vision for the future of care, and innovation will be at the heart of making it real.

In response, we will:

- Continue to support our stakeholders by developing a central knowledge repository to help the system make informed decisions about NIA-supported innovations.
- Build on and adapt our structured, repeatable learning framework so it can be applied across a wider range of technologies and respond to the evolving needs of both the system and innovators.
- Further develop and apply our seven-point maturity matrix to enable the system to make better product selection, inform the structured learning programme, and to provide a personalised, clear direction for fellows.
- Deliver a series of activities designed to build a strong pipeline and support earlier-stage innovators.

We look forward to what we can support our fellows, alumni and stakeholders to achieve in 2026 and beyond.

The NIA team

Get in touch

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Appendix

Appendix: Innovations that have been part of the NIA since its inception.

Explore our fellows and alumni:

2015
AliveCor/KardiaMobile/Kardia™ Mobile; BrushDJ; Episcissors/Episcissors-60; HealthCoaching; HealthUnlocked; i-Thrive; Join Dementia Research; MyCOPD; NerveCentre; NeuroResponse; Non-Injectable Arterial Connector (NIC); Owise; Patients Know Best; PneuX Pneumonia Prevention System; Sapientia (previously Congenica); Sleepio; The Scarred Liver Project

2016
Coordinate My Care; Docobo/Doc@Home by Artemus; DrDoctor; Epilepsy Self Monitor (EpsMon); Eras+; Outcomes Based Healthcare (OBH); Severe Sore Throat Test-and-Treat; SIM (Serenity Integrated Monitoring)

2017
Common Approach to Children's Health (CATCH); ESCAPE-pain and Joint Pain Advice; FREED; Minuteful Kidney by Healthy.io; FutureNurse (previously Dip.io); Home Monitoring of Hypertension in Pregnancy (HaMpton); Lantum; MyWay Diabetes (previously MyDiabetesMyWay); ORCHA; Oviva Diabetes Support; RespiraSense/Respiratory - #MakingEveryBreathCount; SHREWD Resilience; WaitLess

2018
The programme recruitment call dates were shifted; resulting in the cohort starting in 2019 and not 2018

2019
ChatHealth; DDM Health/Diabetes Digital Media; Digital Continuing Healthcare (CHC) by IEG4; Droplet; ECHO by Lloyd's Pharmacy; MIRA Rehab; Mush; Population Genetic Testing; PrecisionPointTM - Transperineal Access System; S12 Solutions; Skin Analytics; SkinVision; Virti

2020
FibriCheck; HN (Health Navigator); Locum's Nest; Management and Supervision Tool (MaST) by Otsuka Health Solutions; MediShout; MyPreOp by Ultramed; PEP Health (Patient Experience Platform); Qbtest/Qbtech; RIX Wiki; Safe Steps; TheWaterDrop

2021
AcuPebble SA100; Brain in Hand; Cyted - EndoSign® (previously Cytosponge); Definition Health; Feebris; Infinity Health; KiActiv; Little Journey/Little Spark; MUTU System; Oxehealth/Oxevision; Oxford Medical Simulation (OMS); Vinehealth

2022
Abtrace; DemDx Clinical Reasoning Platform; getUBetter; Hear Glue Ear; Maxwell Plus; The Real Birth Company; Thalamos; UNEEG Medical; Written Medicine

2023
Ai Dimension (previously Procomp); Anya; Ascelus; Cardmedic; DigiBete; Digistain; Emergency Role Allocation System (ERA); Hailie smart digital inhaler; Holly Health; Limbic; Mahana IBS; myHappymind; Pathpoint eDerma by Open Medical; The PinPoint Test; Suvera; Tellmi; Wysa

2024
Boost Breast Forms; C2-Ai; Healthinote by Cognitant; Deep Medical; DocAbode; Dr Julian; Isla Health; Kidney Beam; Remcare; Sickle Cell Society; SurgeryHero; Tailored Talks by Pogo

2025
Aero Titan & Aero Sentinel; Ampersand Health; Bleepa; Compassly; Concentric; Daye Diagnostic Tampon; The Digital Health Passport; Healthtech-1; JanamApp; LabCycle; MyRenalCare; Nettle; Newton's Tree; Vitual Nodule Clinic (VNC) by Optellum; PocDoc; PreActiv; Prostate Intelligence (Pi); Psyomics; Smart Triage by Rapid Health; ShiftPartner; Strolll AR; The Tribe Project; The WID-Easy Test; Tortus AI; Touchdose by Dosium; UV-C Disinfection by Mackwell Health; Verbo; Boundless by XR Therapeutics