Health Innovation Network
NHS England
NHS Innovation Accelerator

Call for Applications

NHS Innovation Accelerator 2027 Intake

Contents

1. What is the NHS Innovation Accelerator (NIA)?

Supporting innovation to scale across the NHS

The NHS Innovation Accelerator (NIA) helps the NHS, social care and the wider public access proven health and care innovations, creating the opportunities and visibility for those innovations to spread faster across the health and care ecosystem - connecting innovators with the expertise, networks, and support needed to achieve national impact.

Leveraging collective expertise to drive NHS-wide innovation and impact

Funded by NHS England and delivered by UCLPartners (UCLP), in partnership with all 15 Health Innovation Networks (HINs), the NIA is an award-winning programme supporting high-impact solutions to transform patient care and service delivery.

Since 2015, the NIA has supported over 100 innovations to scale across England - improving care quality, empowering clinical teams, and delivering measurable benefits for patients and the NHS.

Our impact includes:

- 3,382 additional NHS sites using NIA innovations
- £229.4M in external funding raised
- 1,261 new jobs created
- 229 awards won

How the NIA works

It can take many years for effective innovations to spread across the health and care system. The NIA exists to accelerate this process - supporting innovators to scale faster while capturing and sharing insights to benefit the wider system.

We do this through three core pillars:

Access
Opening doors across the NHS and the innovation ecosystem for innovators and helping systems identify the right, proven innovations for their needs.

Learn
Building knowledge, capability and confidence for innovators to scale, and giving systems evidence and assurance.

Connect
Creating powerful relationships that drive innovation and supporting systems to adopt, embed and scale solutions.

Who the NIA supports

The NIA supports individuals with a commitment to collaboration and a passion for improving patient outcomes and wider determinants of health.

Our Fellows are defined not just by their innovations, but by their values, leadership, and determination to drive meaningful change across the NHS.

A proven programme with national reach

Since its launch in 2015, the NIA has run annual calls for fellows, building a growing community of innovators and alumni who continue to shape the future of health; we are now recruiting **up to 24 new Fellows** for the 2027 intake - individuals leading promising innovations that have already demonstrated impact and are ready to scale further.

2027 Intake

Deadline to start an application: 12:00 (midday) on Friday 25 September 2026

Application Completion Deadline: 23:59 on Sunday 27 September 2026

If you have any queries about your eligibility or readiness to apply, we encourage you to get in touch with us at nia@uclpartners.com so that we can help identify the best way to support you.

2. Who is the NIA for?

Supporting innovators ready to scale

The NIA is for individuals representing real world evidence-based innovations that have already demonstrated positive impact in practice and are ready to scale further across the NHS.

We are looking for applicants who combine a compelling innovation with a clear, credible plan for delivering greater patient and system benefit at scale.

What we assess

Selection is based equally on:

- The Applicant — their values, and ability to drive change
- The Innovation — its impact, evidence base, and readiness to scale

Both are assessed through the assessment of the written application and through interview.

Focus on innovations at the 'transition to scale' stage

The NIA specifically targets innovations that are beyond early development and entering the critical phase where scaling becomes possible, but often lacks support.

The NIA focuses on innovations in the transition to scale phase, where targeted support can unlock significant impact.

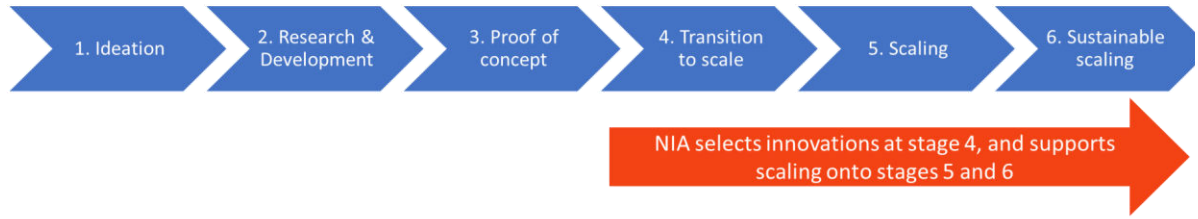

Figure 1: Adapted from *A High-Level Architecture for Scaling Innovation: Scaling Stages*

This stage sits within the wider innovation pathway:

- Ideation – Identifying problems and exploring potential solutions
- Research and development – Building and refining the innovation
- Proof of concept – Testing the innovation in real-world settings
- **Transition to scale – Strengthening the model and building partnerships to enable wider adoption**
- Scaling – Expanding across systems, geographies, or populations
- Sustainable scaling – Achieving long-term, system-wide adoption

We are looking for committed, ambitious individuals who:

- Are passionate about improving outcomes for patients and the NHS
- Have the support of their organisation
- Are ready to actively scale their innovation

Successful applicants will become NIA Fellows and are expected to commit approximately two days per week to scaling their innovation and participating in the programme through a variety of self-determined activities.

See FAQs document for more information about this 2-day commitment.

2a. What are we looking for in applicants?

We welcome applications from innovators of **all genders, ethnicities and backgrounds**.

We are committed to building a cohort that reflects the diversity of the populations served by the NHS and strongly encourage applications from **underrepresented groups**, including women, Black innovators, and others from communities that have been underrepresented in previous cohorts.

Diverse experiences and perspectives strengthen innovation, and people from underrepresented groups often underestimate their contributions. We encourage you to apply if you believe your work can make a difference.

Given the very diverse population our NHS serves, we believe broad representation in innovation is essential, and your ideas, experiences and innovations could help shape the future.

Who can apply

Applicants may be:

- The inventor of the innovation
- The lead for it within your organisation
- A representative of an innovation you find compelling and wish to scale across the NHS

Applicants should have **sufficient influence or decision-making input** to shape the strategy for adoption and spread.

We welcome applicants from across sectors, including:

- Public sector (e.g. clinicians, administrators, social workers)
- Universities and research institutions
- Charities, social enterprises, and community organisations
- Small and medium enterprises (SMEs)

- Large corporates

What we value in applicants

We are looking for applicants that have a set of strong values and a passion for learning and sharing insights for the benefit of entrepreneurs and the wider care system.

We often refer to our fellows as exceptional, which they are, but not because of their achievements or accolades. They are exceptional because of their passion, values, and determination to make a positive impact on the NHS and its patients.

Core attributes include:

- **Communication and collaboration**
  - Effectively engaging stakeholders and building effective partnerships, including key stakeholders from diverse groups or cultural backgrounds
  - Strong communication and ability to articulate a compelling case for change
  - A history of team and partnership working
- **Learning mindset and external orientation**
  - Understanding the perspectives of users and adopters
  - Actively seeking to learn from others and openly sharing insights
- **Entrepreneurial approach**
  - Adaptable, resilient, and open-minded
  - Comfortable taking informed risks
  - Commercially or business-minded
- **Values and integrity**
  - Commitment to improving patient outcomes and quality of care
  - Inclusive and respectful in approach

Working with partners and patients

We are looking for applicants who can demonstrate meaningful collaboration with key partners, including:

- Patients, carers, and communities
- Clinicians and healthcare providers
- Commissioners and system leaders

Patient and public involvement is central to the NIA. Applicants should be able to demonstrate how **end users have shaped their innovation** and how this will continue as it scales.

Applicants will also need to show that you have, or have access to a range of skills and knowledge critical to scaling innovation, including:

- Stakeholder engagement and communications
- Business case development
- Marketing and adoption strategy
- Change management and commercial expertise

The NIA Fellowship is awarded to individuals

- Each application must name a **single applicant**, who will become the NIA Fellow and be the innovation's representative while active on the NIA.
- On that basis, please ensure you respond to questions in the *Applicant* section of the application form in the first person ("I").

However, we recognise that to scale effectively you will be part of a wider team with complementary skills. Therefore, in the application, applicants are encouraged to:

- Describe the roles of different team members and or partner organisations, where applicable (Partners may include patient networks, charities, universities or consultancies)
- Outline the skills and experience supporting delivery

There may be events during the NIA that are open to your wider team, such as our launch and networking events.

What's required as an NIA Fellow

Fellows are expected to play an active role in the programme and demonstrate ongoing progress.

This includes:

- Participating in the **learning programme**, attending all quarterly and Year 1 events
- **Supporting NIA peers** through sharing learning and experiences
- Demonstrating progress in **scaling and personal development**
- Contributing to **evaluation and reporting,** including through submission of quarterly progress reports to the NIA
- Upholding the behaviours highlighted in the **NIA Code of Conduct,** available in the Resource Library on our website

Continuation on the programme in Year 1, and progression onto Years 2 and 3, will be dependent on the fellow demonstrating that they have met all the requirements above.

2b. What are we looking for in your innovation?

For the 2027 intake, we are seeking evidence-based innovations that have demonstrated real-world impact and can address meaningful challenges across the health and care system. These priority areas are outlined in Appendix 1.

Your application should clearly explain:

- The problem your innovation addresses
- How your solution improves on current practice

To be eligible, your innovation should meet the majority of the following:

Area	Requirement
Strategic fit and need	**Address a clear need for patients or the health care system** For example, in the prevention, diagnosis, treatment, or long-term management of a healthcare condition.
	Align with current health and social care system priorities Appendix 1 at the end of this document provides the challenges highlighted by the NHS and ecosystem stakeholders. Innovations are expected to address at least one of these key challenges; innovations that do not address any of these should consider their value proposition as they are unlikely to be prioritised for procurement within the wider health and social care landscape
Impact, evidence and maturity	**Evidence Generation** Innovations should have been tested in settings including pilots, clinical trials and real-world settings and have a **robust evidence base**, demonstrating measurable improvements in outcomes and either direct or indirect impact on health.
	Deployment Innovations should have been deployed in an NHS or care setting in the UK or internationally and be ready to be scaled further across the NHS (unless the innovation is environmental/climate focused and not yet implemented in a health setting).
Adoption readiness	Has a **pathway to scale** across the NHS
	Is **financially sustainable**
	Has appropriate **intellectual property** in place
	Meets all necessary **regulatory and ethical frameworks** for use in England
	Is **interoperable** with core NHS systems (if digital or digitally enabled)
Equity & sustainability	Considers and actively addresses **health inequalities**
	Is **accessible and inclusive** for diverse populations and communities
	Demonstrates or plans for **environmental sustainability**

Innovations that are not suitable

The NIA does not support innovations that are:

- Early-stage or primarily research-focused
- Focused on testing drug dosages or clinical administration methods
- Research into the causes and treatment of illnesses
- Primarily education or training interventions

Strong applications

To strengthen your application, clearly demonstrate:

- The scale and impact of the problem, including:
  - Impact on patients and quality of life
  - Long-term health outcomes and risks
  - System-level impact (e.g. cost, demand, population need)
- Your innovation's unique value, including:
  - How it compares to existing solutions or practice
  - What makes it different or better
- Robust supporting evidence, including:
  - Outcomes data
  - Health economic benefits

All selected innovations will:

- Be assessed using the NIA Maturity Matrix during due diligence and throughout the programme to measure the innovation's readiness to be adopted

Need more guidance?

If you are unsure whether your innovation is suitable, we encourage you to:

- Attend one of our *Meet the NIA* virtual webinars: Sign up here
- Or email the team at nia@uclpartners.com

3. Why apply to the NHS Innovation Accelerator?

Tailored support to scale your innovation

The NIA is designed to help high-potential innovations scale faster across the NHS by providing tailored support to individuals with the capability and ambition to drive change.

Through a structured, three-year programme, fellows receive bespoke support aligned to their innovation, goals, and stage of development - combining expert guidance, national connections, and practical tools to accelerate adoption.

Core support offer

Learning Programme

Quarterly events focused on key themes, challenges, insight into evolving NHS policy and innovation landscape. Plus, the opportunity to problem-solve with peers.

Year 1 cohort events focused on targeted areas such as procurement, communications, behavioural science, and legal/IP, helping innovators to create a sustainable foundation for scaling.

Visibility & Opportunities

The NIA provides opportunities to raise the profile of your innovation and influence the wider system:

- Present at regional and national events and showcase your innovation to commissioners, providers, and system leaders
- Contribute insights to national policy and strategy discussions

Mentorship & expertise

Access to a diverse network of experienced mentors and specialists across clinical, commercial, and system leadership domains

National networks and connections

Direct links to all 15 Health Innovation Networks (HINs), enabling local navigation, partnerships, and showcasing opportunities

Targeted development

Ongoing guidance and critical challenge from the NIA Core Team to refine strategy and accelerate progress

Partnerships & system support

Fellows benefit from connections to a wider ecosystem of partners and organisations, including:

- National bodies (e.g. Innovate UK)
- Professional and industry networks (e.g. ABHI, Tech London Advocates)
- Complementary innovation programmes and initiatives e.g. NHS Clinical Entrepreneurs, London Institute of Health Engineering.

Peer Network

Access to a growing community of fellows and alumni and the opportunity to connect and share learning via Year 1 events, All Fellow events and NIA networking events.

4. What your time on the NIA will involve

NIA Fellows are expected to commit **two days per week** to scaling their innovation and participating in programme activities.

How this time is used will vary depending on your innovation, organisation, and stage of development. While attendance at key NIA activities is required, Fellows have the flexibility to use the remainder of their time on self-determined activities delivered to create the greatest impact.

For some Fellows, this work forms part of their day-to-day role. For others, particularly those in clinical positions, it may sit alongside their existing responsibilities.

Activities may include building a compelling business case for intended purchasers; developing and executing a stakeholder engagement and marketing plan; building a network; refining the health economic case; presenting to target purchasers and so on.

Getting started

Before the formal start of the programme in April 2027, fellows take part in an induction day designed to introduce fellows to the NIA community and support offer, followed by the official Launch in March 2027

Attendance at all mandatory sessions is a condition of Fellowship participation and influences the amount of support Fellows can realistically receive from the NIA. Applicants should ensure they can attend the dates listed in the **Key Dates** section and have the support of their employing organisation to do so.

How the programme works

At the start of their Fellowship, Fellows meet with the NIA Core Team to discuss:

- Their key objectives and milestones
- Activities to support the adoption and spread of their innovation
- The support they require from the NIA to achieve their goals

The NIA Core Team provides feedback, challenge, and guidance throughout the process, helping Fellows refine their plans and overcome barriers to scaling.

In addition, Fellows can access support from the NIA team throughout the programme, including introductions, specialist advice, and signposting to relevant expertise across the health and innovation ecosystem.

What happens after the first 12 months?

The NIA is designed to support Fellows over a period of up to three years, recognising that scaling innovation across the NHS takes time.

The NIA Programme Board reviews progression of Fellows onto subsequent years, this is to ensure Fellows are continuing to engage with the programme and make progress towards scaling their innovation.

The NIA is interested in seeing commitment, learning and momentum rather than a rigid measure of success. We recognise that every innovation follows a different path and that progress is rarely linear.

Fellows who are actively engaging with the programme and making reasonable progress would normally be expected to continue into Years 2 and 3.

As Fellows progress through the programme, they continue to have access to many of the benefits outlined in Section 3, including mentorship, quarterly learning events, the NIA network, and support from the NIA Core Team. Support in Years 2 and 3 is typically less formal and structured, reflecting the growing experience, confidence and networks of Fellows.

After completing the Fellowship, innovators become part of the NIA Alumni Network - a community of over 100 innovators who continue to share learning, support one another, and contribute to innovation across health and care.

5. Details on how to apply

Once you have read this *Call for Applications*, please:

- Read the **Guide for Applicants**, available in the Resource Library
- Review the **Key Dates** document
- Review the **FAQs**
- Review the wording of the draft **Contract** and draft **Code of Conduct** (also available in the Resource Library) which both you and your organisation will need to sign should you be invited to join the NIA. Please note both documents are under review and are subject to change.

Once you are assured that you and your innovation meet the criteria specified, that you can commit to the time requirements, including attendance at all compulsory events and that you have the support of your employing organisation, please visit https://nhsaccelerator.com/about-the-nia-programme/apply-for-nia-fellowship/ and follow the link application.

Readiness Check and Application Process

You will first be invited to complete a ***Readiness Check***. This short assessment helps us determine whether the programme is a good fit for you and your innovation before you invest time in completing the full application.

Please answer all questions as accurately as you can. We may verify the information you provide during the review process.

Your ***Readiness Check*** will be reviewed internally. If you meet the eligibility criteria, you will be invited to complete the ***Main Application***.

We aim to let you know the outcome of your Readiness Check as soon as possible and within 3 working days. We encourage you to submit your Readiness Check as early as possible when applications open and no later than:

12:00 (midday), Friday 25 September 2026

Main Application

If you are invited to complete the Main Application, you must submit your completed application by:

23:59, Sunday 27 September 2026

Late applications will not be accepted.

The Main Application includes:

- **Application Form**
- **Authorisation** from your employing organisation
- **Two references**
- **Additional supporting information**, where relevant

If you are not eligible

If your innovation is found to be ineligible at the Readiness Check stage, you will not be invited to complete the Main Application. Instead, we will provide you with a **signposting and guidance document** outlining potential next steps and other sources of support that may be relevant to you.

5a. Support in completing the application form

UK based Applicants
Your local Academic Health Science Network may be able to provide support and advice in applying for the NIA. Find your local HIN here: https://thehealthinnovationnetwork.co.uk/.

International Applicants
You should contact Healthcare UK to access the dedicated support on offer for international companies looking to come to the UK.

6. Assessment process

Applications will be assessed as follows:

- **Eligibility:** Applicants complete an initial eligibility to apply form online; their answers will determine whether the NIA Team invite them via email to complete the full application. This step allows the applicant to self-reflect on whether their innovation is at the right stage of maturity and has sufficient evidence to realistically demonstrate its impact; as the main application requires both time and in-depth details, the eligibility process will ensure that applicants do not waste time completing it if they are unlikely to progress to the next stage.
- **Screening:** Upon submission, the NIA Core Team will screen all applications to ensure they are complete and meet the minimum criteria for participation:
    - Is there a single named lead applicant?
    - Is the innovation at a sufficient level of maturity?
    - Can the applicant commit to at least 2 days per week?
    - Is there evidence to support the impact for the innovation?
    - Is the innovation in use in at least one health or social care site, either within or outside of the NHS?

- **Assessment:** Each application will be assessed by a representative group of assessors drawn from: patients, clinicians, commercial and implementation experts. Assessors will be sourced via patient and clinical networks, HINs and the NHS among others. At least five assessors will score each application form and make a recommendation as to whether the application should proceed to interview stage. Assessors will provide a score and feedback for the applicant and innovation sections as well as feedback on the evidence provided.

- **Shortlisting:** The NIA Programme Board will review scores and feedback from the assessment stage, ranking applications by the average of the Applicant and Innovation score. The applications, who have scored a minimum of 65% in each of the Applicant and Innovation sections, will be offered an opportunity of an interview.

- **NICE:** NICE may conduct an informal review of the applications offered for interview and provide feedback on the following:
    - Innovation alignment with NICE guidelines.
    - Any contradictions with NICE guidelines or direction of travel.
    - Any major concerns with the evidence provided.

- **NHS England:** NHS England **may** informally review all applications shortlisted for interview.

- **Interviews:** Interview panellists will be sourced from patient networks, NHS England, HINs, NIA mentors and organisations supporting the NIA. At least 4 panel members will sit on the interview panel, scoring each interviewee and making recommendations. The recommendations will be collated and presented to the decision-making panel.

- **Decision-making panel:** The decision-making panel will consider the resulting scores and recommendations. The panel will ratify which of the applications will join the NIA in 2027, subject to due diligence.

  All unsuccessful applicants at both assessment and interview stage will receive written feedback.

- **Due Diligence:** After the decision-making panel, successful applicants will be offered a conditional place on the NIA subject to a due diligence process. During this process:
    - References provided on the application form will be verified,
    - You will be asked to confirm the intellectual property arrangements your innovation has in place,
    - Fellows will be required to complete information governance checklists and to confirm that they are able to attend all compulsory dates.

- **Maturity Matrix** –applicants will be asked a set of questions to guide us in understanding how mature your innovation is, so we can tailor the support we will give you to ensure you progress

- **Final offer:** On successful completion of the due diligence stage -
    - Applicants receive an unconditional offer of a Fellowship,
    - Fully signed contracts will be issued.

7. Key Dates

Programme Information	'Meet the NIA' informational webinars	Thursday 25 June 2026 12:00-13:00 Monday 27 July 2026 12:00-13:00 Tuesday 18 August 2026 13:00-14:00 Thursday 10 September 2026 12:00-13:00 Monday 21 September 2026 13:00-14:00
Stage 1: Apply	Applications Open **Deadline to start an application** *(Readiness Check)* **Application Completion Deadline**	Monday 17 August 2026 **12:00 (midday) on Friday 25 September 2026** **23:59 on Sunday 27 September 2026**
Stage 2: Application Assessment	Application assessment period Shortlisting panel Invitation to interviews Unsuccessful applicants notified	5 October - 6 November 2026 24 November 2026 25 November 2026 27 November 2026
Stage 3: Interviews	Interview period Final decision-making panel Outcomes communicated to interviewed applicants Feedback sent to all successful & unsuccessful applicants	Wednesday 6 January - Friday 15 January 2027 4 February 2027 5 February 2027 26 February 2027
Stage 4: Due Diligence & Onboarding	Due diligence and onboarding period **Deadline for due diligence/onboarding documents**	8 February - 5 March 2027 **19 February 2027**

The following dates/ sessions are a mandatory part of the NIA. You will not be able to take up a fellowship unless you are able to attend all of them.		
Stage 5: Fellowship begins	Induction and preparation for NIA Launch Fellows Launch Dinner Launch Event at Rewired NEC Birmingham NIA Panel Day	Tuesday 9 March Monday 15 March (tbc) 16 or 17 March 2027 20 April 2027
Programme Dates	Quarterly events	Tuesday 11 May 2027 Tuesday 13 July 2027 Tuesday 12 October 2027 Tuesday 14 March 2028
	Year 1 learning events	Tuesday 8 June 2027 Tuesday 14 September 2027 Tuesday 8 February 2028

8. Who delivers the NIA?

The NIA Team delivers the programme in partnership with NHS England and the Health Innovation Networks (HINs). The HINs have the remit of spreading innovation, improving health and generating economic growth. There are 15 HINs across England, established by NHS England in 2013 to spread innovation at pace and scale. During 2016, the HINs agreed to collectively deliver the NIA as a HIN programme in partnership with NHS England.

All 15 HINs provide direct financial support and governance of the programme, alongside actively supporting Fellows.

- Health Innovation East Midlands
- Health Innovation East
- Health Innovation Manchester
- Health Innovation Network South London
- Imperial College Health Partners
- Health Innovation Kent Surrey Sussex
- Health Innovation North East and North Cumbria
- Health Innovation North West Coast
- Health Innovation Oxford & Thames Valley
- Health Innovation South West
- UCL Partners
- Health Innovation Wessex
- Health Innovation West Midlands
- Health Innovation West of England
- Health Innovation Yorkshire and Humber

For more information visit https://thehealthinnovationnetwork.co.uk/.

The NIA is delivered by UCLPartners - health innovation specialists working in partnership to bring together people and organisations to transform the health and wellbeing of the population.

1. Checklist for applications

Before applying, please ensure you are able to answer affirmatively to all the requirements in the checklist below:

	Requirements
Applicant	You must be able to: ☐ demonstrate the necessary skills and competencies as detailed in section 2, ☐ demonstrate why you want to be an NIA Fellow and what you expect to get out of the programme, ☐ commit 2 days a week to scaling your innovation and participating in the NIA, ☐ attend all the mandatory NIA event dates, ☐ be willing to openly share insights and learning, ☐ actively engage in the fellowship, ☐ confirm support from your employers for your place on the programme.
Innovation	Your innovation must demonstrate: ☐ that it meets a current NHS need ☐ that it has a robust evidence base, ☐ that it addresses, and does not exacerbate, health inequalities, ☐ that it is at the correct phase of maturity set out in Figure 1, ☐ that it is already in use in a health or care setting, ☐ that it is ready to be scaled further across the NHS, ☐ that the potential enablers and barriers to scaling have been considered, ☐ that the approaches you have tried to date, and what you have learnt from this, ☐ consideration of the impact of your scaling approach on different communities, ☐ the scaling ambition and projections for your innovation, along with your business model, ☐ your openness to learn and adapt your strategy, ☐ that it is financially viable, ☐ that it has satisfied all necessary regulatory, intellectual property and ethical frameworks for use in England, ☐ that it is an environmentally sustainable solution, ☐ that it has had considerable patient input into its development to date and in its plan for future developments, ☐ that it is interoperable with core NHS systems (for digital innovations).

9. Appendix 1 – Focus Areas for Innovators

FOR INFORMATION

Innovations that provide a clear, evidenced case for impact in at least one Access, Productivity, Modern Service Framework or Women's Health priority are more likely to be taken up by the NHS and wider ecoystem.

Access

- Outpatient transformation: digital triage, Advice and Guidance tools, remote consultations and patient-initiated follow-up (PIFU).
- Urgent and emergency care routing: booking, navigation and scheduling tools that reduce avoidable A&E attendance.
- Digital front door: solutions that integrate with or extend the NHS App and NHS Online.
- Interoperability, Federated Data Platform and the single patient record – shared care records and secure information exchange.
- Diagnostics and community diagnostics: straight-to-test pathways, community diagnostic centres and imaging optimisation.
- Predictive prevention and population health: risk stratification, early-intervention and predictive analytics.

Productivity

- Operational and Clinical Productivity: ambient documentation, theatre utilisation, discharge management, RTT optimisation, ambulance hear/see/treat improvements and crisis response coordination.
- Healthy and Motivated Workforce: workforce planning, job planning tools, rostering, Workforce Bank solutions, retention and wellbeing interventions.
- Technology and Digitally Enabled Care: FDP-enabled applications, interoperability, AI triage, NHS App integration, cyber resilience and operational intelligence.
- Reducing Waste: medicines optimisation, biosimilars, generic switching, supply-chain optimisation, procurement automation and back-office productivity.
- Left Shift: Prevention and Community Care: neighbourhood MDTs, virtual wards, urgent community response, intermediate care, community diagnostics, prevention programmes, Talking Therapies and MSK pathways.

Modern Service Framework Priorities

- Cardiovascular disease.
- Sepsis.
- Severe mental illness.
- Frailty and dementia.
- Palliative and end-of-life care.
- Children and young people's health.

Women's Health

- Menstrual and gynaecological conditions.

- NHS Online pathways.
- Menopause support.
- Pain management.
- Maternity safety and quality improvement.
- Research and clinical trials participation.
- Bone health and osteoporosis.

Relevant to Female Founders

The renewed strategy places a strong emphasis on improving research, innovation and women's participation in the development of health technologies, creating opportunities for women-led innovation and femtech solutions.

Source: NHS England Medium Term Planning Framework 2026/27–2028/29; NHS England "Next steps on planning and priorities for 2026/27" (April 2026); Renewed Women's Health Strategy for England (April 2026); Fit for the Future: 10 Year Health Plan for England (July 2025); NHS England Quality Strategy for NHS-funded care in England.

Dementia – problem statements on priority areas

Call: We are looking for evidence-based innovations that have demonstrated impact in real-world settings and are ready to scale across health and care systems. Whether developed specifically for dementia or successfully deployed in another condition area, we are particularly interested in solutions that can improve prevention, diagnosis, treatment access and crisis avoidance for people affected by dementia.

Challenge Area 1: Early Detection and Diagnosis

The Challenge

There are currently estimated to be 982,000 people with dementia in the UK, but more than a third of people with the condition do not have a diagnosis. This number is expected to rise to 1.4 million by 2040. Many people are still diagnosed too late to access support, plan for the future, or benefit from emerging treatments.

Problem Statements

- How might we enable earlier detection and diagnosis of dementia in order to reach people before symptoms escalate into crisis?
- How might we shorten the time it takes to get a diagnosis of dementia?
- How might we detect clinical changes earlier, following a diagnosis of dementia?
- How might we create seamless pathways from pre-diagnosis through to post-diagnostic support?

Some examples areas of interest

- Digital biomarkers (speech, gait, eye-tracking, passive monitoring)
- AI-supported triage and diagnostic decision support
- Community-based cognitive screening and case finding
- Earlier risk identification through primary care and population health approaches
- Remote assessment and monitoring tools
- Innovations reducing inequalities in access to diagnosis

NHS Impact Sought

- Earlier and more accurate diagnosis
- Improved pathway efficiency
- Reduced diagnostic waiting times
- Increased access in underserved populations
- Earlier intervention and treatment planning

Challenge Area 2: Crisis prevention

The Challenge

People living with dementia account for almost one in six hospital patients at any time, experience significantly longer hospital stays, and attend A&E nearly one million times each year. Falls and infections have been identified as high-priority opportunity areas where which could reduce avoidable deterioration, unnecessary hospital admissions and prolonged hospital stays.

Problem Statements

- How might we prevent avoidable crises, unnecessary hospital admissions and deterioration for people living with dementia?
- How might we enable earlier identification of risk and more proactive support and intervention in community, home and care settings?

Areas of Interest

- Falls prediction, prevention and detection
- Infection detection and prevention – including Pneumonia and UTIs
- Remote monitoring and escalation tools
- Carer support solutions that reduce burden and enable earlier action
- Community and care home technologies that support independence and safety

NHS Impact Sought

- Reduced emergency admissions
- Reduced A&E attendances
- Reduced hospital length of stay
- Improved independence
- Reduced carer burden
- More care delivered in homes and communities
- Lower system costs and bed-day pressures

Challenge Area 3: Treatment Delivery and Non-Pharmacological Interventions

The Challenge

Emerging disease-modifying treatments create significant opportunities but also place pressure on NHS capacity, eligibility assessment, monitoring, coordination and equitable access. At the same time, evidence-based non-pharmacological interventions often struggle to scale despite their potential to improve quality of life and support independence.

Problem Statements

- How might we enable more people affected by dementia to access effective treatments through improving pathway capacity, coordination, monitoring and equitable delivery across health and care systems?
- How might we accelerate the adoption and scale of effective non-pharmacological interventions that could transform the lives of people affected by dementia?

Areas of Interest

- Treatment pathway orchestration and coordination
- Eligibility and referral triage systems
- Monitoring solutions for disease-modifying treatments
- Tools supporting treatment adherence and follow-up
- Workforce productivity and capacity solutions
- Digital and non-pharmacological interventions with evidence of effectiveness
- Infrastructure enabling equitable rollout of treatments across geography and population groups

NHS Impact Sought

- Faster access to treatment
- Improved coordination across pathways
- Greater workforce efficiency
- Reduced inequalities in access
- Increased uptake of effective interventions
- Improved patient outcomes and quality of life