SBRI Healthcare Programme

An NHS England funded initiative delivered by the Eastern Academic Health Science Network

www.sbrihealthcare.co.uk





Agenda

13th November, Leeds

12.30	Lunch & networking
13.15	Welcome from Chair – Patrick Trotter, Medilink Y&H Innovation Services Manager
13.30	Overview of the SBRI Healthcare Programme – Karen Livingstone, National Director, SBRI Healthcare
13.50	The application & assessment process – Nick Offer, SBRI Healthcare Project Manager, Health Enterprise East
14.10	Clinical Presentations

- Outpatients – Julia Coletta, eHealth Programme Director, Airedale NHS Foundation Trust
- Diabetic Foot Ulcers – Prof Peter Vowden, Clinical Director, NIHR HTC for Wound Prevention and Treatment & Matt Chapman, Director, KTN

14.55	Q&A session (All speakers)
15.30	Session close

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SBRI Government challenges. Ideas from business. Innovative solutions.

SBRI is a pan-government, structured process enabling the Public Sector to engage with innovative suppliers:

- ✓ Helping the Public Sector address challenges
  - Using innovation to achieve a step change
- ✓ Accelerating technology commercialisation
  - Providing a route to market
- ✓ Support and the development of Innovative companies
  - Providing a lead customer/R&D partner
  - Providing funding and credibility for fund raising

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SBRI Key features

- ✓ 100% funded R&D
- ✓ Operate under procurement rules rather than state aid rules
- ✓ UK implementation of EU Pre-Commercial Procurement
- ✓ Deliverable based rather than hours worked or costs incurred

- Contract with Prime Supplier
  - ✓ Who may choose to sub contract but remains accountable
- IP rests with Supplier
  - ✓ Certain usage rights with Public Sector – Companies encouraged to exploit IP
- Light touch Reporting & payments quarterly & up front

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Things to Note

- Any size of business is eligible
- Other organisations are eligible as long as the route to market is demonstrated
- All contract values quoted **INCLUDE** VAT
- Applications assessed on Fair Market Value
- Contract terms are non-negotiable
- Single applicant (partners shown as sub contractors)
- Applicants must fully complete the application form






Eligible costs (all to include VAT)

- Labour costs broken down by individual
- Material Costs (inc consumables specific to the project)
- Capital Equipment Costs
- Sub-contract costs
- Travel and subsistence
- Other costs specifically attributed to the project
- Indirect Costs:
  - General office and basic laboratory consumables
  - Library services/learning resources
  - Typing/secretarial
  - Finance, personnel, public relations and departmental services
  - Central and distributed computing
  - Cost of capital employed
  - Overheads

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SBRI

Government challenges.
Ideas from business.
Innovative solutions.

www.innovateuk.org/sbri

website contains details of all SBRI competitions

The NHS Innovation Agenda

"There are great people in the NHS with great ideas. Through a focus on outcomes, we are going to enable and encourage them to turn those innovative ideas into reality. This will result in better care and outcomes for patients."

SECRETARY OF STATE FOR HEALTH, ANDREW LANSLEY

INVENTION
The originating idea for a new service or product, or a new way of providing a service

ADOPTION
Putting the new idea, product or service into practice, including prototyping, piloting, testing and evaluating its safety and effectiveness

DIFFUSION
The systematic uptake of the idea, service or product into widespread use across the whole service.

We will double our investment in the Small Business Research Initiative to develop innovative solutions to healthcare challenges, encourage greater competition in procurement of services, and drive growth in the UK SME sector

HEALTH AND THE ECONOMY

The NHS contributes to the UK economy in four important ways:

1
Through the services it provides: a healthy population is more productive, and more economically active

2
By adopting innovation to improve its own productivity, it can deliver more health benefit for a given public resource

3
By accelerating adoption and diffusion of innovation throughout the NHS it supports growth in the life sciences industry

4
By exporting innovation, ideas and expertise, working in partnership with UK industry, it provides new business opportunities abroad for UK-based companies.

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SBRI Process

AHSN led - typically undertaken by clinicians – service driven

AHSN led - Workshops with industry to support understanding

PHASE 1: Typically 6 months – max of £100k

PHASE 2: Typically 18 months – milestones agreed & monitored

PHASE 3: Typically 12 months – milestones agreed & monitored

Problem Identification

Open call to Industry

Assessment

Feasibility Testing

Prototype development

Pathway testing & Proof of Value

Assessment

Open Procurement

Due diligence & contracts

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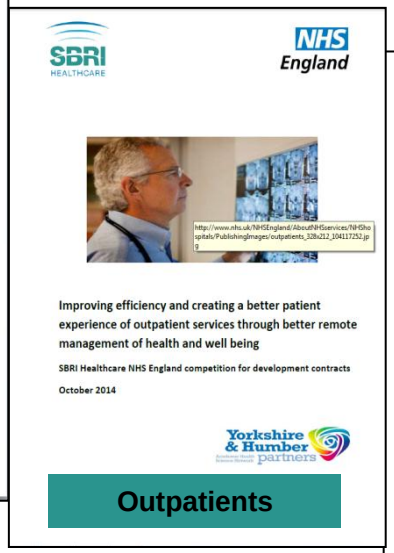
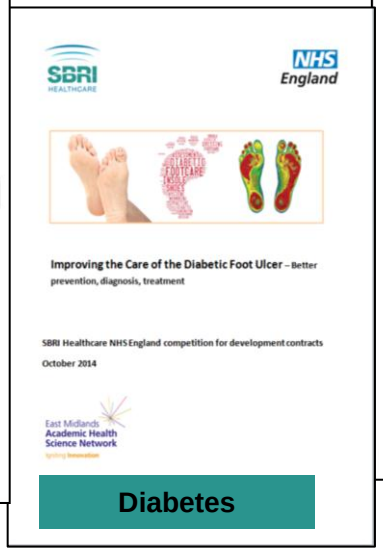
New Competition Autumn 2014





Competition launch: 20th October 2014
Closing Date: Noon 9th December 2014
Industry workshops: 11th November, London & 13th November, Leeds
Contracts awarded: March 2015

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Case Study: Polyphotonix

SME PolyPhotonix has worked with the Liverpool University Hospitals Ophthalmology team to create a light therapy sleep mask which is CE certified for the treatment of diabetic retinopathy (DR).

- The Noctura 400 is based on Organic Light Emitting Diode (OLED) technology which offers a patient centric, non invasive home based monitoring treatment for patients with DR and age-related macular degeneration (AMD).
- The company are currently engaged in a multi-centre Phase III trial of the technology at Moorfields Hospital, London.
- The company have increased 5 fold, have all their manufacturing in the UK and are based at the National Printable Electronics Centre in Sedgefield.

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Case Study: Fuel 3D Technologies

Oxford University Spin out Company, Fuel 3D Technologies, has devised a low cost 3D imaging technology, allowing any wound, scar or tissue blemish to be scanned, measured and mapped over time to inform medical processes like never before .

- The Eykona Wound Measurement System is the original scanning platform developed by Fuel3D. It generates 3D images of wounds to allow objective measurement for accurate wound assessment
- The scanning technology which was launched in the UK in December 2011, is already being used in 25 NHS hospitals as well as in universities and research projects in the UK, Europe and Australia
- The aim of the SBRI Phase 3 contract is to develop the Eykona system into a general medical scanning device able to benefit more patients in more specialties

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Case Study: Veraz

The Green Badge System (GBS) created by Veraz Ltd uses patented touch monitoring technology to improve hand hygiene compliance.

- The GBS works by monitoring instances of physical contact between healthcare workers and patients/beds/equipment, and the number and quality of hand washes performed by healthcare workers.
- The system provides visual feedback informing individuals and their colleagues of their compliance to hand hygiene protocols, whilst reassuring patients.
- Preventable Healthcare Associated Infections (HCAI) cause patients undue pain and suffering, in severe cases leading to death and disability, and are estimated to cost NHS approximately £4.5 billion per year.
- Veraz are currently engaged in the commercialisation of the product and are planning further trials in major NHS hospitals from mid to late 2014, with a market launch planned for early 2015.

The GBS offers significant benefits and savings to patients and the NHS because it has been proven to increase compliance to hand hygene protocols by 300% during a successful trial in a working London hospital.

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Case Study: Edixomed

Edinburgh based Edixomed have developed a Nitric Oxide dressing for diabetic patients with chronic leg ulcers to enable rapid healing

- The system delivers nitric oxide directly to specific skin tissue in order to help increase blood flow and stimulate wound healing.
- The SBRI funding has meant that we have been able to move from a non-investible company to one that could be invested in. Edixomed has partnered with a wound dressing company in order to bring the product to market in the UK and the dressing is now in clinical trials at Kings College Hospital, London and at Ninewells Hospital in Dundee.
- Chairman, Mr Wood says the company hope to bring the product to market later this year.

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Case Study: Aseptika

Huntingdon based start up Aseptika Ltd has devised a home-based rapid quantitative test to predict exacerbation of lung infections in patients with long-term respiratory disease

Evidence indicates that for every day of 'advanced warning' and every day an effective antimicrobial is administered, time in the clinic is reduced by 0.5 day.

- The company has successfully demonstrated the feasibility of quantifying the levels of key biomarkers in sputum donated by cystic fibrosis (CF) patients as a way of predicting the onset of chest infections known clinically as exacerbations.
- The company is now in the process of scaling up trials to make it possible for patients with a range of respiratory conditions including CF and chronic obstructive pulmonary disease (COPD) to self-monitor at home and reduce the frequency of unscheduled admissions to hospital.

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Outcomes achieved to date

	Competition	Launch Date	No. of entries received	Contracts Awarded		Competition Value
				Phase 1	Phase 2	
1	Pathogen detection (DH)	Oct-08	15	7	2	£2m
2	Hand Hygiene (DH)	Oct-08	38	6	4	£3.1m
3	Managing Long Term Conditions	Apr-09	89	5	2	£1.2 m
3	Patient Safety	Apr-09	46	5	2	£1.25 m
4	Keeping Children Active	Apr-09	42	1	0	£0.1 m
5	Dementia	Jun-10	28	7	3	£1.2m
6	Hospital Admissions	Jun-10	69	5	2	£0.4m
7	Long Term Conditions	Feb-11	73	8	5	£2.2 m
8	Medicines Management (DH)	Apr-12	49	5	4	£2m
9	Behaviour changes (DH)	Apr-12	108	8	2	£2m
10	End of Life	Jan-13	97	5	3	£2.5m
11	Mental Health	Jan-13	80	4	2	£2.5m
12	Cancer	Sep-13	22	4	TBC	Approx. £16m across 7 categories. Phase 1 Awards £2.8m
13	Patient Safety	Sep-13	55	5	TBC	
14	COPD	Sep-13	31	5	TBC	
15	Diabetes	Sep-13	48	6	TBC	
16	Research & Diagnostic tools	Sep-13	44	6	TBC	
17	Mental Health	Sep-13	56	4	TBC	
18	Cardiovascular	Sep-13	27	5	TBC	
19	Renal (DH)	Oct-13	41	14	TBC	Approx. £3.6m
20	Genomic (DH)	Dec-13	35	TBC	TBC	Approx. £10m
21	Phase three offer	Dec-13	10	8	TBC	Approx. £5m
22	Child & Maternal Health	May-14	12	4	TBC	Conditional offers. Phase 1 Awards £2.5m
23	Integrated Care	May-14	37	4	TBC	
24	Medicines Adherence	May-14	59	7	TBC	
25	Musculoskeletal	May-14	42	5	TBC	
26	Tele health/care - Learning Disabilities	May-14	31	6	TBC	
27	Brain Injury	Oct-14	TBC	TBC	TBC	TBC
28	CAMHS	Oct-14	TBC	TBC	TBC	
29	Diabetic Foot Ulcer	Oct-14	TBC	TBC	TBC	
30	Imaging	Oct-14	TBC	TBC	TBC	
31	Outpatient Services	Oct-14	TBC	TBC	TBC	
	TOTALS TO DATE		1284	149	31	£26m contracted

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AHSN/SBRI companies

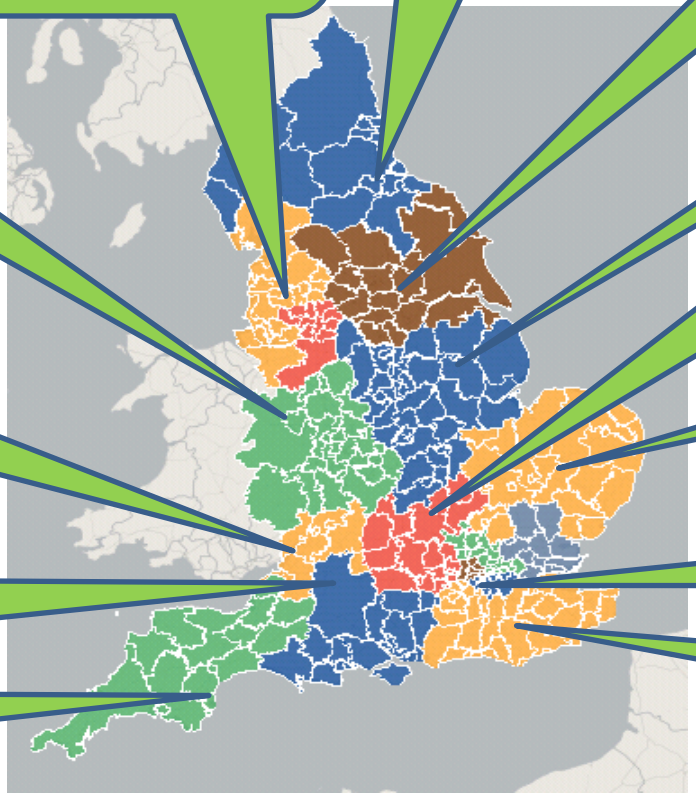
Scotland & N Ireland
Radisens, Edixomed, TwistDX

Grter Manchester & NW Coast
- Sky Med, TrusTECH

North East & North Cumbria
Polyphotonix Ltd

Yorks & Humber
Halliday James Ltd

East Midlands
Monica Healthcare Ltd



West Midlands
SensST Systems, Just Checking Ltd

Oxford -
Eykona, Oxford Biosignals, Message Dynamics

Eastern -
Aseptika, Bespak,

West of England
SentiProfiling

Wessex
CreoMedical, Morgan Automation

S.London, Imperial, UCLP
ABMS, Pintrack, Therakind, UMotiff

SW. Penisula
Frazer Nash

Kent, Surrey & Sussex
Anaxsys, InMezzo

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What the companies say

SBRI enabled Aseptika to see clearly the needs of patients and clinicians, and make a real difference in the care of long-term conditions.

Dr Kevin Auton, MD of Aseptika

The backing and investment from the SBRI competition has been critical

Chris Wood, Chair of Edixomed

SBRI means that Polyphotonix can focus on the important: driving the adoption of a technology that saves the NHS money and improves quality of life for patients

Richard Kirk, CEO of Polyphotonix

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SPARK 2014
SBRI HEALTHCARE INNOVATION EXPO

NHS England

SBRI Healthcare Innovation Expo

QEII Conference Centre, London

10th December 2014

Keynote Speakers include Ian Dodge, National Director of Commissioning Strategy NHS England; Ian Gray, Chief Executive Innovate UK; & Tony Young, National Clinical Director for Innovation NHS England

Register at www.sbrihealthcare.co.uk/spark-2014

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The application process

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Application Process

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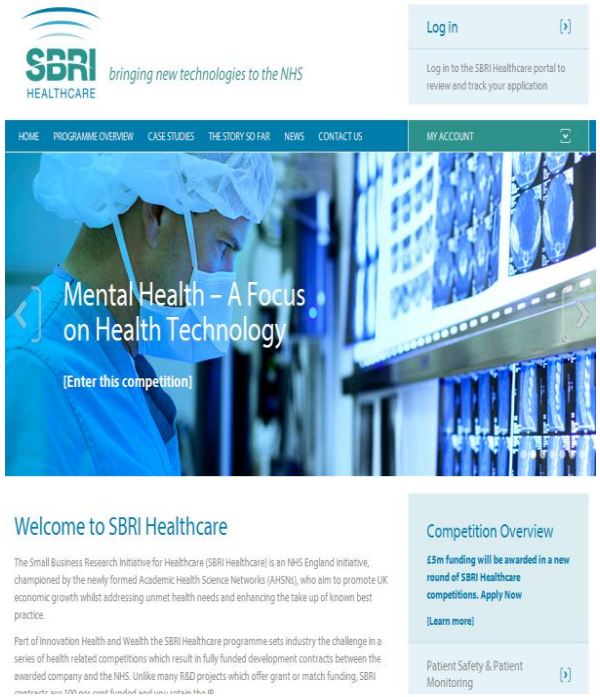

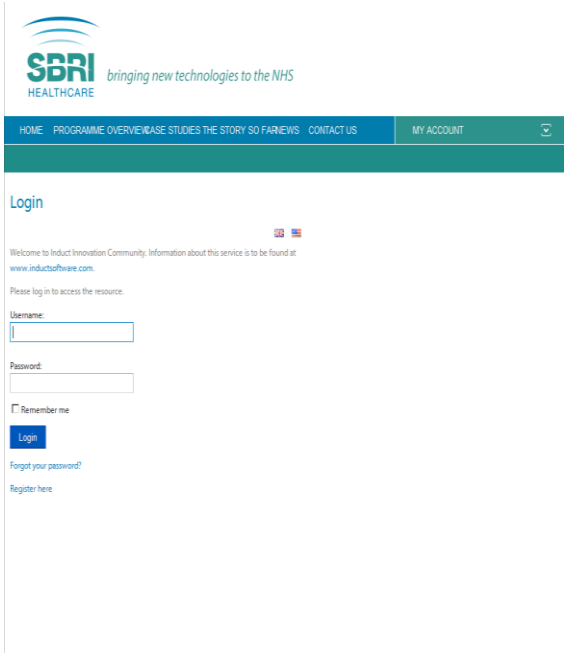

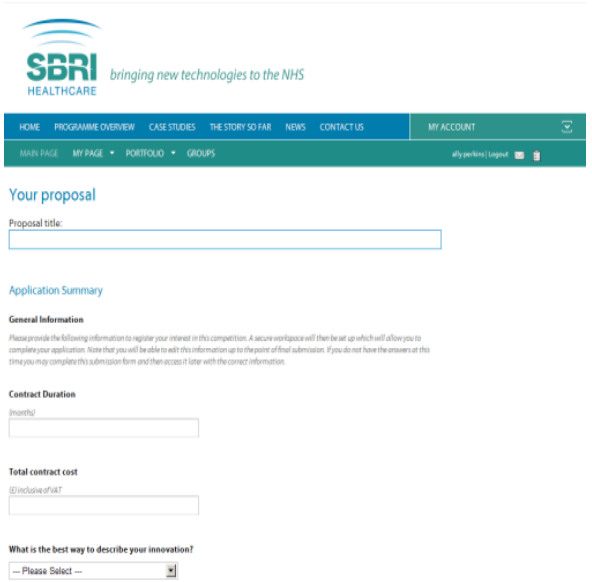

Application Process

Welcome to SBRI Healthcare portal. From here you can track your application or, if you are an assessor, access your assessments.

Applicants

My Applications [›]

Phase 1 Apply Now [›]

Assessors

My Reviews [›]

Don't forget...

The SBRI has competitions starting all the time, plus news and more.

[Go there now]

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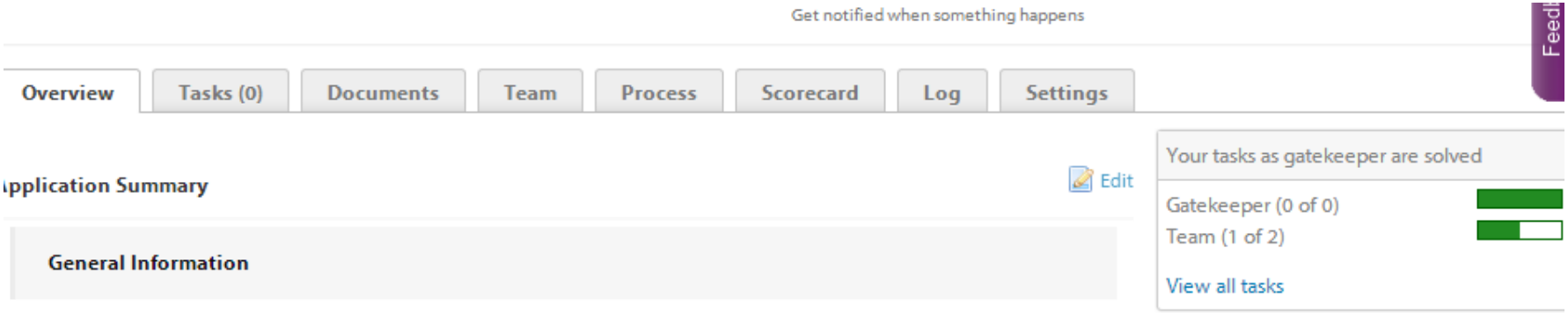
Application Process



Application Process

Overview | **Tasks (3)** | Documents | Team | Process | Scorecard | Log | Settings

Show tasks for Current stage ▾ Create a new tas

Gatekeeper tasks

No tasks

Lead Applicant tasks

No tasks

Team tasks

	Assigned to	Deadline	Status
Download Guidance Documents	Nick Offer	-	Not solved
Complete Company Details	Nick Offer	-	Not solved
~~Complete SBRI Application~~	Nick Offer	-	Solved (16/05/2014)
Declaration	Nick Offer	-	Not solved

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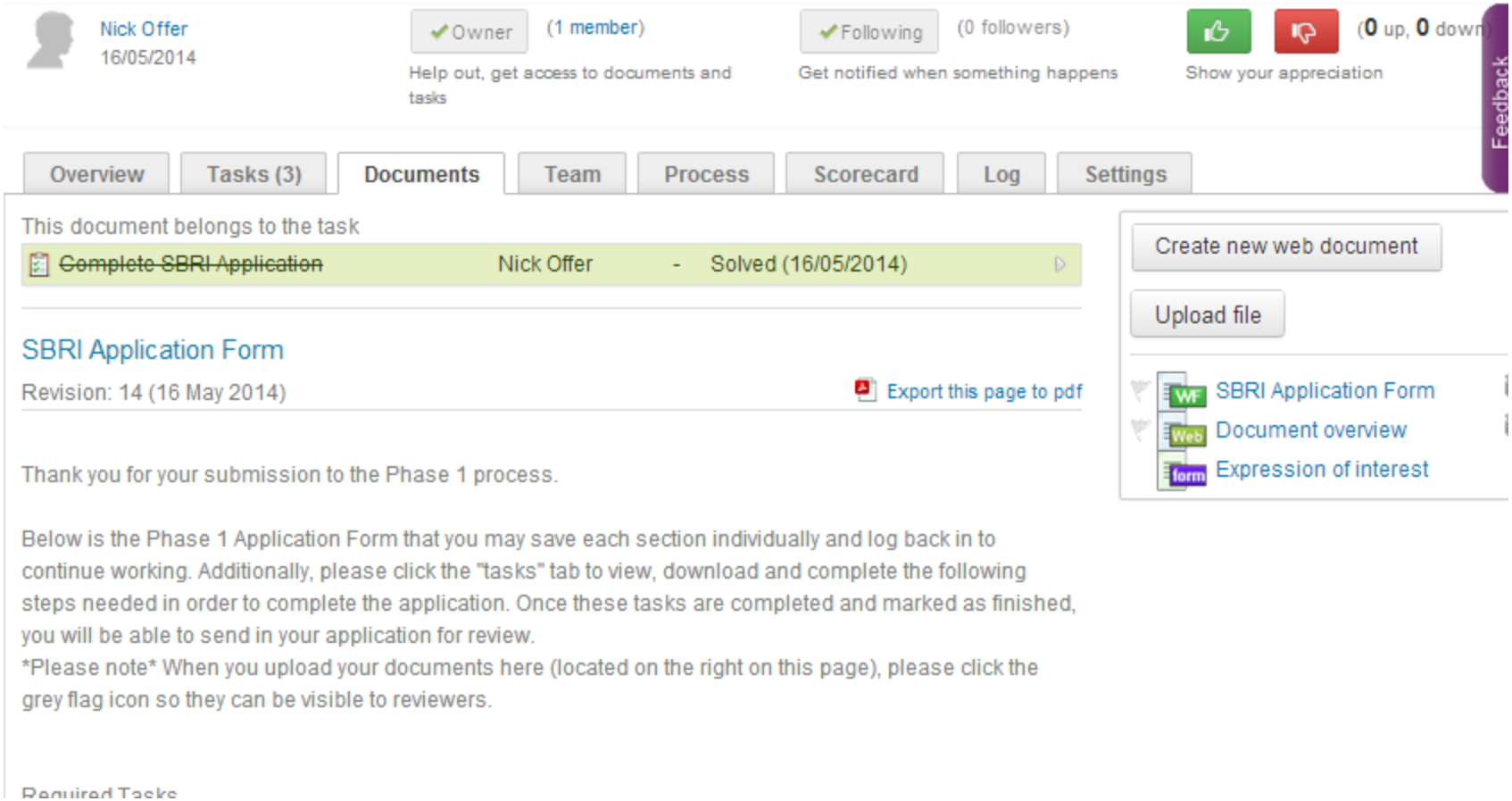
Application Process



Assessment Phase Timelines

- Close competition, noon on 9th December
- Review compliance (Dec)
- Assessment packs assigned and issued to Technical Assessors (Dec)
- Each application reviewed & scored by 3 Technical Assessors (Jan)
- Assessment of long-list applications at panel meeting involving clinical leads (Jan)
- Production of rank ordered list for interview (Jan)
- Interview panels to select final winners (Feb)
- Draft and issue contracts (Mar)
- Feedback to unsuccessful applicants (Mar)
- Publish contracts awarded (Mar)

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Assessment Criteria

1. What will be the effect of this proposal on the challenge addressed?
2. What is the degree of technical challenge? How innovative is the project?
3. Will the technology have a competitive advantage over existing/alternate technologies that can meet the market needs?
4. Are the milestones and project plan appropriate?
5. Is the proposed development plan a sound approach?
6. Does the proposed project have an appropriate commercialisation plan and does the size of the market justify the investment?
7. Does the company appear to have the right skills and experience to deliver the intended benefits?
8. Does the proposal look sensible financially? Is the overall budget realistic and justified in terms of the aims and methods proposed?

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Key Points to Remember

- Research and define the market/patient need
- Review the direct competitor landscape and make sure you define your USP
- Consider your route to market, what is the commercialisation plan? Do you know who your customer will be, how will you distribute, how much will you charge for the product/service?
- How will the project be managed (what tools will you use, how will the team communicate etc)
- Provide a clear cost breakdown
- Make sure you answer all of the questions in sufficient detail
- Try not to use too much technical jargon, sell the project in terms the NHS will understand (outcomes, benefits to patients etc)

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