

# SBRI Healthcare 2018 Data Capture

## Score Card Trends & 2018 Survey



# SBRI Healthcare

## Score Card Trends



# Score Card Trends: 2015 - 2018

The score card collates data from both companies' quarterly progress reports and their responses to the annual survey.

## SBRI HEALTHCARE - BALANCED SCORE CARD

Last Updated: 20 August 2015

Competition management	2014-15
Competitions run	10
Contracts awarded (number)	60
Contracts awarded (value)	£22.4 milli
Phase 1 conversion rate (avg.)	10.5%
Comments	
NHS benefits by competition round*	Total
Potential savings from Spring 2015	Phase 1 a
Potential savings from Autumn 2014	Repaid d
Potential savings from Spring 2014	TBC
Potential savings from Autumn 2013	£633 mll
Comments	*All values taken from independent of SBRI. Assessments take place du potential cost savings based on a re
Knowledge and business opportunities created	Total
NICE approvals	none
Approx. number new IP applications	31
Approx. number finalised agreements with other companies (UK and abroad)	36
Comments	
Economic Value	Total
Jobs created/safeguarded	231
Amount of additional funding leveraged by SBRI Healthcare funded companies	£40 million
No of companies exporting SBRI Healthcare funded products	2 (Fuel 3D, Healthcare funded products
No of SBRI Healthcare funded products on the market:	17

## SBRI HEALTHCARE - BALANCED SCORE CARD

Last Updated: 28 June 2016

Competition management	2013-13	2013-14
Competitions run	1	7
Applications received	49	455
P1 Contracts awarded (number)	5	43
P1 Contracts awarded (value)	£0.4m	£4.2m
Success rate into Phase 1 (avg.)	10.2%	9.45%
P2 Contracts awarded (number)	3	5
P2 Contracts awarded (value)	£1.4m	£10.9m
Possible NHS/LA benefits by competition round*	Autumn 2013 (n=35)	Spring 2014 (n=26)
Annual savings forecast	TBC	£424m
No. of likely patients treated	TBC	4m
Comments	*All values taken from assessments during phase 1 com on behalf of SBRI. Assessments are early indicators of p on likely market penetration of between 5-25% (avg. 15%)	
Knowledge and business opportunities created *	Total	
NICE approvals	1 (Sky Medical) NB: only 5 submitted	
Approx. number new IP applications	47 (31)	
Approx. number finalised agreements with other companies (UK and abroad)	50 (36)	
Comments	*Numbers taken from OHE survey in 2014, updated wit	
Economic Value:	Total	
Jobs created/safeguarded	182/237 (419)	
Amount of additional funding leveraged by SBRI Healthcare funded companies	£45m	
No of companies exporting SBRI Healthcare funded	11 (2) (Fuel 3D, <del>Other, <del>Advanced Therapeutic materials,</del></del>	

## SBRI HEALTHCARE - BALANCED SCORE CARD Last Updated: 5 July 2017

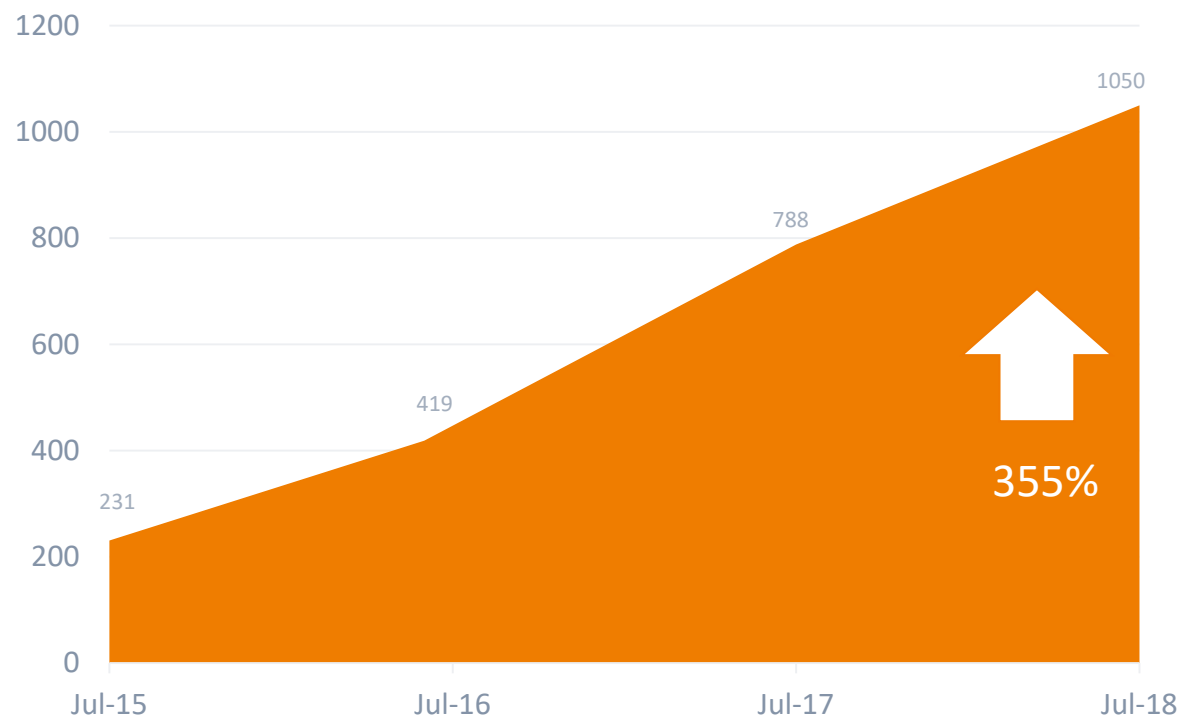
Competition management	2012-13	2013-14	2014-15	2015-16
Competitions run	1	7	10	6
Applications received	49	455	382	258
P1 Contracts awarded (number)	5	43	40	26
P1 Contracts awarded (value)	£0.4m	£4.2m	£3.8 m	£2.3m
Success rate into Phase 1 (avg.)	10.2%	9.45%	10.5%	10.1%
P2 Contracts awarded (number)	5	16	20	18
P2 Contracts awarded (value)	£1.4m	£10.9m	£18.5m	£15.2m
Possible NHS/LA benefits by competition round*		Autumn 2013 (n=35)	Spring & Autumn 2014 (n=40)	Spring Autumn (n=26)
Annual savings forecast		£510 million	£722m	£180m
No. of likely patients treated		23m	3.5m	15m
Comments	*All values taken from assessments during phase 1 completed by indepe on behalf of SBRI. Assessments are early indicators of potential net cost on likely market penetration of between 5-25% (avg. 15%) depending or			
Knowledge and business opportunities created *	Total			
NICE approvals	1 (Sky Medical) NB: only 5 submitted			
Approx. number new IP applications	135			
Approx. number of patients benefitting (trials/sales)	704,000 (23,000/681,000)			
Approx. number of sites (trial/sales)	778 (522/256)			
Approx. number finalised agreements with other companies (UK and abroad)	357 (50)			
Comments	*Numbers taken from OHE survey in 2014, updated with HEE survey Jun			
Economic Value+	Total			
Jobs (created/safeguarded)	788 (376/412)			
Amount of additional funding	£105m			

## SBRI HEALTHCARE - BALANCED SCORE CARD Last Updated: July 2018

Competition management	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19
Competitions run	1	7	10	6	8	8	2
Applications received	49	455	382	258	433	265	
P1 Contracts awarded (number)	5	43	40	26	39	22	
P1 Contracts awarded (value)	£0.4m	£4.2m	£3.8 m	£2.3m	£3.12m	£1.75m	
Success rate into Phase 1 (avg.)	10.2%	9.45%	10.5%	10.1%	9.00%	8.3%	
P2 Contracts awarded (number)	5	16	20	18	12	20	
P2 Contracts awarded (value)	£1.4m	£10.9m	£18.5m	£15.2m	£7.75m	£11.5m	
Possible NHS/LA benefits by competition round*		Autumn 2013 (n=35)	Spring & Autumn 2014 (n=40)	Spring & Autumn 2015 (n=26)	Spring 2016 (n=17)		
Annual savings forecast		£510 million	£722m	£180m	£444m (SBRI 11 only)		
No. of likely patients treated		23m	3.5m	15m	18m (SBRI 11 only)		
Comments	*All values taken from assessments during phase 1 completed by independent health economists on behalf of SBRI. Assessments are early indicators of potential net cost savings per annum based on likely market penetration of between 5-25% (avg. 15%) depending on the technology.						
Knowledge and business opportunities created *	Total						% increase since last report
NICE approvals	1 (Sky Medical) NB: only 5 submitted						Awaiting 2018 survey results
Approx. number new IP applications	135						Awaiting 2018 survey results
Approx. number of patients benefitting (trials/sales)	704,000 (23,000/681,000)						Awaiting 2018 survey results
Approx. number of sites (trial/sales)	778 (522/256)						Awaiting 2018 survey results

# Score Card Trends: 2015 - 2018

Jobs created & safeguarded

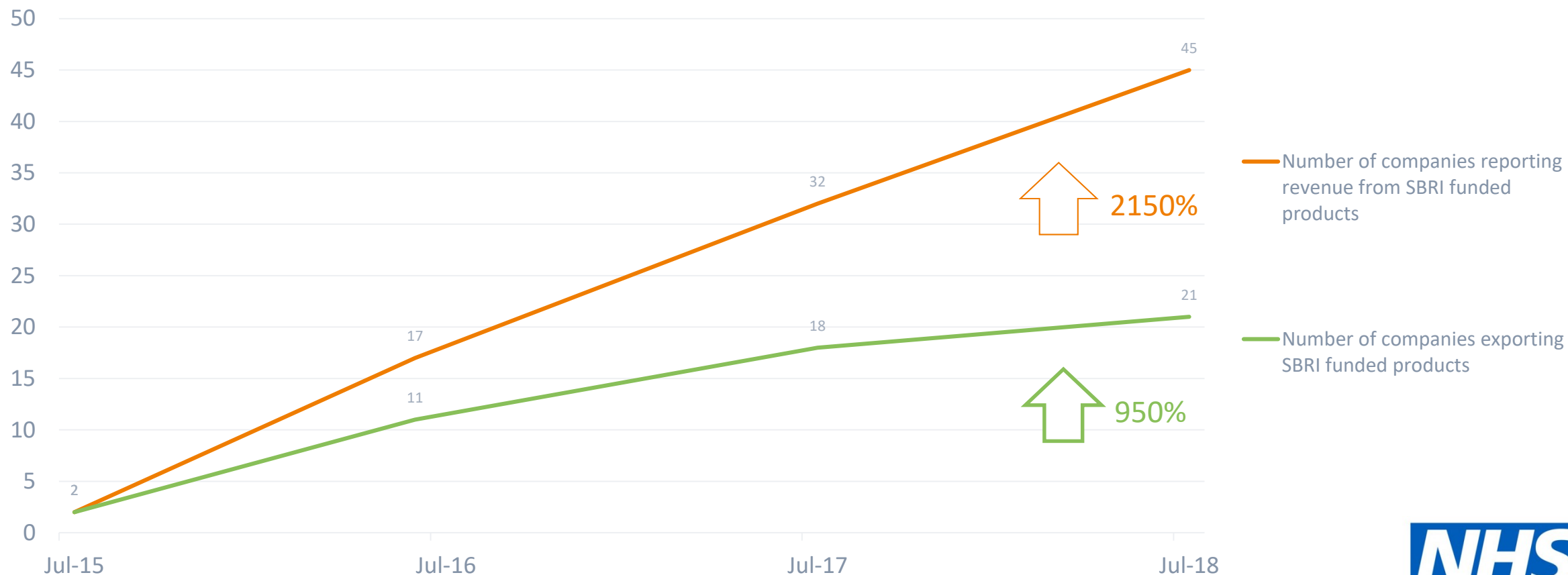


Funding Leveraged (£M)



# Score Card Trends: 2015 - 2018

## Companies reporting commercial activity







# SBRI Healthcare

## 2018 Survey



*The***AHSN***Network*



**England**

# Definitions

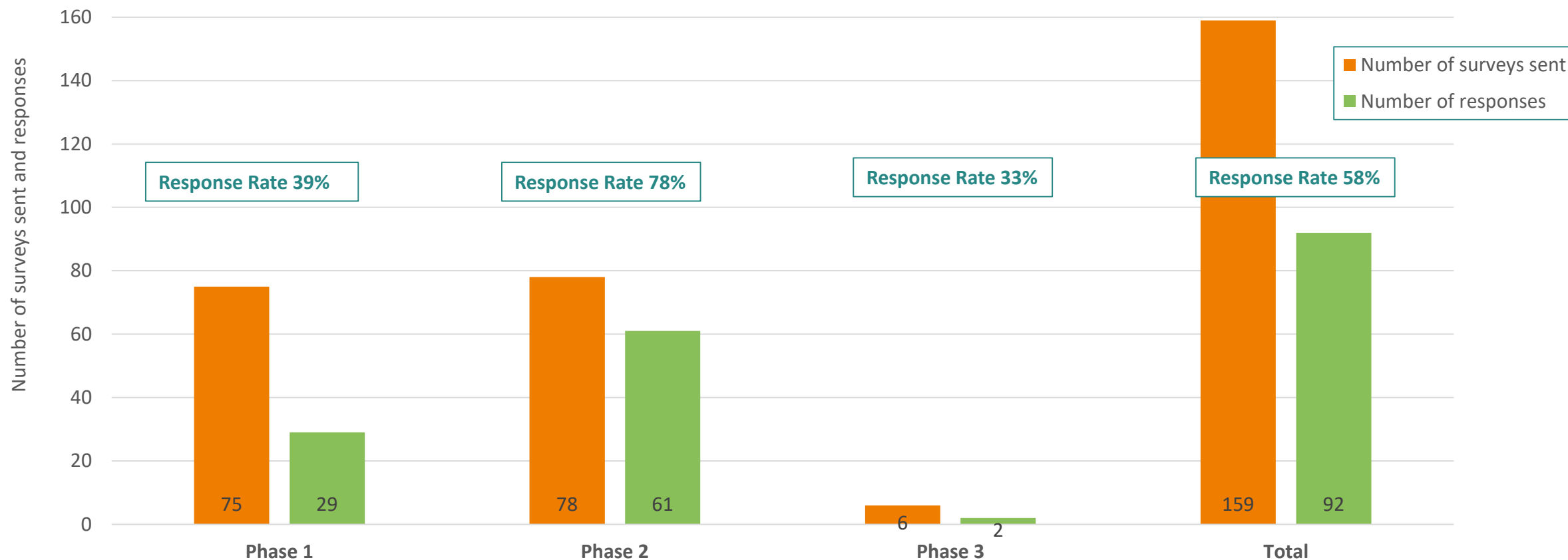
**Phase 1** = Companies which are either working on Phase 1 and are waiting Phase 2 decision, or companies which completed Phase 1 but were unsuccessful in getting Phase 2

**Phase 2** = Companies which are either working on Phase 2, or have completed Phase 2

**Phase 3** = Companies which have completed Phase 3

# Response Rate

Number of surveys sent, responses & response rate

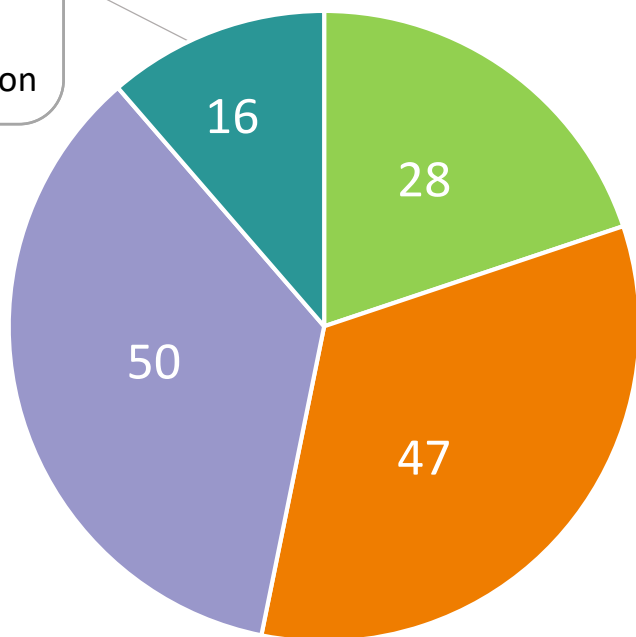




# Innovation type and focus

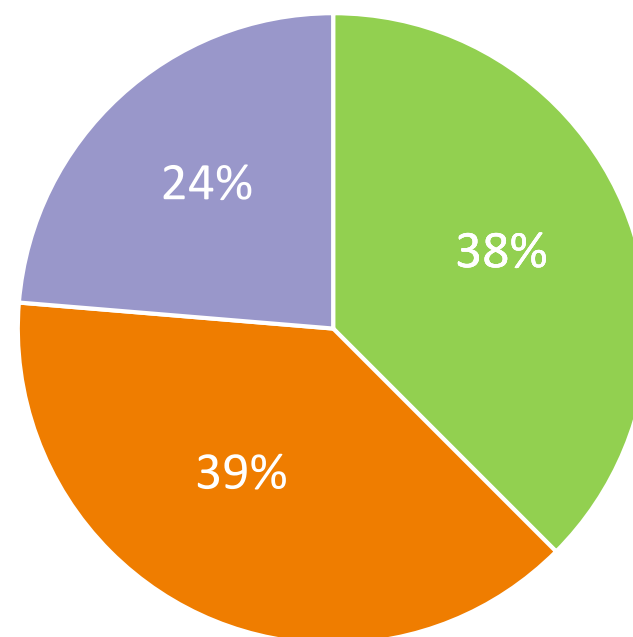
Risk stratification  
Self-care  
Hospital flow  
Elderly care  
Online consultation

Innovation type



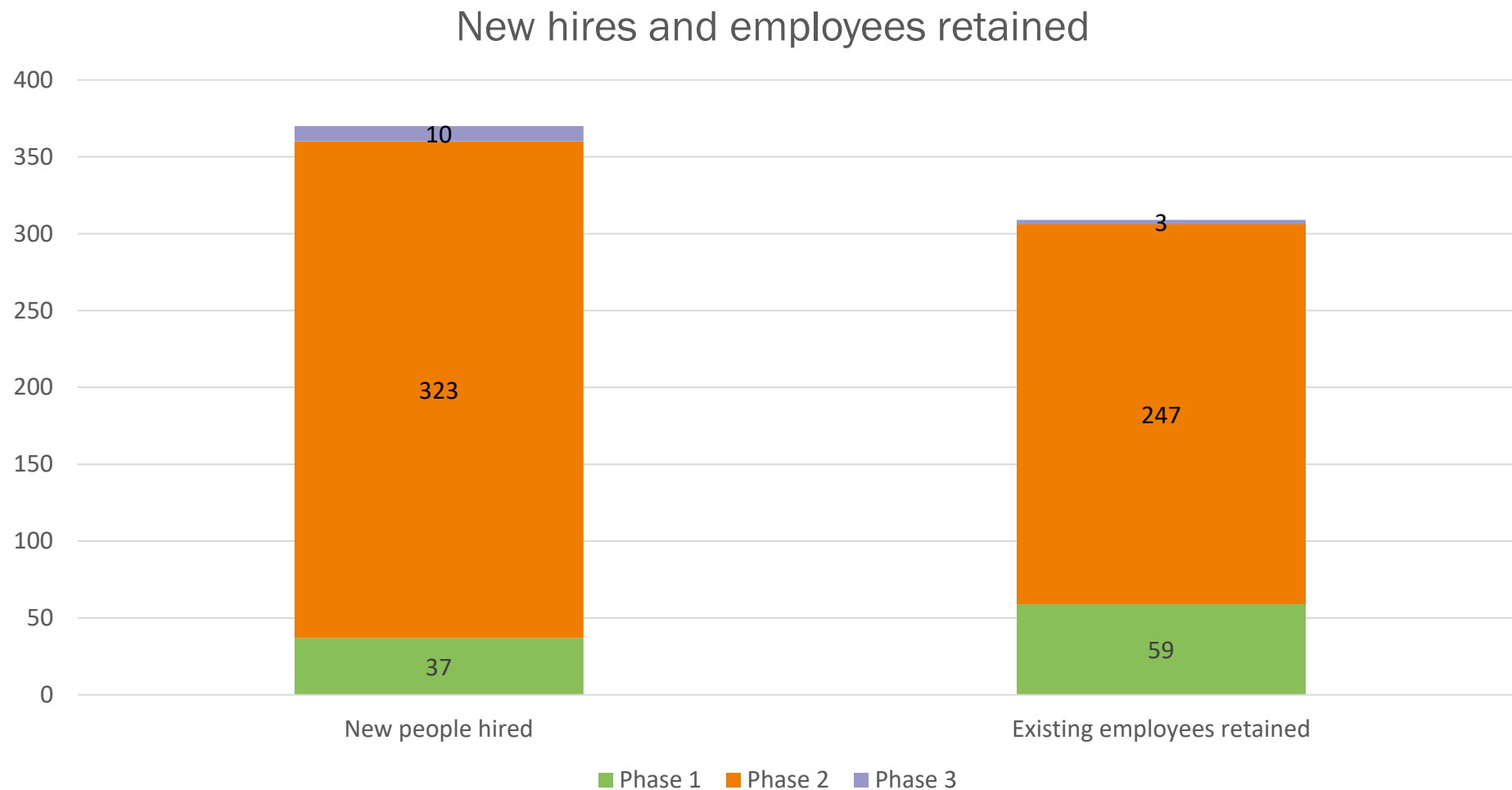
■ Screening ■ Intervention ■ Management ■ Other (please specify)

Intended application focus



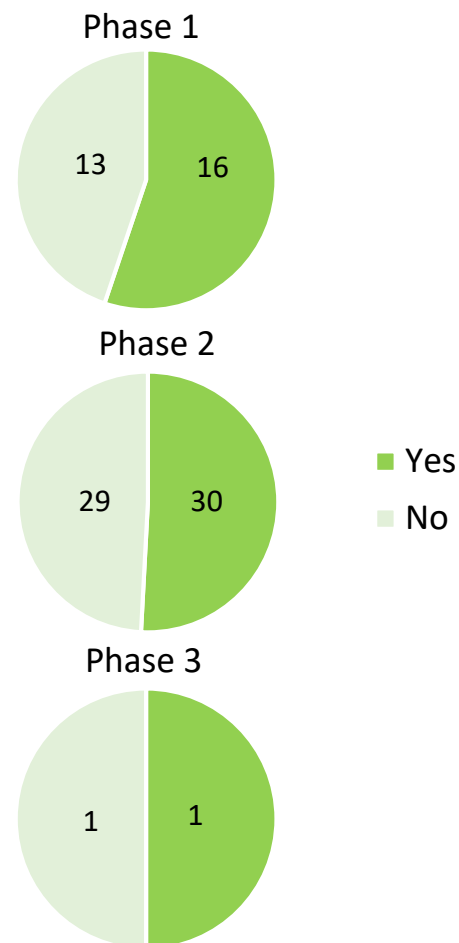
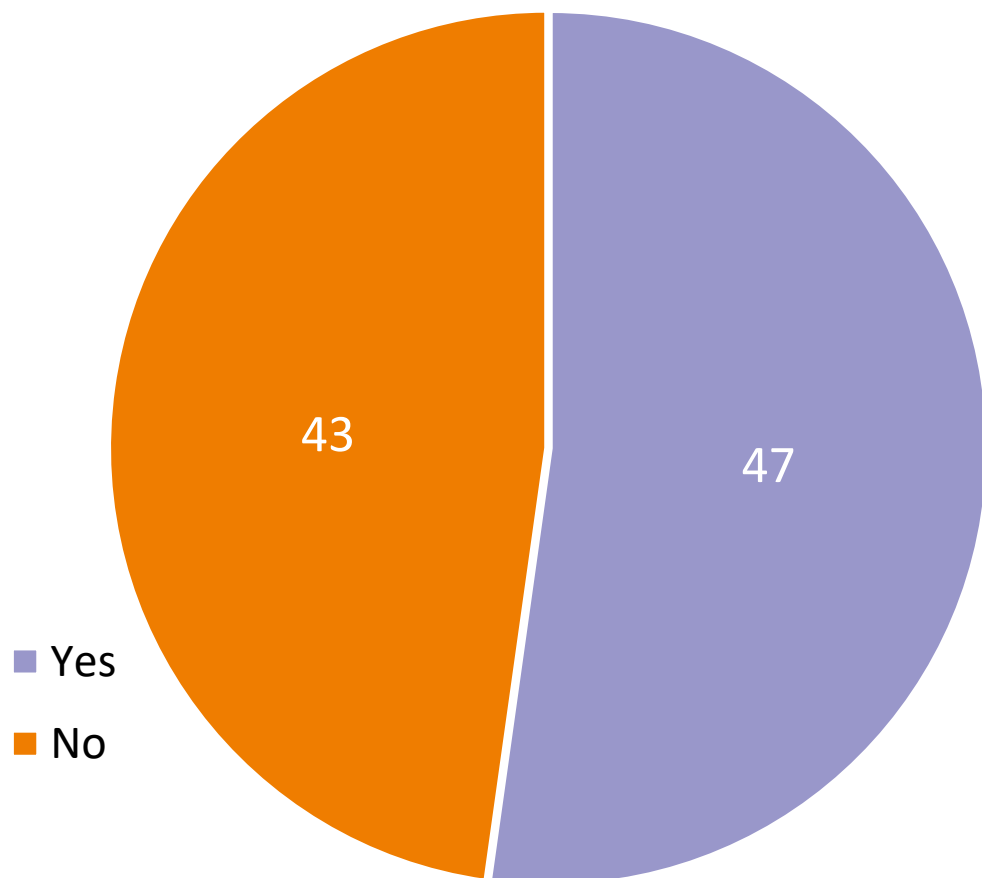
■ Primary care ■ Secondary care ■ Self care

# Employment as a result of SBRI Healthcare funding



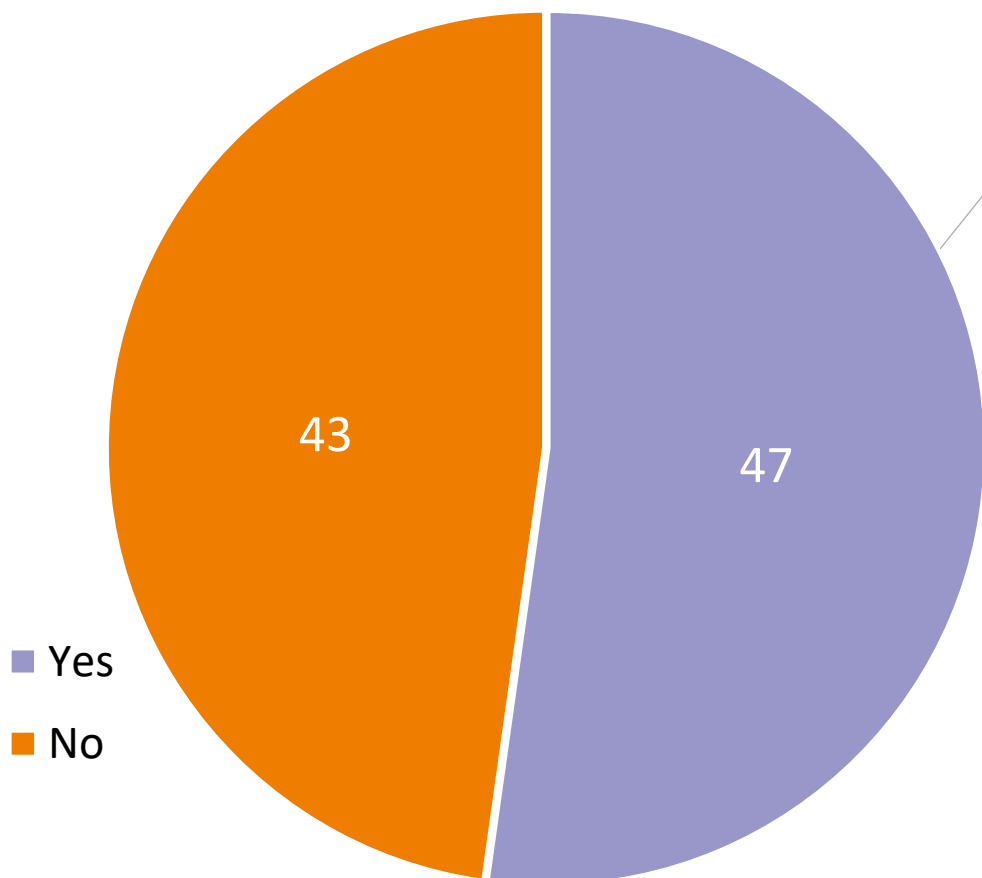
# Companies securing additional investment

Have companies secured additional Investment?

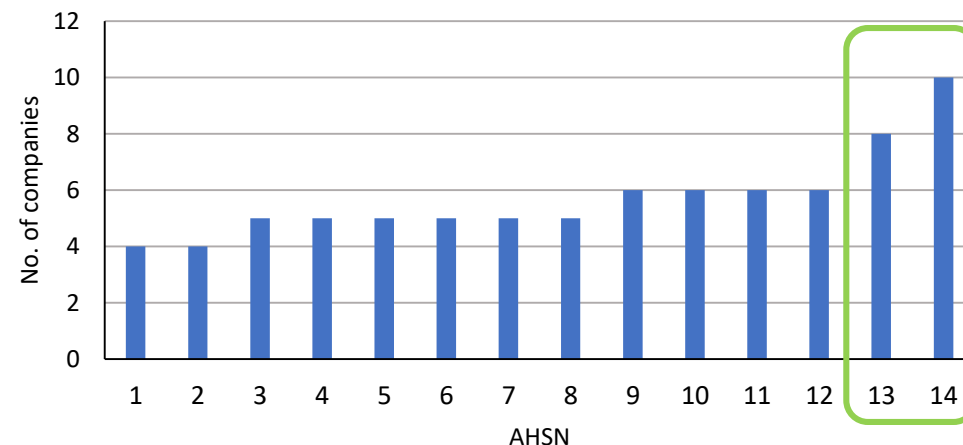


# Companies securing additional investment

Have companies secured additional Investment?



Which AHSNs are you interacting with?

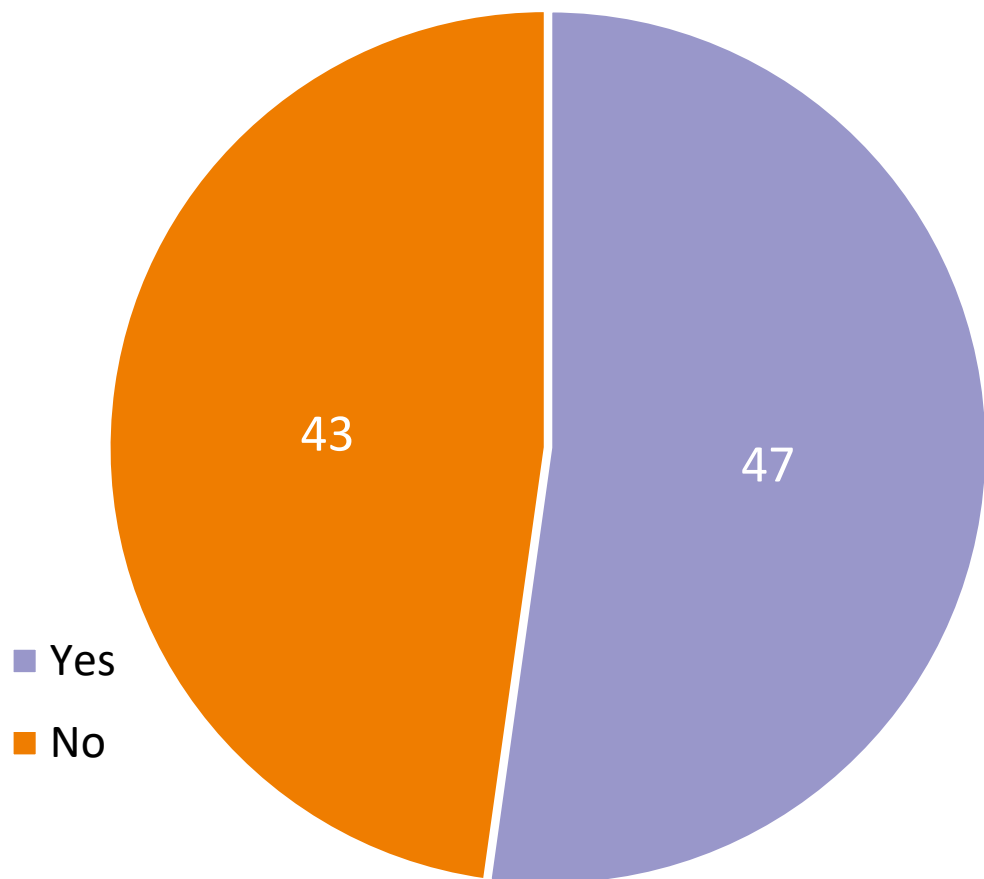


1- Kent, Surrey and Sussex  
2- Wessex  
3- East Midlands  
4- Greater Manchester  
5- North West coast (IA)  
6- South West Peninsula  
7- UCL Partners  
8- West Midlands

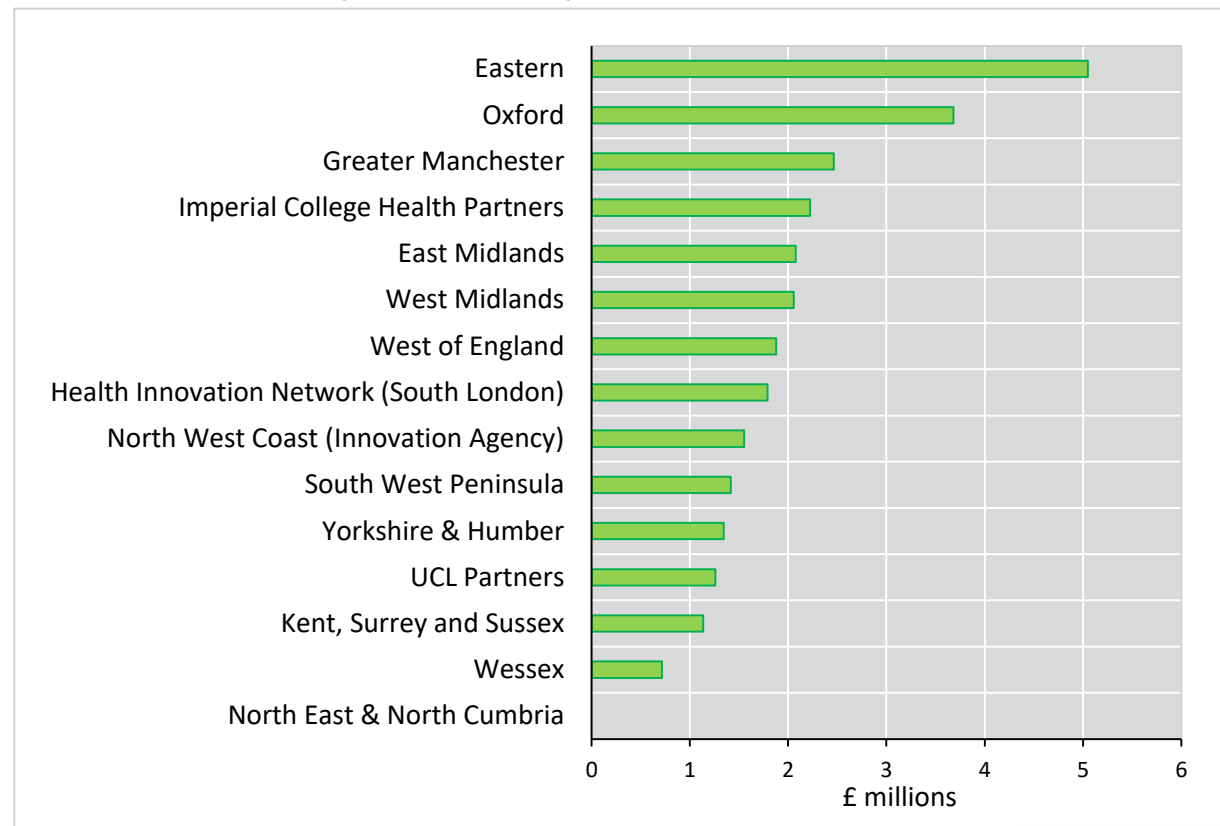
9- Imperial College Health Partners  
10- Oxford  
11- West of England  
12- Yorkshire & Humber  
13- Health Innovation Network  
14- Eastern

# Companies securing additional investment

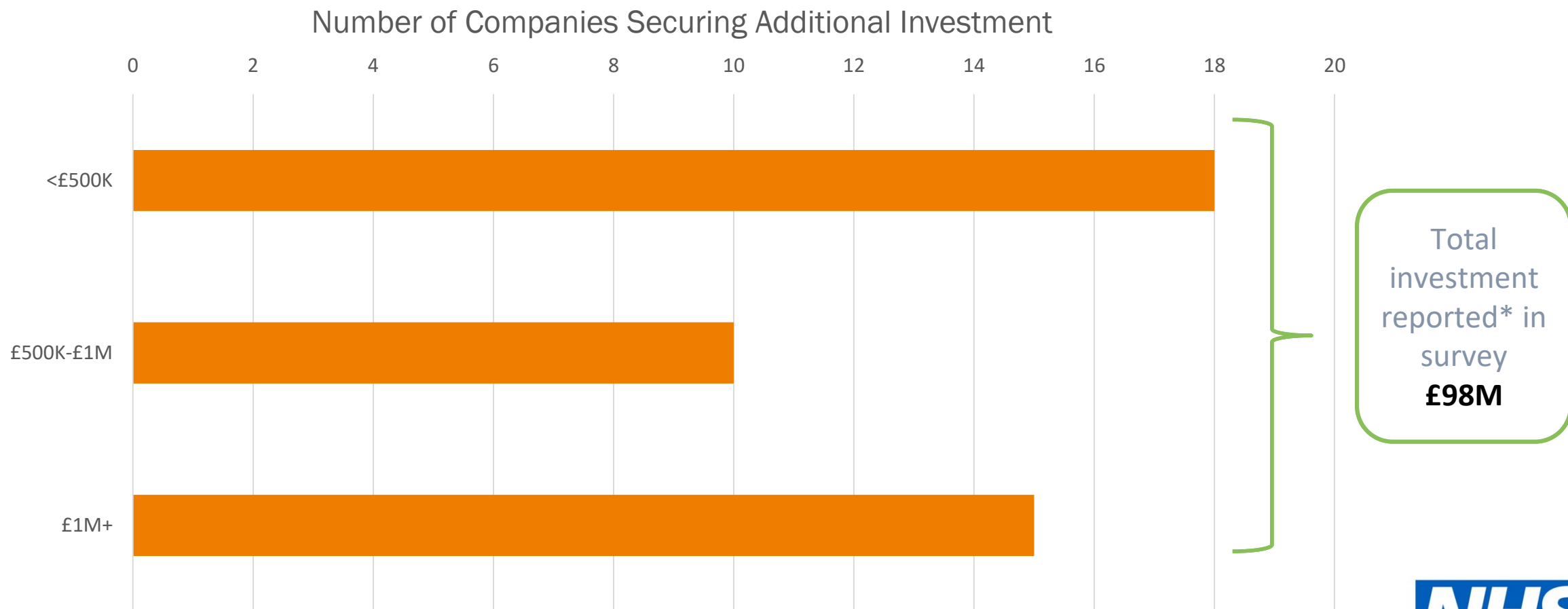
Have companies secured additional investment?



Which AHSNs are working with companies securing investment, and how much (cumulative)?



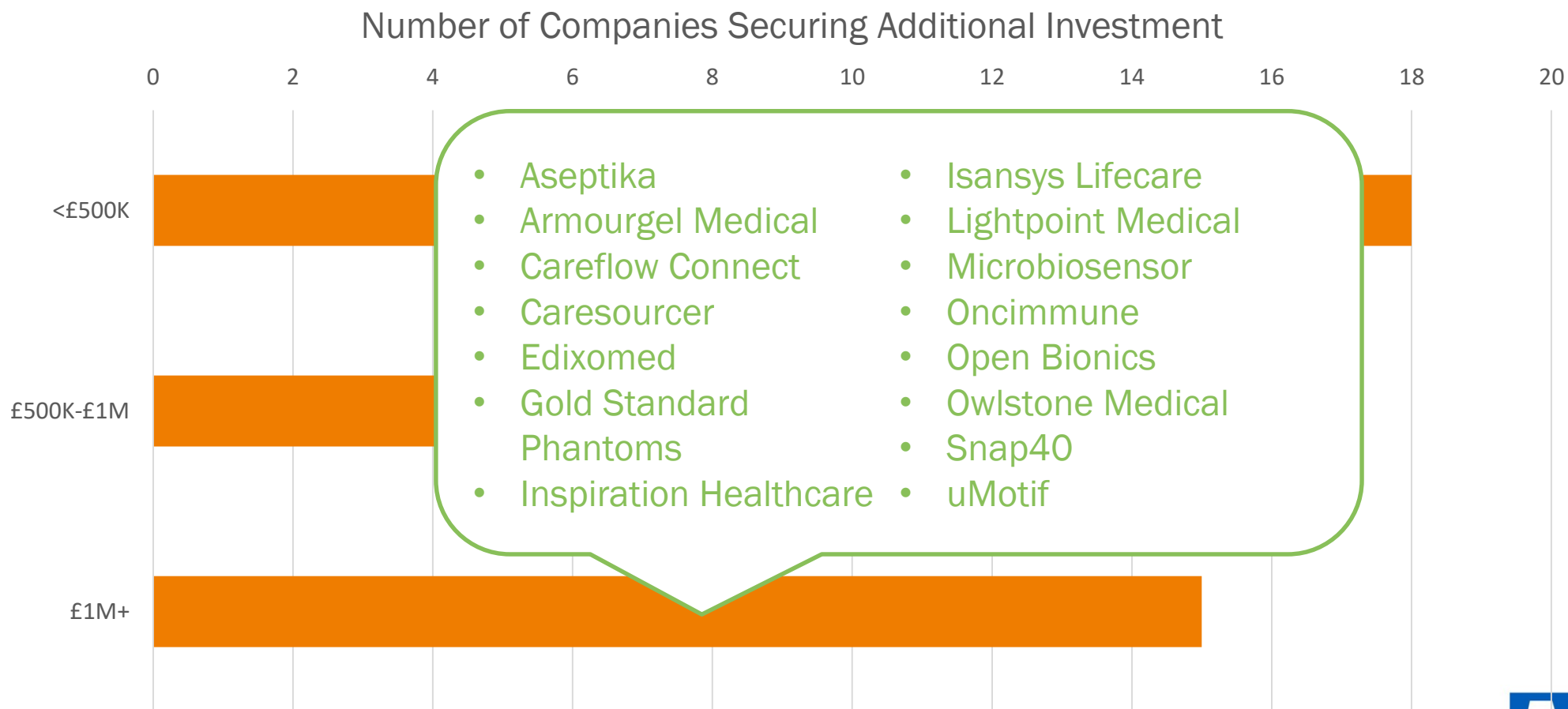
# Companies securing additional investment



\*not all respondents provided revenue figures

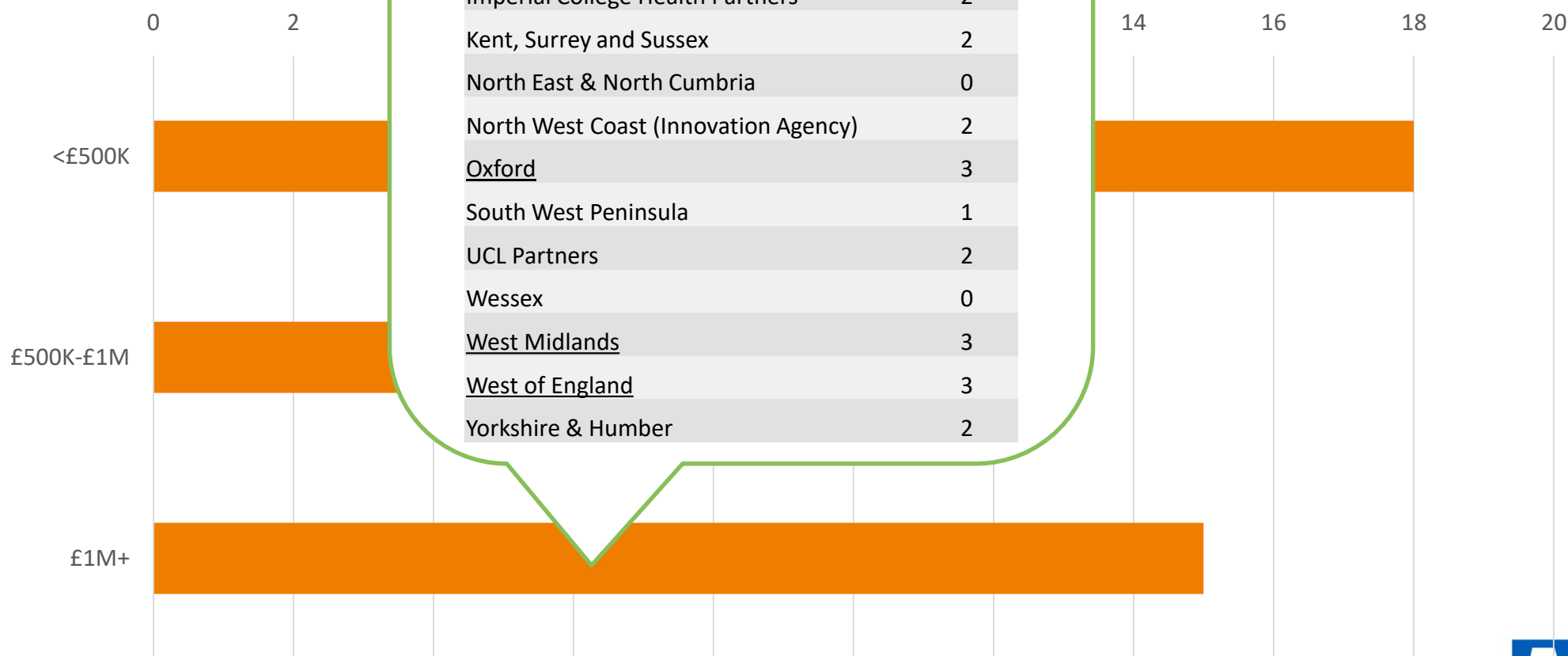


# Companies securing additional investment



Company

investment



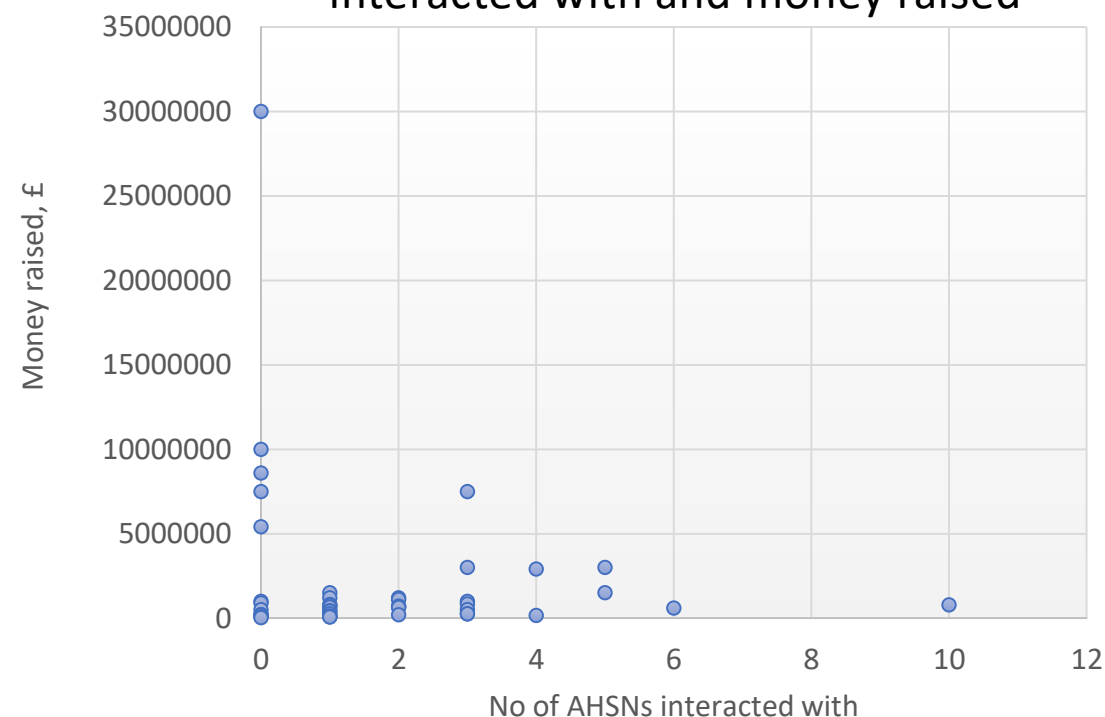
# Chances of securing funding correlated with number of AHSNs interacted with

Average number of AHSNs interacted with for companies that secured additional funding: **1.79**

Average number of AHSNs interacted with for companies that did not secure additional funding: **1.79**

There is no correlation between the amount of additional funding secured and the amount of AHSN interaction.

Relationship between no. of AHSNs interacted with and money raised



# Reasons additional funds were not raised (Phase 1)

Three Phase 1 companies did not seek additional funding

Two companies stated that  
“Technology/service considered too early stage by investors”

“Regarding VC investment ...We are in advanced negotiations with one of them and we have already received a term-sheet which we are currently examining before we move forward with the investment.” DeepMed IO Ltd

One company, Elaros Ltd, is waiting on the results of an Innovate UK bid

Three companies did not obtain stage 2 funding.

“In the process of securing funds!” VODCA Ltd

# Reasons additional funds were not raised (Phase 2)

Fourteen Phase 2 companies did not seek additional funding

Five companies stated that “Technology/service considered too early stage by investors”

“We were considered too early until now, but are now fundraising thanks to SBRI allowing us to make sufficient progress and de-risk investment.” Xim

Aseptika talked about their struggles with NICE adoption and NIHR funding requiring substantial clinical trials data, which in itself is difficult to fund. They will first export to international markets.

“Tactical - aiming to partner with larger diagnostic company” Biovici

“By itself the SBRI funding is not enough. Investment, for us, is most about NHS adoption of technology products and services” Docobo Ltd.

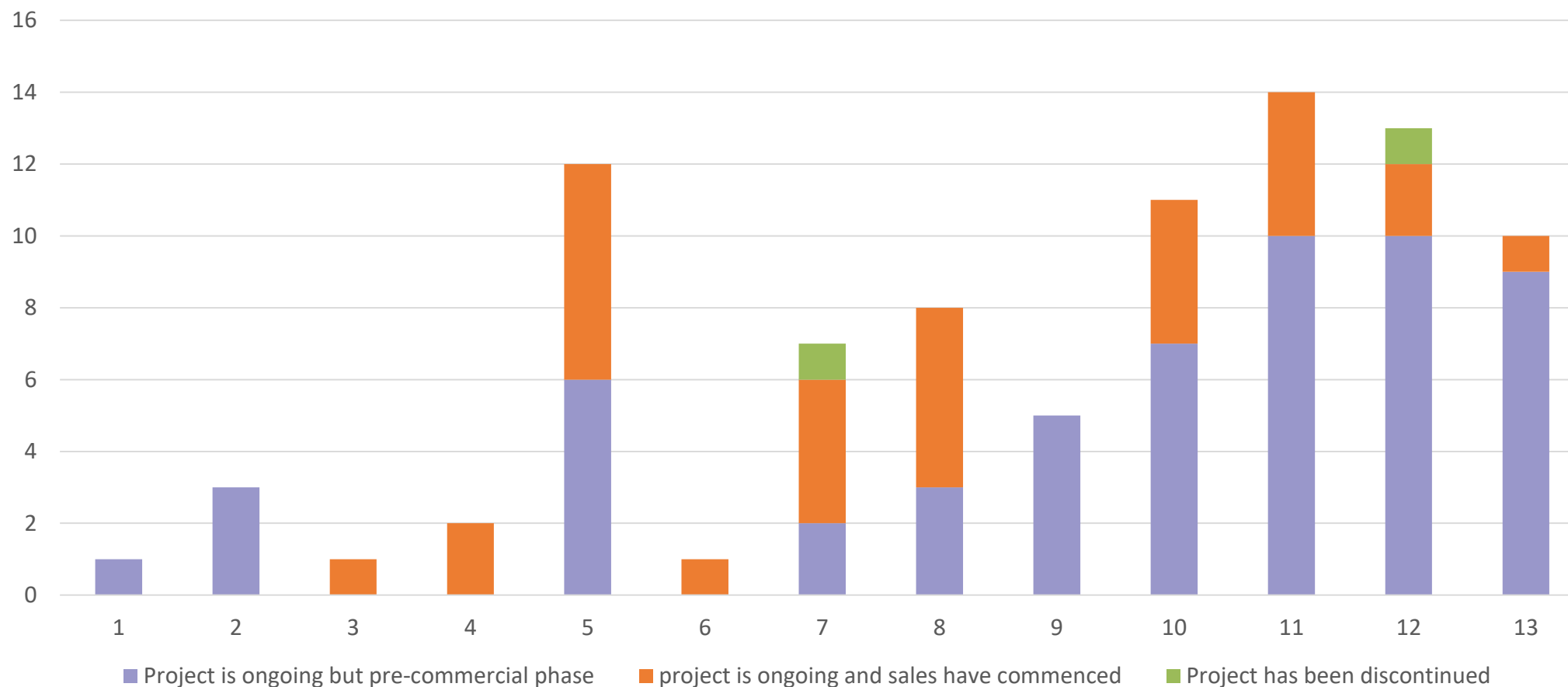
“External investment is currently being sought...Also potential partnership with large diagnostic company under discussion” Medtechtomarket Consulting Ltd.

## What stages are companies at?

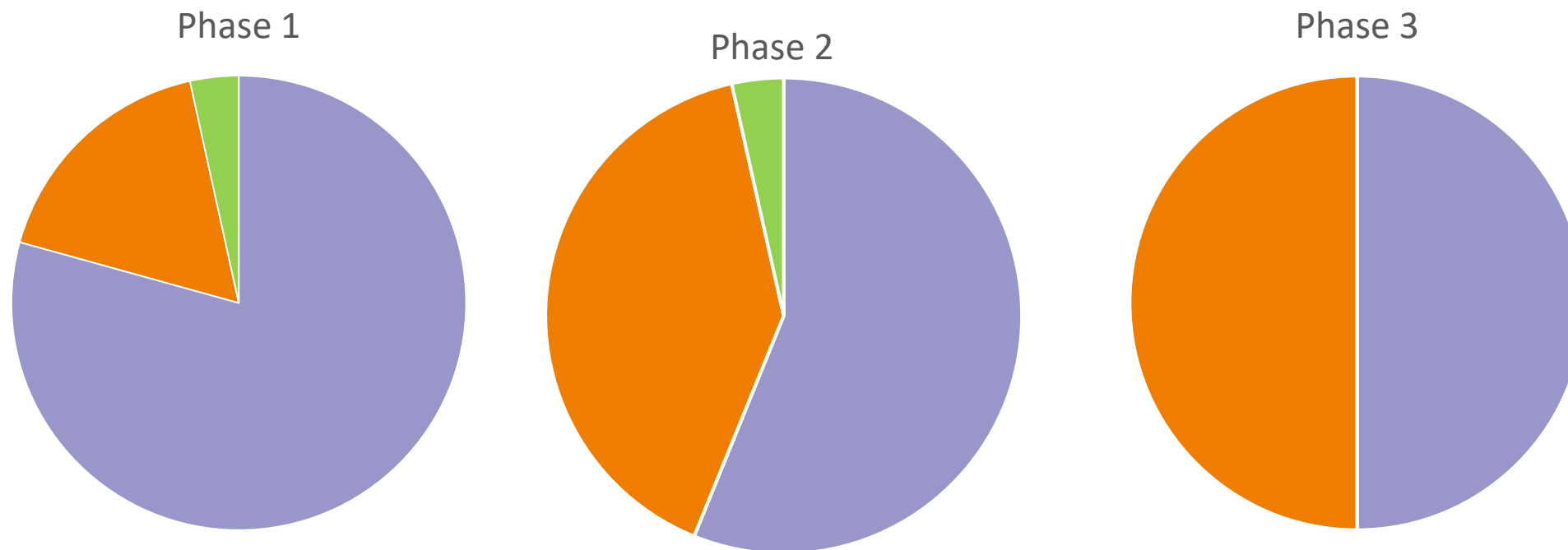
- A. Project is ongoing but pre-commercial stage
- B. Project is ongoing and sales have commenced
- C. Project has been discontinued



# What stages are projects at (by SBRI round)?



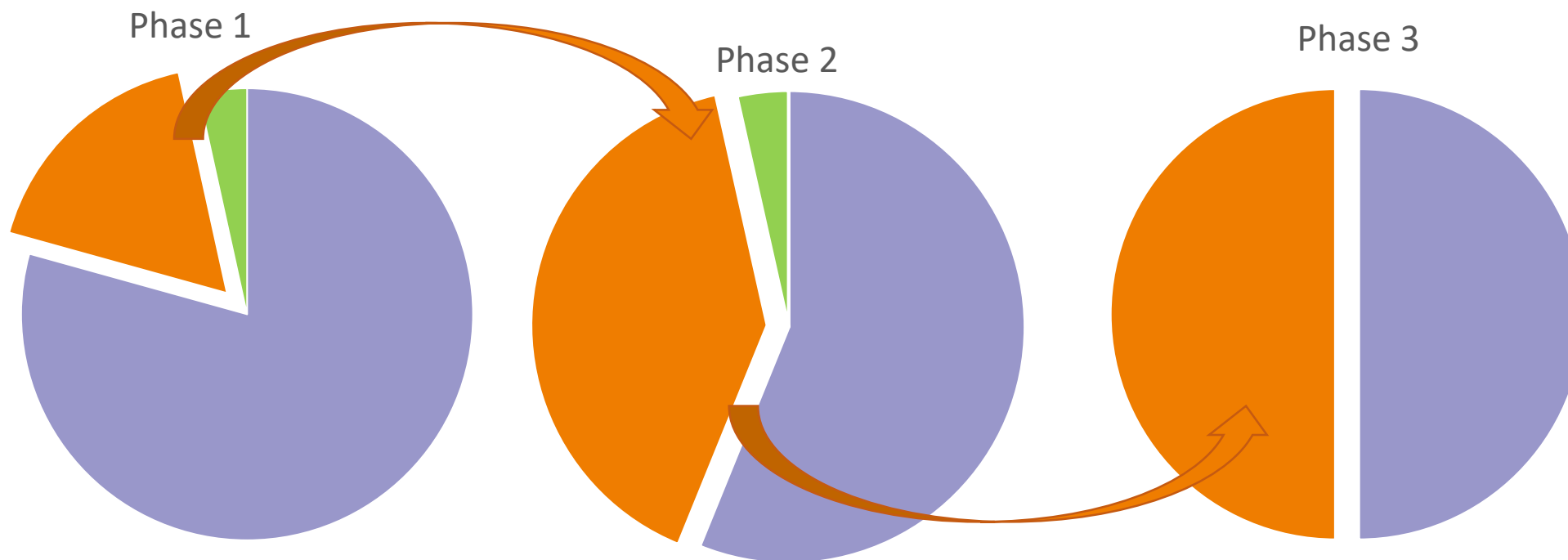
# What stages are projects at (by phase)?



- Pre-commercial
- Sales have commenced
- Discontinued

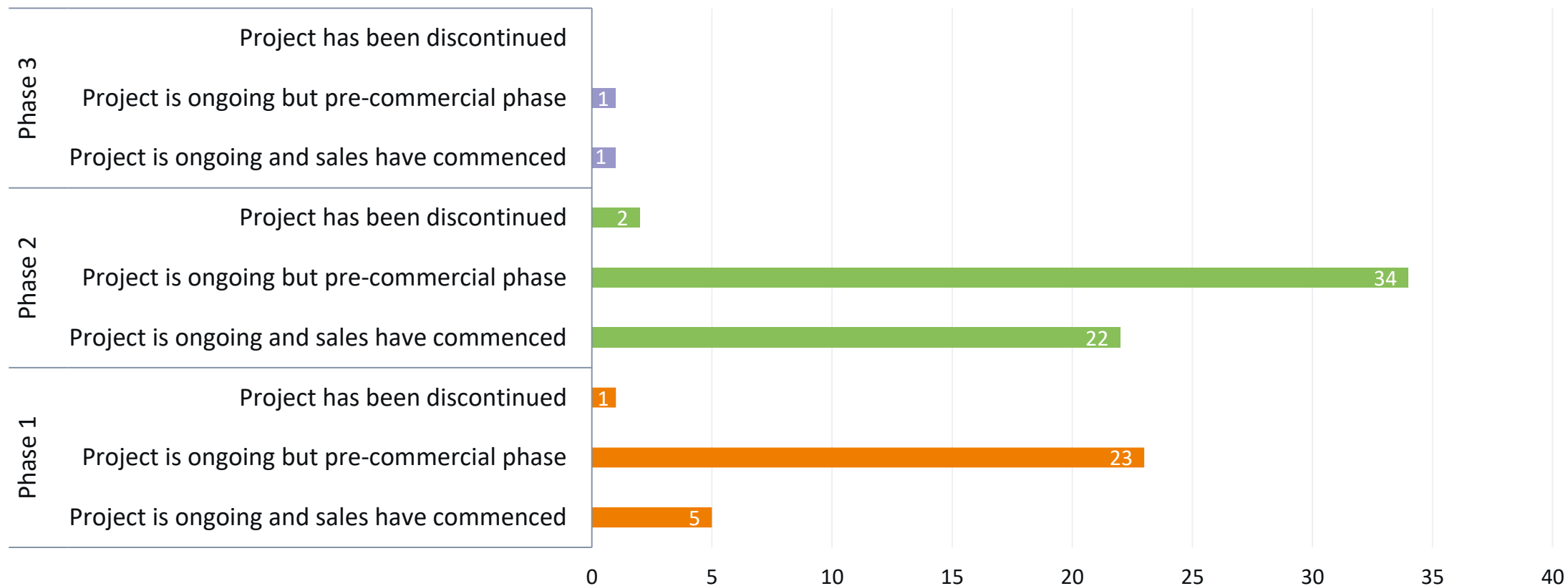
# What stages are projects at (by phase)?

Increase in commencement of sales with phase

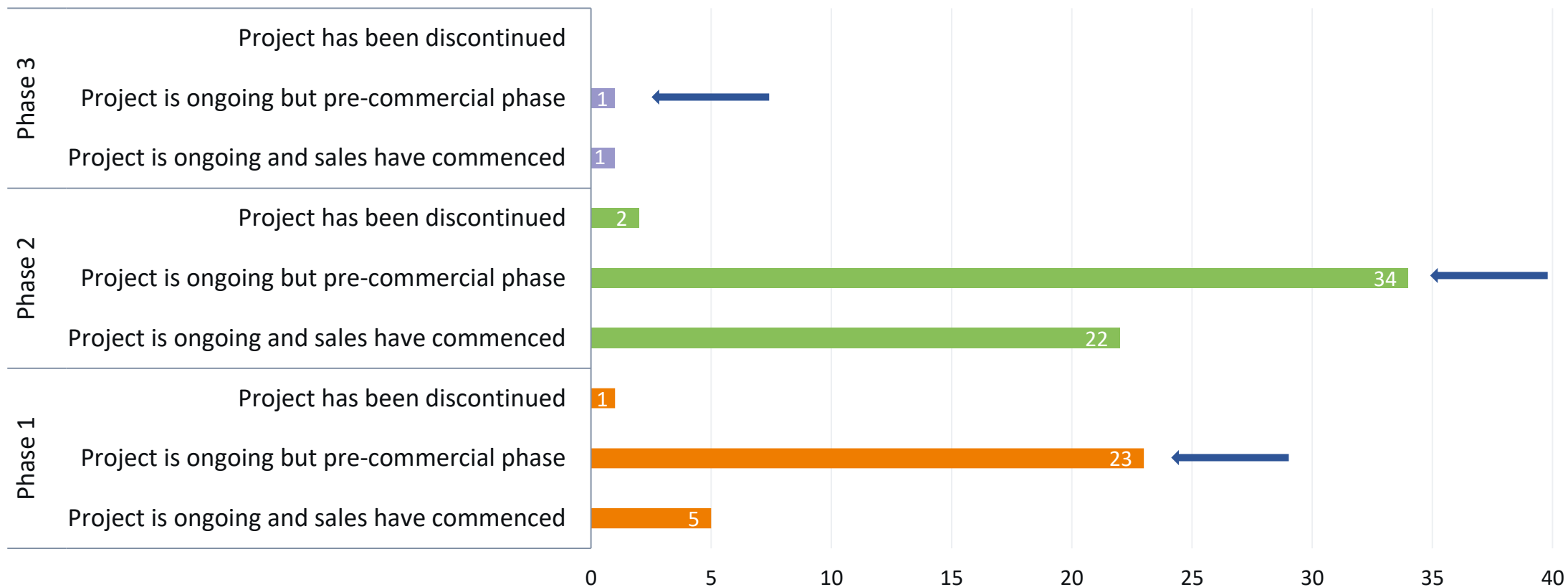


- Pre-commercial
- Sales have commenced
- Discontinued

# Project Status by Phase



# Project Status by Phase



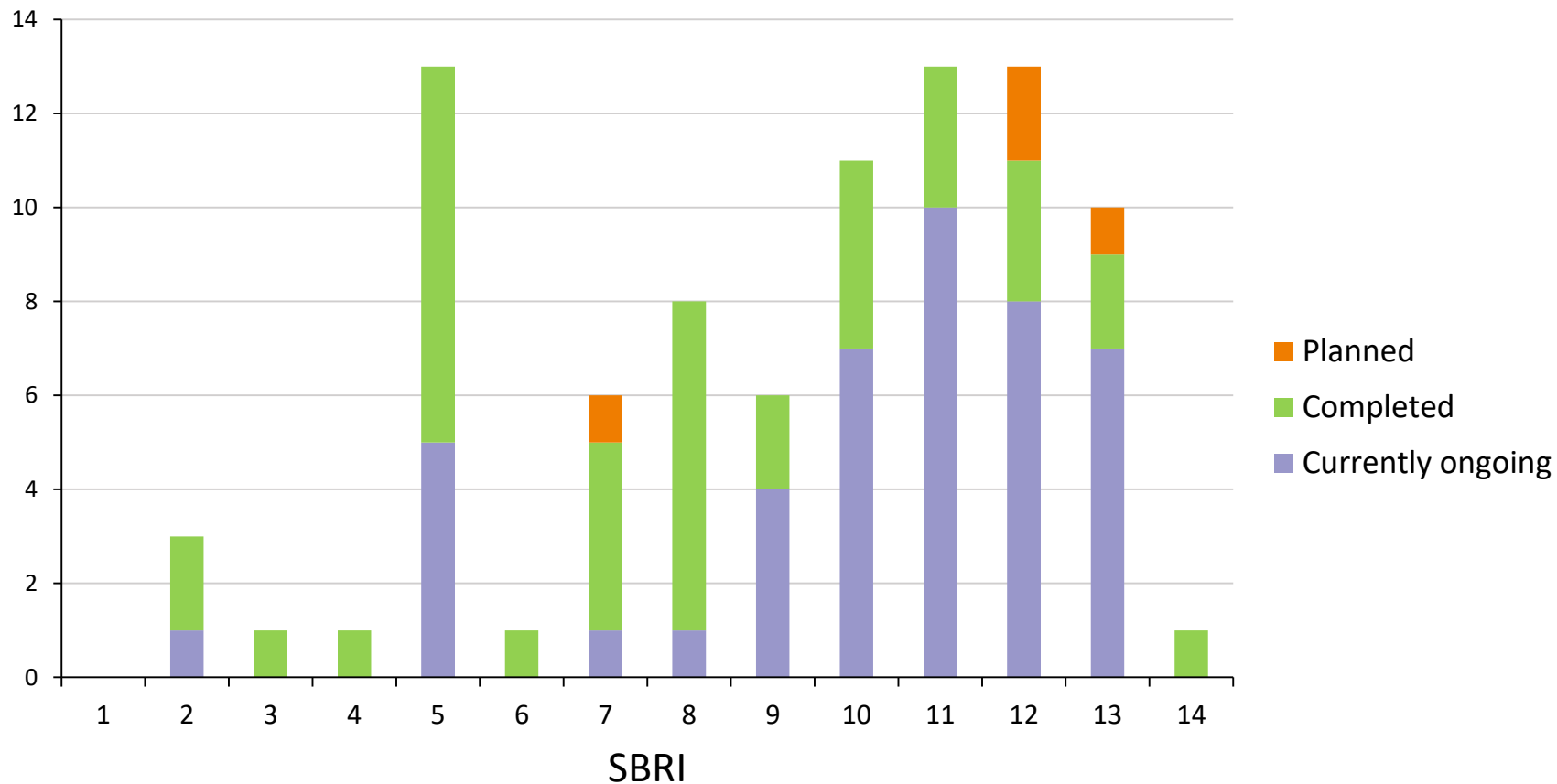
# Detailed project status during pre-commercial phase

What stage of development are companies at ?

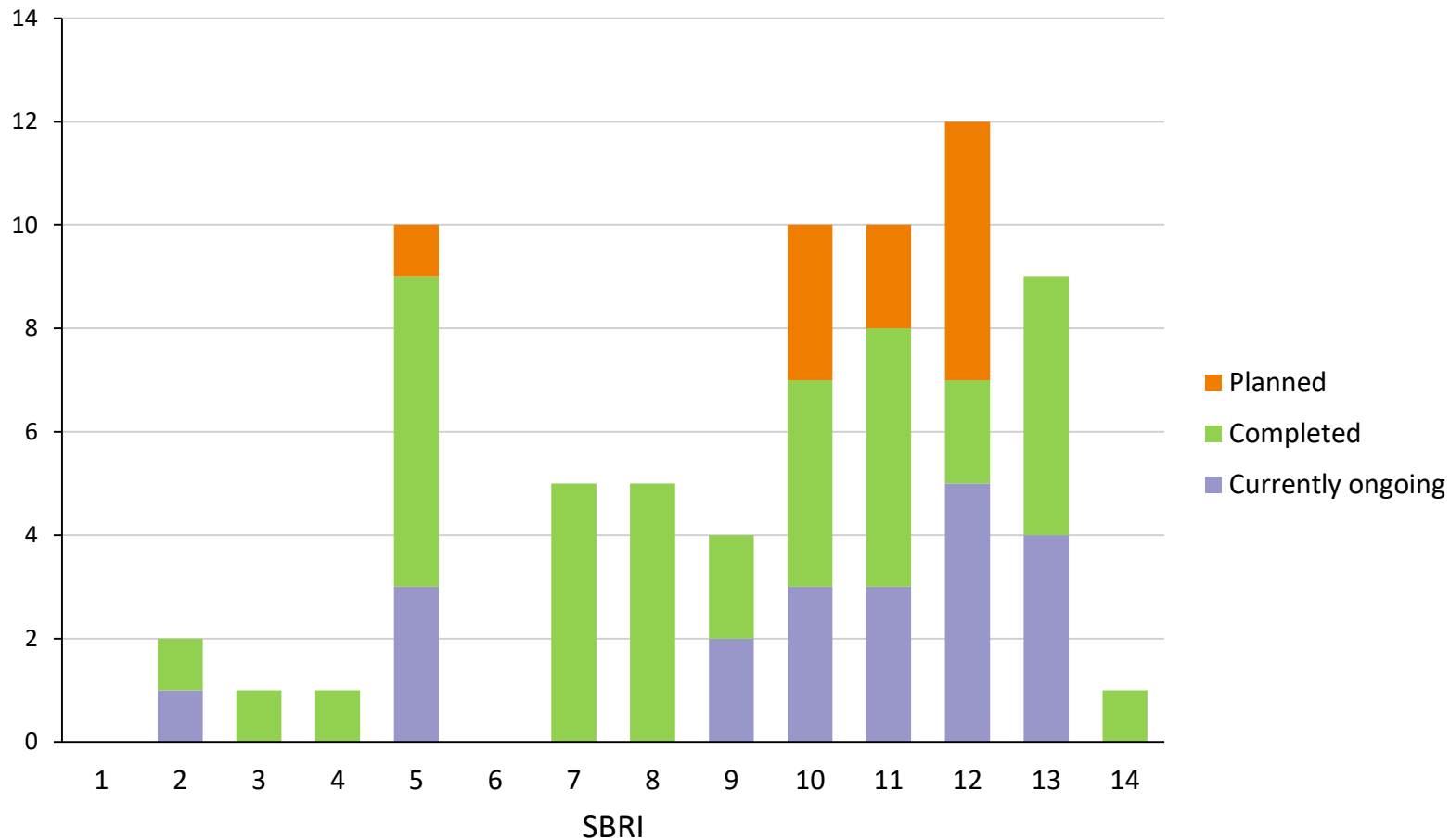
- Product Development
- Pre-clinical testing
- Ethical approval for trials
- Clinical Trials
- CE marking / Regulatory approval



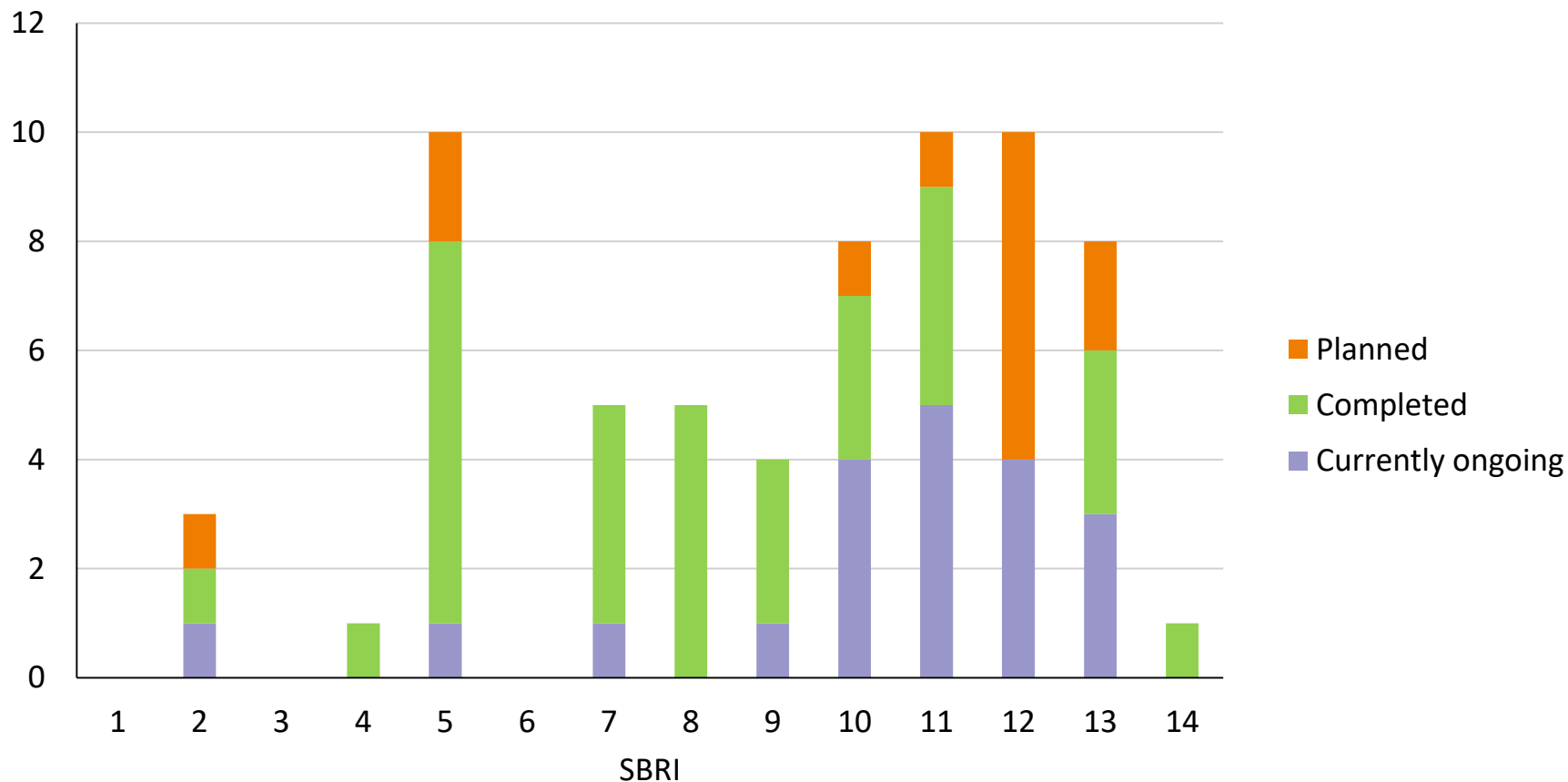
# Product development stage



# Pre-clinical testing

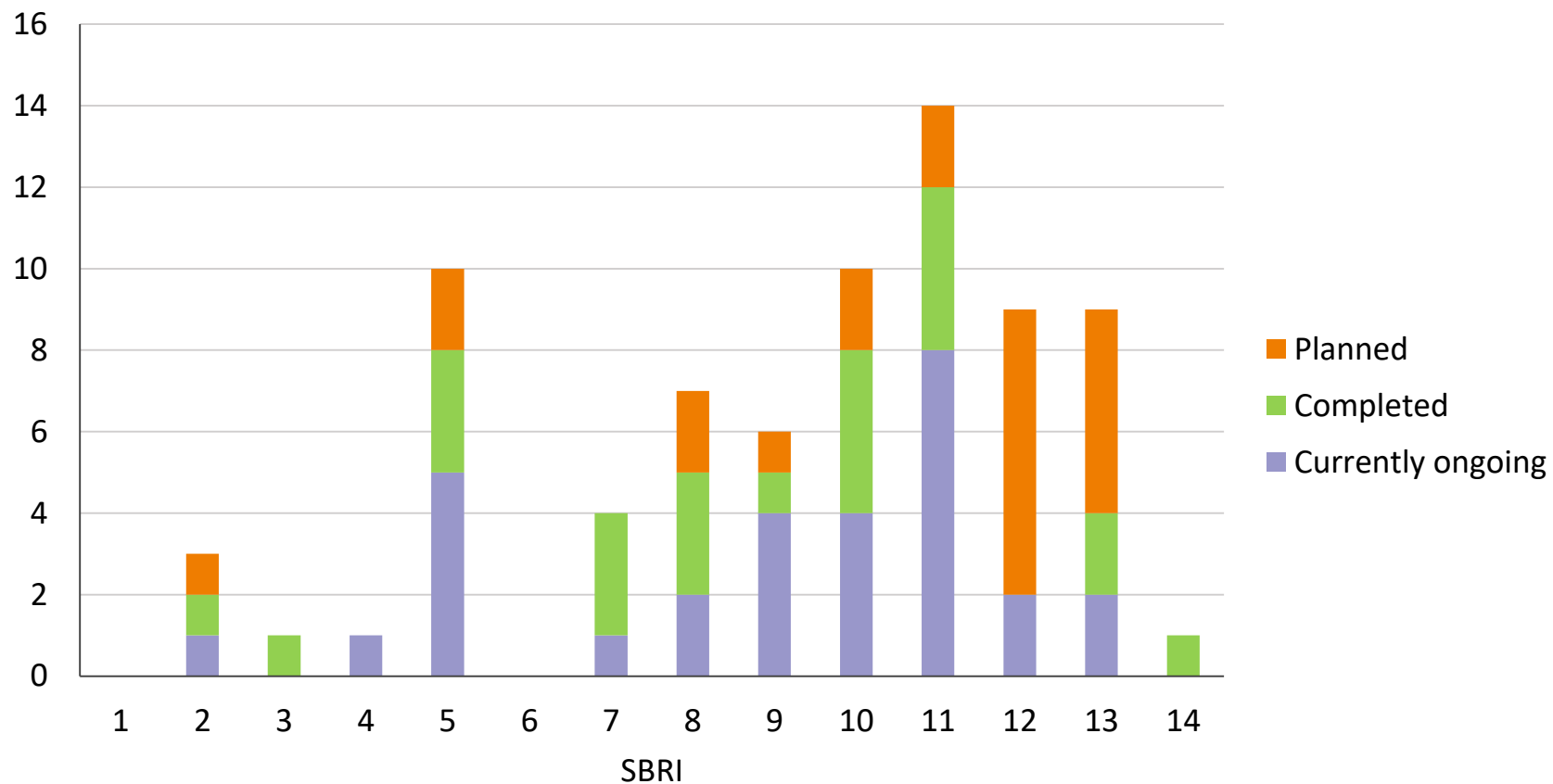


# Ethical Approval

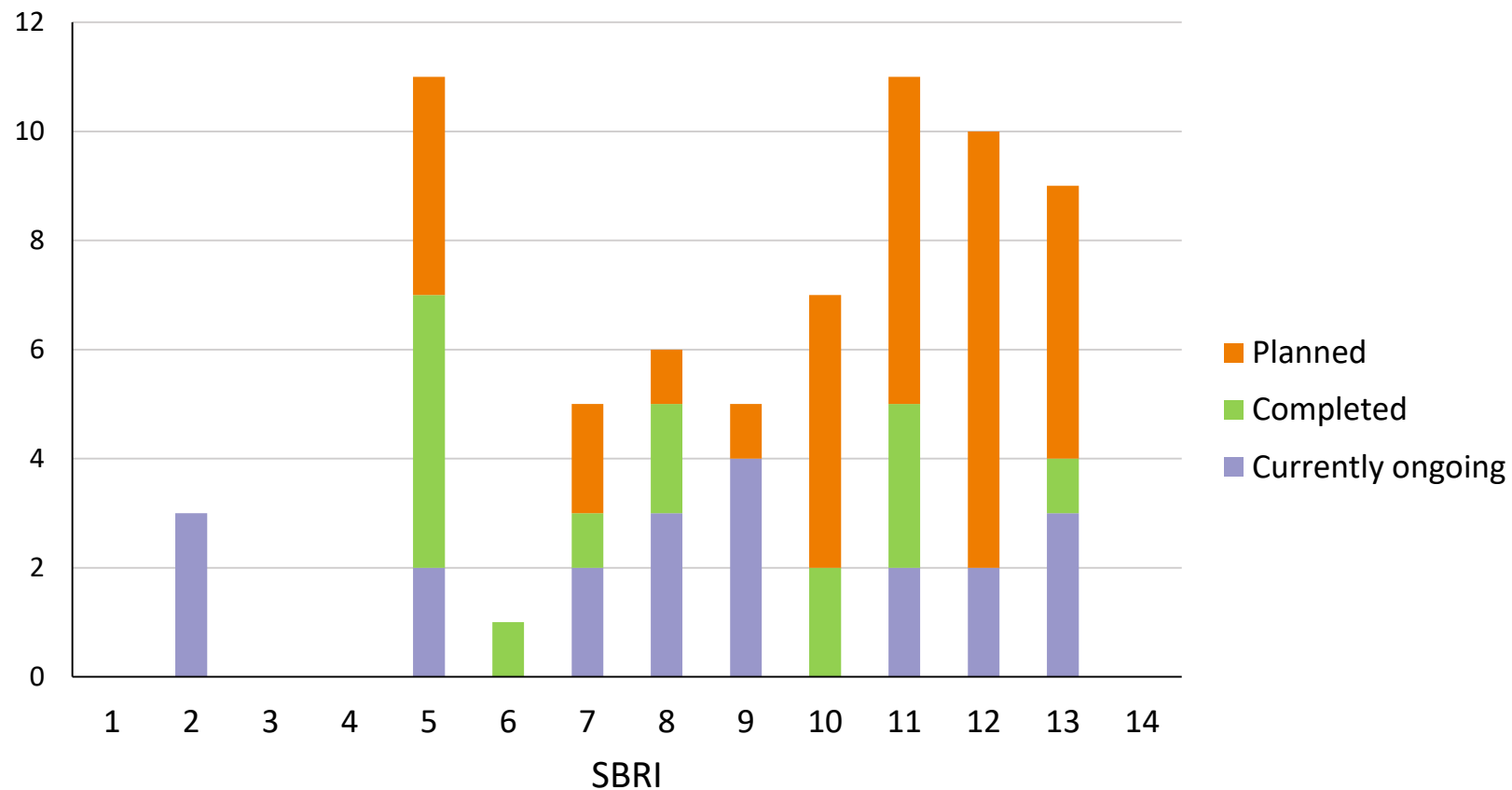


\*For many this was not applicable

# Clinical trials

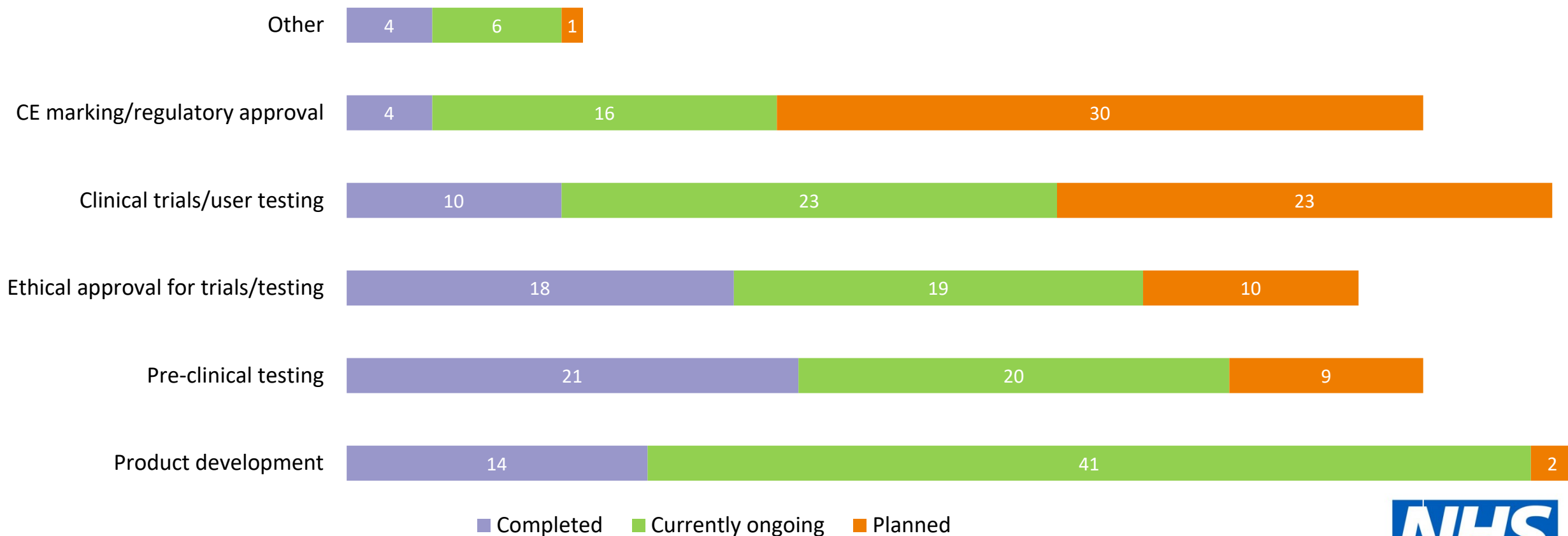


## CE Marking



# Project status of those at pre-commercial stage

## Current status of pre-commercial products



# Please share any issues/challenges you faced/are facing when progressing through the development process (Phase 1)

“Integration at each hospital is different, even though we are using existing DICOM standards, the configurations in every trust / hospital is different” Aidence BV

“Significant delays with setting up and in-house clinical study by our partner NHS Trust” Renephra Ltd.

“Small team largely unremunerated” SA IP Ltd/ Sort-ED partnership LLP

“Regulatory is complex especially for a novel technology such as ours” Cambridge Respiratory Innovations Ltd.

“Using appropriate datasets to accurately test new developments” faHRAS Ltd.

“NHS adoption is difficult and slow” Isansys Lifecare Ltd.

“Preparing the technical file with all the harmonising standards is costly and demanding” DeepMedIO Ltd.

“Lack of access to investment finance is the largest single issue.” Helicon Health Ltd.

## Please share any issues/challenges you faced/are facing when progressing through the development process (Phase 2)

“Really hard to recruit patients. Found that the hospitals exaggerated the timing on recruitment so we missed deadlines” 11Health

“Major issue with engaging mainstream GPs in changing the way they worked with chronic pain patients” ADI

“How...do we fund the funding to pay a NHS Trust to undertake the RCT to show system-wide benefit. ...This needs a Phase 3 of £2m. A Clinical Trials Unit (NIHR) want £0.5m just to plan the RCT. The Trust £0.5 m to undertake it” Aseptika Ltd.

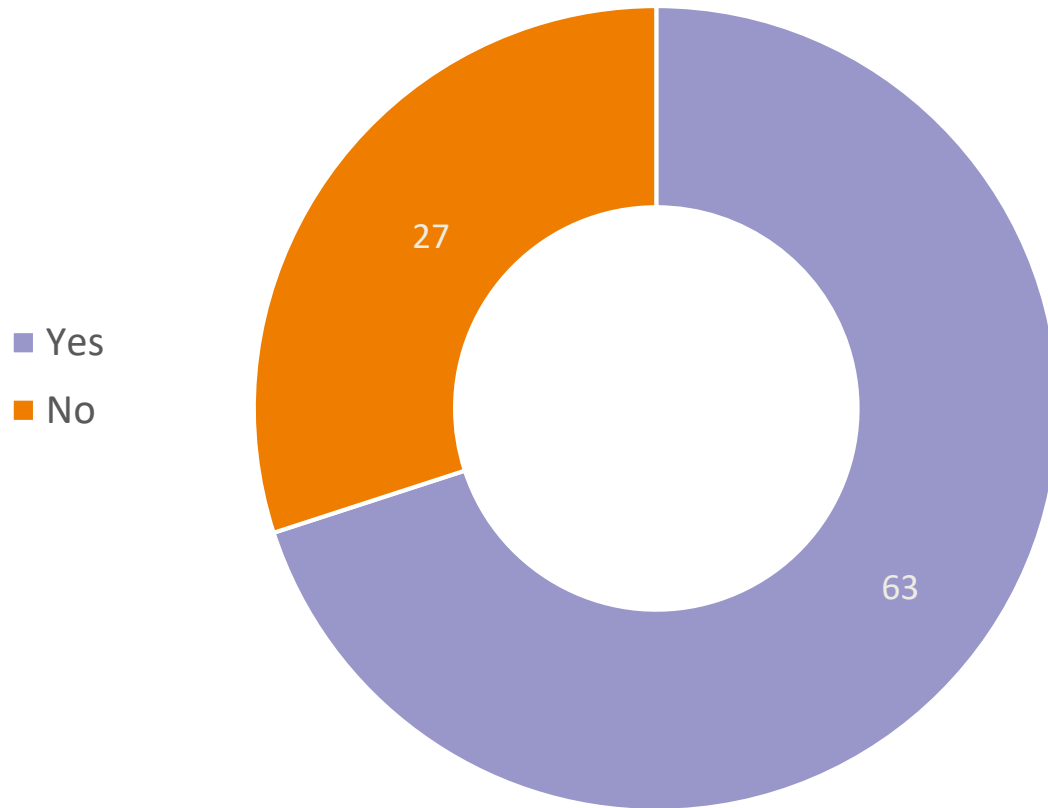
“Product development is difficult because manufacturing capabilities in the UK are limited” Inclusivity Ltd.

“Agreement even for clinical evaluations within the NHS is very hard and slow to obtain, and requires funding.” Brainminer Ltd.

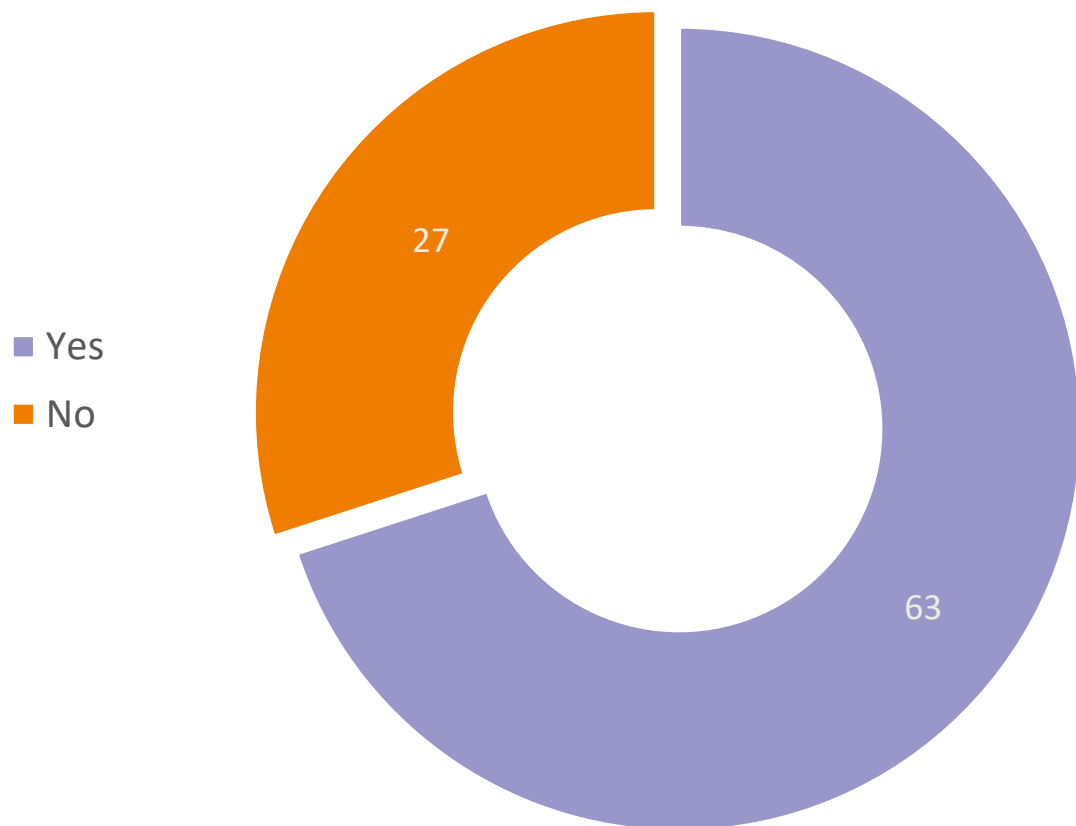
“The SBRI Phase II is a one year program. Product development typically takes 2-3 years, so ensuring appropriate deliverables is challenging.” Medtechtomarket Consulting Ltd.



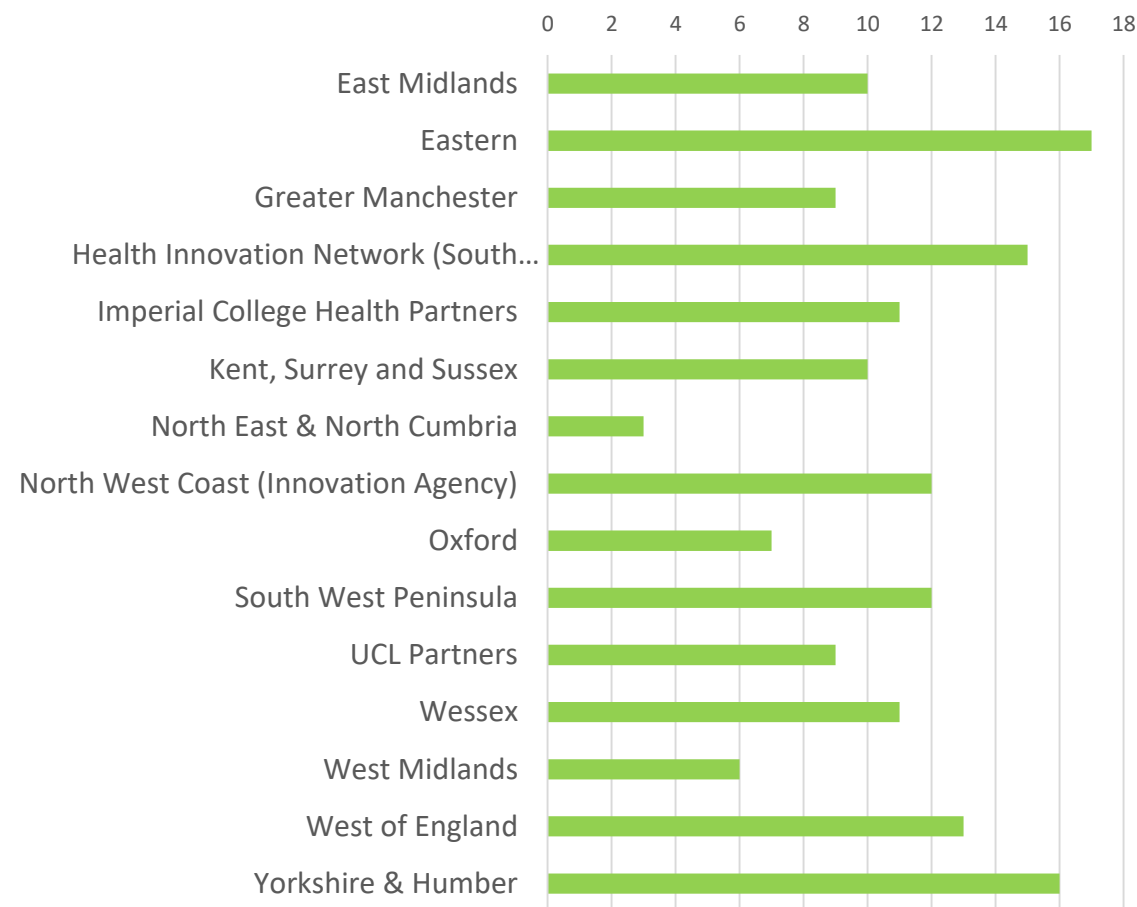
# Have you worked with any AHSNs to help develop or sell your product/technology/service?



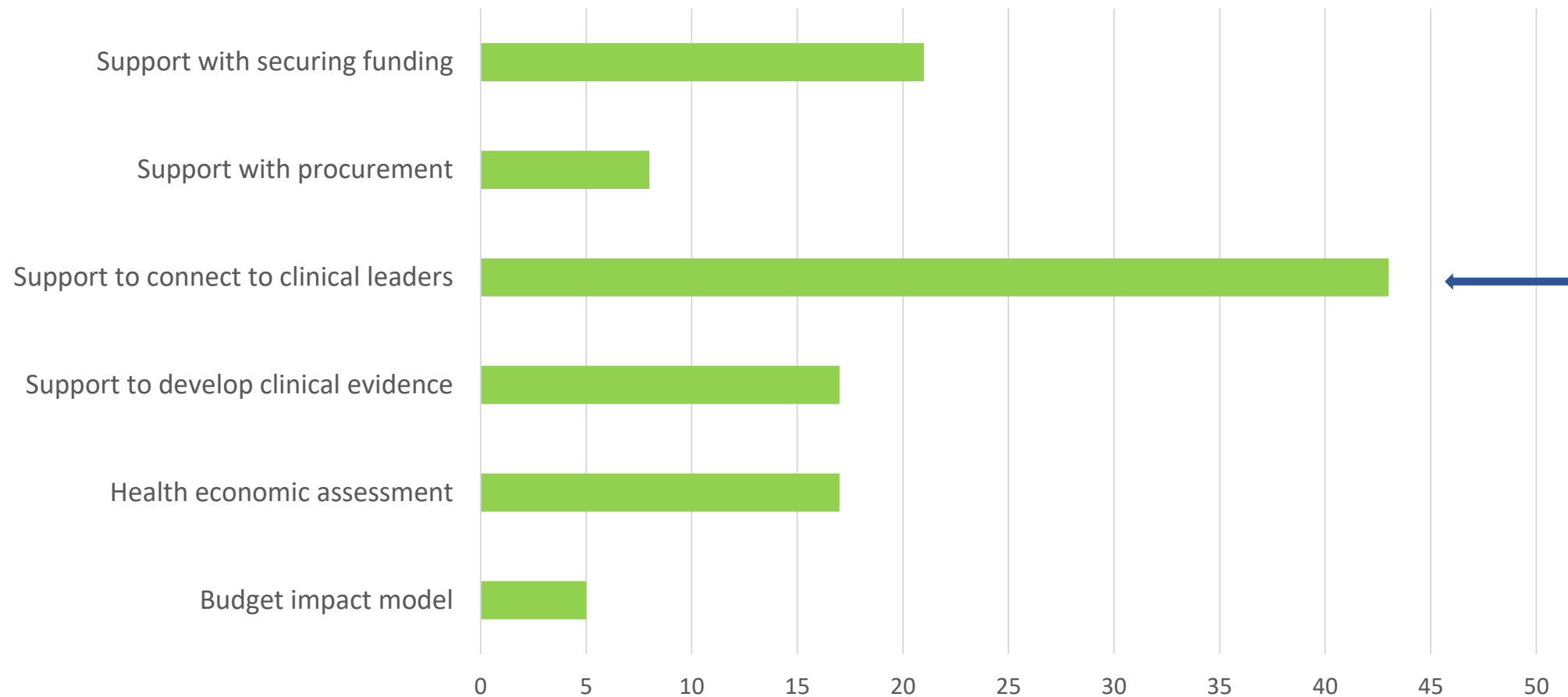
# Have you worked with any AHSNs to help develop or sell your product/technology/service?



Number of respondents reporting collaboration with AHSNs

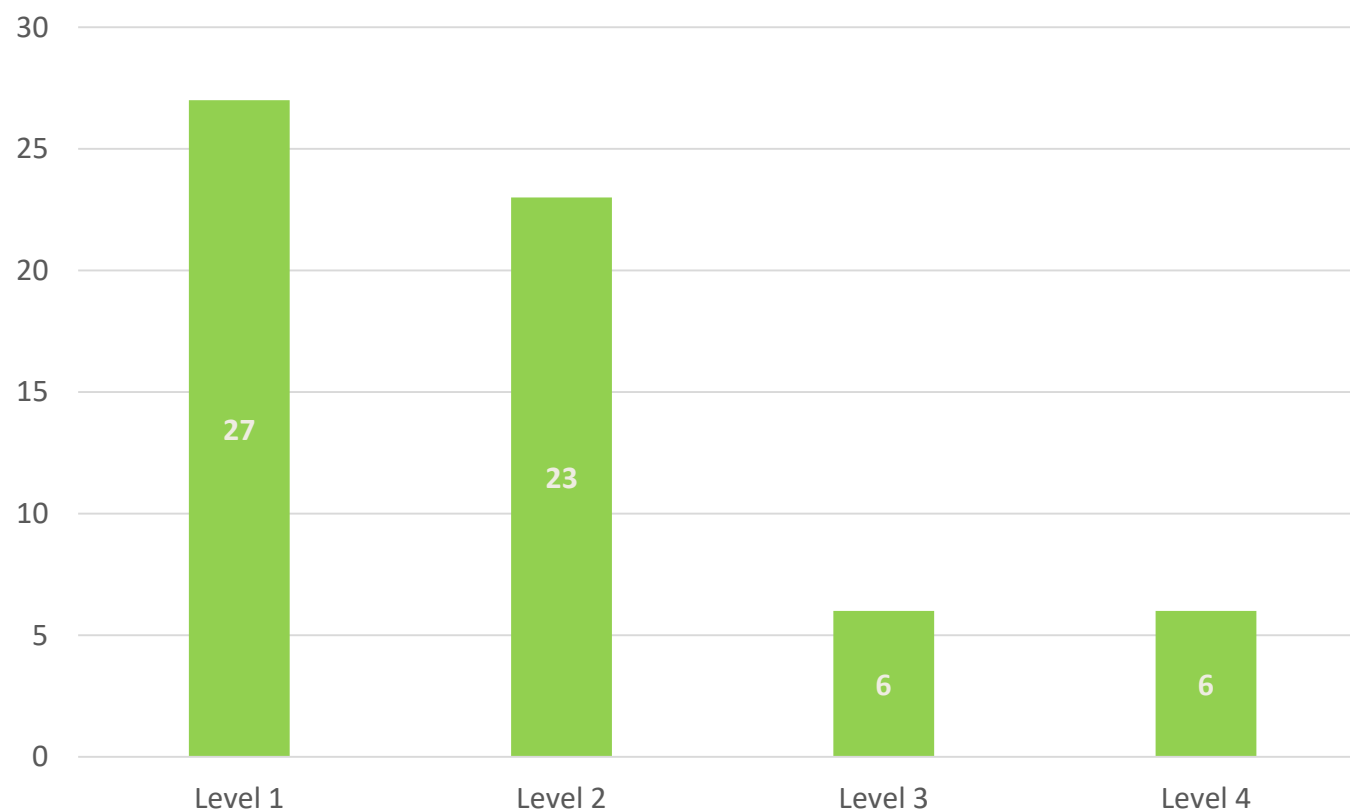


# Type of support received from the Academic Health Science Networks (AHSNs)?



# Type of engagement with the Academic Health Science Networks (AHSNs)?

Number of respondents who specified the type of engagement received



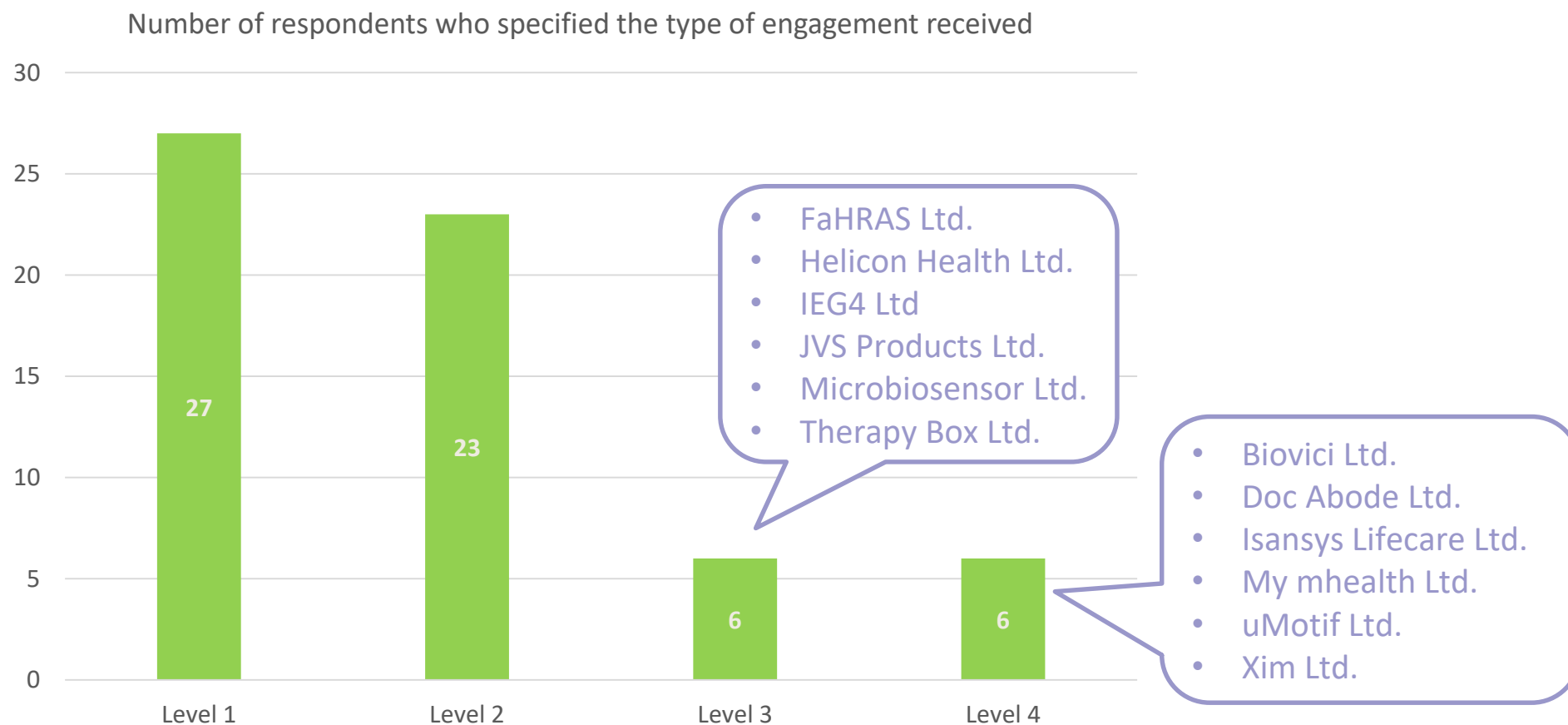
Level 1 = Triage and sign-posting. Typically <4 hours, sign-posting, triage, face to face meeting, participation in events

Level 2 = Refining and developing the offer. Typically <12 hours, as Type 1 plus, clinical team advice, initial advice on evidence generation, introductions to providers, commissioners, academics, initial advice provided on one or more aspects of product development

Level 3 = In-depth support. Typically multiple days of support over a period of months, as Level 2 plus evaluation design, market analysis, brokering adoption and uptake.

Level 4 = Strategic partnership. Typically over some years and with significant impact for the company and the care system - including case study.

# Type of engagement with the Academic Health Science Networks (AHSNs)?



# Was the support you received from AHSNs of value, and in what way (Phase 1)?

"It allowed us to better understand NHS requirements and procurement...face to face meetings and regular NHS readiness events." (Cambridge Oncometrics)

"Very valuable and insightful feedback from the team at the WE-AHSN which is much valued and appreciated at every stage of growth." (Digital Algorithms)

"Finding the right people to talk to" (Skin Analytics)

"Developing contacts within the NHS" (Rinicare)

"Access to key clinicians and IT management" (Isansys Lifcare)

"Good (enthusiastic) contacts hard to find, but worth their weight in gold." (Ubisense)

"Insight on the medical devices product development and procurement process one on one coaching through Step into Healthcare, imminent intros to procurement managers and the clinical research network" (DeepMed IO Ltd)

"...provided in depth insight into our endometrial cancer opportunity" (Chromition Ltd.)

"Commercial insights & strategic support" (FaHRAS)

# Was the support you received from AHSNs of value, and in what way (Phase 2)?

“Improved definition of our target market, networking, further funding and procurement” (Bering)

“Helped to 'sign-post' and clarify health economics / impact model expectations for adoption into NHS” (Medtechtomarket)

“Broad understanding of NHS commissioning and procurement” (Open Bionics)

“Introduction to clinical leaders has been invaluable” (Biovici)

“Helped fund a key pre-clinical study & useful signposting around NHS.” (Microbiosensor)

“securing trials in primary (8 practices) and secondary care (2 trusts)” (Xim)

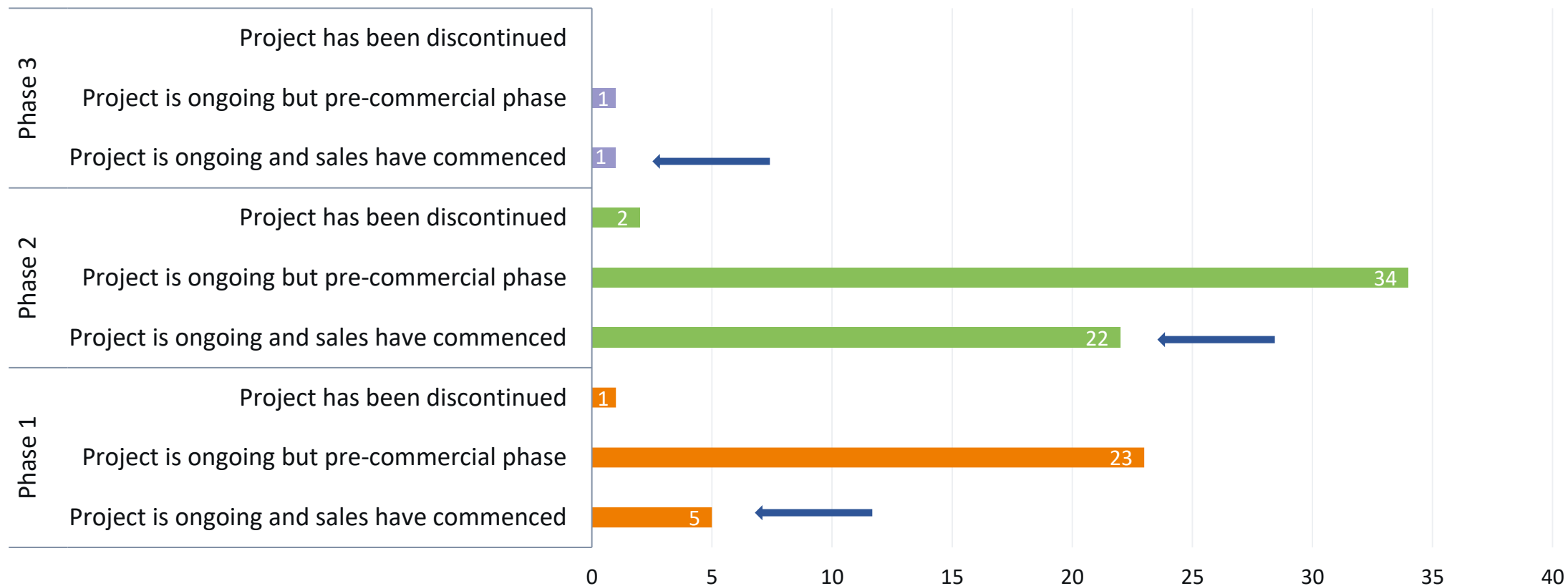
“A good blend of commercial and clinical expertise” (Healthera)

“Excellent support - introductions and expertise in the medical field” (JVS Products)

“Budget impact modelling useful for developing business model” (MSKnote)

“focused "challenge-led" events facilitated by AHSNs with strong representation from NHS influencers and decision-makers.” (ADI)

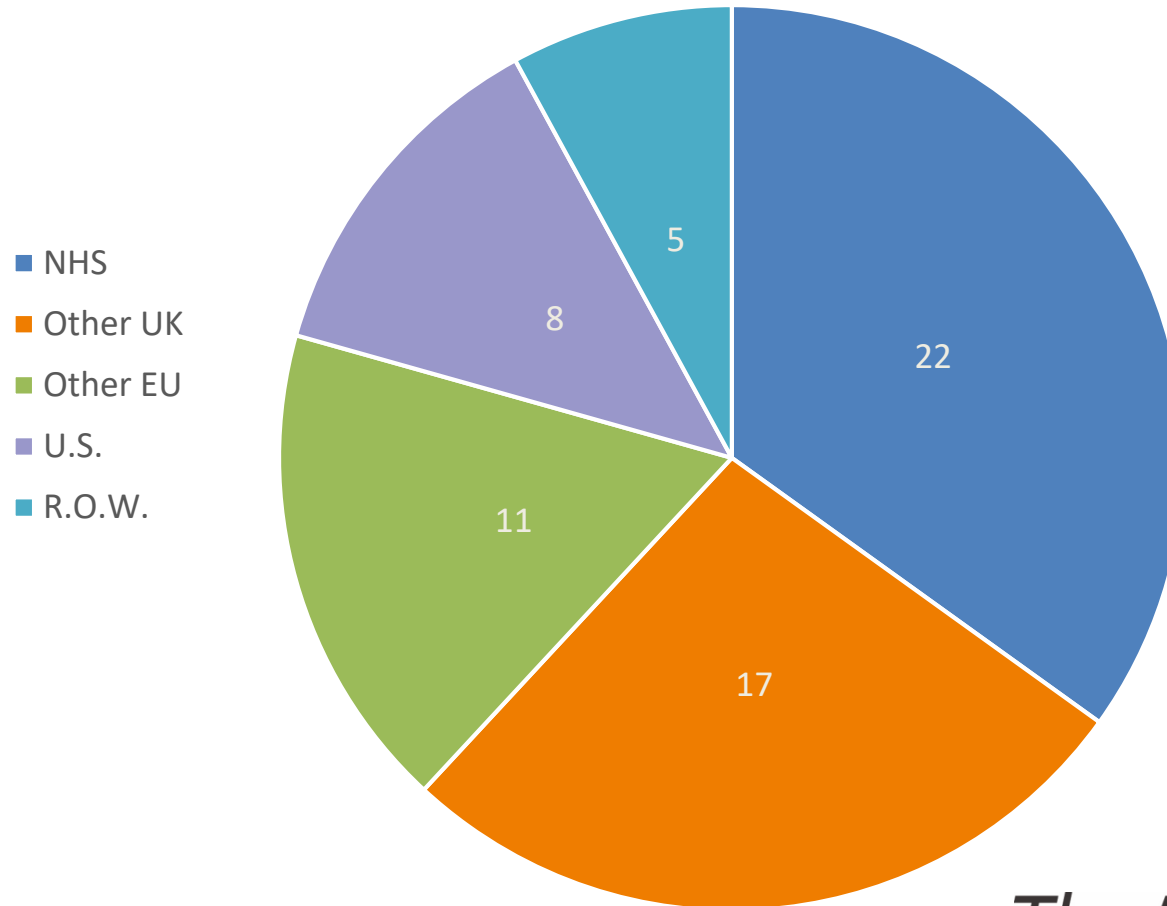
# Project Status by Phase





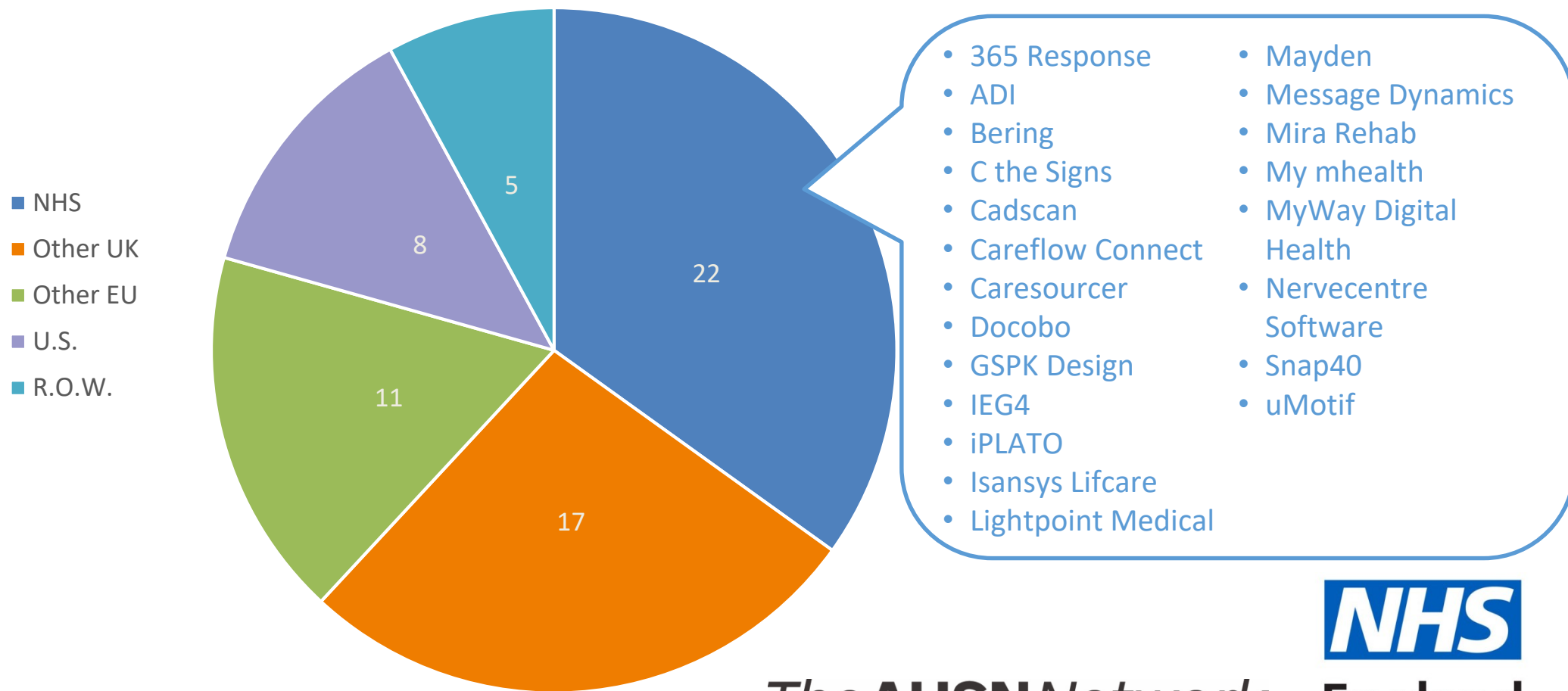
# Where is your SBRI technology/product being sold currently?

Respondents reporting sales of technology/product



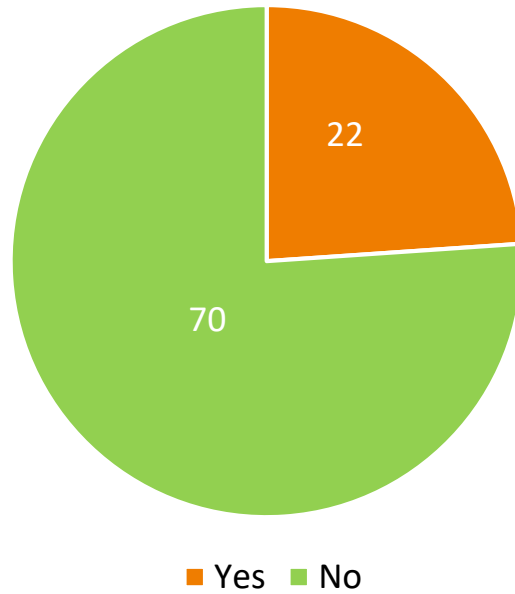
# Where is your SBRI technology/product being sold currently?

Respondents reporting sales of technology/product



# How has interacting with AHSNs helped sell to the NHS?

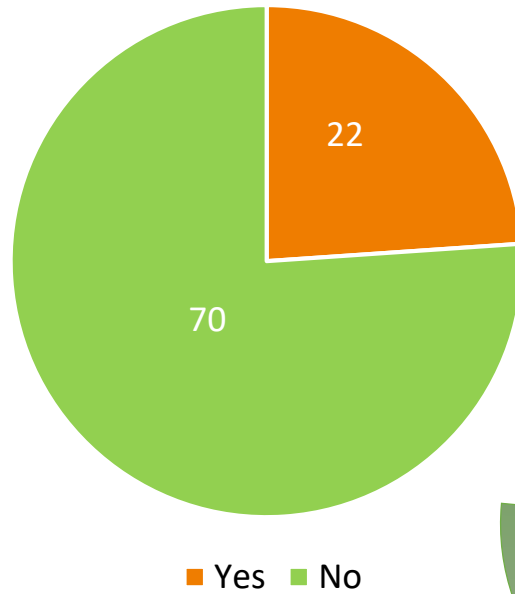
Have you sold to the NHS?



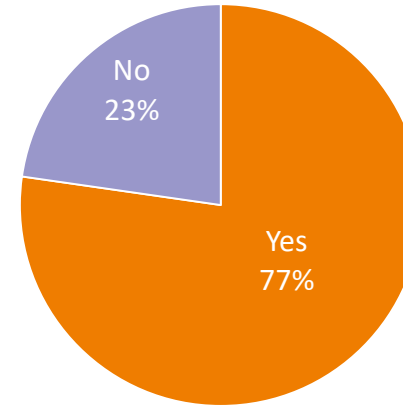
# How has interacting with AHSNs helped sell to the NHS?

Have you worked with any Academic Health Science Networks (AHSNs) to help develop or sell your product/technology/service?

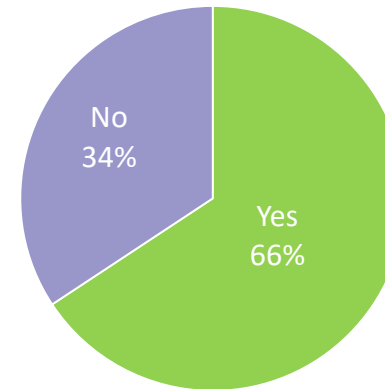
Have you sold to the NHS?



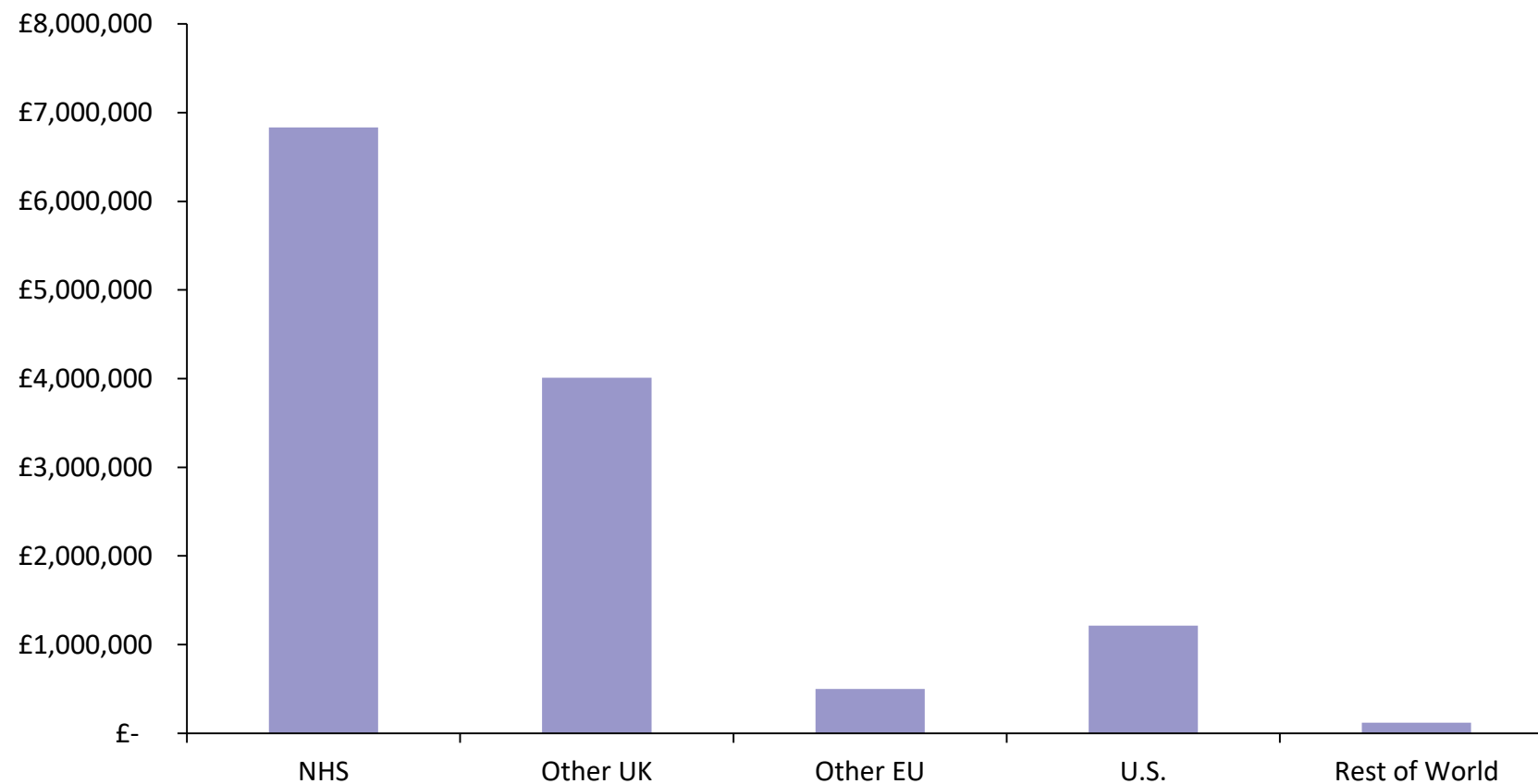
"YES"



"NO"

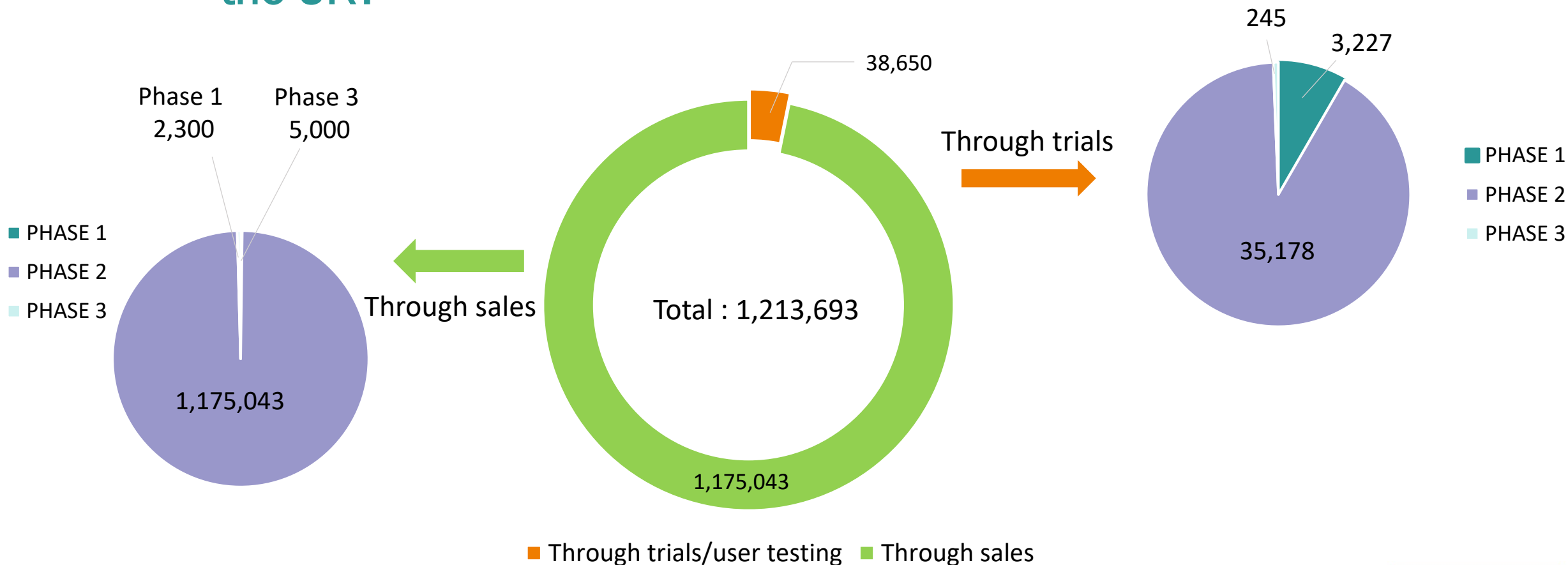


## Please state total revenues to date

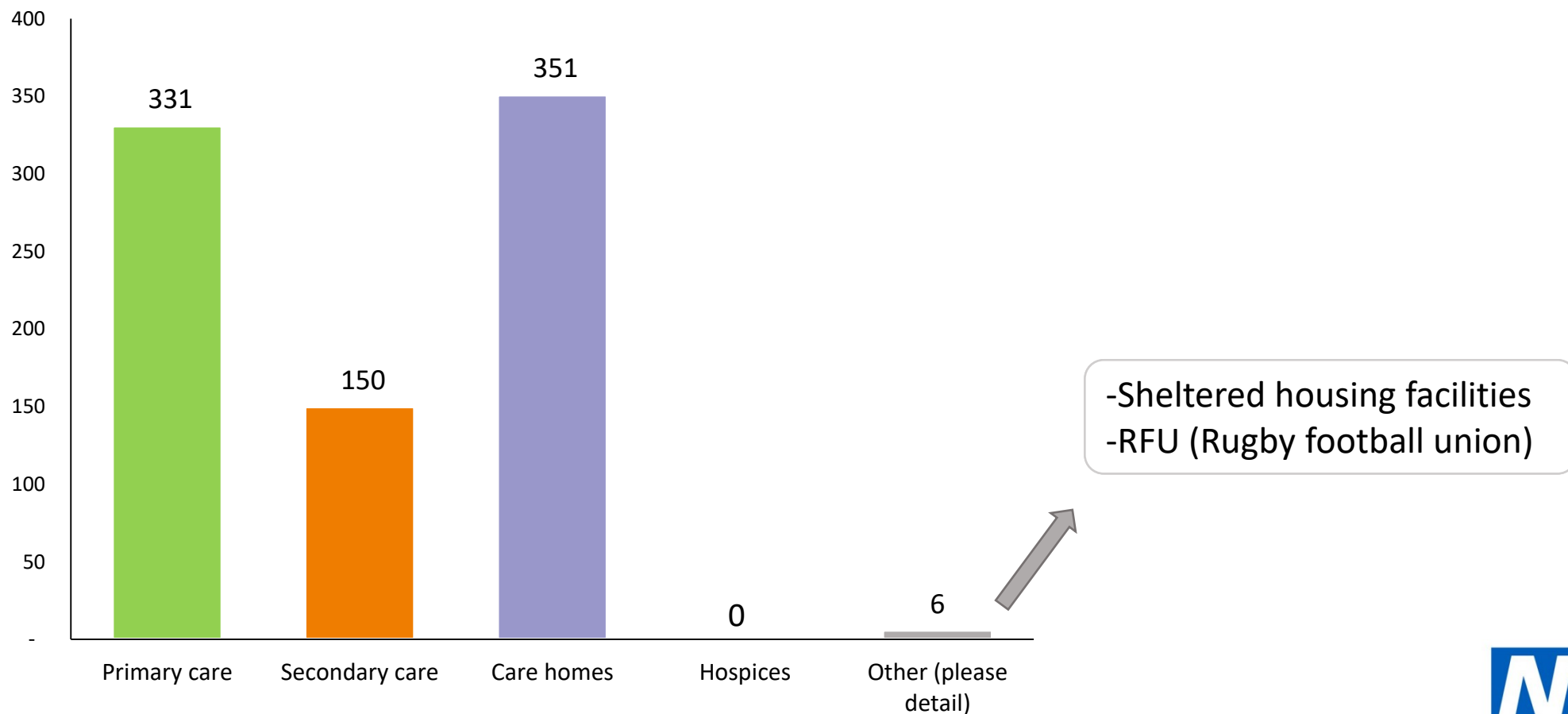


\*Not all respondents provided revenue information

# How many patients are using/benefiting, or have used/benefited, from your SBRI-funded technology/service in the UK?

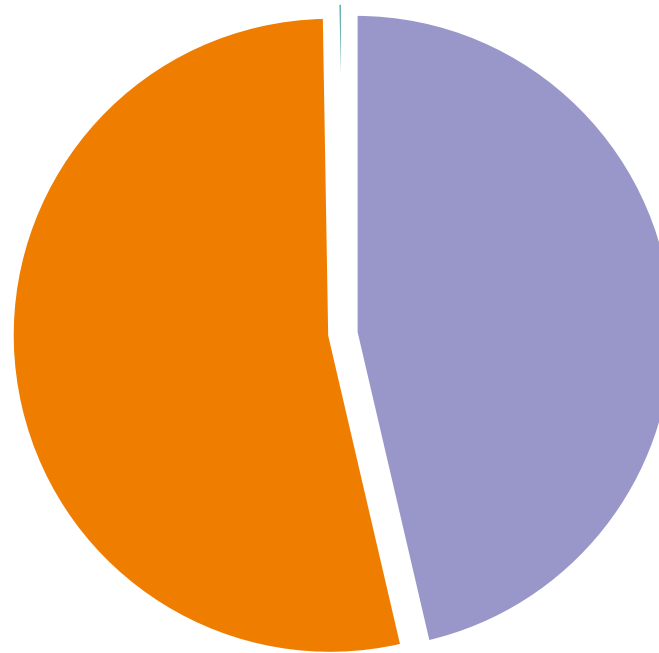


Please specify the number of UK sites where sales of your SBRI-funded technology/service have taken/are taking place?



# What is the expected amount of savings for the NHS if your technology / service is adopted?

Predicted savings to the NHS - totalling > £26bn



■ Phase 1 ■ Phase 2 ■ Phase 3



## What is the expected amount of savings for the NHS if your technology / service is adopted? Please state the key assumption(s) used (Phase 1)

SAVINGS (per annum)	ASSUMPTIONS	RESPONDENT
£4.5-£38M	Reducing radiology reporting times and reducing lung cancer screening follow up	Aidence BV
£10M	Sufficient uptake of non-invasive analysis over invasive cystoscopies, followed by at-home patient analysis	Astrimmune
£675M	All 50% of cancer patients who are currently diagnosed in late stages are diagnosed at an earlier stage	C the signs Ltd
£40.7M	Avoids the need for MpMRI and/or biopsy in 35.4% of those referred	Cambridge Oncometrics
£530M	Replacement of traditional colonoscopy with video capsule endoscopy	CoporateHealth International UK Ltd
£25-30M	18% improvement in productivity	IEG4 Ltd
£35M	Remote monitoring of at-risk patients at home assumes shift in hospital stays from long-stay to short-stay and daycases	Isansys Lifecare Ltd



## What is the expected amount of savings for the NHS if your technology / service is adopted? Please state the key assumption(s) used (Phase 1)

SAVINGS (per annum)	ASSUMPTIONS	RESPONDENT
£291M	Forecasted to release >560,000 bed days per yr in respiratory care pathways alone	PMD Device Solutions Ltd
£40M	Paradigm shift from hospital-based to home/community based	Renephra Ltd.
£0.8-1M (per hospital)	Cost savings of in-patient falls involving elderly patients	Rinicare
£0.2M per hospital	Reduced transfer to ED from urgent centres and reduced 4h breaches in ED	SA IP Ltd/ Sort-ED partnership LLP
£10,000 (per hospital)	Assumes fines for breaching 4h ED wait target remain in place	University of Cambridge
£155M	Adding the AMBEC test before the endoscopy will reduce the cost by 53%	VODCA Ltd.



## What is the expected amount of savings for the NHS if your technology / service is adopted? Please state the key assumption(s) used (Phase 2)

SAVINGS (per annum)	ASSUMPTIONS	RESPONDENT
£35M	10% reduction in face-to-face sessions based on hypothetical uptake by Tier 3	ADI (CAMHS)
£5.7M	Based on £230 staff resource savings per child (Leeds CHT).	ADI (LMSU)
£150M	100% adoption of MyPathway platform	ADI (Meds)
£1.3bn	Ally reduces burden of care by 95%. Each year 464,000 preventable hospital admissions	Ally labs
£100M	Earlier discharge from secondary/tertiary care, eliminations of readmissions, reduction in unscheduled consultations at A&E	Aseptika Ltd
£300M	Assumes that insole can prevent 50% of minor ulcers and 50% of minor amputations	Cadscan Ltd.
£21M	50% of severe asthma attacks identified in advance	Cambridge Respiratory Innovations Ltd
£150M	Through effective data sharing and robust consent mechanisms, admin savings in the NHS of 1%	Dovetail Digital Ltd.

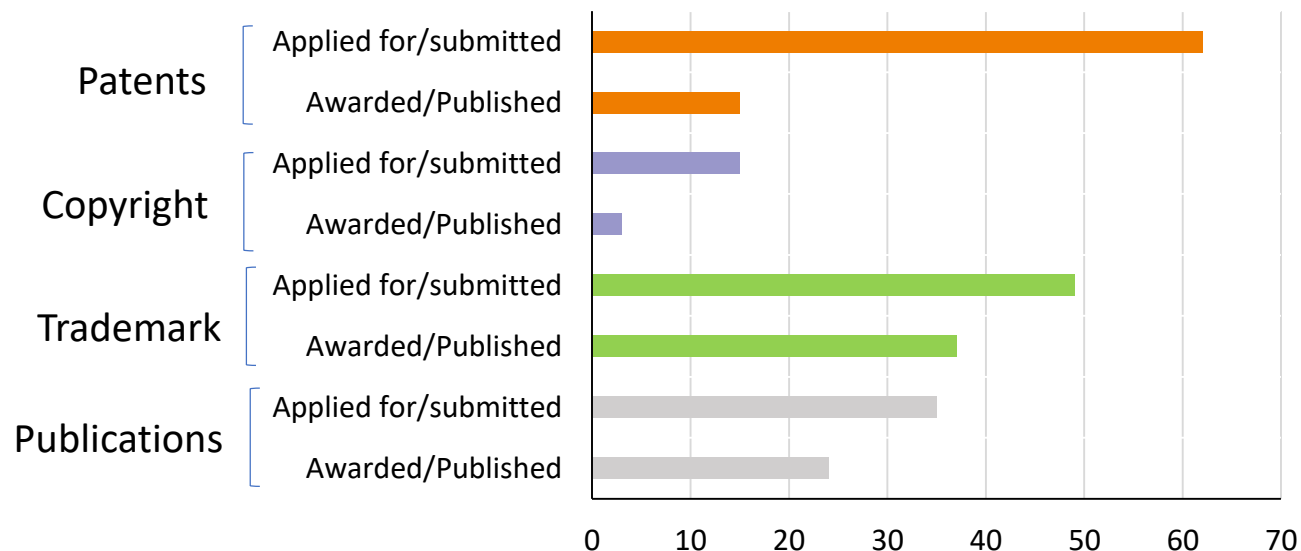
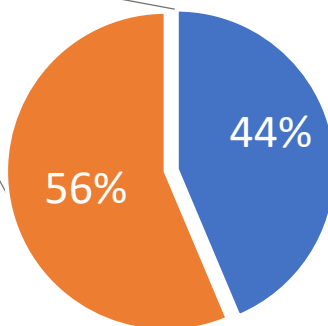
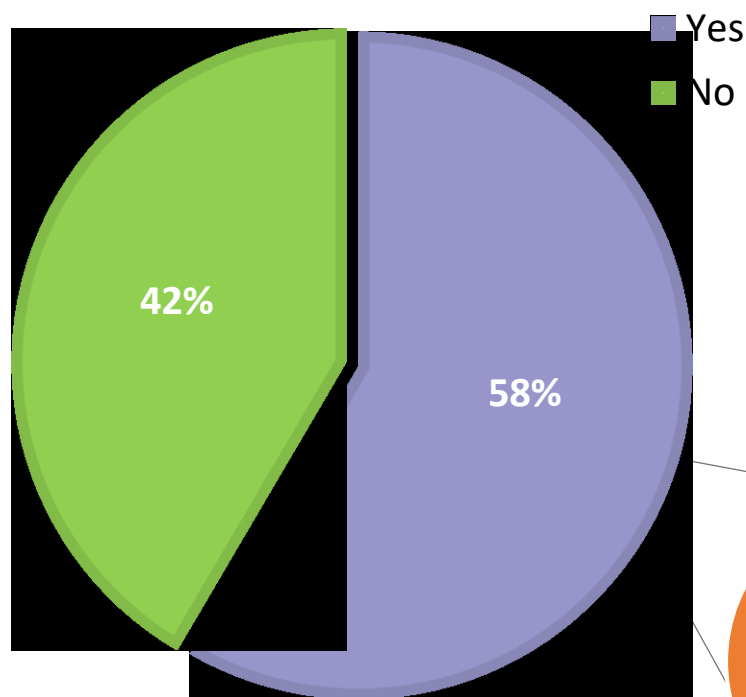
## What is the expected amount of savings for the NHS if your technology / service is adopted? Please state the key assumption(s) used (Phase 2)

SAVINGS (per annum)	ASSUMPTIONS	RESPONDENT
£100M	Over-prescribing is reduced Health outcomes are improved from bettering medical compliance	Healthera Ltd
£2.2bn	27% of GP appointments are 'unnecessary' and could be avoided	iPLATO Healthcare Ltd
£444M	33% reduction in sepsis with early intervention	Medtechtomarket Consulting Ltd
£10-£50M	10% reduction in A&E/hospital costs associated with UTI admissions	Microbiosensor Ltd
£3.2bn	Adoption of Orsus devise by NHS	Orsus Medical Ltd
£50M	Cost of early vs. late lung cancer diagnosis	Owlstone Medical
£20M	Assumes adoption across the NHS	uMotif
£20M	1 million patients visit their GP or hospital with a suspected head injury (bed days saved)	ViVO Smart Medical Devices Ltd.
£132M	Vital sign monitoring saves staff time compared to unplanned vital sign monitoring	Xim

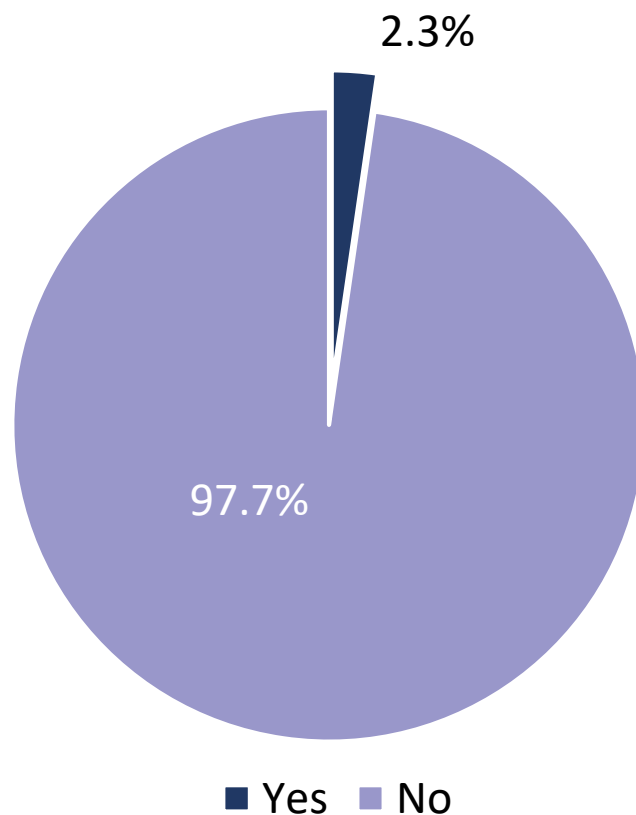
What is the expected amount of savings for the NHS if your technology / service is adopted? Please state the key assumption(s) used (Phase 3)

SAVINGS (per annum)	ASSUMPTIONS	RESPONDENT
£50	Reduction and avoidance of hospitalisation (typical stay 7-11 days). Decentralisation of care into the community. Reduction in unplanned consultations at A&E.	Aseptika Ltd
£20M	Improved efficiency of care-plans.	Just checking Ltd.

# Have you applied for any patents, copyrights, trademarks and/or submitted any scientific publications as a result of SBRI funding?



Have you ever submitted your SBRI funded technology to NICE as part of its guidance process (e.g. Medical Technologies Evaluation Process or Diagnostics Assessment Programme)?



## Please provide a reason for decision not to submit technology to NICE guidance process (Phase 1)

“We are already part of the NICE Endorsement Programme and are the first App ever to be endorsed by NICE.” C the Signs Ltd

“We plan to apply for NICE technology appraisal as soon as we get the CE Marking” DeepMed IO Ltd.

“Doesn't help with overseas sales and has little impact on actual NHS adoption” Insanys Lifecare Ltd

“This is scheduled to commence during SBRI-Phase 2 in collaboration with MMPathIC and Trust Tech” Chromition

“Not necessary for digital solutions” IGE4 Ltd.

“We need to get clinical data from trials in phase 2 to have enough data for a NICE assessment.” Oncimmune

“Waiting results of drug trial - orphan status with EMA granted” Inspiration Healthcare Ltd



## Please provide a reason for decision not to submit technology to NICE guidance process (Phase 2)

“More clinical evidence needed”  
11Health

“Not ready for NICE guidance.  
Waiting until CE mark approved”  
Edixomed Ltd.

“The technology failed to deliver  
a viable product” Onca XT

26 companies claim to be at a too  
early stage or waiting on more  
clinical data before applying.

“Applied for META after the COPD  
funded programme” Cambridge  
Respiratory Innovations Ltd

25 companies say that NICE  
approval is not applicable (mostly  
digital technologies)

# SBRI Healthcare

Any Questions?

