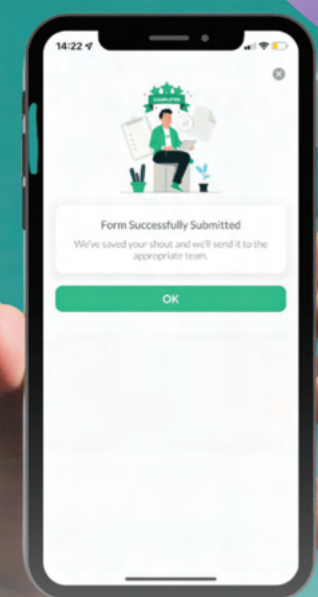




SBRI HEALTHCARE ANNUAL REVIEW 2024 | 2025

ACCELERATING
INNOVATION IN HEALTH
AND CARE FOR
PATIENT BENEFIT





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Accelerating innovations into the NHS

The importance of being able to find transformative, practical, and timely solutions to health and care challenges, and to support the NHS workforce, has never been more paramount.

New technologies provide a significant opportunity to drive the government's "three shifts" for the NHS; moving care from hospitals to communities, transitioning from analogue to digital processes, and shifting the focus from treating sickness to preventing it.

These shifts aim to make the NHS more accessible, efficient, and proactive in its approach to healthcare for future generations.

The Small Business Research Initiative (SBRI) Healthcare programme provides funding and support to high-potential, early-stage innovations to test technical and commercial feasibility whilst generating robust clinical evidence. Also to more mature products by supporting real world implementation studies to accelerate NHS uptake and spread.

Funding is awarded through open market competitions, the unmet clinical needs of which are scoped by working in close collaboration with frontline NHS and social care staff.

Competitions are open to any type of organisation, as long as a strong commercialisation plan is presented, including academia, NHS Providers, charities and corporates, but are particularly suited to small and medium-sized enterprises.

The core objectives of the programme are that SBRI Healthcare:

- > Improves patient care whilst tackling health inequalities and decreasing the NHS carbon footprint. Equitable access to care and patient benefit are at the heart of SBRI Healthcare's mission and innovations are co-designed with patients.

- > Increases NHS efficiencies and capacity by enabling innovations that contribute to cutting waiting times, increasing productivity and generating savings for the NHS.

- > Enables the NHS to become a thriving place to innovate and collaborate by accessing new innovations that solve unmet need by fostering partnerships with technology providers across primary, secondary and community care settings.

- > Brings economic value and wealth creation opportunities to the UK economy. The programme de-risks innovation, boosting the UK startup and venture community.

“

"SBRI Healthcare enabled our technology rollout in a realworld setting, generated valuable data, and allowed us to build strong networks which led to a successful fundraise and multiple commissioning contracts"

PocDoc



“

"SBRI Healthcare have been amazing to work with. We are very proud of what we have achieved and we are now procured in a number of NHS hospitals - helping women is inspiring. Thank you for the support, none of this would be possible without SBRI Healthcare's help"

JanamApp

“

"This project and funding has enabled us to expand our services to NHS Trusts across the UK, create additional job opportunities within the North East, and support more individuals in need. The entire process has been enjoyable, and we have learnt so much from this programme"

XR Therapeutics

“

"On top of funding, the programme enabled the technology to be rolled out and tested across many GP practices"

Abtrace

In the Financial Year 2024/25

In the financial year April 2024 - April 2025, the SBRI Healthcare Programme ran four competitions across six unmet areas of need.
£13.7 million of funding was awarded to **51** innovations.

The NHS Cancer Programme, supported by SBRI Healthcare, launched Innovation Open Call 3.



Phase 1 Funding: Women's Health £1.3m awarded to 14 early-stage innovations



Developing a revolutionary hormone monitor to manage migraines and beyond



Co-design of a personalised, scalable, wellbeing tool, targeting binge eating challenges in women



A novel, non-Invasive alternative to oral therapies for pelvic pain caused by menstrual pain and/or endometriosis



The Essential Baby Company - The 'haPPIE: SHE Cares' project aims to enhance mental health support for Black and Ethnically Minoritized (BEM) women during the perinatal period



Co-designing improved treatment for recto-vaginal fistula; investigating the needs of women and assessing the feasibility of a novel, cost-effective device



SEREN: Strategic Endometriosis Research for miRNA-Enabled Nano-diagnostics and therapeutics



Revolutionising breast cancer prognosis with "OncoSignatur Breast": an innovative, cost-effective test for improved, personalised patient pathways



Supporting women with long-term and chronic health conditions with an adaptive, personalised digital health tool to self-manage and improve health outcomes ("GroW")



BirthGlide feasibility study - a revolutionary device to prevent difficult birth in the pushing stage of labour



LightHearted AI – an accurate, portable, rapid, non-contact means of detecting heart valve disease and other cardiac conditions in women



Validation of a non-invasive Brain Stimulation Device (Nettle) to manage symptoms of Premenstrual Dysphoric Disorder



Screen3D Ltd - An organ-on-a-chip platform to model personalised embryo implantation and improve subfertility associated with chronic gynaecological disease



The PeriPear Medical Device: An innovative, low-cost solution to reduce perineal injury during vaginal childbirth



Increasing cervical screening rates, to the national average, in North Central London

Phase 1 Funding: Antimicrobial Resistance (AMR) £932,000 awarded to 10 early-stage innovations



Development and Evaluation of a host Transcript tEst in Children for rapid Trlge of Viral/ bacterial illness in Emergency departments (DETECTIVE)



Direct from blood rapid antimicrobial susceptibility test



Cexal: Development of a rapid and modular phenotypic test for quantitative urinary tract infection detection and antimicrobial susceptibility in 30 minutes



Infection prevention using next generation UV-C LED Technology



Development of the InfectiClear test onto Near Patient and Point-of-Care NHS



SAMuRAI-LIT - Slashing AMR with the AI-enabled LIT™



Development of a rapid, cost-effective, point of care antibiotic susceptibility test for urinary tract infections



Infection prevention and control through the implementation of novel antimicrobial technologies within healthcare settings



Rapid assessment of aetiology and severity of febrile illness to optimise antibiotic use and clinical care



A novel approach to preventing encrustation and infection in long-term indwelling urinary catheters

Phase 2 Funding: Child Health

£3m of follow-on funding awarded to 4 innovations

TidalSense

Tidal Breathing High Resolution Capnography to quantify obstructed airflow in wheezy children including children <5years old

TinyMedicalApps.

Digital Health Passport for epilepsy: Smarter accessible epilepsy support for children, young people & carers



Defining and validating a digital biomarker of epilepsy in children



Non-invasive, and needle-free, continuous glucose monitor for children and young people living with diabetes

Phase 3 Funding: Stroke

£2.5m awarded to 5 late-stage innovations

UP=RONT
TIME IS LIFE

Real-world evidence for NHS adoption of a point-of-care blood-test for pre-hospital identification of stroke patients suitable for thrombectomy treatment (LVOne-Pathway)



The implementation effect of immersive Virtual Reality for post-stroke rehabilitation within three NHS care settings

COGNITANT

Evaluating 'My Stroke Companion': Enhancing stroke survivors' knowledge, promoting healthy living, and reducing secondary stroke risks



Scaling and evaluating the NeuroRehabilitation OnLine (NROL) Model: Enhancing access to intensive digital stroke rehabilitation across NHS regions for better outcomes



Real-world evaluation of Beautiful Voice, a smart speech and language therapy

Bespoke Funding: Work related digital health solutions for individuals with poor mental health

£1.7m awarded to 9 innovations

InsideOut*

Using AI avatar-led mental health interventions for keeping employees in work



Tend VR: Mental health in the agricultural workplace: The accessibility, acceptability and efficacy of Virtual Reality Mindfulness Based Cognitive Therapy



A needs-matched personalised digital support solution that addresses specific work-related challenges faced by individuals with poor mental health



Adjustments by Open-OH: Work related mental health interventions for people with long term conditions



The development of a digital mindfulness-based cognitive therapy programme supporting disabled individuals with poor mental health to enter the workforce



Work Well by Maudsley - a digital support tool to foster workplace wellness and community resilience



Enhancing therapy engagement for NHS healthcare workers with personalised AI - A feasibility and acceptability study



Reducing anxiety and managing overwhelm in the workplace: Developing, implementing and evaluating a digital hybrid for neurodivergent employees



Personalised "in the moment" mental health support for the young workforce, upskilling individuals and their support network, building workplace resilience

Phase 3 Funding: Urgent and Emergency Care

£3.9m awarded to 9 late-stage innovations



CareLoop P4-DTx: AI-powered digital therapeutic platform for severe mental illness that reduces relapses and demands on Urgent and Emergency Care

safesteps

Reducing hospital demand using enhanced falls prevention in Primary Care



Evaluation of clinical and operational benefits of DemDx's intelligent clinical assessment platform when used by Allied-Health-Professionals in acute clinical settings



CardMedic: The Healthcare Language Portal - Improving patient safety, experience, and quality of care, and reducing health inequalities



Real-world evaluation to assess the clinical and health economic impact of RBfracture software within the NHS



PRE-Implementation Evaluation of Fidelity and Adherence of MeMed BV rapid test in febrile Children presenting to the Emergency Department (PREFACE)



Doc Abode: Digitally transforming the NHS workforce of the future



Brave AI: Supporting communities through anticipatory care outside of hospitals



Scaling acute virtual wards: An evidenced-based NHS blueprint

SBRI HEALTHCARE IMPACT TO DATE

April 2013 - April 2025

*Data is taken from the SBRI Healthcare Annual Survey sent to the SBRI Healthcare portfolio

£163m+ 373

Funding awarded

Products supported



IMPROVED PATIENT CARE AND
IMPROVED NHS EFFICIENCIES

>17.5m+ 36,596

Patients impacted through
sales and trials

Sites accessed through
trials or sales



ENABLED THE NHS TO ACCESS
INNOVATION

381 3,258 108

IP granted

New
collaborations
established

Companies
with sales in
the NHS



UK ECONOMIC GROWTH

£912m+ £114m

Private investment leveraged

Revenue generated

3,895

Jobs created /
retained

11

Acquisitions

1

IPO
(£77m+
raised)

124

Companies with
commercial revenues

88

Products
exported

Enhanced Support for Innovators

Supported by a curated network of experienced clinical and commercial experts and partner organisations, in 2024/25 the Programme Management Office continued to offer bespoke advice, tailored workshops, networking opportunities and introductions to support innovators at each stage of their journey towards NHS adoption and spread. We continued to build an engaged online community on LinkedIn, facilitate two-way dialogue to get continuous feedback and adapt to innovators' needs, and to profile the success and impact of our portfolio.

To help break down barriers to innovation we launched a Female Founders Venture Capital Readiness Programme in partnership with NIHR Invention for Innovation (i4i) and Lifted Ventures, and a programme of work to improve the programme's processes for innovators who are neurodiverse or who have a disability, in consultation with We the Creators.

SBRI Healthcare and NIHR i4i Female Founders Venture Capital Readiness Programme

In March 2025 we launched a 5 month Venture Capital Readiness Programme for female founders in partnership with Lifted Ventures. 15 female founders and CEOs from across the SBRI Healthcare and i4i portfolios were selected. All have a mid-term goal to access investment of £200k -£2m. The programme objectives include building a targeted investment plan and roadmap, facilitating connections with investors, and enabling female founders to meet peers and other women leaders in health and care who have landed investment as part of a self-sustaining, supportive network.



SBRI Healthcare Annual Conference 2024

For the first time, the SBRI Healthcare annual conference was livestreamed to an online audience, with 220 people joining online and in-person. The conference was held at the Royal College of Physicians, London. Innovators and NHS colleagues joined to share advice, inspire success and build new connections. All with the aim to develop and scale impactful health and care innovations for patient benefit. Sessions were run on sustainability and social value for NHS procurement, equitable access to care, harnessing the power of neurodiversity for innovation, spread and adoption, procurement and scaling up, followed by a keynote address from Jacqui Rock, former Chief Commercial Officer at NHS England. The conference was interactive with online polls and networking stands.



Online Learning blogs

To facilitate peer-to-peer learning, in person events and workshops were supplemented by blogs from innovators with their advice for other innovators. These included a piece on public engagement and involvement to narrow health inequalities by Zoe Wright, Founder & CEO of The Real Birth Company, and a piece from Sandeep Chauhan CEO and Co-founder of Definition Health on advice to get your innovation adopted in the NHS. Also a blog for innovators on what ICBs need from them to collaborate successfully.



Blog: Integrated Care Boards (ICBs): Here's how innovators can work better with us

22 July 2024

Breaking down barriers for neurodiverse and disabled innovators

In consultation with We the Creators, SBRI Healthcare ran a session at the annual conference on harnessing the power of neurodiversity for innovation. Subsequently a programme of work has begun to run focus groups with neurodiverse and disabled innovators to listen to their needs and implement accessibility improvements and reasonable changes to the programme's processes.



NHS Cancer Programme Innovation Open Call Networking event 2025

130+ innovators and leaders within the NHS Cancer community attended the NHS Cancer Programme Innovation in the Early Diagnosis of Cancer networking event in BMA House. The event, organised by SBRI Healthcare and the NHS Cancer Programme team, was an opportunity for the 14 companies supported by the NHS Cancer Programme Innovation Open Call, and six companies from the OLS Cancer Healthcare Goals Programme, to showcase their work, share experiences and build new connections. Representatives from NHS England's 21 Cancer Alliances who provide care locally and colleagues from the Health Innovation Network also attended. Along with case studies, sessions were run on screening and proactive case finding and improving pathways. A roundtable consultation on the future of cancer innovation concluded the day followed by networking.

UK Conferences and events

To raise the profile of the programme and diversify applicants to ensure the highest quality of applications, SBRI Healthcare and our portfolio companies took part in and/or exhibited at 2024/25 UK conferences including the Black Health Inequalities Summit 2025, HETT North 2025, Rewired Digital Health 2025, and NHS Confederation Expo 2025.

Tailored Workshops

SBRI Healthcare's 2024/25 online workshops for innovators included Route to NHS, Narrowing Health Inequalities, Public and Patient Involvement and Engagement, Support & Funding Opportunities, and Design Behaviour Change. Innovators were also given opportunities to attend Q&A drop-ins and knowledge sharing sessions.

Success in Scaling: In conversation with Steve and Kiran Roest, Co-founders of PocDoc

pocdoc.co



Please tell us about your company - what is the story behind PocDoc and what is its mission?

In the UK, the NHS currently spends more on treating cardiovascular disease (CVD), renal and metabolic diseases than any other illness, with CVD alone costing the NHS £7.4 billion annually. These are all diseases that can be prevented with better detection and treatment. It was this realisation which led us and our team, who are incredible scientists, to think about how we could use technology to make screening easier, more accessible and convenient.

We have developed the world's first smartphone-based platform that delivers a complete cardiovascular health check (The Healthy Heart Check), including a lipid panel, BMI, heart age and 10-year risk score, in under 10 minutes. Using the same platform, we have also recently launched our world-first type 2 Diabetes Health Check, which helps people understand whether or not they are at risk of type 2 diabetes and helps them take steps to prevent it in the future.

Technologies like our Healthy Heart Check are estimated to prevent up to one million heart attacks and strokes each year and could save the NHS £27 billion over the next decade. PocDoc aims to alleviate pressures on the NHS, supporting the three key shifts by making preventative care truly accessible by combining digital-first delivery with clinically validated testing, delivered in community settings. By freeing up healthcare professionals to focus on the most critical cases, it helps ease pressure on health services.

Where and how is your innovation being used in the NHS?

PocDoc's Healthy Heart Check is being rolled out across multiple NHS regions and community settings, making heart screening more accessible to thousands of people across the UK. Through SBRI Healthcare funding in collaboration with Health Innovation North East and North Cumbria, we delivered one of the largest and most diverse programmes, successfully screening over 5,000 patients through community testing with the PocDoc Healthy Heart Check.

Since then, we have scaled throughout the UK and have screened people with our technology in every part of the UK. We are now working in 35% of all NHS regions and our Healthy Heart Check is the number 1 diagnostic test on the high street (excluding Covid and pregnancy tests). Specific recent examples in the NHS include:

In Cambridge and Peterborough, the Healthy Heart Check was deployed at the region's largest Primary Care Network to engage with serial non-responders to the NHS Health Check. From a single SMS message, PocDoc saw an 80% uptake in ordering the home test among patients who had never responded to a single invite to the NHS Health Check.

In Birmingham and Solihull, The Healthy Heart Check is a key part of the NHS Birmingham and Solihull 'Cancer Bus Tour', delivering 2,000 health checks annually in underserved areas. In West Yorkshire, the checks are being embedded into daily community life through universities, pharmacies, and local hubs to improve access and long-term outcomes.

Meanwhile, in Suffolk and North East Essex, PocDoc partnered with Latitude Festival to screen over 45,000 festival-goers, engaging a wider and more diverse audience in preventive healthcare. Through our partnership with South Leicestershire Medical Group, we're delivering at-home testing across the region, and in the Black Country our test will be offered in a multi-day tour across several towns alongside other health checks.

Finally, in partnership with Health Innovation Wessex, PocDoc supports a region-wide effort to engage patients who typically miss traditional health checks. The results of each check can be shared in real time with the patient record and with the NHS app, enabling early identification of risk and timely intervention. We've partnered with employers to run workplace health programmes, reaching populations who rarely engage with routine checks. By decentralising testing, we've reduced barriers to access and are helping the NHS meet its CVD prevention goals. Our Diabetes Health Check is currently rolling out across the North East and North Cumbria, and will be available across the UK by the end of 2025.

Our 3 key characteristics for a CEO to thrive today:

1. **Resilience – Setbacks are inevitable; what matters is bouncing back**
2. **Clarity of mission – Keep your team and stakeholders aligned on the "why"**
3. **Empathy – Understanding your users, team, and partners builds trust and drives better decisions**

What are some of your company's biggest achievements to date? What are you most proud of?

We're incredibly proud of pioneering two world-firsts: a clinically validated smartphone-based full cholesterol test and type 2 diabetes test that can be deployed at scale. But there have been other major achievements along the way:

Basing our manufacturing in the UK and building our UK facility for our Healthy Heart Check. Scaling capacity from 3,000 kits per month to 300,000 in 18 months is another milestone. We've also secured NHS validation, VC investment, which includes backing from the NHS-anchored fund Meridian Health Ventures, and partnerships with leading pharmacies to take our Healthy Heart Check nationwide.

Most importantly, we've seen real-world impact: people who would never have gone to a GP have discovered they're at risk and taken action. That's why we exist. We've also built an outstanding multidisciplinary team - spanning science, technology, and clinical expertise - that shares our mission to revolutionise early disease detection.

Tell us about your journey as entrepreneurs/innovators. What has been the best advice you have received?

As founders, our journey has been both challenging and exhilarating. We've worn many hats: scientists, fundraisers, customer service experts. One of the best pieces of advice we received was "speak to your customers constantly and build with them, not for them." It shaped our co-design work with NHS teams and patients - we spent hundreds of hours with patients and clinicians before starting any development work, just listening to what their real problems were.

Tell us about your experience raising VC capital – DOs and DON'Ts

Our VC journey taught us key lessons:

DO articulate the size of the problem and your unique solution clearly. Investors back bold missions with real-world impact. Build relationships early - well before you need funding.

DON'T chase every investor; focus on those aligned with your sector and stage. Don't overpromise timelines - credibility matters more than hype.

Securing backing from healthtech-focused funds that share our mission was critical. Transparency and data-driven milestones have helped us maintain investor trust.

What advice would you give to a healthcare entrepreneur just starting out about how to build a team and venture? Any career-defining moments that shaped you and PocDoc? Kiran – any advice you would give to the next generation of female leaders?

For new healthcare entrepreneurs, focus on assembling a mission-driven team. Find people who believe in the problem as much as the solution - skills can be taught, passion can't. Career-defining moments include securing SBRI Healthcare funding, which gave us credibility and access, and our first NHS pilots, which proved our concept.

[Kiran]: As a female leader in STEM, I'd tell the next generation: don't self-censor. Surround yourself with allies and mentors who amplify your voice. Diverse perspectives aren't just "nice to have," they make teams and products better.

Tell us about setbacks and overcoming them and any experience of gender bias

Start-up life is full of hurdles. For us, building an NHS-compliant, clinically validated platform while scaling manufacturing was a huge challenge. We overcame it by breaking the problem down, hiring domain experts, and staying flexible.

[Kiran]: Gender bias does exist - there are rooms where women have to prove their expertise more. What helps is allies who advocate for you, and building your own network of female founders. The ecosystem needs more inclusive funding practices and mentorship programmes for women.

What are your scaling ambitions and are there any key challenges to this (plus any female leadership barriers)?

We aim to screen millions of people annually, expand internationally, and broaden our platform to cover metabolic diseases. The key challenge is scaling responsibly while maintaining clinical quality and integration with healthcare systems.

[Kiran]: The biggest barrier to female leadership is often structural - lack of representation and support networks. Role models and visible success stories help break those patterns.

"SBRI Healthcare funding was transformative - it de-risked innovation and gave us credibility with NHS stakeholders. Health Innovation Networks helped us connect with clinical champions and the Accelerated Access Collaborative provided pathways for adoption. For other founders, we'd recommend SBRI Healthcare, the NHS Innovation Accelerator, and joining founder networks like FemTech Lab or MedCity for mentoring and peer support"

Building a Net Zero NHS

Implementing sustainable products in the NHS doesn't have to be at the expense of quality patient care. SBRI Healthcare is committed to supporting the NHS to reach its Net Zero goals and to date has supported 38 low-carbon healthcare innovations that save money whilst reducing carbon emissions and maintaining and improving the quality of patient care. Here are some examples and you can read more on the SBRI Healthcare website [case studies page](#).

Centre for Sustainable Healthcare

Taking collective action to deliver low carbon, equitable maternity care - **£860,669 of projected annual cost and efficiency savings from the Green Maternity Challenge**



Ufonia - Dora

Autonomous telemedicine triage to increase the sustainability of hospital referrals



Pee-in-Pot (PIP)

A sustainable, single solution device that simplifies mid-stream urine collection while cutting carbon emissions by up to 85%. **£0.18 saved per midstream urine collection + £250 per year on plastic incineration** (per 1,000 in-patient beds)



101,263
kgCO₂e
saved during
the project

16,0378
kgCO₂e
saved per
year

3 tonnes
kgCO₂e
saved per
year

18.28
kgCO₂e
saved per
patient

110,596
kgCO₂e
saved over 12
months

88
Tonnes of CO₂e
saved annually
by Royal Derby
Hospital

14,261
kgCO₂e
saved during
the project

453,000
kgCO₂e
saved during
the project

CrossCover

Evaluation of the clinical, financial and carbon cost effectiveness of the CrossCover Clinical Pathway Development and Operations (DevOps) Platform. **11% reduction in pathway costs for elective pathways (£73 vs £65 per patient)**



Show Me Your Meds

A new model of care asking a simple screening question during routine home visits by community staff, providing the potential for a big reduction in medicines waste with subsequent environmental and cost saving benefits, along with improved individualised patient care. **£720,260 of cost savings based on a population size of 571,600**



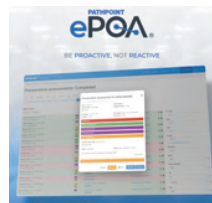
Revolution-ZERO

Reusable surgical textiles, and decontamination of medical textiles, saving waste, water, and energy. Royal Derby Hospital moved to reusable gowns, saving 88 tonnes of CO₂e annually. 19 tonnes of clinical waste, 520,000 litres of water, and **£91,000 in procurement and clinical waste costs**



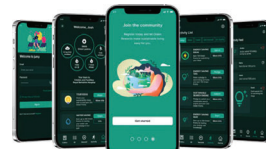
Pathpoint SurgiCare - Net Zero Initiative

Cloud based workflow solution helping clinicians to prepare patients for surgery, facilitate sustainable decision making, and support recovery at home. **Estimated total financial saving by the project of £78,633**



Team Jump

Custom sustainability engagement programmes to drive long-lasting behaviour change and deliver real impact. 276,000 kgCO₂e saved by University Hospitals Plymouth NHS Trust, and 177,000k kgCO₂e at Dorset NHS Trusts and SWASFT



Meet the Innovators

A sample of the SBRI Healthcare portfolio present their companies, their innovations, and the impact they're having on patients and NHS efficiencies

The views, projections and data included are those of the innovators/companies themselves and not necessarily those of SBRI Healthcare or its stakeholders.

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> Government priority: Analogue to Digital, Hospital to Community



JanamApp is a digital health platform developed to tackle perinatal inequalities and improve informed decision-making among ethnically diverse birthing people, with a particular focus on South Asian women.

Mothers and Babies: Reducing Risk through Audits and Confidential Enquiries across the UK (MBRRACE) reports have consistently highlighted significantly poorer maternal outcomes among women from South Asian backgrounds, driven by a combination of communication barriers, systemic inequalities, and challenges in accessing culturally and linguistically appropriate care.

JanamApp directly addresses these gaps. It provides audio-visual, culturally sensitive maternity content in multiple South Asian languages—Urdu, Hindi, Gujarati, Punjabi, Tamil and Bengali—improving patient experience with accessible, culturally resonant content and supporting women with limited English proficiency or low health literacy.

The platform was co-produced with pregnant women and healthcare professionals to ensure content is relevant, understandable, and accessible.

Culturally-sensitive maternity app addressing health inequalities and improving outcomes for South Asian birthing people

JanamApp supports medical staff with translated, standardised information, reducing repeat consultations and reliance on interpreters. It mitigates the risks of miscommunication in maternity care and empowers birthing people to engage confidently in their own care journey.

The app is designed for use both at home and within clinical settings, including installation on hospital iPads and community midwife devices, helping overcome digital poverty.

The innovation aligns with NHS priorities by supporting prevention and self-management, reducing unnecessary GP / emergency attendances through early triage and digital education and replacing printed materials with digital tools, improving cost efficiency. It also contributes to the NHS Net Zero agenda by reducing unnecessary travel, interpreter use, and paper consumption. JanamApp enhances clinical efficiency, supports workforce wellbeing by reducing communication burdens, and improves patient experience through inclusive and trusted information delivery while demonstrating scalable impact in reducing inequalities and improving care quality.

IMPACT

> 8000+ South Asian women and birthing people have used JanamApp

> Implemented across 3 NHS trusts to date - Contracts signed with University Hospitals of Leicester NHS Trust, University Hospitals of Burton and Derby, and Manchester University NHS Foundation Trust. Several other trusts are in advanced stages of procuring JanamApp

> Pilot evaluations show JanamApp is associated with significantly reduced missed maternity appointments, bringing rates among some South Asian groups in line with white women and saving an estimated £9–12k during the pilot

> Reduced use of interpreter time

> DTAC (Digital Technology Assessment Criteria) compliant, meeting NHS standards for safety, security, interoperability, and usability

> Certified with Cyber Essentials, demonstrating robust data security and protection

> Key partnerships with the charities Sands and ICP Support

> Accepted onto the NHS Clinical Entrepreneur Programme, the HIEM Digital Accelerator and NHS National Innovation Accelerator Programme



PREGNANCY

shouldn't be a Barrier

JanamApp breaks down language and cultural barriers to ensure every woman gets the care she deserves.



“

“For the first time, I felt seen and understood. The videos in my language helped me feel prepared”

User of JanamApp

“

“JanamApp has transformed how we communicate with our South Asian patients. It saves staff time and improves patient confidence in their care”

Clinician using JanamApp

“

“Our local population is very diverse, and we feel that this app improves access for some of our most vulnerable groups as it supports women to make informed decisions about their maternity care”

ICB using JanamApp



> Government priority: Sickness to Prevention

REVISE HCC



Innovation in the surveillance and early detection of hepatocellular carcinoma (HCC) to improve patient outcomes

Approximately 3,000 people are found to have HCC in the UK every year - Cirrhosis being the main risk factor. 60% of HCC diagnoses are at later, non-curative stages, with less than half of patients alive after one year.

HCC is curable if detected at early stages (5-year survival >70%) but early diagnosis depends on regular surveillance of at-risk, asymptomatic populations.

The University of Manchester (UoM), Manchester University NHS Foundation Trust (MFT), Imperial College London (ICL) and Roche Diagnostics collaborated to conduct a study - REVISE-HCC - with the goal of improving the detection of HCC at curable stages.

The team implemented Roche's GAAD navify® Algorithm across MFT hospitals, which provide specialist liver care to the Greater Manchester region. Unity Insights conducted the project's independent evaluation.

The test, manufactured by Roche Diagnostics, uses AFP alongside

another blood test (Elecsys® PIVKA-II), age and gender to calculate a risk score.

The REVISE-HCC project also undertook patient interviews and questionnaires to understand patient barriers to surveillance, and made pathway improvements as a direct result of the feedback received. For example, limited disease understanding or awareness of ongoing surveillance participation were consistently highlighted as reasons for poor surveillance, and changes were made to the information that is sent to patients to make the reason for surveillance clearer.

The majority of patients with cirrhosis are within working age so as well as saving lives, early detection and treatment results in getting people back to work more quickly and enhances productivity. Where possible, appointments are carried out in one day rather than multiple, which contributes to a carbon reduction due to a reduction in journeys to secondary care, and improves accessibility and ease of attendance.

IMPACT

> 946 patients have been assessed across 3 hospital sites at MFT since January 2024. 657 patients are enrolled in the REVISE-HCC study

> 1400 surveillance episodes have been conducted. 22 HCC diagnosed (67% early stage, 62% received curative treatment). 7 early-stage cancers detected by GAAD that would have been missed/diagnosed later. 1 referred for transplant

> Budget Impact Analysis demonstrated cost saving in the HCC surveillance pathway, with considerable savings seen at the surveillance stage

> A Cost Effectiveness Model demonstrated that GAAD results in budget savings while also resulting in a small QALY increase and a positive net monetary benefit

> GAAD and GAAD+Ultrasound (USS) both generate better health outcomes and are cost-effective strategies vs standard care, also generating net monetary benefit

> Patient adherence to the HCC surveillance pathway improved as a result of the technology implementation and pathway improvements from <50% to >70%

> CE marked in-vitro diagnostic multivariate index assay

> 4 jobs created/safeguarded (UoM & MFT)

> The promising outcomes from the initial pilot in Manchester demonstrate that the market potential and long-term commercial viability of GAAD is significant

> Roche, MFT, and UoM were finalists at the 2025 HSJ Partnership Awards in the 'Most Impactful Use of Technology on Clinical Practice' category

> An Implementation Toolkit was developed to provide stakeholders with a range of information and considerations to make when implementing GAAD at future sites, with the aim of streamlining the implementation process and maximising effectiveness of the solution

"Collaborating with the team at Manchester, we're leveraging the success and learnings of this study to help other NHS Trusts implement the GAAD algorithm, expanding access to timely diagnostics and potentially curative treatments for liver cancer patients"

Director of Access and Innovation,
Roche Diagnostics UK and Ireland

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"I was shocked to find out that I had liver cancer, but also relieved that it had been found early and it hadn't spread any further. I didn't have any symptoms that would make me think that there was anything wrong, so I am grateful that the cancer has been caught early, where a number of treatment options are available to me. It isn't until you're in this position, that you truly realise how cancer can affect anyone, and detecting it early can save your life. I would encourage others to take part in this study, if given the opportunity, as this new technology will save lives. I am grateful to be in a position where curative treatment is available and I am now cancer free"

Patient

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"This is a great example of how the NHS can transform health outcomes and save lives through the use of cutting-edge technology and a greater focus on prevention.

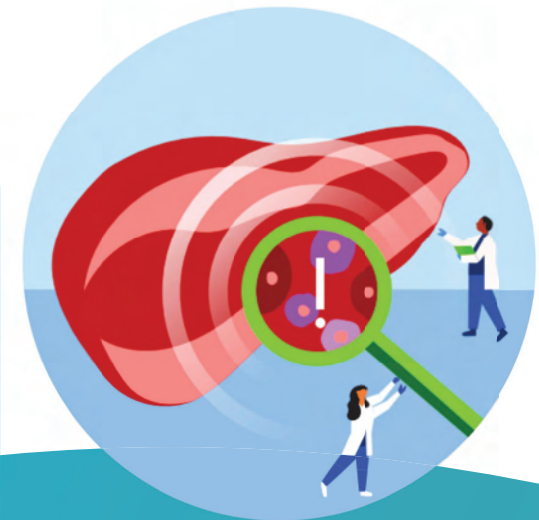
The stories of the patients who have already benefited from this new test highlight why it is so important that we diagnose and treat cancers at the earliest possible opportunity and I'm excited to see how it could be made more widely available in the future"

Regional Medical Director, NHS England

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"When I agreed to join the study, I was being monitored routinely because of the presence of liver disease but the last thing that I thought I would ever develop was cancer. The GAAD test detected that I had a primary liver cancer which turned out to be a Stage 2 liver cancer. I had no symptoms. I was referred immediately for expert treatment. Because the GAAD test detected the cancer early I have been able to access one of several treatment options quickly, before the cancer had the chance to spread outside the liver. Early diagnosis and treatment has meant that I can also benefit from the care and support of an amazing multidisciplinary team. It has also meant that I have been given time to involve my family, especially my children, to navigate this journey together. Without the GAAD test, the diagnosis of cancer may have come too late for all of us"

Patient



> Government priority: Analogue to Digital, Hospital to Community



XR solution transforming rehabilitation with engaging therapy, precise compensation control, and accurate remote monitoring

NeuroVirt is a digital health company using extended reality (Virtual and Augmented Reality) to transform neurorehabilitation for stroke and other neurological patients. The innovation tackles a critical NHS challenge: the shortage of intensive, high-quality rehabilitation - particularly following stroke - where national guidelines recommend three hours of daily therapy, a target most services currently cannot meet due to workforce and capacity constraints.

The innovation gamifies rehabilitation through immersive, individualised XR environments that engage patients in enjoyable, evidence-based therapy. NeuroVirt's proprietary algorithms detect and correct for non-optimal movement patterns in real-time, ensuring high-quality therapy delivery. Clinicians can remotely monitor detailed recovery data and prescribe personalised exercises via the NeuroVirt app, enabling scalable rehabilitation across home and clinical settings.

With just one device, NeuroVirt supports intensive training of both upper and lower limbs, addressing a full spectrum of motor impairments.

The product increases therapy intensity by up to 15 times, helping meet NICE 2023 guidelines, reduces clinician burden, and supports earlier discharge from inpatient care, easing bed pressures and expanding access to community-based rehabilitation.

Patients using NeuroVirt at home show high satisfaction and dramatic increases in adherence, with 87% reporting improved confidence, motivation or function. It enables faster, data-driven decision making, with detailed digital assessments completed in under one minute and remote monitoring tools that allow clinicians to personalise care in real time.

By providing equitable access to gold-standard therapy - including to underserved or rural populations - and reducing travel-related emissions, NeuroVirt also supports the NHS's health equity and Net Zero goals. The innovation enhances productivity, relieves system bottlenecks, and ensures that every patient can access the intensity of rehabilitation they need to recover.

IMPACT

> Over 500 neurological patients benefited to date

> Reduces care costs by over 90%, delivering measurable improvements in motor recovery at a fraction of the cost of traditional care (<10%), and reducing long-term disability and hospital re-admissions

> Improves workforce efficiency, allowing one therapist to oversee multiple patients simultaneously, saving 30-50% in staff time and reducing pressure on overstretched teams

> UKCA, FDA, CE approved/certified as software as a medical device. NeuroVirt is also ISO13485, ISO14001, DSPT, DTAC, DCB0129 certified

> 5+ jobs created and safeguarded, with a growing cross-functional team across clinical, technical, and commercial roles

> Key global partnerships including with Guy's and St Thomas' amongst other NHS providers, Circle Health Group and Hobbs Rehabilitation amongst UK private rehabilitation providers and Mount Sinai Health System, Cedars-Sinai, John Hopkins and the Shirley Ryan AbilityLab in the US

> Over \$4.5M raised in non-dilutive and dilutive funding

> Selected for leading accelerator programmes, including Texas Medical Center Innovation, Endless Frontier Labs (NYC), KQ Labs and Conception X

> NeuroVirt currently has a 100% lead conversion rate (as of May 2025)



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“As proud investors, we believe NeuroVirt's XR solution is truly transformative for neurorehabilitation, significantly increasing access to vital therapy and empowering clinicians with real-time remote monitoring. This innovation represents a leap forward for the NHS, offering a scalable and affordable path to delivering more impactful rehabilitation and improving patient outcomes”

Investor

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“Functionally I have started carrying things, not only bags but also cups when I couldn't carry anything prior to using NeuroVirt. I can see that they [fine-motor skills] are improving, and it has helped me get back to work as it has helped with my keyboard skills”

Patient



> Government priority: Analogue to Digital



Extended Reality (XR) therapy for adults and children

XR Therapeutics (XRT) has developed a new approach to talking therapies by combining clinically proven methods with cutting-edge immersive technology. By integrating traditional Cognitive Behavioural Therapy (CBT) with graded exposure therapy delivered through Extended Reality (XR), XRT is enabling more personalised, efficient and impactful treatment experiences.

At the heart of XR Therapeutics' approach are custom-built simulations that place patients directly within scenarios that would typically trigger anxiety. Unlike traditional therapy, which relies on verbal recollection or imagination, XRT allows patients and therapists to engage within controlled, virtual environments. These simulations are delivered across a range of accessible technologies—including laptops, and TVs and are fully customisable in real-time by the therapist using a tablet or desktop control panel.

Real-time adaptability empowers clinicians to tailor the experience to each patient's needs, creating a safe, responsive, and highly effective therapeutic environment.

XRT's mission is to make transformative mental health treatment affordable and accessible to all, regardless of background or circumstance. Designed to integrate seamlessly with existing clinical pathways, the platform enhances both the effectiveness and efficiency of mental health services. Clinicians benefit from a tool that supports flexible deployment, enabling treatment delivery within NHS settings, private clinics, or even community spaces.

One of the major innovations is XR Therapeutics' new mobile application, designed to complement the intervention. The app enhances patient engagement by providing follow-on support, monitoring progress, and helping users manage anxiety in real-time.



IMPACT

- > Live in the Toby Henderson Trust, Sheffield Children's NHS Trust, Greater Manchester Mental Health NHS Trust, The Percy Hedley Foundation, Daisy Chain, Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust, and South Tyneside and Sunderland NHS Foundation Trust
- > 94% of patients demonstrate measurable improvement
- > XR Therapeutics outperforms the 49% success rate of traditional CBT. Especially effective in cases where standard methods have failed
- > 100% of therapists who have used XR Therapy would recommend it to peers
- > Partnerships with Sheffield Children's NHS Trust through their Children's Health Accelerator
- > Health economic evaluation estimates £21,000 savings per 100 patients treated
- > New mobile application co-designed and developed with autistic people and people with learning disability now available on Apple and Android devices. Positive feedback received
- > Boundless is listed on G-Cloud and the NHS Dynamic Purchasing System
- > Relationships with BUPA, Axa, Vitality, and Aviva
- > Chief Operating Officer Penny Day participating in a Women's International Networking Programme with the Department for Business and Trade

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"The treatment exceeded all my expectations. My daughter turned to me and said: "I think I could deal with anything now"

"I supported a student who was experiencing dysregulation, which in the past has led to very challenging behaviour. The (XRT) therapeutic app provided an opportunity for the student to self-regulate. Through a series of guided breathing and relaxation exercises, the app helped the student calm down, gain awareness of their emotions, and manage their response in a positive way. It was a powerful tool in supporting their emotional regulation and well-being"

"My experience with treatment was phenomenal. I am much better able to manage my phobia and anxiety now and would recommend sessions for anyone who is experiencing phobias of any kind. It's amazing!"

"XRT has changed my perception of how I view all my fears and anxieties and not just the specific phobia I have. I was blown away by the process and how quickly the treatment worked for me"

Users of XR Therapeutics' therapy

> **Government priority: Analogue to Digital**



A digital platform improving hospital efficiency by streamlining reporting of operational and logistical issues

One of the biggest challenges facing the NHS is the growing backlog of patients waiting for elective surgeries. Each additional week of waiting can negatively impact a patient's quality of life. When evaluating causes for delays and cancellations to elective operations at an NHS Trust, MediShout found that 17.4% of cancelled operations over a four-month period were due to equipment issues. This included surgical instruments not being prioritised for sterilisation based on their scheduled use, a lack of real-time visibility on available surgical kits, a lack of available kit, and problems coordinating with external medical device companies to repair and maintain kit.

MediShout has developed an AI-driven smart software solution that integrates operating theatre schedules, hospital asset tracking systems and medical device companies.

By combining real-time equipment availability with upcoming surgical procedures, the software prioritises which instruments should be sterilised or readied for theatre next. This ensures that surgical kits and instruments are ready when needed, reducing cancellations caused by kit shortages. Additionally, the combination allows for increasing kit uptime by optimising for the best time to send kit for preventative maintenance.

MediShout's SBRI Healthcare project focused on Orthopaedics at Broomfield Hospital. Broomfield's Sterile Services department also handles the orthopaedic equipment for Basildon and Braintree hospitals. Use of MediShout was found to save Sterile Services staff up to 60 minutes per day and dispatch teams 30 minutes a day. 74 minutes were saved per ad-hoc repair with annual efficiency savings of £21,721, and 56 minutes saved per

contracted equipment repair with annual efficiency savings of £3,469. Equipment returned from repair 48% faster, up to 28 days quicker from sterile good suppliers and equipment related cancellations dropped by 44%. Preventative planned maintenance on equipment increased from 33% to 100% and staff satisfaction with the repair pathway improved from 12% to 96%. Importantly there was a 44% decrease in elective operations cancelled due to equipment issues.

IMPACT

> MediShout is in use in 140 sites across the UK, Ireland and the Nordics

> 10,000 staff users across Mid and South Essex NHS Foundation Trust

> £1m in efficiency savings per Trust annually

> 100% compliance with waste management

> 44% fewer cancelled operations

> 97% of staff spending more time with patients

> 55% of reporting QR scans conducted by patients and visitors

> £10.9m raised in private investment from 2020 to date. MediShout is partly owned by the NHS, via KHP Ventures (now Meridian Health Ventures)

> Collaborations with GIRFT, HECO Analytics, HealthEdge Ltd, TheatreMan and B. Braun

> 11 jobs safeguarded and/or created

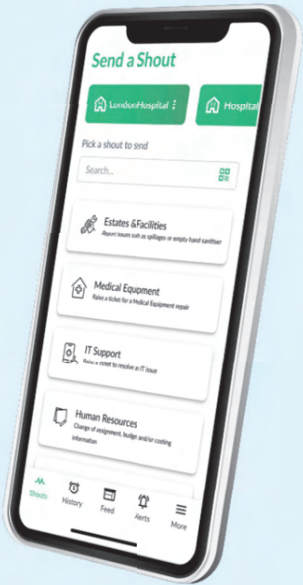
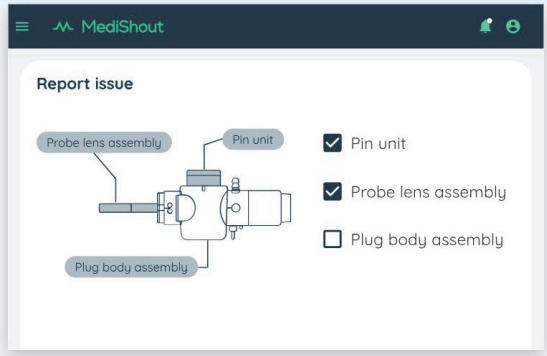
> NHS Health Technology Adoption and Accelerator Fund (HTAAF) funding awarded

> Currently exporting to Ireland and the Nordics, with mainland Europe next

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"Since we have started using MediShout to log our Estates, Equipment and ICT issues we have had a much more robust oversight of these issues affecting our service delivery and are able to easily identify outstanding tasks and chase with the relevant service teams"

Clinician using MediShout



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“MediShout has worked with several of our Trusts to understand our culture and adapt their technology to fit with our organisation’s existing systems and flow”

Deputy CEO at NW Anglia NHS Trust

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“MediShout has had a positive impact on the way we send endoscopes for repair. It has massively reduced the time involved as we no longer need to complete several paper documents or make telephone calls. The communication from Olympus is much better, as everything is communicated via a Shout”

Endoscopy Decontamination Supervisor,
St. Thomas Hospital

> Government priority: Analogue to Digital, Hospital to Community, Sickness to Prevention



Simplifying complex healthcare workflows

CrossCover is a comprehensive AI-assisted Clinical Pathway Development and Operations Platform that optimises healthcare delivery across the NHS. It addresses fragmented care by connecting primary care, secondary care and patients throughout the entire patient journey, regardless of specialty or setting.

The platform streamlines the referral process with integrated management systems that connect to NHS Mailboxes and e-RS and has FHIR interoperability with Primary/Secondary Care Electronic Patient Records.

CrossCover helps ensure standardised, evidence-based, high quality care through customisable clinical pathways and decision support and facilitates active patient participation through digital forms, notifications and shared decision aids.

It delivers comprehensive analytics on outcomes, budget impact and carbon costs and provides real-time carbon impact analysis, helping reduce unnecessary patient journeys and resource use. The platform saves approximately 940 tonnes CO2e per specialty per ICS for optimised primary to secondary care pathways.

By optimising care pathways, CrossCover helps identify issues earlier and supports

preventative interventions. The platform's ability to embed best practice at the first point of care ensures patients receive appropriate management sooner, preventing condition deterioration and unnecessary treatments. Patient-facing tools enable self-management and earlier engagement with health services.

Evidence shows CrossCover can reduce unnecessary emergency department referrals by 40% and secondary care referrals by 50%, supporting the shift toward community-based care. It can reduce the time staff take to review a patient and make decisions on care by 30%.

CrossCover helps healthcare systems achieve earlier diagnosis and treatment initiation - improving survival rates for the biggest killers, and by standardising care pathways reduces health inequalities and unwarranted variation.

CrossCover cuts service provision financial and carbon costs by 20-30%. It saves £57-£136 per patient pathway episode for modelled direct efficiency savings, excluding additional potential savings from reduced litigation claims, reduced training time for staff to be deployed to front line roles and reduced staff stress as they are supported with tools embedded in their workflows.

IMPACT

> UKCA-marked Class 1 Medical Device software platform registered with the MHRA

> Deployed in more than 50 NHS Sites

> 450,000 patients benefitted to date

> The Eye Single Point of Access (SPoA), hosted by Moorfields Eye Hospital, The Royal Free Hospital and North Central London ICB, won the Acute Sector Innovation of the Year award at the HSJ Award 2024. The SPoA service runs on the CrossCover referral management system

> CrossCover reduces carbon emissions by 18% (22.5kg vs 18.28kg CO2e per patient)

> Keele University's Randomised Clinical Trial demonstrated doubled best practice adherence in primary care, 40% reduction in routine referrals from primary to secondary care, and decreased prescribing (2.1 vs 1.79 per patient). The system maintained excellent safety with no high-risk issues identified. (Unpublished findings)

"Using CrossCover makes you more thorough and reminds you of things that you might have missed"

Clinician using CrossCover

"Guides Junior Doctors who are new to Orthopaedics and gives them confidence"

Clinician using CrossCover

"If I didn't know how to manage a case I would usually call my seniors any time of the day. CrossCover reduces my frequency of having to call for assistance"

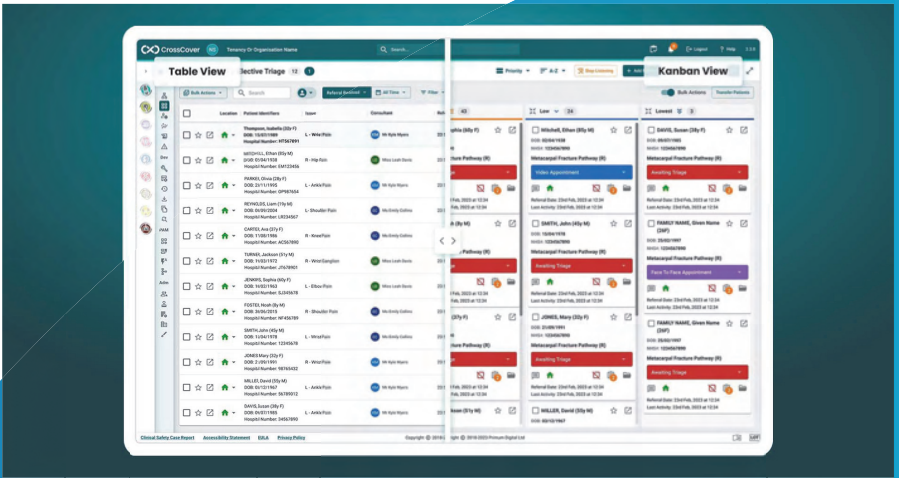
Clinician using CrossCover

We asked 100 healthcare professionals what they want. Then built it.



"From a patient's perspective they are going to get the most constructive, least invasive, least inconvenient treatment"

Clinician using CrossCover



> Government priority: Analogue to Digital, Hospital to Community, Sickness to Prevention



A proven digital self-management app that improves outcomes and cuts costs by empowering patients

myCOPD is a clinically proven digital self-management platform for people living with chronic obstructive pulmonary disease (COPD). It directly addresses the NHS challenge of limited access to pulmonary rehabilitation (PR) - a critical intervention shown to reduce exacerbations and hospital admissions, yet accessed by fewer than 20% of eligible patients due to workforce and capacity constraints. myCOPD introduces a scalable, evidence-based digital alternative to traditional PR that patients can use at home, improving access, consistency, and engagement.

myCOPD delivers comprehensive, NICE-recommended care digitally, including a full PR programme, inhaler technique training, symptom tracking, educational resources, and clinician oversight.

myCOPD generates significant benefits across efficiency, experience, and equity:
> Hospital admission reduction: COPD accounts for 1 in 8 emergency

admissions. Clinical studies have shown myCOPD is as good as traditional PR, while improving access to both PR and self-management
> Cost savings: By preventing exacerbations and admissions, myCOPD can save the NHS an estimated £1,000-£2,000 per patient per year
> Workforce efficiency: Digital PR reduces the demand on in-person services, enabling them to manage more patients with fewer resources
> Health equity: By offering care remotely, myCOPD helps reach underserved groups - including those in rural areas or with mobility issues - who are typically excluded from in-person PR
> Carbon savings: Reducing patient travel for PR appointments supports NHS Net Zero goals, cutting emissions associated with transport
> Patient empowerment: An independent NICE survey has shown that over 80% of users report increased confidence in managing their COPD, contributing to better adherence and long-term outcomes.

IMPACT

> myCOPD holds a UKCA mark and is registered as a Class I medical device with the MHRA. It is also compliant with DTAC, DCB0129, and Cyber Essentials + standards. myCOPD self-management and pulmonary rehabilitation has received an early value assessment (EVA) Recommendations | Digital technologies to support self-management of COPD: early value assessment from NICE. The outcome is a time-limited NICE recommendation that the technology can be used within the NHS until December 2027, while further evidence is generated

> Adopted in 350 sites. Procured by at least one service in 70% of the NHS Integrated Care Boards in England

> Delivered over 225,000 remote PR and education sessions, saving an estimated 1.5 million miles of travel, significantly reducing emissions associated with patient transport

> £2 million in equity investment from family offices. Planning for an additional VC round in 2026

> Launched in the US - deployed in Massachusetts and Kansas to date. Planned deployments in Florida and Texas

> Secured commercial sales in the US, supported by evidence from the PROPEL study

> 3 jobs safeguarded as a result of SBRI Healthcare funding

> Projected revenue growth of 10-20% YoY within the NHS, with potential to reach £60-£80 million by 2029 internationally

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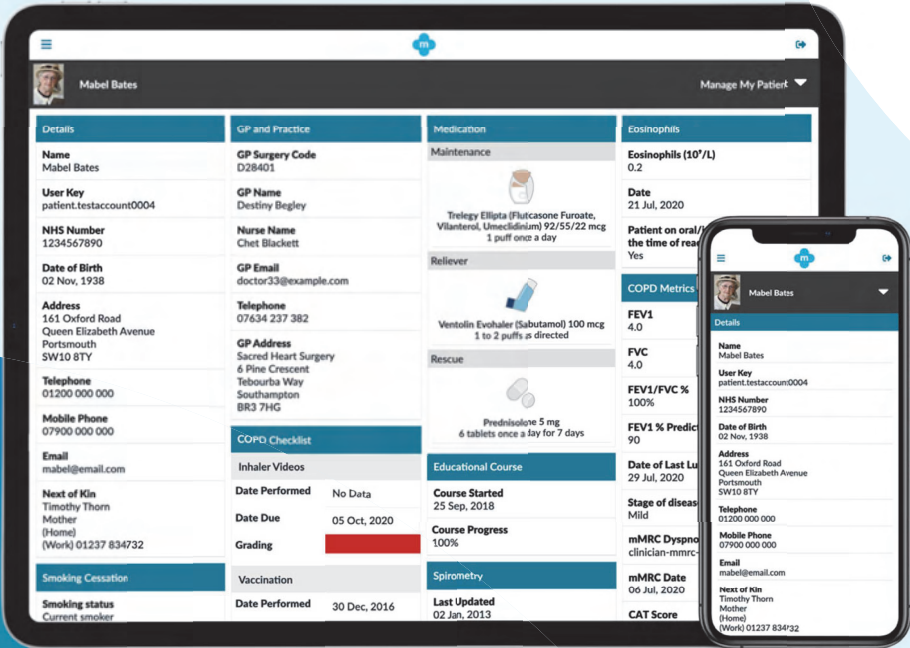
“I’ve got more confidence. Confidence in managing my condition. I realise I don’t have to stop, and I don’t have to rush”

Patient

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“Last year, before using myCOPD, I had 12 exacerbations, this year I have had 2. I now know when and how to take my medication. I rely on my doctor far less than before”

Patient



> Government priority: Analogue to Digital, Hospital to Community



GPs see over 13 million patients annually for dermatological concerns resulting in more than a million referrals to secondary care. About half of these are urgent suspected skin cancer referrals of which only 8% will be diagnosed with melanoma and squamous cell carcinoma, the majority of patients having been referred for benign skin lesions. Nationally, urgent suspected skin cancer referrals are increasing by more than 11% each year and this growing demand for dermatology appointments is placing significant pressure on the workforce.

DERM is an AI as a Medical Device (AIMD) that can be utilised to triage and assess skin lesions for cancer. Patients are screened in Community Diagnostic Hubs using DERM to obtain a highly accurate skin lesion assessment, without the need for a face-to-face appointment.

DERM, Class III CE-marked AI medical device enabling early diagnostic skin cancer assessments in post-referral/secondary care and the community

Ease of access and the ability to obtain a highly accurate assessment closer to home encourages patients to present earlier with a concerning skin lesion.

DERM can recognise melanoma with a similar accuracy to skin cancer specialists. It can be used to more quickly rule out benign lesions thus reducing onward dermatology referrals. Capacity can therefore be directed to patients who need expertise the most.

The most recent post-market surveillance data demonstrated that DERM continues to perform at or above the level of specialists. DERM helps to support better triage of cases that warrant specialist review and onward referral to biopsy or excision. Across pre-referral sites, DERM avoids Urgent Suspected Cancer Referrals (USCRs) for 60-70% of patients including 35-50% of patients being routed towards discharge.

IMPACT

- > 200,000+ NHS patients have been seen through pathways that rely on DERM. 15,500 cancers found
- > Approved by NICE for use in triage and assessment of skin lesions on the urgent suspected cancer referral pathway, while further evidence is gathered
- > Used by 25 NHS organisations at 27 sites
- > 99.9% Negative Predictive Value accuracy rate ruling out melanoma
- > Helped Secondary Care organisations avoid up to 95% of NHS face-to-face USCRs by combining DERM with downstream teledermatology reviews where patients can be routed straight to biopsy
- > 21 partnerships including with Bupa, and a partnership with Affidea to implement DERM in skin cancer pathways in Greece, Romania, and Lithuania
- > Raised £15M series B investment round
- > Winners of the HSJ Awards: Digital Clinical Safety Award for CWFT - "Demonstrating the clinical safety of AI teledermatology: transitioning from pilot to sustainable standard practice" and the Improving Primary Care Through Digital Award for SNEE - "Using AI to detect skin cancer earlier and transform patient experience in primary care"
- > British Data Awards AI Company of the Year 2025
- > Named in Bloomberg's Top 25 Startups to watch 2024

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"The role of AI, as far as I'm concerned, is here to stay. We need to use it as part of a pathway that redefines the whole process and reduces work pressures, but also increases efficiencies in terms of costs - underpinning it all is a [positive] patient journey"

Clinician using DERM

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"If you could describe a perfect NHS appointment end to end, then it would have been this appointment. Seen in a day and reassured a few days later. Thank you"

Patient



Contact

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