

Frequently Asked Questions

What is the NHS Innovation Accelerator?

The NHS Innovation Accelerator (NIA) is an award-winning [NHS England and NHS Improvement](#) initiative, delivered in partnership with all 15 [Academic Health Science Networks \(AHSNs\)](#) and hosted at [UCLPartners](#).

The NIA was created to deliver on the commitment detailed within the *Five Year Forward View* and more recently highlighted within the [NHS Long Term Plan](#) - helping to create the **conditions and cultural change necessary for proven innovations to be adopted** faster and more systematically through the NHS, and to **deliver examples into practice for demonstrable patient and population benefit**.

Launched in 2015, the NIA is chaired by Professor Stephen Powis, National Medical Director, NHS England and NHS Improvement.

How is the NIA funded?

The NIA is a partnership between [NHS England and NHS Improvement](#), and England's 15 [Academic Health Science Networks \(AHSNs\)](#), hosted by [UCLPartners](#). Each partner provides funding for the NIA.

How does the NIA align with the work of the Academic Health Science Networks?

The NIA supports the spread of high impact innovations for the benefit of patients and the NHS. It is delivered in partnership with all 15 [Academic Health Science Networks \(AHSNs\)](#), hosted at [UCLPartners](#).

The NIA aligns with and contributes to AHSN delivery on a local level and as a national network as follows:

- **Economic growth and innovation exchanges**
NIA Fellows contribute to AHSN national targets for economic growth, including investment leveraged, exports and number of jobs created. Their respective products, devices and technologies undertake a rigorous multi-stage assessment process before being selected to join the NIA, helping to 'de-risk' these innovations and provide assurances for local and national Innovation Exchanges.
- **Breadth of innovations rigorously selected to address local needs and national priorities**
The NIA is open to all types of innovation, seeking to identify evidence-based solutions for local or national spread. These include platforms to support medicines optimisation, patient safety devices, genomics and diagnostic related innovations, medtech, digital innovations, AI, and new care models and pathways.
- **Research on NIA innovations and understanding adoption and spread**
The NIA's evaluation stream is helping to broker real-world validation using insight, learning and experience from the Fellows and adoption sites. Year One's research (2015/16) evidenced some of the common conditions for success in innovation scaling, whilst the Year

Three evaluation ([Understanding how and why the NHS adopts innovation, 2017/18](#)) examined how NHS sites successfully take up NIA innovations for greater patient and staff benefit. Our 2020 research in partnership with the Nuffield Trust ([Achieving scale and spread: Learning for innovators and policy-makers](#)) looked at what needs to happen for innovation to achieve scale, particularly for later stage adopters.

Fellows are also supported to strengthen their existing evidence base through links with the AHSNs, [National Institute for Health and Care Excellence \(NICE\)](#), and [National Institute for Health Research \(NIHR\)](#) infrastructure (including Collaborations for Leadership in Applied Health Research and Care - [CLAHRCs](#)), building an understanding of what research and evidence is most useful to de-risk and spread their innovation.

- **Accelerating spread through integration with other national programmes**
The NIA supports selected innovations to become ready for acceptance onto relevant national initiatives. This includes evidence refinement, business model development and preparing implementation toolkits.

One of the 11 AHSN Network national programmes - QbTest - continues to access support through the NIA. A further three are NIA Alumni: ESCAPE-pain, FREED and AliveCor Kardia.

How is the NIA different from other accelerators?

Unlike other health accelerators, the NIA offers a dual focus on both personal development for individuals, and bespoke support to spread a mature innovation, recognising that both are [critical to scaling innovation in the NHS¹](#).

The NIA is open to all types of innovation (including digital, medtech, workforce and models of care) and welcomes applicants across a range of professional backgrounds and skills sets (including clinical, academia, SMEs, large corporates, public-sector, charitable, community groups and not-for-profit organisations).

The NIA does not support start-up or early-stage innovations. It supports mature innovations with an existing evidence base, already being used in the NHS or elsewhere, to spread. In doing so, the NIA captures and shares real-world insight, learning and expertise on how to spread new solutions across the NHS in England.

How is the NIA different from other initiatives like Small Business Research Initiative (SBRI), the DigitalHealth.London Accelerator, the UCLPartners Innovation Fellowship and the Clinical Entrepreneurs?

The NIA is distinct from other initiatives like the [Small Business Research Initiative \(SBRI\)](#), the [DigitalHealth.London Accelerator](#), the UCLPartners Innovation Fellowship and Clinical Entrepreneurs, in that it only supports innovations with an existing evidence base, already being used in the NHS or elsewhere, to spread nationally. The NIA's unique dual focus offers personal development for individuals and bespoke support to scale an innovation.

The DigitalHealth.London Accelerator and AHSN regional digital health accelerators work with earlier stage companies who would benefit from closer working with the NHS in a specific locality, for example, to trial products or build their evidence base. Unlike the NIA, these initiatives focus solely on digital solutions, and aim to support the company as opposed to the individual and innovation.

The SBRI Healthcare programme provides funding to develop innovations that meet the challenges facing the English healthcare system. NIA Fellows in the past have successfully applied to receive funding from the SBRI.

The UCLPartners' Innovation Fellowship (IF) focuses on companies that are at a stage earlier in the pipeline than the NIA will support. Applicants to UCLPartners will need to be at the proof-of-concept stage whereas the NIA recruit innovations that are already in use and have an evidence base. UCLPartners IF is only open to NHS clinicians and NHS staff working within North Central London, North East London or Mid and South Essex Integrated Care Systems; NIA Fellows can come from any organisation.

The Clinical Entrepreneur training programme is specifically for clinicians and is designed to offer opportunities for clinicians to develop their entrepreneurial aspirations during their clinical training period.

Why does the NIA have a dual focus on the individual and the innovation?

To successfully spread innovation in the NHS, our experience has found that you need: (1) an inspiring leader who can engage effectively and lead the scaling of a health innovation, and (2) a great innovation, at the right level of maturity, supported by evidence and the right business model⁴. The NIA's dual focus on personal development for individuals and bespoke support to spread an innovation recognises that both are critical to scaling in the NHS.

What is an NHS Innovation Accelerator Fellow?

NHS Innovation Accelerator (NIA) Fellows are the committed and passionate individuals being supported to scale their high impact, evidence-based innovations through the NIA. Each of these Fellows – along with their innovations – have been through a rigorous, competitive selection process before being invited to join the NIA.

There are currently 36 Fellows and 36 Alumni on the NIA. 17 were recruited in Year One (2015), 8 in Year Two (2016), 11 in Year Three (2017), 13 in Year Four (2019), 11 in Year Five (2020) and 12 in Year Six (2021), following successive annual Calls. NIA Fellows are offered the opportunity to become Alumni at the end of their 3 years on the Accelerator.

Fellows share a passion for learning and scaling innovation for patient benefit. They are committed to sharing their learnings widely via the NIA, and all offer expertise and experience in the adoption, implementation and spread of innovation in the NHS.

NIA Fellows are exceptional but not because of their achievements or accolades. They are exceptional because of their passion, values and determination to make a positive impact on the NHS and its patients. They come from a wide range of backgrounds, including clinical, industry and academia. Amongst the mix is a Multiple Sclerosis nurse consultant, an engineer, a former police officer, a respiratory consultant, a dentist, a social worker and even a sleep evangelist!

What support does the NIA offer to Fellows?

The NIA cannot offer a guaranteed route to widespread adoption across the NHS. Being on the NIA does not offer preferred supplier status.

The ethos of the Accelerator is to provide a range of support in response to the needs of each Fellow and the barriers to uptake their innovation faces within the NHS. This includes a bespoke learning programme, mentorship and networking opportunities to equip Fellows with critical knowledge, relationships and skills to scale innovation in the NHS.

Each NIA Fellow is provided with:

- Access to a pool of mentors
- Networking opportunities with [Academic Health Science Networks \(AHSNs\)](#)
- Quarterly learning events
- Peer-to-peer support
- Ad hoc specialist information sessions, as required (e.g. procurement, NHS commissioning, health economics, business case development, media training, etc.)
- Navigation to existing innovation initiatives locally within AHSNs (e.g. [SETsquared](#)) and nationally (e.g. [Global Digital Exemplars](#))
- Access to a bursary*

**Please note: clinicians can use the bursary to fund backfill for clinical sessions, on a case by case basis*

At the end of the initial 12 months, each Fellow should have the following in place, with the help of the NIA:

- **A robust diffusion plan:** A critically appraised, robust diffusion plan for the NHS, which they have made progress on implementing (e.g., new contracts signed, resources secured).
- **Expanded networks:** Built a network of decision makers, 'critical friends' and other key stakeholders.
- **Navigation of innovation opportunities:** The ability to navigate innovation initiatives, support infrastructure and national levers.
- **Expanded knowledge:** Addressed critical knowledge gaps as agreed with their mentors/lead AHSN/NIA core team at the programme outset.

How long can Fellows access support from the NIA?

Fellows can access support from the NIA for up to 3 years, after which they will be offered the opportunity to become an NIA Alumni.

When can I apply for the NIA?

The NIA will launch its next international Call on 1 September 2021, seeking exceptional individuals with high impact, evidence-based innovations which address clear needs and challenges within England's NHS.

What is the application and selection process?

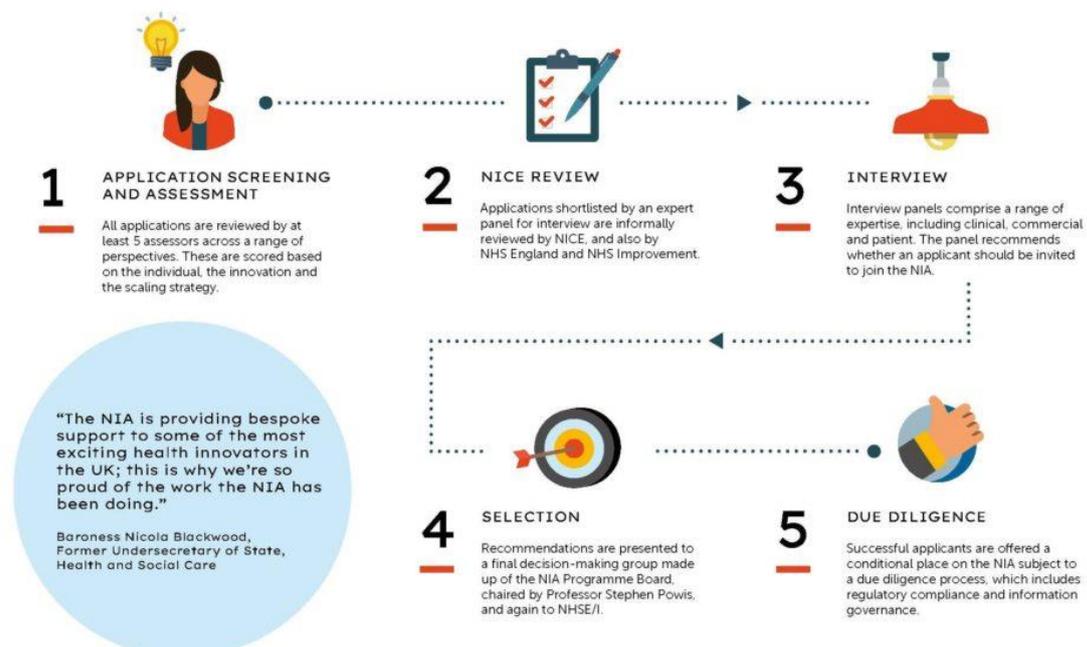
When the NIA Call opens, applicants are asked to submit an application form detailing information about themselves and their skills, experience and competencies to spread an innovation; as well as their innovation, the problem it addresses, the evidence as to its effectiveness and their strategy for scaling in the NHS.

Application forms are then shortlisted by a minimum of five assessors drawn from a range of perspectives including clinical, patient, commercial and implementation. Applications are assessed on the basis of the applicant, the innovation, and confirmation that there is no straightforward or obvious local mechanism for scaling; in other words, there needs to be a clear reason as to why the applicant needs the support of the NIA.

Once shortlisted, applicants are invited to a panel interview. At the same time, the [National Institute for Health and Care Excellence \(NICE\)](#) informally reviews all shortlisted applications. After the interviews, a final decision panel chaired by Professor Stephen Powis, National Medical Director at [NHS England and NHS Improvement](#), and Chair of the NIA Programme Board, reviews the recommendations from the assessment process (application, NICE review and interview) to agree which applicants will be offered a conditional place on the NIA.

At this stage, two references are requested for each Fellow - one of whom needs to be a senior representative from the Fellow’s employing organisation; the other should be from a healthcare provider/ commissioner site where your innovation is currently in use (this does not need to be an NHS site). We also undertake a period of due diligence, and request - where relevant - two years of annual accounts, a list of company directors and published annual reports. All Fellows will be asked to sign an agreement with [UCLPartners](#) (who host the NIA) before being formally announced as an NIA Fellow. An example contract will be available on the application page of the NIA website when the Call is launched. Applicants should check that they and their employing organisation would be happy to sign this contract before applying.

THE SELECTION PROCESS



The NIA does not perform independent scrutiny of the evidence base put forward by the applicant. All NHS sites remain accountable for their decisions and care provision/ safety, and as such undertake their own scrutiny of NIA innovations before they decide through their local governance structures whether to use them or not. The NIA does not seek to duplicate, circumvent or replace these local decision making processes. NHS sites are not mandated to take up NIA innovations.

How are the Call themes decided?

The annual Call themes are agreed by the NIA Programme Board following extensive national engagement with NHS stakeholders, patients, [Academic Health Science Networks \(AHSNs\)](#) and [NHS England and NHS Improvement](#), according to local and national priorities.

The 2022 intake recruitment Call has aligned with the current NHS priorities. As such, applications for this Call must address at least one of the following themes:

- 1. Supporting equity of access, experience or outcomes for those at greatest risk of poor health outcomes.**
 - Individuals from black and minority ethnic communities.
 - Individuals living in the bottom income quintile.
 - Individuals with a learning disability.
 - Individuals with autism.
 - Individuals with a serious mental illness (SMI).
 - Individuals from a health inclusion group (specifically: traveller communities, homeless people).
- 2. Early detection of diagnosis.**
- 3. Delivery of pro-active personalised care.**

Additionally, applicants are asked to demonstrate

1. How their innovation addresses health inequalities, either by actively minimising inequality or by proactively ensuring the innovation does not exacerbate inequality.
2. Active engagement with patient and public representatives on the innovation with which they are applying.

Detailed theme information can be found in the *Call for Applications*.

Do applicants need the support of an Academic Health Science Network (AHSN) before they can apply to the NIA?

An application does not need the support of [Academic Health Science Network \(AHSN\)](#) prior to submitting an application form. However, applicants may wish to engage with their local AHSN to discuss applications and to seek advice on scaling plans before submitting their application.

Is the NIA only for UK-based companies?

No. Applicants from across the UK and overseas are encouraged to apply. Applicants should note the mandatory requirement to attend the NIA launch, summit and quarterly events in person.

I am from a start-up, can I apply for the NIA?

The NIA is for innovations that are both ready to scale across the NHS in England, and that have the necessary resources and team to scale across England over a 12-month period and beyond. Your organisation should therefore have sufficient resources to be able to scale up at pace – and be able to take up opportunities that arise from your participation in the NIA.

I am a clinician, can I apply for the NIA?

Yes, the NIA is open to Fellows from any background, and we have supported several clinicians to scale their innovations. If you have queries or concerns regarding the time commitment of 2 days a week for Fellows, we encourage you to contact the NIA team to discuss your options. Please note, as of 2020, we have expanded our bursary usage policy to include backfill for clinical sessions.

I have not completed an application form like this before, where can I go for support?

UK based Applicants

Your local Academic Health Science Network may be able to provide support and advice in applying for the NIA. Find your local AHSN here: <https://www.ahsnnetwork.com/>.

If you are new to completing application forms of this nature and are based in the UK, independent advice provided by the [Knowledge Transfer Network](#) on structuring and producing a compelling application is available. Applicants can register their interest for this support by emailing NIA@uclpartners.com by 22 September 2021. A draft of the proposed application will need to be completed by this date and feedback will be provided by telephone or an online platform on 1 October 2021. Support will be offered on a first come, first served basis.

International Applicants

You should contact [Healthcare UK](#) to access the dedicated support on offer for international companies looking to come to the UK.

Why is there a time commitment for Fellows of 2 days a week?

In order to ensure they can take advantage of the benefits of being on the NHS Innovation Accelerator (NIA), Fellows need to be able to commit two days per week to scaling their innovation. These two days per week could include for example attendance at quarterly events, producing and implementing sprint plans, meeting mentors and [Academic Health Science Networks \(AHSNs\)](#), developing stakeholder engagement and marketing plans, building networks, or a health economic case.

For some Fellows, this will be part of their normal day jobs - where scaling their innovation is their everyday business.

For others, particularly those who are based in clinical roles, it might mean setting aside the 2 days for the completion of these discreet tasks. Where required and approved, clinicians are able to use their bursary to back-fill for these two days.

How has Covid-19 affected participation in the NIA programme?

The NIA learning programme has been previously delivered face to face with quarterly and learning events as well as meetings held in London. Due to the Government guidelines during the pandemic, events and meetings have successfully been held virtually on platforms easily accessible on all devices including those used in NHS settings. Although the guidelines now allow for face to face sessions to be held, it is likely that the programme will continue to be run at least partially online, although this is subject to change with advance notice.

What if a Fellow wishes to resign from the NIA?

If a Fellow is no longer able to maintain their commitment to the NIA, for example if they are no longer working for the company supporting their innovation, they are able to put forward a replacement candidate, who will then go through a formal application process. Replacement Fellows

are carefully assessed and must attend an interview with NIA stakeholders before a recommendation is ratified by the NIA programme board.

If for any reason a Fellow is no longer able to participate in the NIA and does not wish to be replaced, they are offered the opportunity to become an Alumni early.

Who are the Mentors on the NIA?

Our expert, high-profile Mentors represent a broad skills base. Their support is predominantly in the form of advice, guidance and networking. Our pool of Mentors is regularly expanded to support the experiences and identified needs of the Fellows. Current Mentors include:

- Dr Adam Kirk, Medical Director at my mhealth; Consultant Physician
- Adrian Downing, Independent Consultant specialising in Healthcare SMEs
- Professor The Lord Ajay Kakkar; Chairman, King's Health Partners; Professor of Surgery, UCL
- Andreas Haimboeck-Tichy, Director of Health, Social Care and Life Sciences, IBM
- Professor The Lord Darzi of Denham, Director of the Institute of Global Health Innovation, Imperial College London
- Dr Archana Sharma, Founder of Neem Tree Press; Medical Doctor; expert in finance and healthcare
- Dr Arun Krishna, Head of Franchise, Oncology, AstraZeneca
- Dr Ben Maruthappu, Co-founder and CEO, Cera
- Bobby Kaura, Seed investment and International development, Illumina Accelerator Cambridge
- Dr Celia Ingham Clark, Medical Director for Clinical Effectiveness, NHS England and NHS Improvement
- Ed Jones, Independent adviser; Formerly Chief of Staff to the Foreign Secretary and Advisor to the Secretary of State for Health
- Fiona Bride, Director of Market Access, Novartis
- Gary Gallen, CEO and founder of rradar
- Dr Harpreet Sood, NHS primary care doctor; Senior Advisor in Health Technology at Reckitt Benckiser
- Hassan Chaudhury, Global Digital Health Specialist, Healthcare UK
- Ian Thompson, Independent Digital Health Specialist
- Professor Joanne Hackett, Head of Genomic and Precision Medicine, IQVIA
- Professor Sir John Burn, Professor of Clinical Genetics, Newcastle University; Non-Executive Director, NHS England and NHS Improvement
- Jon Spiers, Former CEO, Autistica
- Juliet Armstrong, Independent Transformational Change and Digital Transformation Specialist
- Kay Boycott, Independent Advisor and Strategy Consultant
- Manish Miglani, Investment Director, Nesta
- Dr Mayur Vibhuti, GP and NHS England Clinical Entrepreneur Fellow
- Dr Nick Ibery, Associate Partner, Pangea Investors; Medical Doctor; Lawyer
- Nick Allen, Industry Procurement Adviser, Health Innovation Manchester
- Pam Garside, Partner, Newhealth; Fellow, Judge Business School, University of Cambridge

- Robert Mollen, US-qualified corporate lawyer resident in Fried Frank's London office since 1991 and member of London Tech Advocates
- Dr Samantha Barrell, Chief Operating Officer, The Francis Crick Institute
- Sharlene Lopez, Founder & CEO, Eye catcher; Brand & Communications Expert
- Professor Sudhesh Kumar, Dean of the Warwick Medical School; Director of the Institute of Digital Healthcare, University of Warwick
- Professor Tony Young, National Clinical Director for Innovation, NHS England and NHS Improvement
- Professor Tony Young, National Clinical Director for Innovation, NHS England and NHS Improvement

What is the role of the NIA core team?

The NIA core team, based at [UCLPartners](#), provides coordination, administration and communications support for the Accelerator. This includes:

- Working with partner organisations ([NHS England and NHS Improvement](#), [AHSNs](#)) and supporting organisations ([The Health Foundation](#), [NHSX](#), [Department of Health and Social Care](#), [Healthcare UK](#)) to optimise the value of the NIA for Fellows and the wider NHS.
- Administering the recruitment, selection and contracting process of the NIA Fellows.
- Coordinating the annual summit and launch events, quarterly events, and additional learning sessions.
- Connecting Fellows to [Academic Health Science Networks \(AHSNs\)](#) and Mentor support.
- Supporting Fellows to develop action and sprint plans.
- Identifying and meeting any gaps in the support package offered to Fellows.
- Providing secretariat for the NIA Programme Board and NIA Operational Group.
- Engaging with NHS England and NHS Improvement to optimise opportunities for the Fellows and to address systemic barriers.
- Coordinating and managing communication and engagement activities to support NIA aims.
- Providing day-to-day support to the Fellows.

Is there ever a circumstance when a Fellow could be asked to leave the NIA?

The bar for Fellows and innovations is high. All Fellows are required to demonstrate full participation in the NIA, with a consequence of exiting the programme if requirements are not met. Expectations of Fellows are detailed in the *Call for Applications* and the *contract* that Fellows, along with their organisations, are required to sign, to formally join the NIA. As part of this commitment, Fellows agree to spend two days per week on the NIA, attend the launch and four quarterly events, and submit progress reports. At the start of the NIA, they will develop and agree a scaling plan with the NIA core team. As part of this, Fellows agree a minimum set of activities they will deliver during the first 12 months.

Fellows may be asked to leave the NIA in the event that they:

- Break any condition in the NIA contract.
- Do not adhere to the NIA code of conduct.
- Are unable to attend the launch and/ or quarterly events.
- Do not deliver on agreed activities during the course of the programme.
- Behave in a manner unacceptable to the NIA and its ethos.

I do not think the NIA is right for me. Where else can I go for support for my innovation in the health sector?

The [Academic Health Science Network \(AHSN\)](#) are uniquely placed to identify and spread health innovation at pace and scale; driving the adoption and spread of innovative ideas and technologies across large populations. There are 15 across the country and these should be your first port of call for support with your innovation.

2022 Intake Call, September 2021

Who should apply for the 2022 Intake NIA Call?

You can be the inventor of your innovation, the lead for it within your organisation or simply the representative of an innovation you find compelling, and as such, wish to scale it across the NHS.

Applicants, nationally and internationally, can be clinicians; academics; from a public-sector, charitable or not-for-profit organisation; from a small or medium-sized enterprise (SME); from a large corporate.

You should apply if:

- Your innovation addresses one or more of this year's themes:
 1. **Supporting equity of access, experience or outcomes for those at greatest risk of poor health outcomes.**
 - Individuals from black and minority ethnic communities.
 - Individuals living in the bottom income quintile.
 - Individuals with a learning disability.
 - Individuals with autism.
 - Individuals with a serious mental illness (SMI).
 - Individuals from a health inclusion group (specifically: traveller communities, homeless people).
 2. **Early detection or diagnosis**
 3. **Delivery of pro-active personalised care**
- Your innovation demonstrates, in practice, significant outcomes for significantly lower cost.
- Your innovation is supported by an evidence-base and is ready to be diffused across the NHS.
- You have a set of strong values, and a passion for learning and for sharing your insight widely.
- You are committed to scaling evidence-based innovations for patient and population benefit.
- You are committed to understanding health inequalities and to improving equity of access, experience and outcomes through innovation.

Innovators from all genders, ethnicities and backgrounds are encouraged to apply for our accelerator. We know that many groups have been underrepresented in our past cohorts and we are keen to move toward a cohort of Fellows that better represents the diversity of the people served by the NHS.

How do I apply to join the NIA?

The *Call for Applications* document provides a useful starting point for learning more about the NIA. You should also read the *Guide for Applicants* and review the wording of the contract, which both you and your organisation will need to sign should you be invited to join the NIA. The *Guide for Applicants* will be made available when the call launches on 1 September 2021.

Once you are assured that you and your innovation meet the criteria specified, that you can commit to the time requirements (including attendance **at all quarterly events**) and that you have the written support of your employing organisation, you will need to complete the application form between 1 September 2021 and 23:59 on 10 October 2021.

How many Fellows will be selected to join the NIA in Year 7 (2022)?

Up to 12 individuals will be selected to join the NIA in its sixth year. These individuals will join the existing Fellows from the 2020 and 2021 cohorts.

Is the NIA for individuals only or can teams/ companies apply?

The NIA focuses on the development and support of individuals, and therefore all applications must include a sole named applicant.

What are the key dates for the Year Six NIA Call in 2021/22?

The key dates are as follows:

Activity	Date
NIA opens for applications	1 September 2021
'Meet the NIA' information events	Wednesday 1 September 12:00 - 13:00 Thursday 9 September 12:00 - 13:00 Monday 20 September 12:00 - 13:00 Tuesday 5 October 12:00 - 13:00
Application deadline	23:59, 10 October 2021
Application form assessment	29 October – 19 November 2021
Shortlisting panel	10 December 2021
Invitation to interviews	15 December 2021
Unsuccessful applicants notified	15 December 2021
Interviews	10, 11, 12, 13 & 14 January 2022
Final decision-making panel	26 January 2022
Outcomes communicated to applicants	3 February 2022
Due diligence and contracting	4 February – 25 February 2022
Feedback sent to unsuccessful applicants	25 February 2022
<i>The following dates/ sessions are a mandatory part of the NIA. You will not be able to take up a fellowship unless you are able to attend each of them.</i>	
New Fellow 1:1 meetings with NIA team	w/c 21 March 2022
Induction and preparation day for NIA Launch	21 March 2022
Launch event	31 March 2022
NIA induction event/ panel session	4 April 2022
Quarterly events	9 May 2022 Wednesday 20 Jul 2022 Thursday 30 September 2022 Tuesday 1 February 2023
NIA Summit	March 2023 date tbc

Where will the panel interviews take place?

Panel interviews will take place virtually on 10, 11, 12, 13 and 14 January 2022.

I have read the Call for Applications and the Guide for Applicants but I still have further questions.

If you have read all the published documents (the *Guide for Applicants* is available from 1 September) but still have questions, there are a number of online information events you can join to find out more.

'Meet the NIA' information sessions

These online Q&A sessions are open to anyone without prior registration. The interactive sessions will provide detailed information about the application process and the NIA. Slides will be made available and there will be an opportunity for Q&A with the NIA core team.

- [Wednesday 1 September: 12:00 – 13:00](#)
- [Thursday 9 September: 12:00 - 13:00](#)

- [Monday 20 September: 12:00 - 13:00](#)
- [Tuesday 5 October: 12:00 - 13:00](#)

Please register for a session by clicking on your preferred date. Full details will be sent to you in the confirmation email.

If I am selected as an NIA Fellow, how and when can I access the bursary?

The NIA year is structured around a series of four 12-week sprints, which support delivery of your overall scaling ambition. At the beginning of each 12-week sprint, you will be asked to set out a plan for the coming 12 weeks, including the type of support you need from the NIA. As part of this, you can request to use your bursary, but you will need to clearly show how it supports delivery of the 12-week sprint. You will need to receive written agreement from the NIA team before claiming your bursary.

What can I spend my bursary on?

In the first year, Fellows will have access to a bursary of £20,000. To be eligible to access the bursary, Fellows will need to demonstrate a clear need for this funding within their application form. It will be assumed that large private companies will not seek to access the NIA bursary. The bursary is intended to support the scaling of your innovation and/ or your own personal development to support you in your scaling efforts. You can also use your bursary for travel to NIA events.

The uses for the bursary are likely to fall into the following categories:

- Personal development, including expert advice (e.g., legal or commercial) or specific training courses, where not directly provided or available through the NIA.
- Enablement of effective engagement with key stakeholders, including the organisation of meetings and events (e.g., venue hire, refreshments, speakers, travel costs for potential adopters and patients etc.), development of engagement material (e.g., videoing, editing, designer costs, etc.) and design of supporting diffusion tools (e.g., design and production costs relating to training and marketing material).
- Innovation development and adaptations where these have been suggested through the NIA as enablers to diffusion.
- Evidence gathering and analysis including, for example, the application of health economics, market testing or technical analysis.
- Travel and other costs (e.g., subsistence) directly relating to the Fellow's participation in the NIA.

The bursary cannot be used to cover, for example:

- The NIA Fellow's salary or other related payroll costs¹.
- Any costs for services contracted from consultancy firms or other external agencies for the delivery of support otherwise available to the NIA Fellow via the NIA.

Will I receive feedback if my application is unsuccessful?

¹ Please note: clinicians can use the bursary as backfill for clinical sessions, on a case by case basis

Unsuccessful applications will receive feedback by the end of February 2022. The level of detail of the feedback will depend on the stage to which the application progressed e.g., applicants that have not progressed to the full assessment phase will receive basic feedback whilst those fully assessed will receive detailed feedback.

I have not completed an application form like this before, where can I go for support?

UK based Applicants

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International Applicants

You should contact [Healthcare UK](#) to access the dedicated support on offer for international companies looking to come to the UK.

For more information about the NIA:

Email: nia@uclpartners.com

Website: www.nhsaccelerator.com

Twitter: [@NHSAccelerator](https://twitter.com/NHSAccelerator)

Sign up for our Insights newsletter via the NIA website