Test Beds FAQs

Following our recent briefing events, we have compiled a list of frequently asked questions to help you when completing your expression of interest.

1. **What can we expect if we submit an expression of interest?**
   Submitting an expression of interest (EOI) does not guarantee you a partnership with the NHS or any funding through this programme. All expressions of interest will be reviewed for completeness and fit with the programme objectives. EOIs that offer the greatest potential to improve outcomes at reduced cost for the NHS will be taken forward into the matchmaking process where they may have the opportunity to meet and form partnerships with NHS organisations. Please note that we will not be providing feedback on EOIs that are not taken forward and that all EOIs may be subject to Freedom of Information requests and should, therefore, not contain any commercially sensitive information.

2. **What does the matchmaking process involve?**
   The matchmaking process aims to bring together innovators who can offer the greatest potential to improve health outcomes for equal or less cost with potential NHS sites with an interest in a similar area. The process will be flexible and iterative, focusing on catalysing new partnerships – or deepening existing relationships. The process is likely to include virtual opportunities to meet potential partners, as well as a number of face-to-face events around the country. We are designing the process in partnership with the AHSNs and programme sponsors. We envisage this phase running from July through to the autumn.

3. **How will test beds be selected?**
   Test Beds will be selected by the end of 2015 following an assessment process in the autumn. We will invite final proposals from Test Bed partnerships in the autumn, with selection based on the strength of combinatorial innovation propositions and strength of partnerships between innovators and the NHS. We anticipate selecting around five or six Test Beds in December 2015, although if more proposals are of sufficiently high quality we may seek to back them as well.

4. **How will Intellectual Property be protected throughout the programme?**
   Intellectual Property (IP) associated with existing technologies that are tested through the programme will remain with the developer. If new IP is created through the programme, its ownership will need to be determined locally on a case-by-case basis in discussion with the relevant Test Bed site. We do expect to share evaluation results widely, so all organisations must be prepared to share data and results from the evaluation.

5. **I am already in a partnership – can we submit a bid?**
   Yes. Nothing precludes existing partnerships from submitting an expression of interest. However, we are naturally most interested in catalysing innovations that would not have happened anyway and are not interested in funding innovations that are already being funded from elsewhere. These need not be entirely new proposals, but could be proposals that seek to expand the scale or scope of planned or existing work that require rigorous evaluation.

6. **We are already involved in another national programme (vanguard / DPP etc), can we still participate?**
   Yes. All health economies that meet the criteria set out in the prospectus are welcome to put themselves forward as a potential Test Bed site. However, the Test Bed programme provides an opportunity to evaluate combinations of innovations to identify

those that produce significant health improvements at the same or lower cost. This programme is distinct from others that may be in play locally and any support associated with it must therefore be targeted at this programme's objectives.

7. Is the Internet of Things a central requirement for all Test Beds?
The Internet of Things (IoT) is one potential application for Test Beds, but it is not the only focus. Test Beds should develop proposals based on innovations that have the highest potential impact on improving health outcomes at the same or lower cost. However, we will select at least one Test Bed that deploys an Internet of Things approach to achieve these objectives. In line with this, and the desire to scale any successful innovations more widely, we are also looking for all digital innovations to be developed with open standards for cyber security, privacy and interoperability.

8. What do you mean by 'sufficient scale'?
Test Beds will need to include a large enough population group to provide sufficient data to support a robust evaluation. The exact population size required to enable this may vary by partnership, depending on the clinical area of interest and associated prevalence within the local population. We have indicated an overall population of 1m to demonstrate that we are seeking proposals of sufficient scale to move beyond initial pilots and provide robust evaluation, and that will consider scalability beyond initial testing. Sub-populations on which innovations may be focused – for example, people with long-term conditions – may of course be smaller than the overall population.

9. How much funding is available for the programme and how will it be awarded?
The first wave of the programme has access to funding of £10m, which we expect to run for 2-3 years. However, it should be noted that this programme is not intended as a commissioning vehicle, but as enabler to unlock and test the potential value of innovations.

10. How will funding be allocated?
We will consider how funding should be allocated at a later stage in the process, as partnerships start to emerge. It is likely that funding will be allocated on a case-by-case basis. We are looking to back the best Test Bed proposals, with consideration for the strength of partnership and the potential value to patients and taxpayers alike.

Funding is primarily designed to support participating NHS bodies to ensure they have the capacity and capability to deliver their proposal. National sponsors will also fund the evaluation programme. We expect participating innovators and companies to invest their time, people and technology in return. However, for the Internet of Things focused Test Bed or Test Beds some funding will be available to businesses, academia and public sector bodies to support collaborative projects which demonstrate the application of IoT technologies in real life settings. This is part of the Government's integrated £40m programme to accelerate the development of the Internet of Things (IoTUK) over the next three years.

11. Is there seed funding to support people through the matchmaking process?
No. However, we will be providing advice and support throughout the matchmaking process to help the development of partnerships.

12. What funding is available for SMEs?
There may be some funding available for UK-based SMEs, which will be considered on a case-by-case basis. However, innovators should be prepared to invest their own time and technology.

13. What investment are innovators expected to provide?
We are asking innovators to contribute their innovation and associated capacity, capability and leadership to enable it to be effectively tested in a real world clinical setting. Recognising that some SMEs may not be able to invest at the scale required, some funding may be available to UK based SME organisations within designated Test Beds – the level of this funding would be agreed on a case-by-case basis.

14. I am an international innovator – am I able to participate?
Yes. We welcome any innovator who thinks they have an innovation that can improve healthcare outcomes at the same or lower cost. We are, however, not able to provide funding to any innovator who does not have a UK base.

15. What are the benefits for innovators, given there is little or no funding for them?
The Test Bed programme is providing innovators with a route to build partnerships with the NHS in order to test their innovations in real world clinical settings. In addition to access, the programme will provide central support that will focus on unblocking barriers to progress and any problems that arise through implementation. Where innovations prove to be successful, the programme will provide an evidence base for success within the NHS and national bodies and the NHS will look to support their further adoption and diffusion within the NHS in England.

16. What is the national approach to evaluation that will be used?
The national approach to evaluation is being developed and will be set out later in the process. However, it will build on a number of core principles:
- To have a clear understanding of the outcomes (health and wellbeing; care and quality; and efficiency) and impacts from each Test Bed, how these arose and whom they affected, and what costs and other resources were involved
- To give us early indications of change and effects as well as information on longer term impacts
- To be clear about the outcomes and how the inputs and activities contribute to these, through development of a logic model
- To have metrics to measure progress against the outcomes
- To have a control group for each Test Bed to establish what would have happened if there was no change

As set out in the prospectus, the national bodies will cover the costs of developing the national evaluation approach and analysing and reporting on information collected nationally in order to establish the impact of the combinations of innovations. Sites will be expected to contribute to the development of the local approach, including definition of local metrics, and to collect and provide the necessary data. The costs for this will be borne by the local teams.

17. What happens once Test Bed projects are complete?
We anticipate that each Test Bed will need to run for 2-3 years to generate robust evaluations. National bodies, working with the AHSNs, Test Beds and others looking into adoption and diffusion, will explore how wider uptake of successful innovations can be encouraged. We are committed to using the flexibilities available to us to facilitate diffusion, which may include degrees of freedom in payment, tariff and information flows.

18. Will service users be involved in the test bed process?
We expect patients and the public to be engaged by innovators and potential NHS sites as they develop their combinations of innovations and consider how they best serve local patient needs. In recognition of this we anticipate including assessment criteria focused on patient and public engagement as part of the selection process.

19. What type of innovations are you looking for?

We are looking for all types of innovation that can have a positive impact on healthcare outcomes at the same or reduced cost and help improve service delivery models across the NHS. We are interested in digital innovations that can help contribute to this, as well as innovations that have an Internet of Things focus. However, at this point we are welcoming innovations from any sector.

20. Do innovators have to be working in a consortium already?

No. Innovators can come forward as a consortium, but equally we are welcoming individual innovators who may find new innovator and NHS partners through the matchmaking process.