

# Evaluation of the NHS Clinical Entrepreneur Programme

## Case Studies



# Contents

Case study: Ash Kalraiya .....	1
Case study: Bernadette Porter.....	2
Case study: Chris Turner.....	3
Case study: Diane Chandler.....	4
Case study: Hammad Jeilani .....	5
Case study: Henrietta Mbeah-Bankas.....	7
Case study: Henry Goodier and Manny Nijjar.....	8
Case study: Hinnah Rafique.....	9
Case study: Ian Stell .....	10
Case study: Jing Ouyang.....	11
Case study: Julian Nesbitt.....	12
Case study: Krishan Ramdoo.....	13
Case study: Kyle Stewart.....	14
Case study: Rosie Riley.....	15
Case study: Saif Ahmad.....	16
Case study: Sajeev Shanmuganandarajah .....	17
Case study: Tamsin Holland-Brown.....	18
Case study: Tim Allardyce .....	19

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## Case study: Ash Kalraiya



Ash Kalraiya



Joined the CEP in 2016



MediShout

Digital platform and app improving operational inefficiencies in hospitals.

**Whilst working as an Orthopaedic surgeon in the NHS and internationally, Ash grew frustrated at how inefficient hospitals could be from an operational perspective.** On a daily basis, he was experiencing delays due to issues with IT, equipment stock, estates and facilities, and this was having a big impact on patient care. In response, Ash established MediShout, an app which incorporates smart data analytics and AI to enable providers and suppliers to fix the issues most impacting care.

**Prior to joining the CEP, Ash had successfully piloted MediShout on a small scale but was in need of additional support to help advance and grow the company.** When he came across an advert for the CEP on social media, he was quick to apply: *“I was a clinician and I was trying to be entrepreneurial, I felt that the programme was speaking to me.”*

**Ash remarked that the benefits of being part of the CEP materialised early on.** On the day of his interview he met another applicant who is now his colleague and co-founder, and an interviewer who quickly became an important and influential mentor (one of many he connected with through the programme). Ash also met his lawyer and accountant, future investors, industry experts (including heads of medical equipment departments), and senior NHS executives, and it was from a visit to a global manufacturer organised by Tony Young that MediShout secured its biggest contract. Ash also reported that the pit stops were particularly valuable. They helped build foundational knowledge and skills and were an excellent opportunity to bring CE together and facilitate peer learning: *“The energy you get is incredible... It is about humans helping other humans effectively – that is what’s happening on the CEP.”*

**MediShout has led to a number of wider benefits for healthcare providers, patients and medical suppliers.** An economic health assessment demonstrated that MediShout can save hospitals £1 million annually in efficiency savings<sup>1</sup>. Healthcare staff have more time to focus on patient care and improved workflow prevents issues such as cancelled procedures. Improved communication with healthcare staff and better accessibility enables medical suppliers to deliver improved services, which strengthens their reputation, and the AI algorithms predict when equipment might break, thus allowing suppliers to better plan for device maintenance.

**If it wasn’t for the CEP, there is a high chance that MediShout would have closed.** When Ash joined the programme it was just him. Now, there are 16 people in his team. MediShout has raised over £2 million of funding and is already being used in ten NHS sites in the UK. Through a collaboration with one of the world’s largest equipment manufacturers, it is intended that this will increase to hundreds of hospitals within the next year. Remarking on this, Ash stated: *“The amount of support and resources we have got out of the programme has honestly been incredible.”*

<sup>1</sup> Health Enterprise East, supported by Eastern ASHN (2020) The health economic impact and benefits of MediShout

## Case study: Bernadette Porter



**Bernadette Porter**



Joined the CEP in 2018



**NeuroResponse**

Out of hours care for those with long term neurological conditions

**NeuroResponse is a company that aims to improve out of hours care for those with long term neurological conditions like Multiple Sclerosis and Parkinson's.** A consultant nurse with over 30 years' experience, Bernadette had run an audit that found that patients with these conditions were susceptible to developing UTIs and sought to develop a new pathway to improve their care. She had always looked for opportunities to develop the process within the NHS and prior to the programme had created healthcare pathways as precursors to the innovation. The CEP provided an opportunity to develop the ideas into a business whilst improving her business skills with a clinical focus – and through a route that was supported by the NHS. Resulting from NeuroResponse, Bernadette was in the inaugural Health Service Journal top 50 NHS Innovators List. She has also been awarded with an MBE for her services to nursing.

**NeuroResponse has been adopted within the NHS, and there are opportunities to explore other areas in the future.** Adoption has occurred in North Central London ICS, the Barnett ICS group and Mid South Essex, currently utilised by 400 patients with on-boarding of 2,000 more underway. There are plans for expansion into other patient groups within the urology network and interest from clinical teams from healthcare systems abroad such as Australia and New Zealand.

*"It's good people doing good things, but actually being allowed to do it".*

**The peer support networks, pit-stops and mentoring were deemed to be highly valuable for the success of NeuroResponse.** Bernadette found she was able to mix with like-minded people with backgrounds and interest more aligned with hers compared to well-established businesses who were not easy to relate to. She described the mentors and peer groups as having "outstanding generosity". For instance, she was able to connect with other clinical entrepreneurs who were creating digital solutions and able to share ideas on barriers and enablers. In another example, Bernadette was able to reach out to other clinicians that helped her recruit managers, signpost helpful companies to work with and act as a sounding board for pitches and interviews.

**As a result of the programme Bernadette returned to the NHS when she would otherwise not have.** By the time she joined the programme, there were numerous options of work outside the NHS or retirement. Instead, she was able to take up an Honorary Role following retirement from a clinical environment and stated that *"the CEP was fundamental to my decision to stay"*.

## Case study: Chris Turner



**Chris Turner**



Joined the CEP in 2017



**Convenet**

Technology company providing NHS integration APIs (Application Programme Interfaces)

**A pharmacist by background, Chris has been involved with the CEP twice with two different innovations.** During his first year on the programme, Chris developed Dimec, a repeat prescription app that integrated with GP and Pharmacy systems. Dimec was acquired by Co-op in September 2018 and relaunched as Co-op Health.

**Whilst developing Dimec, Chris spent the best part of five years trying to integrate the app with GP and Pharmacy systems.** Although this was a lengthy and at times frustrating process, this experience inspired his second innovation, Convenet.

**Convenet is an aggregator of NHS digital integrations.** Chris explained that companies can plug their systems into the Convenet API and achieve interoperability with NHS systems – which is now a requirement of the NHS Standard Contract – without having to navigate the lengthy assurance process with the NHS directly. Examples of companies that have used the Convenet API include an online pharmacy that wanted to allow patients to order repeat prescriptions directly to their GP without the pharmacy having to manually process the order, and a company that wanted to provide users with real-time access to blood test results from their medical record.

**Convenet is associated with significant time and costs savings for companies:** access to NHS integration is 26 times faster using the Convenet API (taking a matter of weeks as opposed to years) and seven times cheaper. Accelerating products to market also has knock on benefits for patients with utilization of Convenet’s API resulting in patients across the country being able to access their electronic health records, book appointments and order repeat prescriptions.

**Although it is likely that Chris would have developed Convenet in the absence of the CEP, the networking facilitated by the programme was credited with securing a pipeline of potential customers.** Chris was able to network with fellow Clinical Entrepreneurs at pit stops and events, and through Tony Young and others he was introduced to senior people in companies that were interested in an integration offer.

**The programme also helped grow Chris’s confidence:** *“In my company I am very much the front of house, I communicate with business partners, companies and developers. Through the programme my confidence with chatting to people and my ability to network has improved”.*

**Convenet was nominated for the Most Promising Start Up award with Medilink Midlands. The company was acquired by Datavant in September 2022.**

## Case study: Diane Chandler



**Diane Chandler**



Joined the CEP in 2020



### The Safe Home Environment Assessment Tool

Supporting people with challenging behaviours and learning disabilities to move from inpatient hospitals to community accommodation

As an Occupational Therapist working in a Mental Health Trust, Diane recognised that there was not a tool that could help with planning the physical environment for people with challenging behaviour and learning disabilities when they were moving from inpatient hospitals to community accommodation. To help with this challenge, Diane developed the Safe Home Environment Assessment (SHEA) Tool whilst she was working as part of a group of Occupational Therapists that had come together in response to the NHS' Transforming Care Agenda (2015). The initial version of the SHEA contains a list of potential risk behaviour statements and sensory preferences (such as the need for space or noise minimising strategies) which need to be considered as part of the planning process. It is envisaged that the revised tool will focus more on what will support an individuals' wellbeing and contribute to a more home like environment.

**Diane wanted the CEP to help her develop the idea, scale it up and embed it within the NHS.** The CEP provided opportunities to Diane that she could not otherwise have accessed as an NHS clinician. Although she thought that she would have taken the idea forward without the programme through separate grant funding that she had received, Diane found that the CEP provided something complementary to the money that kept her on track: *"It was like having a goal ... It was really easy during Covid to lose track and the CEP provided structure to help us keep moving forward to getting the initial version of the tool to the point where we could share with a wider audience."*

**Diane has been able to draw on a range of perspectives as a result of the CEP, helping her to develop the SHEA Tool.** It was important to her to be able to get the inputs from a range of individuals working in the NHS, especially people on similar journeys who provided reassurance and support to her. The CEP has helped develop her role at the Trust where she works. The CEP provided the opportunity for Diane, alongside peers, to visit IBM and this inspired Diane to consider how she could apply different technologies within her work setting.

**To date, the SHEA Tool has been adopted inside the NHS by around 115 individual users as part of a 'soft launch'.** The plan is for the Tool to be utilised by these individuals and the project's academic partner will assess its effectiveness and identify improvements. Although they have not established a company, the CEP business planning was noted to be particularly helpful here, including the 'lean canvas' approach. Diane said that she was also looking forward to the social media session to learn how best to promote the Tool. Work is ongoing with experts by experience on developing a range of accessible design tools. These aim to ensure that there are meaningful opportunities to involve someone in the planning and design of their own home.

**Even at this early stage, the Tool has led to a wider benefits, and these are expected to grow.** It has helped Diane and others to understand in more detail what needs to be considered when designing a home for someone who may need a more bespoke person-centred environment and the tool can contribute to better understanding what a "capable environment" may look like for someone. Further evaluation is needed to know if the tool can lead to other benefits for the individual and broader system such as cost savings or reducing placement breakdown.

## Case study: Hammad Jeilani



**Hammad Jeilani**



Joined the CEP in 2019



**Apian**

A healthcare drone logistics startup

**Hammad Jeilani, together with his friend Christopher Law, came up with an idea for improving healthcare logistics whilst in medical school.** The idea was formulated when they entered a competition run by the UK Space Agency in 2018, and in 2019 they joined the CEP as the youngest ever Clinical Entrepreneurs at the time. In 2020, they founded Apian with Alexander Trewby to take their idea forward. The company seeks to provide on-demand delivery of faster, smarter and greener healthcare by building products and platforms to connect the healthcare industry with the drone industry. Drones can, for example, be used to deliver medication including chemotherapy which can have short half lives. Hammad and Christopher decided to apply to the CEP to help them formalise the idea, meet other like-minded entrepreneurs, and receive guidance from mentors. A key attraction of the programme was the suite of support offered: *“The collective variety makes the Programme worth more than the sum of its individual offerings.”*

**In November 2022, the company raised £5 million in seed funding after trialling its platform<sup>1</sup>.** The Covid pandemic had led to a prioritisation of healthcare in drone access applications, thereby creating significant new opportunities for the company. There were trials underway with two NHS Trusts and ongoing discussions to set up more. Following rigorous testing, Apian became the first company in the UK to get permission from the NHS to use drones to delivery chemotherapies, proving it’s safety. Outside the NHS, the company has partnered with several private sector companies.

**The platform is expected to lead to a range of wider benefits, including improved patient care** (by providing lab results and medical products more quickly), **financial and time savings for the NHS** (through efficiencies), **reduced health inequalities** (by increasing access to healthcare), reducing traffic on roads (the NHS accounts for 5% of all road traffic in England<sup>2</sup>), and **enhanced reputation of the NHS (through world-leading innovation)**. Whilst the company is expected to maintain a healthcare focus for time being, it is likely that there will also be applications in other sectors in the longer term.

**Without the CEP, Hammad considered that they would have tried to take the innovation forward through other means.** However, **they would likely have made “a minute fraction of the progress”** that they had achieved as a result of taking part in the programme. A key factor in this was the CEP’s role in providing a source of connections within the NHS and beyond: *“What the CEP does is it quite literally opens doors.”* Hammad and his colleagues had formed numerous business relationships following introductions to senior stakeholders within the NHS and the private sector. The programme itself has created a community within a *“truly incubating environment”*. For example, through the CEP, Hammad and Christopher met their third co-founder, Alexander (initially a mentor on the Programme) who brought invaluable skills to the company. Alexander is a serial entrepreneur and led Apian’s seed round – without the CEP bringing Chris, Alex and Hammad together, Apian would not be where it was today.

**The programme was seen to provide Clinical Entrepreneurs with “friendly and willing” testbed locations for their innovations, helping to gain traction and scale more rapidly.**

Without the credibility of the CEP and the right connections, Hammad believed that it would have been much more difficult for them to set up trials within the NHS. This has also had a 'snowballing' effect: following successful trial activity with the first few Trusts, the company has been directly contacted by others with trials now underway in Northumbria and London.

**On a personal level, Hammad reflected that he had benefitted greatly from taking part in the programme,** both in terms of his wellbeing and career development: *"I cannot emphasise enough how much personal improvement I have enjoyed as a direct result of the CEP."* The community of other like-minded, positive and determined individuals as well as the mentorship on the programme was seen as particularly valuable for personal development and wellbeing.

**More widely, the CEP was considered to have contributed to a "culture of innovation" within the NHS, particularly among the younger generation.** Hammad had seen an *"exponential rise"* in the number of junior doctors and young medics who were interested in innovating to create solutions for the NHS and the wider healthcare industry, but would have lacked the confidence to take their ideas forward without a programme like the CEP. He has been happy to share his experience on the programme and encourage others to apply.

<sup>1</sup> *Moving beyond the trial stage is subject to changes in UK licencing law as current law does not allow for permanent flying of drones on a commercial basis.*

<sup>2</sup> <https://apian.aero/product.html>



## Case study: Henrietta Mbeah-Bankas



**Henrietta Mbeah-Bankas**



Joined the CEP in 2018



Culturally sensitive mental health screening tool

Evidence suggests that there are large ethnic inequalities in access to and experiences of healthcare in the UK<sup>1</sup>. This is prevalent in mental health services with perceived barriers associated with the stigma attached to mental health, a distrust in services, and a fear of discrimination. In her role as a mental health nurse, Henrietta became aware of the challenges that some ethnic minority groups face in using existing mental health services. She set out to explore the options for using digital technologies to provide a tool which considers the different cultural nuances and is better able to “*speak their language*”. By providing better and more inclusive access to mental health support, she intends to improve public/patient wellbeing as well as clinical outcomes and service provision, ultimately leading to reduced health inequalities and financial and social savings for the NHS and society overall.

**Henrietta applied to the CEP looking to develop entrepreneurial and commercial skills to help take this idea forward.** Without the programme, she would likely have continued to look for other opportunities, but she was not aware of any specific alternatives at the time: *“If I want something to happen, I’ll keep looking for ways – but this might have taken longer.”*

**She has accessed a range of support through the CEP.** Attendance at the Pitstops was helpful in giving her the theoretical underpinnings alongside an opportunity to network with peers and other professionals. She also received advice from her mentor, a subject matter expert, which shaped thinking to develop the tool. Going forward, she will likely require another mentor with a different set of skills to provide support on the commercial aspects.

**The support provided by the CEP enabled her to develop a prototype. Since then, priorities in the day job have meant that Henrietta has had less time to take the innovation to the next stage.** Nevertheless, she plans to take the innovation forward and is looking out for finance opportunities, including those sent out regularly to the CEP mailing list. Through this, she has identified a couple of funding streams to explore further.

**Through her experience on the programme, Henrietta has improved her skills, knowledge and overall confidence.** For example, the pitching experience, where CEPs learn how to share their idea with enthusiasm and expertise, has helped her to become a more effective communicator and to present information in a more concise, easy-to-understand format – a skill which she has also been teaching her colleagues. Networking is key to successful entrepreneurship and in her current role Henrietta uses her knowledge of the CEP and individual entrepreneur’s projects to broker relationships and partnerships to progress products, and drive change in national policies. Being part of the CEP community has shown her the importance of the right environment as an enabler for making an impact: *“I always thought that if for whatever reason the product does not reach the market, I will have significantly benefitted from being on the programme. It has shaped my thinking as a person and supported me in developing certain skills, especially commercial negotiation.”*

<sup>1</sup> e.g. NHS Race & Health Observatory (2022) *Ethnic Inequalities in Healthcare: A Rapid Evidence Review by commercial negotiation.*

## Case study: Henry Goodier and Manny Nijjar



**Henry Goodier and Manny Nijjar**



Joined the CEP in 2017 and 2016 respectively



**Truu**

Digital passports for healthcare professionals

**Whilst working for the NHS, Henry and Manny both grew frustrated with inefficiencies relating to the way medical services verify staff identities, qualifications and certifications.** Checks can be repetitive and often require employees to travel to the location in person to provide relevant documentation, taking them away from caring for patients. In response, they have developed a secure, portable digital passport, Truu, which will allow employees to prove who they are instantly, securely and digitally. This would enable healthcare workers to have more time with patients and healthcare organisations to reduce their administrative burden.

**Both joined the CEP looking to develop entrepreneurial and commercial skills and build connections to help take their idea forward.** Manny joined the CEP in 2016 and following his experience encouraged Henry to join the following year. Without the programme, they thought that they may have taken the idea forward and grown their company, but this would have been slower and on a smaller scale. The CEP 'badge' helped them to influence policy: through work completed by Truu, changes to policy have been made and the NHS People Plan now includes plans to introduce passports for healthcare professionals.

*"I think having the title of a CEP fellow got me noticed and into some high-powered meetings to influence policy. We have worked top-down with evidence from the bottom-up to get it written into policy at the start – I think maybe that would not have happened without CEP."*

**Covid-19 has helped bring new opportunities for Truu.** Specifically, one of the motivations identified at the outset by Henry and Manny related to the improvements required in telehealth to verify doctors' and patients' identities. With the pandemic accelerating the number of online consultations taking place, Truu has been a ready solution. For example, although the passport has not yet been fully rolled out, key phases of testing were sped up to meet demand during the pandemic, with 99 sites and 400 individual users having utilised the innovation to date.

**The CEP has provided Henry and Manny with a range of support.** The various topics covered in pitstops, the specialist talks by finance and legal experts, and the sharing of experiences by other individuals were all useful, providing *"something for anyone to learn"*. Opportunities to network and be mentored by people they otherwise might not have met was another strength of the programme. More widely, Manny noted that the CEP made him feel heard: *"It has support, approval and belief in what you are doing. I think it gave me the encouragement to know that you can do what you want."*

**For both, the CEP has encouraged them on a personal level.** For Henry, the programme has been *"refreshingly broad, like going back to school again"* and compared to practicing medicine has encouraged him to embrace his critical thinking and creativity to solve problems. For Manny, the programme has given him the tools and *"motivation and psychological support"* to progress the idea. Furthermore, Tony Young and the support he provides was highlighted as a success factor for them: *"When you have someone at national level, driving innovation and you have access to their thoughts, that is really powerful. If he does not know he will point you to someone."*

## Case study: Hinnah Rafique



**Hinnah Rafique**



Joined the CEP in 2016



**Generation Medics**

Award-winning social enterprise that provides accessible healthcare careers advice, support and improves health literacy

**After experiencing first-hand the gap in guaranteed support for people from non-traditional backgrounds into healthcare careers, Hinnah established Generation Medics in 2013 to create a healthcare workforce that better represents the society it serves.** Based in Oxford and operating across the country, Generation Medics is not just a widening access programme but also provides step by step support for young people and adults wishing to explore, strive towards and succeed in healthcare careers: *“We are like the older brother or sister who's been there, done it and can tell you all the good bits, but also potentially the realities so that people can truly make an informed decision about their future.”*

**Prior to joining the CEP, Generation Medics was at risk of heading down a more educational route due to challenges accessing healthcare funding. Fortunately, the CEP came at the right time and prevented mission drift:** it connected Hinnah to networks of healthcare professionals; provided opportunities for collaboration; and gave Generation Medics a ‘badge of approval’. This helped get passionate supporters onboard (including Baroness Dido Harding, Chief Dental Officer Sara Hurley and many more) and resulted in new contracts: *“As a direct result of the CEP we have had three conversations that have led to contracts that we probably wouldn't have secured otherwise.”*

**The mentoring aspect of the CEP also played a pivotal role in the direction of Generation Medics.** Reflecting on a discussion with her mentor in one of their initial business planning sessions, Hinnah widened the scope of Generation Medics from a sole focus on medicine and dentistry to encompassing the 350+ different healthcare roles in the NHS. This widening of scope, which was a direct result of the CEP, has allowed Generation Medics to better support the young people and adults that they support so that they can be signposted to careers that they might never have heard of before.

**Generation Medics was recently shortlisted for the Health Service Journal Workforce and Wellbeing Initiative of the Year award due to the wider benefits for NHS staff.** Trusts have approached Generation Medics to train their staff as mentors so they can provide health careers advice and support to young people. Through this, NHS staff access the benefits of continuing professional development and mentorship: *“Employers and NHS staff report that our leadership and management opportunities has led to increased confidence, morale and 'outside of the box' thinking and problem-solving”*

**Outside of the NHS, Generation Medics works with a number of partners including local councils, schools and universities, resulting in wider societal benefits.** For example, in Buckinghamshire, Oxfordshire and Berkshire, Generation Medics was given a contract to tackle gender stereotypes in children as young as seven. This involved delivering a range of after school and holiday programmes emphasising that girls can be scientists and doctors and that boys can be nurses and midwives: *“It was about breaking down gender stereotypes early and allowing young people to understand the different training routes available.”*

## Case study: Ian Stell



Ian Stell



Joined the CEP in 2017



**Bromley Emergency Courses**

Face to face and online Emergency Medicine and Ultrasound training courses for doctors

Ian spent a career working in the NHS and whilst working in an Accident and Emergency department was part of a team responsible for registrar training. In 2004, new Emergency Medicine exams were created but there was no relevant training available. In January 2005 Ian delivered a training course and subsequently established Bromley Emergency Courses with two of his colleagues. The company now provides face-to-face and online Emergency Medicine and Ultrasound Courses for doctors. Six years ago, the business reached a sufficient size for Ian to leave the NHS to work for the company full time, and he is now the sole Director of the company.

**Ian joined the CEP to help him “think differently” about the business by getting advice, ideas and connections to innovative doctors who might be interested in training development.** Ian found that the CEP has helped him to speed up the process of developing his business: *“The problem with business is that you hit some new barrier. It is a constant process of trying to solve things and I would have carried on muddling my way through. The programme helped me to find some answers a bit quicker.”*

**Support to secure external funding and the mentoring that Ian received through the CEP were seen as particularly valuable.** Ian was assigned a mentor who had strong business experience and who provided an alternative perspective on the business. He also valued the “constant flow of information” from Polly Sullivan at CEP about funding opportunities. One of these was the Anglia Ruskin University KEEP+ programme, which the company has subsequently secured funding from for ultrasound research, working in partnership with the University of Hertfordshire.

**The support provided by the CEP has helped the company to grow.** On average about 2,000 individuals per year from inside and outside of the NHS engage with the training courses, which has increased from about 1000 before Ian took part in the CEP. Two key factors have helped this growth. First, new courses have been developed, thereby expanding the offer of the business. Second, CEP introduced Ian to new contacts, such as a peer Clinical Entrepreneur who runs an alternative career website through which they have recruited teaching staff and third the discussions with his mentor helped him to make decisions that needed to be made. Going forward, the link to the University of Hertfordshire, facilitated through the information supplied by CEP, is potentially important. This link is leading to further research, which may provide an avenue to manufacturing – a new venture for the business.

**On a personal level, through his experience on the programme Ian has improved his business skills and knowledge:** *“One of the things that happens is that if you have been in the NHS your whole life, you have been in the NHS for so long that you are not commercially minded. Then you step outside that and start your business, and there is not an easy way to get trained. One of the valuable things about the CEP is just being around people from business.”*

## Case study: Jing Ouyang



Jing Ouyang



Joined the CEP in 2016



Patchwork Health

Fully integrated workforce management solution focused on optimising outcomes for organisations, managers, clinicians and patients.

**Whilst working as a locum between his foundation years, Jing experienced the pressures of temporary staffing in the healthcare sector first hand.** He observed that the process was often complex, inflexible and time consuming for clinicians: it was difficult to identify available work, book onto shifts and get paid. He was also aware that an overreliance on agency workers was a significant expense for NHS organisations. Jing identified a need for a technological innovation that could improve temporary staffing for clinicians, workforce teams and organisations. Around the same time, a friend from medical school, Dr Anas Nader, had just been appointed as a Darzi Fellow at Chelsea and Westminster Hospital NHS Foundation Trust and had been assigned a project which focused on transforming the temporary staffing function within the Trust. Recognising the unique opportunity this presented, Jing and his colleague established Patchwork Health, a service and tech-led workforce management solution that puts flexibility at the heart of staffing systems to create better outcomes for patients, clinicians and employers.

**Jing explained that the CEP helped “engineer serendipity”.** Although it is difficult to isolate the direct contribution of the programme, Jing noted that Tony Young’s mentorship, especially during the early stages, was invaluable and that being connected to a network of other entrepreneurs (both people who were at the start of their innovation journey and those that were more advanced) provided numerous opportunities for peer-to-peer learning. Having the title of ‘entrepreneur’ was also really important: *“The CEP gave me permission to pursue an innovation in an NHS that was still trying to understand what innovation meant... it offered a level of support which was really helpful”.*

**Patchwork has enabled over 100 healthcare sites to reap a number of wider benefits, including service improvement, financial savings and improved flexible working opportunities.** When Patchwork’s tech-enabled staff bank service (which allows clinicians to book shifts on-demand via an app) was implemented at West Middlesex University Hospital’s Emergency Department, shift fill-rates sky-rocketed from 35% to 96%. After this success, Chelsea and Westminster NHS Foundation Trust (ChelWest) implemented Patchwork across the entire organisation. As many as 85% of shifts are booked four weeks in advance, agency spend decreased by 62% in the first six months alone and £1.2 million is saved across the Trust annually in agency fees.<sup>1</sup> By automating and digitising previously manual tasks, Patchwork also reduced the heavy admin burden previously placed on workforce teams. In highlighting the benefits relating to clinical staff, Jing remarked: *“It’s fantastic to see so many of the pain points I experienced as a doctor doing locum work being addressed through this technology”.*

**In recognition of the positive impact at ChelWest, Patchwork was awarded the prestigious HSJ Partnership Award in their Medical Software, Systems and Technology category in 2019.** The staff bank management tool has subsequently been adopted by over 100 healthcare sites across the country.

<sup>1</sup> <https://www.patchwork.health/case-studies/chelsea-and-westminster-hospital>

## Case study: Julian Nesbitt



**Julian Nesbitt**



Joined the CEP in 2017



**Dr Julian**

Innovative mental health and wellbeing platform that aims to increase accessibility to mental health care

**It is estimated that one in four adults in England experience mental illness.** However, NHS psychological services have lengthy waiting-lists and poor recovery rates, and are subject to considerable geographical variation. **Dr Julian is a healthcare platform that aims to increase the accessibility of mental health care by connecting patients to a global network of psychotherapists, counsellors and psychologists.** Patients use a variety of options (such as the issue requiring support, preferred language and type of therapy) to match themselves to a suitable professional. They then schedule an appointment at a time that is convenient for them using a calendar booking system (same day appointments are available) and receive support via secure video/audio/text links from the comfort of their own home. The platform also offers a range of self-help and homework resources which can be tailored on an individual's personalised dashboard.

**Although it is likely that Dr Julian would have progressed in the absence of the CEP, there were notable benefits of being involved in the programme.** The programme gave entrepreneur, Julian Nesbitt, permission to work as a clinician in the NHS and take an innovation forward. It imparted a basic knowledge of business and finance that doctors don't often have and provided access to senior leaders in the NHS who offered advice and support. In particular, being connected to a network of other entrepreneurs helped Julian on a personal level: *"The biggest benefit is having that support structure so that you know you are not isolated in what you are trying to do, otherwise it can get quite lonely... being able to speak with fellow entrepreneurs gives you motivation and resilience"*.

**The Covid-19 pandemic created new opportunities for Dr Julian** by accelerating the demand for, and adoption of, digital mental health care. In addition to providing private support to individuals via a pay as you go service, Dr Julian now offers services for businesses and students and has been commissioned by 25 NHS Improving Access to Psychological Therapies (IAPT) services to provide support. It is also used by NHS Practitioner Health to provide appointments for NHS doctors.

**Dr Julian has led to a number of wider benefits, including improved patient wellbeing and financial savings.** A health economic analysis undertaken by the Kent, Surrey and Sussex Academic Health Science Network in 2020 showed that reliable recovery rates were 9.3% higher and reliable improvement rates were 17.3% higher for patients using Dr Julian compared to users of the NHS IAPT service approach. Patient drop-out rate and DNA (did not attend) rate were also around 50% lower. The economic modelling revealed an NHS return of £1.33 for every £1 spent over five years, and a total return (including social benefits) of £2.83.<sup>1</sup>

**Dr Julian has won several awards including Mental Health Specialists of the Year 2019 and was recently nominated as one of the most innovative healthtech firms in the UK.**

<sup>1</sup> KSS AHSN (2020) Health Economic Report and Independent Evaluation by KSS AHSN

## Case study: Krishan Ramdoo



**Krishan Ramdoo**



Joined the CEP in 2016



**TympaHealth**

All-in-one ear and hearing health assessment system

**Whilst working as an Ear, Nose, and Throat (ENT) surgeon, Krishan identified an opportunity to improve the accessibility of hearing assessment and treatment.** His company, TympaHealth, has developed the world's first all-in-one ear and hearing healthcare assessment device which combines three different diagnostics and treatments (digital otoscopy, microsuction wax removal and a hearing screener test) into one hand-held portable system. The company aims to enable better access to hearing healthcare across the world: the Tympa system is affordable and simple to use. It can be implemented by a wide range of healthcare professionals to provide a faster route to diagnosis and treatment within local communities. The company has been granted IP protection for its innovative products.

**In 2016, a year prior to setting up the company, Krishan joined the CEP as part of its first ever cohort for support in taking the idea forward:** *"I was interested in entrepreneurship, but I was also interested in offering better care. There is no other programme like that available."* By November 2022, the company employed around 50 people and was continuing to invest in its growth by reinvesting surpluses, and drawing on grants and external equity investment. The Tympa system had been adopted by five NHS sites and over 400 private sector organisations globally, including pharmacies. The company had also received numerous awards, including the Royal Society of Medicine Innovation in Otolaryngology Award. Krishan reflected that the CEP had enabled the company to grow by providing guidance, access to networks and, more generally, giving the company a *"badge of credibility."* Without the CEP, Krishan may have taken the idea forward through other means, but he considered that any progress would likely have been smaller in scale and taken up to a year longer.

**In addition to the CEP's role in enabling company growth, Krishan benefitted from the programme personally.** The network of Clinical Entrepreneurs had been particularly valuable to him, facilitating learning and support from peers. He had received a range of support from the programme which helped him to develop his skills, including the ability to pitch his ideas in a clear and succinct way. Krishan continued to work as an ENT surgeon within the NHS alongside developing TympaHealth, and he considered that the credibility associated with the CEP helped him to maintain a greater degree of flexibility in his role. He has maintained close links with the CEP and has become a mentor on the programme.

By **empowering non-specialists to provide high quality hearing healthcare**, TympaHealth has helped to upskill workforce within the NHS and beyond. This, in turn, has provided **greater accessibility to services**, contributing to improved service provision, clinical outcomes and patient wellbeing. Looking at the impact of Tympa's products, a study found that 75% of patients had one fewer hospital visit as a result, and 65% did not need a hospital visit at all. The efficiencies associated with the products have been estimated to result in considerable savings for the NHS. In the longer term, the affordable and portable system is expected to contribute to **international development** and **reduce health inequalities** by improving access to healthcare for under-served groups.

## Case study: Kyle Stewart



**Kyle Stewart**



Joined the CEP in 2016



**Watercress Research**

Phytochemical research & development company  
creating products for human health and disease

Watercress is a member of the Brassica family of plants and has long been regarded as a superfood. More recently, the phytochemistry underpinning the beneficial effects in humans has started to be better understood. At the front of this learning curve is Dr Kyle Stewart and his company, Watercress Research Ltd. This journey started on a ward round while Kyle was a junior doctor in training and had to look after a baby who was septic from infected nappy rash. Researching the pathophysiology of nappy rash revealed a key bacterial enzyme called urease was at the centre of the process, converting the urea in urine to ammonia which disrupts the protective skin barrier due to its irritant alkalinity. Fast forward to today, Watercress Research has managed to extract the naturally occurring urease inhibitors and ammonia scavenging compounds to effectively stop this process and protect the skin, which also has potential benefits in a range of health conditions. The team are now able to manipulate watercress to upregulate other useful compounds and hope to be launching their first products in March 2023.

**Kyle had various innovative ideas and applied to the CEP hoping that the programme would help him to decide which to take forward, whilst also giving him “a ticket to open doors”.** Without the CEP he may have taken the idea forward, but he felt that he would not have had the same structured learning opportunity. CEP helped Kyle to whittle down his array of project ideas to focus solely on the watercress project. He would probably have had to leave the NHS to pursue a role in private industry to take forward the idea, which he thinks would have been less beneficial: *“It is nice for the story to be able to say I am still a GP; I think it wouldn’t carry the same clout and credibility if I wasn’t.”*

**Through the CEP, he has accessed a wide variety of support.** Kyle has received advice from mentors who “know business”, which has been reassuring as the company has developed. Being part of a network of entrepreneurial clinicians through the CEP has also been valuable and provided contacts, encouragement and peer support. Kyle has been on the CEP since 2016, and the rolling programme of pitstops (e.g., building an idea, raising funds) means that the CEP has remained relevant through his journey: *“A benefit of being on the CEP for years is that everything comes up as relevant over time.”*

**The CEP has supported Kyle and his co-founder to establish and develop the company.** He felt that he “would not have known what to do” and likely would not have developed the company had it not been for the CEP. The company has recently secured VC funding and Kyle found that the CEP “carries some clout” when he goes out to investors.

Watercress Research are currently building and commissioning a bespoke production facility in their own premises. Through 2023 the focus will be on building commercial sales in topical products, particularly those relevant to incontinence associated dermatitis, as well as food and drink. In parallel, there is a program of medical research underway with the ultimate goal of pharmaceutical development.



## Case study: Rosie Riley



**Rosie Riley**



Joined the CEP in 2018



**VITA Training**

Education provision for safeguarding and care of victims of modern slavery

Potentially 136,000 victims of modern slavery are living and working in the UK and although one-in-eight healthcare professionals reported previous contact with a patient they knew or suspect of having been trafficked, 80% felt they hadn't had enough training on the issue<sup>1</sup>. **Founded in 2014, VITA Training aims to improve identification, support and care for victims of modern slavery by equipping healthcare professionals with trauma-informed consultation skills and evidence-based guidance that can be transferred across vulnerable groups.** Training has been delivered to over 2,000 health professionals and allied health professionals across the UK, with feedback suggesting doctors, nurses and practitioners feel equipped with tangible skills to know what to do when a potential victim of exploitation is in front of them in a clinical context.

**Rosie, VITA's founder, knew she needed to equip a team and build an organisation of expertise to advance the health response to modern slavery in a sustainable way with long term impact.** For the first four years of VITA's existence, Rosie delivered the training alone. As the demand grew from healthcare professionals, safeguarding leads, policy-makers all across the UK, it was at this point Rosie decided to take the idea forward through the CEP. As soon as she finished her second foundation year as a doctor, Rosie reduced her hours to part time. This gave her the space and capacity to build VITA alongside her clinical work – something she deemed as essential to ensure she was not burnt out from the demands of both being a doctor and an entrepreneur: *“I don't know if I would've had the stamina, met the contacts or had the support without the CEP. It had all the ingredients I needed right at that moment.”*

**The CEP was able to provide Rosie with a mixture of core business skills and bespoke guidance from her mentors that would go on to be implemented in practice.** The peer-to-peer support, discussions and debates she had with her colleagues on the programme helped to clarify her vision of how she wanted to take the organisation forward. Through people Rosie had met in the CEP, she was able to quickly source reliable business services such as legal advice and insurance. *“I was entrepreneurial in spirit but didn't have any training or understanding of accounts, IP, law, and all that background infrastructure that helps you build an organisation.”*

**There are wider benefits from the innovation. The VITA Network is separate from the company's training provision, and is a leading voice nationally in the anti-trafficking and refugee sectors.** The VITA team meets regularly with the Home Office to advise and critique policy, supports national anti-trafficking response to humanitarian crises, such as the war in Ukraine, writes guidance for the Royal College of Paediatrics and Child Health, collaborating with and advising national police and NHS responses. Although the policy advice component would have likely happened without the programme, the training provision that the CEP has helped to scale has given VITA enormous credibility in this sphere.

<sup>1</sup> <https://www.vita-training.com/>

## Case study: Saif Ahmad



**Saif Ahmad**



Joined the CEP in 2019



**NeutroCheck**

Device to allow chemotherapy patients to test for neutropenic sepsis symptoms at home

Chemotherapy can result in suppression of the immune system, meaning that even a mild illness puts patients at risk of developing neutropenic sepsis. This is a life-threatening medical emergency and patients are advised to attend hospital if they show any symptoms. However, a high proportion of symptomatic patients (around 50%) do not have the condition, and so do not need to experience the stress of a visit to hospital or taking antibiotics. At the end of his PhD, Saif developed the idea of a finger prick blood test device which can allow patients to test their neutropenic sepsis symptoms from home. This would improve patient safety and quality of life, reduce unnecessary use of antibiotics, and increase efficiencies in Accident and Emergency.

**Prior to joining the CEP, Saif had developed the idea for the device and saw the programme as an opportunity to gain advice from mentors outside of where he was based in Cambridge.** Without the programme, he would likely have continued to develop the device but *“definitely would not have gone at the same rate.”*

**The Covid-19 pandemic has created new opportunities for NeutroCheck,** as the device uses a lateral flow-based test with blood cells. The pandemic has dramatically widened individual use and capabilities around remote lateral flow testing which is expected to enhance adoption: *“Before we started it was just pregnancy lateral flow tests that people may be used to, but because of Covid, adoption is more likely.”*

**The CEP has helped NeutroCheck to grow and secure funding, and on the right terms.** Signposting to funding opportunities has been helpful for the company: the company secured £15k from the KEEP+ Grant available from Anglia Ruskin University which was highlighted by CEP. The CEP also supported NeutroCheck during a c.£1m fundraising round: *“We got a lot of support and sense checking for the funding round we did; we might not have done as good a deal without the CEP.”* More recently, NeutroCheck, in collaboration with Cancer Support UK, Macmillan and the Sepsis Trust, has received a £1m Small Business Research Initiative (SBRI) Healthcare grant. This has supported employment growth from three at the outset to seven employees in 2022 (four full-time and three part-time). Overall, Saif felt that without the CEP the company would have developed but likely more slowly and at a smaller scale.

**Through his experience on the CEP, Saif has developed his overall confidence, and built a strong network of connections.** Saif remarked that through the CEP he *“understands more about how the NHS works”*, which in turn has enabled him to be more confident in taking different opportunities, such as helping to assess grant applications. In addition, the programme has supported Saif’s self-development: *“Entirely separate to my journey developing the project, I have significantly benefitted from being on the programme in its own right. It has shaped my thinking as a person and supported me in developing certain key skills.”*

**Looking to the future, although not rolled out yet due to the device requiring regulatory approval, the NeutroCheck device has the potential for substantial financial and time savings for the NHS.** Specifically, NeutroCheck suggests that in a year across the NHS you could save 400 lives and reduce 50,000 unnecessary emergency visits, saving the NHS £70m<sup>1</sup>.

<sup>1</sup> Supported by independent health economics assessment performed by Health Enterprise East and verified by Dr Gurdeep Sagoo, Health Economist at University of Newcastle (publication in preparation).

## Case study: Sajeev Shanmuganandarajah



Sajeev Shanmuganandarajah



Joined the CEP in 2017



Medify Ltd.  
Education technology

**Medify is an educational technology product that provides e-learning materials to help prospective students with their admissions tests into medical school. Sajeev was accepted onto the CEP whilst in his fourth year of medical school.** Medify's innovation implements the technology that allows users to improve their learning, in a way that better simulates the testing environment, and is associated with lower costs due to innovation in web development. In the last year, there were over 120 million question attempts on the platform.

The training company is partnered with over 20 schools in the UK and abroad, including in Australia, Dubai and Poland, and had an active userbase of 32,000 in 2021. Medify holds 70% market share in the UK and half of the market share in Australia. Sajeev and the company are looking to expand into other high-stakes assessments, provide educational material to first year medical school students, and are currently in the process of attaining IP protection.

**After exploring other business support programmes, Sajeev found that the CEP had something unique to offer due to the specific way it helps clinically-minded individuals learn about enterprise.** He states that the programme provides a safe space to acquire and develop the skills needed for business that medical professionals are otherwise not exposed to. There are stark differences in mindset, Sajeev explains, that are needed in clinical work and enterprise; the programme is able to help develop the competitive nature of business for people whose work has not demanded that before:

*“Doctors are not built for being commercially minded. The primary reason why people go into healthcare is because they have a caring and altruistic personality and unfortunately in the world of business that's not common and can be taken advantage of. So there is a psychological aspect that being part of the NHS programme provides, as opposed to another programme that might exist for start-ups, and this is very unique.”*

**The networks he established on the programme were some of its most important benefits for Sajeev, as he claimed that the calibre of people on the CEP was higher and more diverse than in other places he had experienced.** Without participation, he believes Medify would have taken two to three years longer to get the stage it is now and would have been up to 75% smaller in scale. The mentoring he received was indispensable, with his business mentor having a venture capital background who was able to guide him through asset valuations and key performance indicators: *“I wouldn't be where I am right now if I didn't have people like Tony and [the mentors].”*

**As a result of the programme, Sajeev has remained in the NHS when he otherwise would have left in order to purely focus on the business.** After taking time out to re-organise the company structure, he is now about to start in foundation schooling as a junior doctor whilst remaining CEO of Medify.

## Case study: Tamsin Holland-Brown



**Tamsin Holland-Brown**



Joined the CEP in 2019



**Hear Glue Ear**

Hearing aid and mobile app for children suffering from reduced hearing due to glue ear

Glue ear is a common condition where the middle ear becomes filled with fluid, typically causing temporary hearing loss. As most cases resolve on their own within three months, patients are usually placed under 'active observation' after diagnosis. As a paediatrician, Tamsin had seen the learning delays that can occur when children have reduced hearing at critical points in their development. To address this, she developed a bone conduction hearing device which sends the sound as a vibration straight to the cochlea in the inner ear (missing out the eardrum). Alongside this, she created a free mobile app, which helps children with speech and language enrichment activities, and auditory processing and listening skills through specially designed songs, games and audiobooks. There is a home hearing game to help parents gauge their child's hearing loss between appointments. The headset and mobile app can be used either together or separately.

**Prior to joining the CEP, Tamsin did not think of herself as an entrepreneur** – despite having developed these two innovations by that point. When she applied to the CEP, she was facing challenges in taking the headset and the app forward. In the absence of the CEP, she would have continued to develop the innovations but would likely have left the NHS to do so. The programme was invaluable in helping to validate the idea as well as providing a supportive community of like-minded people: *“That’s the wonderful thing about the CEP – suddenly you’re in a place with lots of people trying to do a similar thing.”*

**Without the programme, Tamsin thinks it would have taken up to a year longer to scale the innovations and that the related benefits would have been smaller.** Through the CEP, Tamsin gained the skills to continue developing the innovations whilst giving her the confidence to *“think bigger”*. She considered the programme’s ability to provide honest, impartial advice one of its strengths because this is difficult to find as an early-stage entrepreneur.

By July 2022, three NHS sites were using the hearing aid as part of their service and there was interest from three private providers. The app is free and can be downloaded without a referral. Tamsin has gone on to explore collaboration opportunities (including community hearing screening and expansion into developing countries) which may lead to additional products and services. Whilst these conversations have not come directly through the CEP, Tamsin considered that the programme encouraged her to think more ambitiously.

**The innovations have led to a range of early wider benefits,** including improved patient wellbeing and clinical outcomes (important in the context of the post-Covid NHS backlog) and reduced health inequalities (because children from the lowest income groups often struggle the most to catch up after hearing loss). The innovation is included in the National Institute for Health and Care Excellence (NICE) guidance, and has won a range of awards, including from the British Society of Audiology and the British Association of Paediatricians in Audiology.

**On a personal level, Tamsin reflected that she has become an advocate for digital innovation** which has had a ripple effect on others within her organisation and beyond. For example, she has taken up a leadership role within the CEP, drawing on her own experiences to support others in developing their innovations.

*“Even if my innovation completely failed, I now have a career focused around digital technologies. It has become a part of who I am now – I want things to be better.”*

## Case study: Tim Allardyce



**Tim Allardyce**



Joined the CEP in 2018



### Rehab My Patient

Exercise prescription software for physiotherapists

### Hoop

Website and app providing healthy classes, events and camps for children.

**An NHS First Contact Physiotherapist and Director of Surrey Physio, Tim has developed three innovations which have benefitted from support from the CEP.** Musculoskeletal (MSK) problems make up to 1 in 5 primary care consultations and 10% of GP referrals<sup>1</sup>. The first two of Tim's innovations focused on delivering MSK services in a more innovative way: 'Rehab Me' enables GPs and First Contact Practitioners to signpost patients to advice and treatment plans online or via an app; and '[Rehab My Patient](#)' is an exercise prescription software for physiotherapists. Tim continues to innovate and has recently launched a third innovation, 'Hoop', an app to encourage children to be active and spend time in the outdoors by helping parents and children to find healthy activities, classes and events.

**Tim had developed one of his MSK innovations before joining the CEP but was motivated to join the programme to network and build relationships, and develop business and technical skills.** He felt it would "open doors" to the NHS, and help him to navigate the challenges in supplying to a complicated system. Without the CEP, he may have taken the ideas forward, but was unclear how he would have done so:

*"There is no way we would be as progressed as we are now without the support from the Clinical Entrepreneur Programme. It gives you a mentor, support and advice, training, workshops, lectures, opportunities to approach overseas organisations and travel, and helps your idea to become validated in the NHS ecosystem. Additionally, it gives you the self-belief and confidence that I needed to say, "I can do this, I can build something great, and my innovations can help thousands of people."*

**The CEP encouraged and supported Tim to scale up his innovations and enable adoption.**

For example, by July 2022, 20 NHS sites and 3,000 NHS individuals were using Rehab My Patient. The innovations have also led to range of wider benefits: NHS staff performance has improved through providing access to appropriate specialist MSK knowledge, advice and treatment resources via Rehab My Patient; and Rehab Me contributes to reducing health inequalities as a result of it being free to all to access. His company Surrey Physio also scaled up to provide workforce support to the NHS, launching First Contact Practitioners and Social Prescribing Link Workers and through this increasing their employed team to over 100. If it wasn't for the CEP, Tim felt the adoption and wider benefits would have taken longer to be achieved and likely would not been to the same scale.

Tim's latest product launch is called Hoop: *"My next mission is to help reduce childhood obesity, and improve healthy living for children through education, activities, events, camps and classes. We must help our children to understand what it means to live a healthy life. If we can educate our children about the benefits of nutrition, exercise, and sport, then we can help reduce the current reliance on social media, social gaming, and on-demand TV."* Hoop was taken over by Tim in 2021 and is due to be re-released in 2023.

**Through his experience on the programme, Tim has developed his business knowledge and networks.** Tim considered one of the programme's key strengths to have been the access to several mentors on the programme including Tony Young as a key mentor who is able to provide "*the honest truth about your product/innovation/idea*". In addition, the programme has provided Tim with access to networks, teaching him that collaboration is a key factor in building success within the NHS.

**Despite having developed the ideas before joining the CEP, Tim did not think of himself as an entrepreneur.** However, after being accepted onto the programme, Tim remarked: "*You often hear of imposter syndrome, but what the programme does, it helps validate your thoughts and that you are a healthcare business leader and entrepreneur. It gives you the confidence to leap, knowing there's a net to catch you if you fall.*"

<sup>1</sup> See NHS Clinical Entrepreneur Programme (2022) [Entrepreneur launches new app to support child health](#)

# SQW

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## About us

### SQW Group

SQW and Oxford Innovation are part of SQW Group.

[www.sqwgroup.com](http://www.sqwgroup.com)

### SQW

SQW is a leading provider of research, analysis and advice on sustainable economic and social development for public, private and voluntary sector organisations across the UK and internationally. Core services include appraisal, economic impact assessment, and evaluation; demand assessment, feasibility and business planning; economic, social and environmental research and analysis; organisation and partnership development; policy development, strategy, and action planning. In 2019, BBP Regeneration became part of SQW, bringing to the business a RICS-accredited land and property team. [www.sqw.co.uk](http://www.sqw.co.uk)

### Oxford Innovation

Oxford Innovation is a leading operator of business and innovation centres that provide office and laboratory space to companies throughout the UK. The company also provides innovation services to entrepreneurs, including business planning advice, coaching and mentoring. Oxford Innovation also manages investment networks that link investors with entrepreneurs seeking funding from £20,000 to £2m.

[www.oxin.co.uk](http://www.oxin.co.uk)