



West Midlands Innovation Fund 2025–26 Application Form

Thank you for your interest in applying for funding for your project through the **West Midlands Innovation Fund 2025–26**. This application is your opportunity to showcase how your project can drive meaningful innovation in health and care across the region. Before you begin, please note:

- **Estimated Completion Time:** 3 to 5 hours, depending on your project's complexity.
- **Pre-Application Checklist:** You'll need details on your project's aims, evidence base, partnerships, strategic alignment, impact plans and financials.
- **Helpful Tips:** Use clear, jargon-free language, stick to word limits, and consider drafting your responses offline before submitting.

We look forward to reviewing your application and learning more about your innovative ideas. If you have any questions, please contact innovationfund@healthinnovationwm.org

Further guidance for applicants is available here: <https://www.healthinnovationwestmidlands.org/wp-content/uploads/Guidance-for-Applicants-Innovation-Fund-25-26.pdf>

A PDF version of this form can be downloaded here, however submissions will only be accepted through this online form:
<https://www.healthinnovationwestmidlands.org/wp-content/uploads/West-Midlands-Innovation-Fund-2025-26-Application-Form.pdf>

A Privacy Statement about how we handle your data is available to review here: <https://www.healthinnovationwestmidlands.org/wp-content/uploads/Privacy-Statement-West-Midlands-Innovation-Fund-2025-26-Application-Form.pdf>

* Required

Scoping

1. Use the HRA decision tool to determine whether your project is classified as research. *

<https://hra-decisiontools.org.uk/research/>

- ☐ Yes my Project is classified as Research
- ☐ No, my Project is not classified as Research

2. Can the Project be described in any of the following ways *

- ☐ A 'Business-as-usual' (BAU) type of activity
- ☐ Has no identifiable innovation
- ☐ Activity whose primary focus is **non**-applied research
- ☐ Does not include a recognised Health or Care provider as a partner
- ☐ Does not support National, Regional or Local Health or Care priorities
- ☐ None of the above

Out of Scope

Thank you for your interest in the **West Midlands Innovation Fund 2025–26**.

We regret to inform you that your application does not meet the eligibility criteria for this funding round and will not be progressing further.

We appreciate your commitment to innovation in health and care, and we encourage you to stay connected with us for future opportunities

Supporting Documentation

In addition to this completed form, the following documentation is required to be submitted:

1. Innovation Fund 25-26 - Logic Model and Project Plan Template: <https://www.healthinnovationwestmidlands.org/wp-content/uploads/Innovation-Fund-25-26-Logic-Model-and-Project-Plan-Templates.xlsx>
2. Innovation Fund 25-26 - Budget Breakdown Template: <https://www.healthinnovationwestmidlands.org/wp-content/uploads/Innovation-Fund-25-26-Budget-Breakdown-Template.xlsx>

3. Please confirm that you have downloaded the template documentation via the above links. *

- ☐ Yes
- ☐ No

Applicant Information

4. Lead Organisation Name *

The lead is the organisation which will receive the grant funding

Please enter at most 500 characters

5. Lead Organisation Type *

- ☐ Commercial Entity / Social Enterprise
- ☐ Charity, Voluntary or Community Sector
- ☐ Health or Care Service Provider
- ☐ Academic Institution

6. Please provide a Companies House Registration Number *

Please enter at most 20 characters

7. Please provide a Registered Charity number *

Please enter at most 20 characters

8. Is your organisation VAT registered? *

- ☐ Yes
- ☐ No

9. What is your VAT Registration number *

Please enter at most 12 characters

10. What is the address of the Lead Organisation? *

Please enter at most 1000 characters

11. Lead Contact Name *

Please enter at most 500 characters

12. Lead contact job title *

Please enter at most 500 characters

13. Lead Contact Email *

Please enter an email

14. Lead Contact Phone Number *

Please enter at most 20 characters

15. List the Health and/or Care Service providers involved with the Project *

Please enter at most 2000 characters

16. List any other partners that you are collaborating with *

Include:

- Name of the people
- Job titles
- Organisations for which they work
- Contact email address

Please enter at most 2500 characters

17. Which ICS area(s) will your Project support? *

Projects spanning multiple geographies are eligible

- ☐ **North** - Staffordshire and Stoke-on-Trent ICS, Shrewsbury, Telford and Wrekin ICS, Keele University
- ☐ **Central** - Birmingham and Solihull ICS, Black Country ICS, Aston University
- ☐ **South** - Coventry and Warwickshire ICS, Herefordshire and Worcestershire ICS, South Warwickshire University NHS Foundation Trust

Project Overview

18. Project Title *

Please enter at most 500 characters

19. Provide a concise summary of your innovation (i.e. process, service, pathway, or product). *

Please include:

- What problem is the innovation seeking to solve
- The aim of the project
- The target population
- The health and care setting for the projects
- Expected outcomes from the project

Please enter at most 2500 characters

20. Does your innovation require any regulatory approvals and/or clinical standards?

e.g. MHRA, DTAC, CQC, NICE, NICE EVA, NICE ESF, ISO, UKCA/CE, DPO & CIO, data quality standards, cybersecurity, CSO (covered in Guidance Document) *

If yes, please specify which and the current status of approval

Please enter at most 800 characters

21. Does your innovation have an existing evidence base? *

Briefly summarise the evidence and provide 3 links to evidence (e.g. NHSE policy, NIHR/ARC Research, RCT, RWE/RWD, academic papers, case studies, peer support)

Please enter at most 2500 characters

22. Please select the main objective which your project supports. *

Health Infrastructure – refers to the physical and organisational structures, facilities and systems that support the delivery of health and care services. It includes Physical Infrastructure (buildings and facilities), asset based medical equipment (Product, Pipeline) and essential digital systems (Data Infrastructure).**Health Inequalities** – are unfair and avoidable differences in health across the population and between different groups within society. Between 2010 and 2020 health inequalities in England had widened and the amount of time people spent in poorer health had increased, according to the Marmot Review 10 Years on, published in 2020.**Integrated Care** – seeks to improve the quality and cost effectiveness of care for people and populations by ensuring that services are well co-ordinated around their needs. Integrated care is therefore necessary for anyone for whom a lack of co-ordination leads to an adverse impact on their care experiences and outcomes**Productivity & Workforce** – relates to initiatives that deliver greater operational and clinical throughput with the same or fewer resources. Workforce refers to any initiative that relates to staffing of NHS and Social Care to improve recruitment, retention and/or productivity.

| | The main objective the project supports | The projects supports this area but it is not the main objective | The project does not support this objective |
|--------------------------|---|--|---|
| Health Infrastructure | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Health Inequalities | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Integrated Care | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Productivity & Workforce | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

23. Please select the main National Shift which your project supports. *

| | The main objective the project supports | The projects supports this area but it is not the main objective | The project does not support this objective |
|-------------------------|---|--|---|
| Analogue to Digital | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Hospital to Community | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Treatment to Prevention | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Impact and Inclusion

Please describe how your project will deliver meaningful impact and promote inclusion.
Word limits apply to each question.

24. How will the project impact the health and care system? *

Please enter at most 1250 characters

25. What is the primary area of impact/s for the project?

This could include:

- Clinical impact (e.g. improved patient outcomes, reduced admissions)
- Geographic impact (e.g. specific ICS areas, underserved communities)
- Operational or workforce impact (e.g. improved productivity, staff wellbeing)
- Strategic or policy impact (e.g. alignment with NHS priorities or transformation goals)
- Equity and inclusion (e.g. addressing health inequalities, Core20PLUS5 populations)

*

Please enter at most 1250 characters

26. What is your evaluation methodology to measure the impact/s (including return on investment if you intend to measure it)? *

Please enter at most 1250 characters

27. Do you have an evaluation partner, If so, who? *

Please enter at most 1250 characters

28. How will this project impact the development of your innovation? *

Please enter at most 1250 characters

29. What system changes (people, processes, technologies, culture) are required for the project? *

Please enter at most 1250 characters

30. How will you involve public, patients, and/or staff in the project? *

Please enter at most 1250 characters

31. How will the project address health inequalities and support inclusion? *

Consider Core20 plus5; Indices of Multiple Deprivation; other measures of social exclusion or inequality

Please enter at most 1250 characters

32. What changes are needed to the clinical pathway to use this innovation? *

Do any existing procedures need to be adapted? Please describe the changes required.

Please enter at most 1250 characters

33. How well does the innovation fit with the people and services who will use or support it? *

Think about how it aligns with the needs, values, and beliefs of staff, patients, services, and commissioners. Please include any evidence of engagement with them.

Please enter at most 1250 characters

34. Describe any political and/or cultural sensitivities that may need to be considered *

Please enter at most 1250 characters

35. How will the project contribute to NHS Net Zero / carbon reduction targets? *

Please enter at most 1250 characters

Adoption, Implementation and Sustainability

36. Has your innovation been tested in a real-world setting? *

If yes, describe the setting, key findings, and how they inform your current proposal.

Please enter at most 1250 characters

37. What are the key barriers to adoption in NHS or care settings? *

Please enter at most 1750 characters

38. Have you evaluated likely return on investment of your innovation? If so, provide details *

Please enter at most 1250 characters

39. Who are the key stakeholders (e.g. clinicians, commissioners, patients), and how have they been involved in development or evaluation? *

Please enter at most 2500 characters

40. What is your plan for engaging stakeholders in the adoption process? *

Please enter at most 1250 characters

41. How could the innovation be scaled across different settings or populations? *

Please enter at most 1250 characters

42. What resources or infrastructure are needed to support wider adoption? *

Please enter at most 1250 characters

43. How will you ensure sustainability beyond the initial implementation? *

Please enter at most 1250 characters

44. What is your plan for spreading the innovation (e.g. through HINs, ICSs) *

Please enter at most 1250 characters

45. What do you need from other partners to support adoption? *

Please enter at most 1250 characters

46. Would you like support with spread and adoption of your innovation from HIWM? *

Please enter at most 1250 characters

47. How will you capture learning from implementation? *

Please enter at most 1250 characters

Financial Information for the Project

48. Total Funding Requested (£) *

Funding request should be net of VAT

As Innovation Funds are a grant they are VAT exempt, therefore a Grant Funding Agreement will be issued to the Lead Organisation.

Please ensure you have completed the budget breakdown template as part of this application.

Please enter a number less than or equal to 50000

49. Will you be applying VAT at 20%?

☐ Yes☐ No

50. If overheads are included, please explain the calculation method (e.g. percentage of directly incurred costs). *

Please enter at most 1250 characters

51. Are there any capital/revenue funds required for longer term adoption (e.g. cost of the innovation/staff)? If so, please provide details *

Please enter at most 1250 characters

52. Have you explored or secured any additional funding opportunities to support the broader scope of the project? If so, please provide details *

Please enter at most 1250 characters

File Submission

As noted earlier in this form, two additional files are required to be completed and submitted to validate an application:

1. Innovation Fund 25-26 - Logic Model and Project Plan Template: <https://www.healthinnovationwestmidlands.org/wp-content/uploads/Innovation-Fund-25-26-Logic-Model-and-Project-Plan-Templates.xlsx>
2. Innovation Fund 25-26 - Budget Breakdown Template: <https://www.healthinnovationwestmidlands.org/wp-content/uploads/Innovation-Fund-25-26-Budget-Breakdown-Template.xlsx>

Files can be submitted by email to innovationfund@healthinnovationwm.org. Emails to this address have a maximum file size limit of 100MB

Please name your file as follows:

- LeadOrganisationName_Projectname_logic and plan
- LeadOrganisationName_Projectname_Budgetbreakdown

53. For files submitted by email please provide the senders email address and the filenames *

Please enter at most 2500 characters

54. Please reconfirm the senders email address *

Please enter an email

Declarations

55. I confirm that the information provided is accurate and complete

- ☐ Yes
- ☐ No

56. I understand that failure to deliver may result in clawback of funds

- ☐ Yes
- ☐ No

57. I agree to provide progress and final reports as required

- ☐ Yes
- ☐ No

58. Name, Job Title and Organisation of Declarant *

Please enter at most 1250 characters

59. Please confirm that this application is supported by a senior individual (Director level or equivalent) from the lead organisation. *

Please include their name, job title and contact email address with their consent

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