Eligibility

Theme	Questions	Answer
CQC related questions	Do we have to be CQC registered or is it just the partner that needs to be CQC registered please?	Additional information required to answer this question. Can the individual who asked this question please contact us via the Innovation Fund email address to clarify who 'we' refers to innovationfund@healthinnovationwm.org
	Do social enterprises have to be CQC registered or is it just the lead partner	If a social enterprise delivers regulated activities under the Health and Social Care Act 2008, such as: Personal care Treatment of disease, disorder or injury Diagnostic and screening procedures Nursing care Maternity services, then CQC registration is legally required Applicants should: Review the list of regulated activities on the CQC website Clarify in the application who holds responsibility for governance if the social enterprise is not registered Partner with a CQC-registered provider if needed to meet eligibility requirements
	If applying for a PCN, would it need to be through the lead practice, who would be CQC registered?	Additional information required to answer this question. Can the individual who asked this question please contact us via the Innovation Fund email address to clarify innovationfund@healthinnovationwm.org
	If the applicant is CQC registered, do they also need another supporting organisation	If the lead applicant is CQC registered and does not require a collaborative partner to deliver the innovation then you are more than welcome to apply as a solo application.
	You touched on registered charities needing to be CQC registered. We are CQC registered for one area of our charitable work but the project we are seeking a grant for relates to another area of our work that does not require us to be CQC registered. Is this project likely to meet your criteria or should we email separately?	Please could you email us separately, with additional information about your chosen project/innovation.
	can domiciliary care agency(s) count as a care provider (cqc registered)	Yes you are more than welcome to apply for this innovation fund as a CQC registered domiciliary care agency.
Is this considered eligible for funding?	Is an innovation that is based on previous successful examples—though not yet tested in the UK—with a month of customisation to fit the proposed region, considered eligible?	Additional information required to answer this question. Can the individual who asked this question please contact us via the Innovation Fund email address innovationfund@healthinnovationwm.org
	Are corporate innovation projects that benefit staff and provide efficiencies for the Trust eligible?	Yes, this would be an eligible project. We are classing innovation as a new or significantly improved process, pathway, service or product that addresses a clear need or challenge within health and/or care settings. The innovation should demonstrate potential for meaningful impact, be feasible to implement, and show promise for sustainability and wider adoption.
	Could an innovative training and coaching programme be eligible?	Yes, this would be an eligible project. We are classing innovation as a new or significantly improved process, pathway, service or product that addresses a clear need or challenge within health and/or care settings. The innovation should demonstrate potential for meaningful impact, be feasible to implement, and show promise for sustainability and wider adoption.
	Can the innovation be a service rather than a product, as a new way of working in partnership. Your gave an example of a digital tool, can you expand please.	It does not need to be a digital tool. We are classing innovation as a new or significantly improved process, pathway, service or product that addresses a clear need or challenge within health and/or care settings. The innovation should demonstrate potential for meaningful impact, be feasible to implement, and show promise for sustainability and wider adoption. Please email us directly shoud you require any specific information: innovationfund@healthinnovationwm.org
	We have NHS Trusts who are already committed outside of West Midlands. We wait for West Midlands NHS Trust to confirm their interest. Could we apply as Midlands Trust as TBC or does this need to be 100% confirmed? Would a letter or email as statement of commitment from the Midlands NHS Trust be enough to show their alignment OR would this commitment be already through a more formal process internally?	The application will require you to input details of a local health and/or care delivery partner and would not allow you to progress any further unless this information has been entered. The form will also require a named individual at Director level or equivalent to confirm their support. Commercial entities that own or have developed the proposed innovation should be in collaboration with a healthcare partner, with demonstrable benefits for the West Midlands region.
	Does the project have to last 12 months or will a 6month project be eligible?	Projects do not need to last exactly 12 months. A 6-month project is eligible, provided it meets the overall aims and criteria of the Innovation Fund. We encourage applicants to propose timelines that are realistic and appropriate for their intended outcomes.
	Is compliance with the NHS 10 year plan important for this funding?	Yes, part of the eligibility criteria to apply for the fund stipulates that the application must support one of the three national NHS shifts (Analogue to Digital, Hospital to Community, Treatment to Prevention). Any additional alignment is welcomed.

	Are companies that have been awarded this grant in the past via the AHSN able to apply?	Yes, as long as the innovation is a new project, or a scaling up of an existing project. Projects that have been previously funded by the AHSN would not be successful in their application.
	What are the requirements for a startup (under the 3 years trading) you mentioned?	We've approached this on a case-by-case basis, but it's important to note that further due diligence is needed. We want to ensure that you're in a position to successfully deliver the project, both financially and operationally and have the necessary capacity and capability to see it through.

Partnerships & Lead Organisation		
Theme	**Question**	**Answer**
Who can we collaborate with?	Can charities or community organisation be considered as collaborators?	Yes, charities and community organisations can be considered as collaborators. Please ensure that there is also a health and/or care provider included in the application.
	Can we announce that we wish to collaborate rather than be the lead applicant	The application will require you to input details of the lead applicant in order to proceed and would also be required for the funding to be received by the lead applicant. Therefore the lead would need to be in place in advance of the application submission whihc you would be responsible for identifying and working with.
	In the context of Hospital to Community, what if the collaborator is a mobile health professional (e.g phlebotomy) delivering care at home to patients? This may affect the CQC requirement??	In cases where the collaborator is a mobile health professional such as a phlebotomist delivering care in patients' homes the CQC registration requirement may not apply directly to the individual but more to the activity. However, we would expect the lead health or care provider listed in the application to take responsibility for the governance, oversight and assurance of the activity. This includes ensuring that the service is safe, compliant, and appropriately managed within the wider care pathway.
	Can a Local Authority be a partner to a commercial entity, or does it need to be a Health or Care provider?	We can confirm that the Local Authority are CQC registered, and therefore would be eligible to apply.
	Would a partnership with selected community pharmacies within an ICB be an acceptable partner i.e. partnership with a Local Pharmaceutical Committee?	Yes, Community Pharmacies within an ICB would be an acceptable partner
	Is a hospital considered a partner?	Yes, a hospital would be considered a partner
	Is an Occupational Health company deemed a 'recognised health or care provider'?	A lead local health and/or care provider must be included in the application as part of the eligibility criteria if the application is made by a company.
	Does the term "recognised health provider" refer to someone within the region?	Yes we would expect to support applications of health providers within the West Midland region.
	Does Public Health count as a Health provider?	Public Health teams would be classed as a health provider where they are responsible for service delivery and governance of the service in question.
	I assume we will have to collaborate with an NHS organisation in order to be eligible. Please can you confirm?	A local health or care provider refers to any organisation based in the West Midlands that delivers health or social care services directly to individuals or communities. This includes: NHS organisations (e.g. hospitals, community trusts, GP practices) Local authority adult or children's social care services Community health services Public Health teams (where they are responsible for service delivery and governance) CQC-registered providers of domiciliary, residential, or specialist care Voluntary or third-sector organisations delivering commissioned care services To be eligible, the provider must be actively involved in the delivery of care and able to support the implementation of the proposed innovation, either as a lead or a formal partner.

	We are a private company that has an innovation that will be market ready within the 12 months but we do not have a health provider partner. Can HIWM help us find a partner?	The application will require you to input details of a local health and/or care delivery partner and would not allow you to progress any further unless this information has been entered. We are asking the applicants to come with a health system partner (they are also the body to accept the funding, in most cases), rather than us finding partners (as you can imagine, there has been a great deal of interest, and we are unable to support the identification of a partner within this current application period) and we would need the process to be fair and equitable. This may be something we could support with after the completion of the innovation fund and outside of the process in the future.
Location of partners/collaborators	We are a private provider based in the West Midlands, collaborating with GP practices for this project. Does the NHS organisation we collaborate with also need to be located in the West Midlands?	As long as the proposed project demonstrates a clear and measurable impact for the population of the West Midlands. Applications should show how the innovation will benefit local health and care systems within the West Midlands region.
	Do you accept cross border applications eg community organisation from South, health partner from Central?	Yes, we would accept applications that fall across multiple ICSs in the West Midlands.
	Our collaborators are outside the West Midlands - is that allowable?	As long as the proposed project demonstrates a clear and measurable impact for the population of the West Midlands. Applications should show how the innovation will benefit local health and care systems within the region.
	Is it acceptable for a project partner to be an academic institution located outside the West Midlands, provided they have the necessary expertise to support the proposed innovation and its associated impact?	As long as the proposed project demonstrates a clear and measurable impact for the population of the West Midlands. Applications should show how the innovation will benefit local health and care systems within the West Midlands region.
	Is a business ineligible if they are based outside of the West Mids but the partner is a WM based hospital?	Companies located outside the West Midlands are eligible to apply. However, the proposed project must demonstrate a clear and measurable impact for the population of the West Midlands. Applications should show how the innovation will benefit local health and care systems within the West Midlands region.
	Could the lead commercial partner with innovation be an European company working with a startup in West Midlands for UK delivery	Companies located outside the West Midlands are eligible to apply. However, the proposed project must demonstrate a clear and measurable impact for the population of the West Midlands. Applications should show how the innovation will benefit local health and care systems within the West Midlands region.
	Would it be viewed differently/more favourably if the lead applicant were the local GP practice, rather than an external health service provider?	We can confirm that having a local GP practice as the lead applicant would align more strongly with the eligibility criteria.
	can an ICB lead on this or does it need to be a service provider	Yes, an ICB is able to be the lead applicant

Lead provider/partnerships	To be eligible we must include a healthcare partner - what classifies as this? Can this be a gp, social prescriber working in certain localities?	We would classify a GP as a healthcare provider and so this is a viable option under the criteria that has been set out. A local health or care provider refers to any organisation based in the West Midlands that delivers health or social care services directly to individuals or communities. This includes: NHS organisations (e.g. hospitals, community trusts, GP practices) Local authority adult or children's social care services Community health services Public Health teams (where they are responsible for service delivery and governance) CQC-registered providers of domiciliary, residential, or specialist care Voluntary or third-sector organisations delivering commissioned care services To be eligible, the provider must be actively involved in the delivery of care and able to support the implementation of the proposed innovation, either as a lead or a formal partner.
	How do you define provider partners?	A local health or care provider refers to any organisation based in the West Midlands that delivers health or social care services directly to individuals or communities. This includes: NHS organisations (e.g. hospitals, community trusts, GP practices) Local authority adult or children's social care services Community health services Public Health teams (where they are responsible for service delivery and governance) CQC-registered providers of domiciliary, residential, or specialist care Voluntary or third-sector organisations delivering commissioned care services To be eligible, the provider must be actively involved in the delivery of care and able to support the implementation of the proposed innovation, either as a lead or a formal partner.
	Would the health care provider have to be a clinical based provider? or would a digital healthcare group such as Tunstall or PPP taking care (an ARC) count? am wondering if the digitalisation of warden call systems in sheltered housing will be eligible as this prevents delayed transfers of care, enables people to avoid carehome placements, etc.	This question has been answered via the Innovation Fund inbox. However, please do come back to us if you have a further query regarding this innovationfund@healthinnovationwm.org
	Is there a criteria for the collaborator?	We haven't set out any specific criteria for the collaborator, is there anything you wish to share and require guidance on? Please email the inbox if you wish to expand innovationfund@healthinnovationwm.org
	Does it have to be Aston Uni for Central? We already have good collaborative working relationships with Keele Uni...	Depending on which area of the West Midlands your innovation benefits, we will connect you with the relevant academic institution. However, if you already have strong existing links with a particular academic partner, you are welcome to select them as your preferred collaborator and we will endeavour to support your request.

	please can you give examples of the lead providers from health and 3rd sector that are eligible and also those that are not eligible eg commissioners of services	A local health or care provider refers to any organisation based in the West Midlands that delivers health or social care services directly to individuals or communities. This includes: NHS organisations (e.g. hospitals, community trusts, GP practices) Local authority adult or children's social care services Community health services Public Health teams (where they are responsible for service delivery and governance) CQC-registered providers of domiciliary, residential, or specialist care Voluntary or third-sector organisations delivering commissioned care services To be eligible, the provider must be actively involved in the delivery of care and able to support the implementation of the proposed innovation, either as a lead or a formal partner.
	I am interested to understand why this bid is partnered between SWFT, Aston and Keele can you give us some background to that grouping please?	The North, Central and South clusters outlined as part of the fund form the foundation of our approach. Within each of these clusters, we've established a strategic partnership with one key organisation. Specifically, we're working with Keele, Aston, and South Warwickshire Foundation Trust. These are organisations with whom we already have strong, existing relationships focused on developing innovation. They also serve as the fund holders, which aligns with our goal of ensuring a broad geographical spread across the West Midlands. This structure allows us to build on trusted partnerships while supporting innovation across the region.

Project Scope		
Theme	**Question**	**Answer**
Area's (geographically and by specialism)	Is there any prioritisation for Child and Young People health innovation or is it all adult focused?	There is not a specific adult focus for the innovation fund, and we would welcome applications focusing on Children and Young People
	Can the innovation be aimed at a particular vulnerable group? or are you looking for general population impact?	Yes, the innovation can be aimed at a particular vulnerable group and applications which demonsatrate a health inequalities focus may be looked upon favourably.
	Does your innovation need to be something that's innovative for the West Midlands or UK as a whole?	The proposed project must demonstrate a clear and measurable impact for the population of the West Midlands. Applications should show how the innovation will benefit local health and care systems within the region. However, innovations can be those which have been previously tested/evaluated outside of the region.
	Is there an expectation you reach people across the whole sub region or could the funding implement the innovation in a smaller sub section I.e just Solihull or just Birmingham, with the view to expand its adoption over a wider area over time or post funding?	There is no expectation that the innovation must reach across the whole of the ICS, sub-regional projects would be welcomed, particularly if there is a robust plan to scale up moving forward.
	there seems to be a lot of focus on clinical innovations and patient pathways, but would a non-clinical innovation that impacts on workforce and productivity at scale (regional and beyond) be in scope?	Your application does not need to have a clinical focus. Innovations which have an impact on workforce and/or productivity may be accepted. We are classing innovation as a new or significantly improved process, pathway, service or product that addresses a clear need or challenge within health and/or care settings. The innovation should demonstrate potential for meaningful impact, be feasible to implement, and show promise for sustainability and wider adoption.
	Could you describe more about how you will assess the project being sustainable? Eg being funded beyond the project period.	When we assess sustainability, we're looking at whether the innovation has a clear plan for continuing beyond the funding period. This could include things like: 1. Plans to embed the innovation into routine service delivery 2. Securing future funding or commissioning support 3. Demonstrating cost-effectiveness or system-wide value that makes the case for continuation We're not expecting every project to have guaranteed long-term funding in place, but we do want to see a realistic and thoughtful approach to how the innovation could be sustained or scaled after the initial 12 months. So in your application, it's helpful to outline what steps you'll take to ensure the innovation has a life beyond the funded period, even if that's still in development.

Sustainability	Will intention of procurement from NHS collaborators be required to show the future viability of the innovation ?	Demonstrating intention of procurement from NHS collaborators can significantly strengthen the case for the future viability of the innovation. However, it is not a requirement for application. While it may not be a strict requirement in all funding or evaluation contexts, it serves as a strong indicator of real-world demand and adoption potential. In the context of the Health Innovation Fund, where the focus shifts to implementation and impact, it's important to show: 1. Engagement with NHS stakeholders: This includes clinicians, service managers, or procurement leads who have expressed interest or intent to adopt the innovation. 2. Letters of support or MoUs: These can be used to evidence procurement intention or pilot commitments. 3. Alignment with NHS priorities: Demonstrating how the innovation addresses current NHS challenges (e.g. workforce efficiency, patient outcomes, cost savings) helps validate its viability.
	Just to clarify, this is to fund innovative service or tech delivery - not for research? Also, what happens to a funded service after 12 months, especially people employed to deliver a new service?	We are only looking for innovations being tested in a Real World Setting (subset of *Applied* Research). Successful applications should have given consideration for sustainability in an attempt to minimise risk of long term project failure as part of the application.
	Does the project need to be a pilot. Could it be assessing pathway fit by engaging stakeholders to establish larger scale pilots.	Ideally, we would like to support projects already tested in a real world setting with demonstrable positive outcomes for patients. Those projects which have already undergone Real World Evaluation/Testing with the potential for adoption and spread, are likely to be looked on favourably. However, projects with other forms of applied research may be accepted and marked on merit e.g. feasibility studies, safety testing in a controlled environment.
	Duration of project is for 1 year. That might be small timeframe for the clinical studies (ethic approval, IG approval etc taking into consideration). If that's the case how are outcomes supposed to be framed? Can it be a retrospective study?	Projects must be a form of applied research. Ideally, we would like to support projects already tested in a real world setting with demonstrable positive outcomes for patients. Those projects which have already undergone Real World Evaluation/Testing with the potential for adoption and spread, are likely to be looked on favourably. However, projects with other forms of applied research may be accepted and marked on merit e.g. feasibility studies, safety testing in a controlled environment. If ethics approvals are required it is unlikely that this would be completed within the timescales of the project delivery period and may indicate that the innovation is not yet mature enough for adoption and spread.

Outcomes and duration	1.Does one need to provide a letter from the NHS trust where the innovation will be implemented 2. How do you assess whether the innovation is market-ready and deliverable	Ideally the NHS trust will be named as a key collaborator/partner as part of the application under the criteria of requiring a local health and/or care provider. While a letter from the NHS trust is not a mandatory requirement, a letter that outlines the Trust's commitment to the proposed activity is highly recommended and would significantly strengthen your application or case for support. However, where collaboration is at an early stage and a letter not forthcoming, we suggest you include an open and honest description of conversations/agreements to date within the application. Assessing market readiness and deliverability involves a combination of technical, operational and commercial criteria. Key indicators include: Technology Readiness Level (TRL): Ideally TRL 6 or above, meaning the innovation has been demonstrated in an operational environment. Validation of efficacy: Evidence from pilots, trials, or real-world evaluations. Relevant regulatory approvals in place: For example, CE marking, MHRA registration, or other relevant certifications. Adoption ready: The ability to deploy into sites with minimal adaptation Operational integration: Compatibility with NHS workflows, IT systems, and identified procurement route. Commercial model: A clear value proposition, pricing strategy, and route to market. We look at whether the innovation can be safely and effectively deployed at scale, whether it meets a defined NHS need and whether the team has the capacity and partnerships to deliver.

Application Process	
Question	**Answer**
Just a practical question. Would it possible for you to share an editable form i.e. Word format / PDF that is editable? or is there a way to save the Microsoft form to allow you to return to it?	Unfortunately, 'save and return' is not a function offered by Microsoft Forms, and the application form document is only provided in PDF format to ensure the integrity of the content. The downloadable version is intended to support applicants in preparing their responses before completing the online application form. It serves as a reference guide only and has been locked in PDF format to prevent any changes to the questions, ensuring consistency across all submissions. We apologise for any inconvenience this causes.
Given the relatively small time frame between now and the 19th of September are we right in assuming that the application will need to be something that is quite well developed and a whole new innovation. As an example where a trust may wish to explore using AI driven technologies rather than AI solution despite this being very popular and not to mention very expensive.	We do not have a preference for AI Solutions above AI Driven technologies which may already be in place. However, ideally, we would like to support projects already tested in a real world setting with demonstrable positive outcomes for patients. Those projects which have already undergone Real World Evaluation/Testing with the potential for adoption and spread, are likely to be looked on favourably. So AI driven technologies which have been tested/piloted elsewhere would be welcomed. However, projects with other forms of applied research may be accepted and marked on merit e.g. feasibility studies, safety testing in a controlled environment.
What time specifically on the 19th is the deadline?	The deadline is 5pm on the 19th September.
Can you put in more than one application if its for different innovations?	There is no limit to the number of projects that can be submitted, provided each one meets the outlined criteria. However, please note that only one application should be submitted per project. Each project should outline a different innovation that can be considered. Should you wish to discuss this further, please email the inbox: innovationfund@healthinnovationwm.org
Given current system-wide time constraints especially with summer break, we're concerned about being able to submit a strong application within the deadlines. Could you please advise whether there might be any future rounds?	Unfortunately we do not have certainty as to whether there will be future funding rounds. However if there were future opportunities, this would be announced on our website and via our other communication channels such as our mailing list and socials.

Funding Contracts

Theme	Question	Answer
Existing product	Will the fund accessible for projects that have already started?	Yes, these bids will be considered but the expectation is for completion within our time scales of delivery within a 12 month period.
	We have an innovative digital tool developed . Can we use this grant for feasibility assessment prior to implementation of that innovation in a clinical setting for the pre implementation phase?	The priority will be given to those innovations that are implementation ready. We specifically require innovations to be fully developed, market-ready, and capable of immediate implementation.
	We have a product that is already in clinical use and we are trying to adapt it to a new use case and pathway, to solve a significant problem in the new pathway - will that be considered?	Yes, this will be considered depending on what the adapatation is and if it builds on improving and taking learnings from the origianal pilot and it meets the the other criteria outlined for this fund.
	If the work is an innovation, we can't confirm there will be continuity funding as it's being tested. Can this grant be used to pilot innovation to prove concept for further investment?	The priortiy will be given to innovations that are implementation ready. We specifically require innovations to be fully developed, market-ready, and capable of immediate implementation.Those projects which have already undergone Real World testing and evaluation with the potential for adoption and spread, are likely to be looked on favourably. However, projects with other forms of applied research may be accepted and marked on merit e.g. feasibility studies, safety testing in a controlled environment.
	Is the fund available for a medical device that is not yet approved by MDR/MHRA but on a path to do so in near future?	We are seeking market-ready solutions that can be deployed immediately. Given the project timelines, activities need to commence in December. You're welcome to submit a bid if you're confident that all necessary approvals will be in place by October or early November, allowing the process to begin on schedule. However, if approvals are unlikely to be secured within that timeframe, or if there's uncertainty around readiness, we may not be able to consider the application.
	Will the fund support a technology that has been developed by a particular trust and not a 3rd party technology company?	Yes, these bids will be considered. Please do email us should you require any additional information to give us a broader understanding of your question/innovation: innovationfund@healthinnovationwm.org
	Can I apply for innovation funding on a readily available market product for a different clinical use?	Yes, these bids will be considered. Please do email us should you require any additional information to give us a broader understanding of your question/innovation: innovationfund@healthinnovationwm.org
Further funding	Is the project funded for 12 months sorry if I missed this?	Projects do not need to last exactly 12 months. Any time frame **within** a 12 month period will be considered as long as it does not go beyond the 12 months.
	Is there an intention to have further rounds of funding?	No future funding rounds are scheduled at present, further opportunities may take place subject to national health innovation funding and wil be promoted thorugh our website and social media accounts.
	How many projects are you considering to fund?	This will depend on the values of each bid and number of bids suitable for approval.
Match funding/other organisation involvement	How does it work if the project we propose is also waiting for decision on other funding needed which hasn't been decided by 19th of September?	All applications will be reviewed based on suitablility at the time of application.
	Can the health/social partner be someone providing in-kind support or do you expect them to be costed?	In-kind support can be included in the overall bid, just need to be clear if you are seeking funding for this as part of the bid.
	For a local GP practice collaborating with a private health service provider, will the service provider costs come under subcontractor category? Also is there an expected percentage for subcontractor costs? Thank you.	Yes, private health contractor can be listed as subcontractor costs. There is no % limit to subcontractor costs as a proportion of the overall bid cost.
	If a project has merit but the distribution of funds does not permit meet the total budget requested, will partial funding be available?	Yes, these bids will be considered
	Can NHS organisation use subcontractor which are private startup?	Yes, an NHS organisation can use a private sector subcontractor to help deliver a project. If successful, the lead NHS organisation will receive funding, they can pass on any agreed project funding share to the startup company.
	We're exploring the potential for matched funding from local partners for the innovation sustainability. Could you confirm whether matched funding is encouraged or allowable within the scope of the fund, and whether the funding is strictly limited to a 12-month delivery window?	Matched funding can be included in the bid as this demonstrates support from other organisations. Please be clear on what needs to funded as part of this funding application.

	For projects with partnership with UHCW, which entity will be accessing it?	We can provide funding to the NHS Trust or direct to the partner organisation (private sector) - this wil be the lead named organisation as part of the bid.
	We have completed a pilot to support a department which was very successful, and need to seek expansion across other departments to support the continued implementation of the innovation. Would this be a suitable project (supporting the implementation of the technology within another department) for this fund?	Yes, these bids will be considered as long as all other criteria outlined for the fund have been met.
What can funding be used for?	Are you expecting the evaluation costs to be included in the funding or are you able to evaluated impact?	Yes, evaluation costs should be included in the funding.
	You have discussed the areas in which this fund can be used for? Do we have to cover the whole of the Black country, or can we cover an area in the Black country i.e. Dudley	Yes, bids to support innovations which affect part of the West MIdlands will be considered and we would be looking for innovations which could be scalable across wider populations (with our support should you require this)
	Can the funding be used to fund a post/person to deliver improvement or is the funding for an innovative item/equipment?	Yes, the funding can be used for pay/ staff costs
	Following on from the question about MDR/MHRA approval: what if the funding is intended to be used specifically for obtaining MDR/MHRA approval and ISO certifications for the medical device? Would this still be eligible?	This would not seem to be an innovation that is implementation ready and awaiting regulatory approval can be a timely process, one which would not meet the criteria of completion within the 12 month period. Shoud you wish to discuss this further, please email us: innovationfund@healthinnovationwm.org
	The guidance is not clear on allowable costs. It says overheads are allowed but not what the funding rate is. Does this mean funding is provided at 100% FEC?	No set (maximum / minimum) rate for overheads, we would expect them to be proportionate to the overall bid total. Funding is provided for the value of the bid (up to a maximum of £50,000), so yes, the full cost of delivering the project could be funded.
	I am from BCU and working in collaboration with UHB. We have developed an innovation that we would like to validate within the West Midlands Secure Data Environment (WM SDE). We have not yet gone through the MHRA approval route — can we still apply?	This would not seem to be an innovation that is implementation ready and awaiting regulatory approval can be a timely process, one which would not meet the criteria of completion within the 12 month period. Shoud you wish to discuss this further, please email us: innovationfund@healthinnovationwm.org
How will the funding be allocated and how much is it?	Are you considering offering any funding for existing sucessful projects offering value for money (and facing closure)?	Please could you email the inbox so we can fully understand your question/innovation: innovationfund@healthinnovationwm.org
	does the funding have to cover full project costs or can it support a % of year 1 with the provider organisation funding the remaining?	Funding secured through a successful bid can be used to support (fund) part (%) of the overall project costs. It would be beneficial to include some detiails about the expected / approved other sources of funds
	Why do you say the award is up to 50k yet expect them to be in a range between £10,000 and £35,000.	The £10-35k was an estimate of the average bid based on some internal discussions. We were trying to highlight that bids would be considered for a range of values, every bid does not have to be for the full £50k.
	How much is the total fund available? Is it split evenly between the 3 areas?	Our aim is to fund bids from across the West MIdlands region, it may not be exactly split evenly between the 6 ICB's and 3 regions. All applications from each area will be reviewed and awarded to an agreed criteria
	Sorry if I missed it, how many up to £50k applications do you have financial capacity to support (e.g how much is the overall total funding opportunity locally)	We're aiming to support a meaningful portfolio of innovations across the region, and we encourage applicants to focus on value, impact, and feasibility within the available funding envelope of up to £50,000 per project.
	what if the innovation proposed is greater that £50,000? would it be ineligible or would evidence be required that the rest can be funded?	Yes, evidence should be provided to demonstate the agreed or expected source of funding for bids over £50,000
	would this fund service development and evaluation projects? Otherwise the timeline seems tight for obtaining research ethics approvals, especially if it had to go through NHS ethics	This fund is designed for innovations that are market ready with regulatory approvals in place and are ready for implementation. We are classing innovation as a new or significantly improved process, pathway, service or product that addresses a clear need or challenge within health and/or care settings. It is not designed for research projects that require ethics approval.
	Can external evaluation by a third party be funded within the budget? eg. Health Innovation West Midlands	As Health Innovation West Midlands we cannot be included to be funded as part of your application. Our support would fall outside of the fund and will be based on our capacity of being able to support your project.

Next Steps

Theme	Question	Answer
Communication	Will the successful projects be visible to others? It would be great to see how the grants are used and applied and also the impact this has on the West Midlands upon completion	Yes, successful projects will be featured in our Impact report and video and written case studies will be produced
	Will you share the slides?	Yes
	It would be helpful to have some insight into what has been funded in the past (if there's been similar pots available). Thanks	This is the first time we've run the fund in its current format. Previously, we had a Safety and Innovation Fund, which was more focused on process improvement. So while the concept of supporting innovation isn't new to us, this is the first time we've launched a fund specifically dedicated to innovation. For example, we have previously funded a project that is looking at an innovative pathway in a urgent care response team in which they are testing point of care ultrasound to assist in clinical decision making, particularly in the DVT pathway, with the aim to reduce hospital attendances/admissions.
Support	Apart from funding, will guidance and support be given or what kind of check ins?	Successful applicants will be supported by a designated Contract Manager from HIWM, who will oversee the contractual process, coordinate with the lead academic institution, and ensure that project milestones and payments are managed effectively. In addition, HIWM's communications team will assist with promoting funded projects to raise visibility and share progress. Where appropriate, HIWM can also provide support for wider adoption and spread of the innovation across the health and care system, should this be of interest to the applicant.