



SPACE EAST

Health Innovation East



MARCH 2026

Towards a Space-Enabled Region

**STRENGTHENING HEALTH AND CARE
DELIVERY IN THE EAST OF ENGLAND**



REPORT AND RECOMMENDATIONS



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EXECUTIVE SUMMARY

Health and care systems in the East of England are under sustained pressure from demographic change, workforce constraints, uneven digital infrastructure, and increasing environmental risk. These pressures are most visible in rural and coastal areas, where geography, connectivity, and access directly shape whether care can be delivered safely, efficiently, and closer to home.

This report tests a practical hypothesis: if resilient, seamless connectivity is treated as a necessary shared clinical infrastructure across ambulance services, hospital boundaries and community settings, then the region can accelerate out-of-hospital care models, improve operational flow, and reduce unwarranted variation in digital access.

The East of England Ambulance Service NHS Trust (EEAST) provides an early example of what this looks like in practice. Working with Excelebrate, EEAST deployed a platform that intelligently switches between terrestrial and satellite networks to maintain stable connectivity for frontline teams, including in remote areas, patient homes, and at hospital handover points. In the initial deployment period, the technology enabled reliable access to digital tools and records on the move and supported an average of more than 3,000 connections per day at ambulance bay and handover locations.

At the same time, national policy recognises that current models of care are unsustainable in the long run, given ageing demographics and rising public expectations of our healthcare system. The Ten Year Health Plan, the Strategic Commissioning Framework, and the Medium Term Planning Framework set expectations for prevention, digital-first delivery, and expanded out-of-hospital care. Meeting these ambitions depends on reliable connectivity, secure and continuous data flows, and better use of population-level insight.

Space-enabled technologies directly support these requirements. Satellite connectivity, Earth Observation data, and secure space-derived data flows are already being used in real-world public services to address connectivity gaps, improve situational awareness, and strengthen resilience.

For health and care, these capabilities offer practical ways to enable mobile clinical models, support remote diagnostics and monitoring, and improve population health planning.



EXECUTIVE SUMMARY

This report captures the first in a planned series of regional conversations exploring how space-enabled technologies could be applied more systematically across health and care in the East of England. Convened with NHS organisations, local government, industry, academia and national partners, the roundtable tested whether these capabilities address real delivery challenges, assessed appetite for moving beyond isolated pilots and explored what would be required to progress towards a coordinated Space-Enabled Region approach.

The discussion confirmed that the opportunity is no longer conceptual. Participants highlighted clear use cases where space-enabled technologies could support current NHS priorities, particularly in relation to rural and coastal access, out-of-hospital care, mobile diagnostics, urgent and emergency care pathways and system resilience. Connectivity was consistently identified as a foundational constraint, limiting the effectiveness of the digital tools and care models the system is already expected to deliver. The EEAST example indicates that this is addressable now through hybrid terrestrial and satellite approaches that reduce user burden and improve reliability in real operational conditions. Treating connectivity as shared infrastructure, rather than a pathway-specific issue, emerged as a critical enabler of change.

Five priority actions emerged from the roundtable to guide the next phase of work: focusing on a small number of high-value regional challenges; positioning connectivity as core infrastructure; establishing the East of England as a testbed for space-enabled health innovation; strengthening enabling conditions such as interoperability, procurement and workforce capacity; and convening a follow-on roundtable to move from opportunity to implementation.

Together, these actions set out a pathway from early engagement to delivery. The report positions health and care as a core entry point for a future Space-Enabled Region proposition, aligned with national policy and the UK Space Agency's Unlocking Space for Government programme. The next phase will be critical in translating shared ambition into a credible, coordinated regional approach that delivers measurable benefit for patients, services and the wider system.

CONTRIBUTIONS

With thanks to the following participants who informed this discussion:

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SUMMARY OF RECOMMENDATIONS

The roundtable demonstrated that space-enabled technologies can play a practical and strategic role in addressing the East of England's most pressing health and care challenges. Participants agreed that the opportunity now is to move from individual pilots and conversations to a more deliberate, region-wide approach that builds the foundations of a Space-Enabled Region for health and care.

To do this, stakeholders identified a small number of priority actions that should shape the next phase of work and inform a follow-on roundtable focused on delivery, design and investment.

1. Focus on a small number of high-value regional challenges where space-enabled solutions can deliver measurable benefit.

Progress towards a Space-Enabled Region will depend on prioritisation. Rather than pursuing isolated use cases, the region should focus on a limited number of shared challenges where satellite connectivity, Earth Observation data and secure space-enabled data flows can clearly support NHS priorities. These include rural and coastal access, delivery of out-of-hospital care, mobile diagnostics, urgent and emergency care pathways, and system resilience.

A focused approach will enable clearer outcomes, stronger evidence generation and greater confidence among NHS leaders and national partners.

2. Use connectivity as a foundational enabler for digital, community and preventative care models.

Reliable connectivity was consistently identified as a critical constraint on innovation, workforce productivity and equitable access to care. The region should treat connectivity as core infrastructure for modern health and care delivery, particularly for community services, ambulance and mobile clinical models, care homes, and virtual wards.

Space-enabled connectivity should be positioned as a practical solution to address gaps where terrestrial networks are insufficient, enabling digital tools and care models that systems are already expected to deliver under national policy.



SUMMARY OF RECOMMENDATIONS

3. Establish the East of England as a testbed for space-enabled health and care innovation.

Participants highlighted the need for safe, supported environments where new approaches can be tested, refined and demonstrated before wider adoption. The region should build on existing assets, including innovation gateways, living labs and cross-sector hubs, to create a more coordinated testbed offer for space-enabled health solutions.

This would support experimentation without compromising frontline delivery, generate evidence that is meaningful to system leaders, and provide a clear route from trial to scale.

4. Strengthen enabling conditions for adoption, including interoperability, procurement and workforce capacity.

Technology readiness alone is insufficient without the right system conditions. The region should prioritise work to address known barriers to adoption, including interoperability requirements, procurement rigidity and limited capacity for operational leaders to engage in innovation activity.

Clear expectations around interoperability, more flexible approaches to procurement, and targeted investment to release frontline capacity will be essential to ensure that space-enabled solutions can be adopted at scale rather than remaining time-limited pilots.

5. Use a follow-on roundtable to move from opportunity to implementation.

Participants supported convening a second roundtable to build on this initial discussion. This session should move beyond awareness-raising and focus on co-designing priority use cases, defining the shape of potential regional demonstrators, and clarifying roles for NHS organisations, local government, industry and national partners.

This next phase will be critical in translating interest into a credible Space-Enabled Region proposition aligned with UK Space Agency priorities and regional system needs.



BACKGROUND

Health Innovation East is the local Health Innovation Network for the East of England, bringing together the NHS, industry, academia and the third sector to help drive health innovation across the NHS, at pace and scale. We transform lives through innovation by supporting health and social care teams to find, test and implement new solutions at scale to the NHS' greatest challenges, driving economic growth.

Space East is the East of England's space cluster and connector organisation. Funded by the UK Space Agency, it provides free membership and support to build connections between organisations with real-world problems and those with relevant space and space-adjacent capability. The cluster has a large regional membership base and convenes cross-sector partners to turn shared challenges into collaborative projects.

The East of England presents a distinctive case for progressing towards a Space-Enabled Region for health and care. Large rural and coastal geographies, uneven digital connectivity, and dispersed populations create persistent access challenges and constrain the delivery of community-based and digital-first care. Workforce shortages further amplify these pressures, particularly for services that depend on mobility and flexible deployment.

These local challenges intersect with national policy direction. The Ten Year Health Plan and associated commissioning and planning frameworks require systems to deliver more care outside hospital settings, strengthen prevention, and improve productivity. They also assume the availability of robust digital infrastructure and interoperable data to support new care models. In practice, gaps in connectivity and data flow continue to limit what systems can deliver.

Space-enabled technologies offer a route to addressing these constraints. Satellite connectivity can provide resilient digital infrastructure in hard-to-reach locations and at the edges of existing estates. Earth Observation data can be combined with health and social data to improve understanding of access barriers, environmental risk, and population health patterns. Secure space-enabled data flows support remote monitoring, diagnostics, and decision-making in mobile and community settings.



BACKGROUND

This agenda aligns closely with the UK Space Agency's Unlocking Space for Government Civil Workstream, which identifies healthcare as a priority sector and seeks regions capable of hosting integrated demonstrators. A Space-Enabled Region approach moves beyond individual pilots to test how multiple space-enabled applications can operate together across a defined geography, generating evidence for adoption at scale.

The East of England already hosts relevant capability across the NHS, local government, industry, and academia, alongside established innovation assets such as living labs, testbeds, and regional connectors. What is currently missing is a coordinated approach that brings these elements together around shared priorities and a clear delivery pathway.

The roundtable that informed this report was convened as a first step towards that coordination. It focused on surfacing where space-enabled technologies align most strongly with regional health and care needs and on identifying the conditions required to move from interest to action. The next phase of work will build on this foundation, with a sharper focus on prioritisation, demonstrator design, and readiness to progress towards a Space-Enabled Region proposition.





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Keynote



KEYNOTE

Tony Mears, Deputy Director of Strategy at Salisbury NHS Foundation Trust, drew on experience spanning five years in the NHS and almost 4 years at the UK Space Agency, including work linked to the Future Hospitals Initiative, to frame the challenge facing health and care as less about clinical capability and more about how the system responds to demographic change, complexity and long-term demand.

While significant progress has been made in reducing premature mortality, a growing proportion of later life is now lived in poor health, creating sustained pressure on services. This shift is particularly acute given the projected growth in the over-85 population and the increasing prevalence of multimorbidity.

The Keynote argued that many interventions occur too late in the pathway, when options are limited and costs are high. Managing this challenge requires earlier insight, better understanding of risk, and new ways of supporting care outside traditional settings. However, the system often responds to this reality by deprioritising innovation, citing operational pressure and lack of capacity.

Space-enabled technologies were positioned not as a separate innovation pathway, but as enablers that can help the system do what it is already trying to do more effectively. Examples included using space-derived and geospatial data to better understand access barriers, mobility constraints and environmental risk, and combining these insights with health data to support population health management and more targeted intervention. Improving the cadence and fidelity of data was highlighted as essential to moving from reactive to preventative models of care.

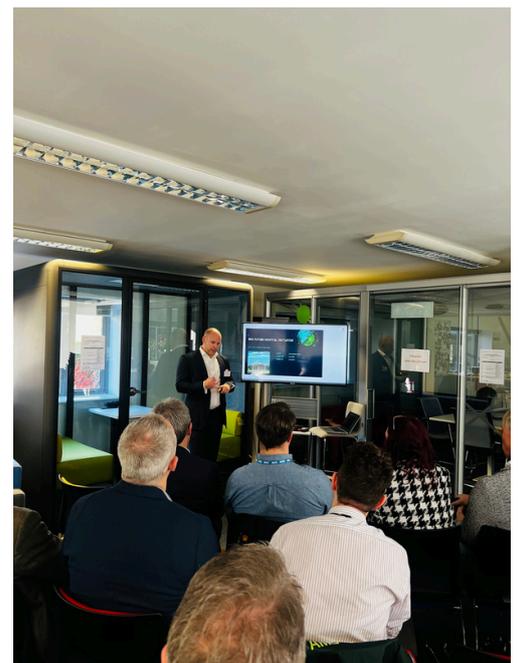
The keynote also highlighted a persistent structural issue: the NHS struggles to spread and adopt solutions that are already proven. Pilots can demonstrate value but fail to scale, not because the technology is flawed, but because adoption across systems, sectors and pathways is difficult. Space-enabled approaches were framed as an opportunity to focus on shared infrastructure and capability, rather than single-use applications, supporting multiple pathways and services simultaneously. A recurring theme was the need to look beyond healthcare alone. Other sectors have developed capabilities in connectivity, data and systems integration that health has been slow to accept or adapt. Progress therefore depends on being willing to work across sectors and on individuals and organisations that can connect problems, skills and funding to deliver practical solutions.



KEYNOTE

Tony also highlighted population health opportunities using space-derived and geospatial data, including using information on access barriers, mobility constraints and environmental risk alongside health datasets to improve targeting and timing of intervention. He emphasised the value of individuals who can connect problems, capability and funding across sectors to convert opportunity into delivery.

The keynote concluded by suggesting that the East of England is well placed to take this forward. The region combines clear system need, including rural and coastal access challenges, with an established innovation ecosystem and active engagement from national partners. The roundtable was positioned as an initial step in building shared understanding and confidence, with participants encouraged to see themselves as bridging communities and sectors as the region moves towards a Space-Enabled approach to health and care.





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Case studies



CASE STUDY 1

EEAST AND EXCELERATE: BUILDING RESILIENT CONNECTIVITY ACROSS EMERGENCY AND HOSPITAL SETTINGS

The challenge

As care delivery becomes increasingly digital, East of England Ambulance Service NHS Trust (EEAST) identified that inconsistent connectivity was limiting the effectiveness of digital tools across pre-hospital, hospital-edge and specialist emergency pathways. This risk was most acute in mobile environments, rural areas and at points of handover between services.

The approach

EEAST partnered with Excelerate to deploy a connectivity platform that seamlessly integrates terrestrial networks and satellite connectivity. The platform monitors available networks and switches automatically to maintain stable performance, reducing dropouts and removing the need for frontline staff to manage connections manually. This created more reliable, resilient connectivity for ambulance crews across remote areas, patient homes, and hospital sites, supporting a consistent user experience under real operational conditions.

About the technology

The solution combined multi-network routing with operational management suitable for large fleets, supporting consistent connectivity across moving vehicles and fixed hospital-edge locations. It was designed so that crews could focus on care delivery while connectivity remained dependable in the background.

Key applications delivered

1. Digital ambulances and mobile care

- Resilient connectivity for mobile clinical environments
- Reliable access to patient records, tools and specialist advice while on the move
- Designed for low and no-coverage areas
- Removed connectivity as a constraint for frontline crews
- This supported access to electronic patient records and national record services that had become operationally dependent on consistent connectivity following the shift from paper-based workflows.



CASE STUDY 1

EEAST AND EXCELERATE: BUILDING RESILIENT CONNECTIVITY ACROSS EMERGENCY AND HOSPITAL SETTINGS

2. Hospital-edge connectivity

- Reliable digital connectivity at ambulance bays and handover points
- Faster, smoother patient handovers
- Support for digital care across fixed and temporary hospital spaces
- Averaging more than 3,000 connections per day
- A dedicated Wi-Fi network at ambulance bay and handover points helped keep crews connected during handover, supporting smoother flow and more reliable digital working.

3. Mobile stroke vehicles

- Live video triage with stroke specialists from the roadside
- Earlier and more accurate treatment decisions
- Fewer unnecessary hospital admissions
- Better use of ambulance and emergency department capacity
- Reliable connectivity supported live video triage with stroke specialists, improving confidence in on-scene decision-making and supporting pathway efficiency.

Across these use cases, frontline feedback consistently highlighted stable performance in remote locations, strong connection speeds during live operations and high confidence that connectivity would be available when required.

Why it matters

Individually, these projects improved specific services. Collectively, they demonstrated that resilient connectivity is an enabler for multiple care models, not a single intervention. By investing once in foundational infrastructure, EEAST created the conditions to scale digital, mobile and out-of-hospital care across pathways rather than through isolated pilots.



CASE STUDY 1

EEAST AND EXCELERATE: BUILDING RESILIENT CONNECTIVITY ACROSS EMERGENCY AND HOSPITAL SETTINGS

What this demonstrates

- Connectivity underpins emergency, hospital-edge and specialist pathways simultaneously
- Space-enabled solutions can provide resilience where terrestrial networks alone fall short
- Treating connectivity as shared infrastructure accelerates adoption and reduces duplication

This portfolio approach illustrates how space-enabled capability can support current service pressures while enabling future models of emergency and community-based care across the East of England.





CASE STUDY 2

COMBINED AUTHORITIES AS SYSTEM ENABLERS OF A SPACE-ENABLED REGION

The contribution from the Cambridgeshire and Peterborough Combined Authorities demonstrated that the East of England's ambition to progress towards a Space-Enabled Region for health and care is underpinned by scale, capability and coordination at a system level.

What this demonstrates about regional readiness

The region has the economic and industrial scale to support space-enabled health at pace

The East of England operates as one of the UK's strongest science and technology economies, with over 5,000 knowledge-intensive firms, a regional GVA exceeding £30 billion and sustained long-term growth above the UK average. Nearly 28% of economic output is driven by innovation-led sectors, creating the conditions for space-enabled technologies to be developed, tested and adopted at scale ([link](#)).

Space-derived capability is already embedded across health-relevant sectors

The case study highlighted space-adjacent capability across advanced manufacturing, digital technologies, life sciences and medical technologies. Concrete examples included firms working on precision positioning and navigation, satellite and geospatial data, advanced sensing and materials, photonics and semiconductors, and quantum technologies, all with direct application to diagnostics, imaging, robotics, wearables and remote monitoring.

There is a demonstrable pipeline from space capability to health use cases

Examples presented showed how space-enabled technologies are already being translated into health and care contexts, including:

- Precision positioning technologies supporting ambulance routing, asset tracking and wearable monitoring
- Satellite and Earth Observation data used for population health modelling, environmental risk and emergency response
- Advanced materials and sensing transferred from aerospace into medical device testing and reliability
- Semiconductor and FPGA technologies accelerating MRI, CT and surgical robotics

This evidences readiness to support integrated demonstrators rather than exploratory pilots.



CASE STUDY 2

COMBINED AUTHORITIES AS SYSTEM ENABLERS OF A SPACE-ENABLED REGION

Combined Authorities provide the coordination mechanism required for a Space-Enabled Region

The involvement of Combined Authorities demonstrated how economic strategy, infrastructure investment, skills development and innovation support can be aligned with NHS priorities. This creates a route to coordinate demand across multiple systems, address infrastructure constraints such as connectivity, and support demonstrators that operate across pathways and geographies rather than within single organisations.

Why this matters

This case shows that the East of England already meets the core conditions required to act as a Space-Enabled Region for health and care: scale, industrial capability, translational pathways and place-based coordination. The active role of Combined Authorities provides system leadership that connects NHS need with regional capability and national programmes, strengthening the case for progressing towards region-wide demonstrators aligned with Unlocking Space for Government.





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Discussion summary



DISCUSSION SUMMARY

The roundtable discussion focused on how space-enabled technologies could address practical delivery challenges in the East of England, and what conditions need to be in place to move from individual initiatives towards a coherent regional approach.

From technology awareness to delivery relevance

Participants consistently emphasised that the challenge is not just understanding what space-enabled technologies can do but determining where they add most value to current service pressures. Connectivity, data reliability and access to insight were identified as foundational constraints that limit the effectiveness of the digital care models that the system is already expected to deliver. Space-enabled approaches were discussed as a means of strengthening these foundations rather than introducing additional complexity.

Connectivity as critical infrastructure

Poor and inconsistent connectivity was highlighted as a systemic barrier across settings, including community care, hospital edges and mobile clinical environments. Discussion reinforced that connectivity should be treated as shared infrastructure supporting multiple pathways, rather than addressed through isolated, site-specific solutions. Space-enabled connectivity was viewed as particularly relevant in rural and coastal areas, where terrestrial solutions alone remain unreliable or prohibitively costly.

Enabling care beyond hospital settings

The discussion aligned strongly with national direction to deliver more care out of hospital. Participants noted that mobile diagnostics, virtual wards, remote monitoring and specialist input in the community are increasingly constrained by digital reliability rather than clinical capability. Space-enabled technologies were seen as an enabler of these models, supporting earlier intervention, better use of workforce time and reduced pressure on acute services.

Moving upstream: prevention, prediction and resilience

Beyond immediate operational challenges, participants highlighted the potential for space-derived data to support prevention and system resilience. Earth Observation and geospatial data were discussed in the context of population health insight, environmental risk and preparedness, enabling systems to identify and respond to emerging pressures earlier rather than reacting once demand has escalated.



DISCUSSION SUMMARY

Barriers to adoption and scale

The discussion identified recurring barriers that limit adoption even where technologies are proven. These included rigid procurement frameworks, lack of mandated interoperability, limited capacity for operational leaders to engage in innovation activity, and the absence of safe environments to test and refine solutions. Participants noted that benefits are often diluted when deployment remains small-scale, making it difficult to evidence impact through headline performance metrics.

The importance of place-based coordination

A consistent theme was the need for coordination at a regional level. Participants emphasised that moving towards a Space-Enabled Region requires alignment across NHS systems, local government, industry and research partners. Place-based leadership was seen as essential to prioritising shared challenges, coordinating investment and supporting demonstrators that operate across pathways rather than within single organisations.

Implications for next steps

The discussion reinforced that the East of England already has relevant capability and early examples of delivery. The challenge now is focus. Participants emphasised the importance of narrowing attention to a small number of high-impact use cases, supported by clear governance, agreed outcomes and routes to scale. This provides a clear rationale for a follow-on roundtable focused on prioritisation, demonstrator design and delivery readiness.



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Recommendations and actions



RECOMMENDATIONS AND ACTIONS

The roundtable confirmed that the East of England has both a clear need and a credible opportunity to progress towards a Space-Enabled Region for health and care. Participants emphasised that success will depend on focus, coordination and the creation of enabling conditions that allow space-enabled technologies to move beyond isolated pilots into routine service delivery.

The recommendations below set out the priority actions required to translate early momentum into a coherent regional proposition and to shape the agenda for the next phase of work.

1. Focus on a small number of high-value regional challenges where space-enabled solutions can deliver measurable benefit

Participants agreed that progress towards a Space-Enabled Region will depend on clear prioritisation. Rather than pursuing multiple disconnected use cases, the region should focus on a limited set of shared challenges where space-enabled technologies can clearly support NHS delivery priorities and generate evidence of impact.

These challenges consistently centred on rural and coastal access, out-of-hospital care, mobile diagnostics, urgent and emergency care pathways, and system resilience in the face of environmental and infrastructure pressures.

Actions

- Define a small number of priority challenge areas at a regional level, agreed across NHS systems and partners, to anchor future activity and investment.
- Align priority challenges to national policy drivers, including requirements to expand community-based care, improve productivity and strengthen resilience, ensuring relevance to system leaders and national stakeholders.
- Use these challenges as the organising framework for future pilots, demonstrators and investment discussions, avoiding fragmentation and duplication.



RECOMMENDATIONS AND ACTIONS

2. Use connectivity as a foundational enabler for digital, community and preventative care models

Reliable connectivity was repeatedly identified as a prerequisite for modern health and care delivery and a persistent constraint in rural, coastal and mobile settings. Participants stressed that connectivity should be treated as core infrastructure, rather than an optional enhancement, if digital and community-based care models are to function effectively.

Space-enabled connectivity was recognised as a practical solution where terrestrial networks are insufficient, particularly for ambulance services, community teams, virtual wards and mobile diagnostics.

Actions

- Position connectivity as enabling infrastructure within regional digital and service transformation programmes, rather than as a standalone technology initiative.
- Identify priority settings where connectivity gaps directly limit care delivery, such as ambulance handovers, community services, care homes and remote monitoring pathways.
- Integrate space-enabled connectivity into existing care models, ensuring solutions support services that systems are already expected to deliver, rather than creating parallel approaches.

3. Establish the East of England as a testbed for space-enabled health and care innovation

Participants highlighted the need for safe, supported environments where space-enabled solutions can be tested in real operational conditions without compromising frontline delivery. A coordinated regional testbed approach was seen as essential to move from proof-of-concept to adoption at scale.

The East of England's geography, innovation assets and cross-sector partnerships position it well to host integrated demonstrators that reflect real system complexity.



RECOMMENDATIONS AND ACTIONS

Actions

- Build a coordinated regional testbed offer that brings together NHS organisations, local government, industry and research partners around shared priorities.
- Design demonstrators that test multiple space-enabled applications together, reflecting the integrated nature of real-world service delivery.
- Ensure demonstrators generate evidence that is meaningful to decision-makers, including clinical, operational and economic outcomes, to support future commissioning and investment decisions.

4. Strengthen enabling conditions for adoption, including interoperability, procurement and workforce capacity

The roundtable emphasised that technical capability alone is insufficient to drive adoption. Participants identified persistent system barriers that limit the ability of organisations to trial and scale new approaches, including interoperability challenges, procurement rigidity and limited operational capacity.

Addressing these enabling conditions was seen as critical to ensuring space-enabled technologies move beyond time-limited pilots.

Actions

- Clarify interoperability expectations early so that space-enabled solutions align with existing digital architectures and data standards.
- Explore more flexible procurement approaches that allow systems to test and adopt emerging technologies without excessive risk or administrative burden.
- Support operational and clinical leaders with protected capacity to engage in innovation activity, recognising this as a prerequisite for meaningful adoption.



RECOMMENDATIONS AND ACTIONS

5. Use a follow-on roundtable to move from opportunity to implementation

Participants supported convening a second roundtable to build on the foundations established in this session. This follow-on discussion should shift from awareness-raising to delivery-focused design, bringing together the right mix of decision-makers to shape a credible Space-Enabled Region proposition.

The next phase was seen as critical in translating interest into a clear, investable programme aligned with UK Space Agency priorities and regional system needs.

Actions

- Design the follow-on roundtable around delivery, focusing on co-designing priority use cases, defining demonstrator scope and clarifying ownership.
- Use the session to align roles across NHS, local government, industry and national partners, ensuring shared accountability and momentum.
- Position the output as a stepping stone to a Space-Enabled Region proposal, providing clarity on next steps, timelines and partnership requirements.

