



SPACE EAST

Health Innovation East



APRIL 2026

Towards a Space-Enabled Region

NAVIGATING NATIONAL FUNDING AND SUPPORT



REPORT AND RECOMMENDATIONS



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EXECUTIVE SUMMARY

Health and care systems in the East of England are being asked to deliver more care outside hospital, improve productivity, strengthen prevention and make better use of digital infrastructure and data. For regions with large rural and coastal geographies, these ambitions are harder to realise in practice. Uneven connectivity, fragmented data flows and the difficulty of coordinating innovation across multiple organisations continue to limit the delivery of digital, community-based and more preventative models of care. These pressures sit within a wider policy context shaped by the [Ten Year Health Plan](#), the [Life Sciences Sector Plan](#) and the NHS's broader direction on service transformation, all of which depend on stronger digital capability, more integrated delivery and clearer routes from innovation into adoption.

The first [Towards a Space-Enabled Region report](#) established that space-enabled technologies are relevant to these challenges. It showed that satellite connectivity, Earth Observation data and secure space-derived data flows can support practical delivery priorities in health and care, particularly in relation to ambulance services, community care, mobile diagnostics, hospital-edge working and wider system resilience. It also concluded that the East of England has the geography, capability and cross-sector assets to act as a credible region for further development.

This follow-on roundtable focused on the next question: what is required to move from identified opportunity to funded, adoptable and scalable programmes? Bringing together regional partners with the [Satellite Applications Catapult](#), [Innovate UK](#), [Space East](#) and [Norfolk and Norwich University Hospital](#), the session examined how national support routes, innovation funding and regional coordination could be better aligned to support progression. The discussion centred on how the East of England can build a proposition that is credible to funders, relevant to NHS decision-makers and capable of moving beyond repeated pilot activity.

Participants were clear that promising technologies continue to stall between successful feasibility work and routine adoption. The issue is especially acute where operational benefits are visible, but budgets, incentives and procurement routes remain fragmented. In health and care, the organisation that experiences the benefit is often not the organisation that holds the budget to adopt a solution at scale. That disconnect was identified as one of the most significant barriers to movement from innovation into service delivery.



EXECUTIVE SUMMARY

Three priority actions emerged from the session. First, create a regional coalition to coordinate the space-enabled health agenda and join up existing activity more effectively. Second, develop a short, shared paper that strengthens the case for action and supports future engagement. Third, bring end users, customers and buyers more directly into the next phase of work so that future activity is shaped by clearer demand and practical implementation conditions. Together, these actions would help shift the conversation from interest and experimentation towards a more coordinated and delivery-focused programme of work.



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SUMMARY OF RECOMMENDATIONS

The East of England has a credible opportunity to move from early interest in space-enabled health and care towards a more coordinated regional proposition. Participants agreed that the next steps should focus on more direct engagement with the people who would ultimately need to adopt and support these approaches.

To support that next phase, participants identified three priority actions.

1. Create a regional coalition to coordinate the space-enabled health agenda

Establish a more structured forum to bring together the organisations already involved in this work, including NHS partners, universities, companies, policymakers and regional convenors. The purpose would be to provide continuity between sessions, join up related conversations and reduce duplication across multiple parallel discussions.

A regional coalition would provide a practical mechanism for carrying the work forward collectively, while keeping ownership shared across the partners involved.

2. Develop a short, shared paper that strengthens the case for action

Participants suggested that Health Innovation East and Space East could develop a short paper or case that sets out the argument more clearly. This would give the group a stronger, shared way of describing the problem, the opportunity and why this matters in practice.

Such a paper should help articulate the adoption challenge, the operational need and the relevance of this agenda to current policy and funding priorities.



SUMMARY OF RECOMMENDATIONS

3. Bring end users, customers and buyers more directly into the next phase of work

Future work needs to be shaped more directly by the people who experience the problems, use the services and hold responsibility for implementation. Participants suggested replacing some room-based assumptions with more direct engagement with clinicians, users, customers and adopters, so that future activity is driven by real problems and clearer demand.

This should help ensure that the next phase of work is grounded in practical service need, while remaining focused enough to inform strategic regional and national action.





BACKGROUND

Health Innovation East is the local health innovation network for the East of England. The organisation's expertise, experience and trusted relationships places them at the forefront of development in health and care. By connecting the NHS, industry and academia to implement health innovation at pace and scale, their work delivers change for the people and places that benefit most.

Space East is the East of England's space cluster and connector organisation. Funded by the UK Space Agency, it provides membership, support and convening capacity to build links between organisations with real-world challenges and those with relevant space and space-adjacent capability.

Together, the two organisations have been working to explore where space-enabled technologies can support health and care delivery more systematically across the region.

The East of England presents a distinctive case for this work. Its large rural and coastal geographies, dispersed populations and uneven digital infrastructure create persistent access challenges for health and care. These conditions make it harder to deliver reliable digital services, flexible community-based care and operational models that depend on connectivity, data flow and mobility. Workforce shortages and service pressures compound these issues, particularly in settings where services need to reach people outside traditional hospital environments. The first roundtable established that these are not marginal technical concerns. They are practical constraints on the models of care that the system is already expected to deliver.

These local pressures intersect with a wider national policy direction. The Ten Year Health Plan and associated commissioning and planning frameworks expect systems to deliver more care outside hospital settings, strengthen prevention, improve productivity and make better use of digital capability and interoperable data. The Life Sciences Sector Plan adds a further emphasis on translation, adoption and economic growth, with stronger expectations that innovation should contribute both to improved outcomes and to a more productive health and care system. In practice, these ambitions depend on enabling infrastructure, stronger digital resilience and clearer routes from innovation into use.



BACKGROUND

Space-enabled technologies offer one route to addressing these constraints. Satellite connectivity can provide resilient infrastructure in hard-to-reach and mobile settings. Earth Observation and geospatial data can improve understanding of access barriers, environmental risk and population need. Secure space-derived data flows can support remote monitoring, diagnostics and operational coordination across complex pathways. This agenda aligns closely with the UK Space Agency's Unlocking Space for Government Civil Workstream, which identifies healthcare as a priority area and is exploring how public sector organisations and regions can progress space-enabled adoption through pilots, demonstrators and coordinated approaches.

The first [Towards a Space-Enabled Region roundtable](#) focused on whether these capabilities addressed real operational pressures in health and care across the East of England. That discussion concluded that the opportunity was practical and regionally credible. It also set out five broad priority actions, including the need to focus on a small number of high-value challenges, treat connectivity as foundational infrastructure, strengthen enabling conditions for adoption and convene a follow-on session focused on implementation.

This second roundtable was designed to respond directly to that final recommendation. Its purpose was to examine the national funding and support landscape, clarify what credible progression looks like in practice and identify how the East of England can organise itself more effectively around the next phase of work. The focus was therefore less on surfacing new opportunities and more on understanding how existing momentum could be translated into funded, adoptable and scalable programmes.





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Presentations



SATELLITE APPLICATIONS CATAPULT

THE NATIONAL SUPPORT LANDSCAPE



Role in the ecosystem

The Satellite Applications Catapult set out its role as a neutral organisation working across government, industry and academia to help translate space-enabled capability into commercial and public sector applications. Its purpose is to grow the UK economy by supporting the UK's best companies to accelerate the invention and adoption of space data and technology, working closely with businesses to remove the barriers that block their growth. The contribution emphasised that progression depends not only on technical innovation, but also on the conditions that allow technologies to move from development into use, including partnership-building, market development and public sector engagement.

National support infrastructure

A central theme of the presentation was the importance of ecosystem development. Working with the UK Space Agency, the Catapult supports a connected national space ecosystem through regional clusters, business support, partnership-building and enabling infrastructure. The North East of England was used as an example of how sustained coordination and targeted support can build regional capability over time and connect technical strengths to real-world opportunity.

Relevance to health and the East of England

The presentation positioned healthcare within the UK Space Agency's Unlocking Space for Government programme, which is focused on accelerating public sector adoption of space-enabled services. It highlighted healthcare as a priority area and pointed to connected ambulance environments and the Norfolk and Norwich University Hospital frailty project as examples of how satellite connectivity and related capability can support more efficient, resilient and equitable models of care. Taken together, the presentation situated the East of England within a wider national support landscape and reinforced the importance of connecting regional priorities to existing adoption and delivery mechanisms.



INNOVATE UK

HOW THE INNOVATION FUNDING LANDSCAPE IS CHANGING



Strategic direction

Innovate UK's contribution focused on how the innovation funding landscape is evolving in response to industrial strategy, economic growth priorities and a stronger emphasis on commercialisation and scale. The presentation pointed to a shift in focus towards companies, alongside wider UKRI priorities on knowledge exchange, translation and proof of concept activity. It also highlighted the importance of partnerships and the role of place within this changing landscape.

Funding context

The presentation referenced the [Innovate UK Prospectus](#), UKRI spending review allocations and the emerging UKRI 2026–2031 strategy (view updates [here](#)). This set space-enabled health within a broader funding environment that includes support for translation and commercialisation, cross-UKRI proof of concept funding, the R&D Missions Accelerator Programme and the Local Innovation Partnerships Fund. The overall message was that the landscape is becoming more targeted, with stronger alignment to national priorities and clearer expectations around growth potential and practical application.

Implications for the East of England

For the East of England, this contribution reinforced that future propositions will need to be framed in ways that align with recognised national priorities, including growth, translation, partnership-working and more effective health and care delivery. It also underlined that progression is likely to depend on how clearly regional activity can connect to current funding language and demonstrate relevance beyond early-stage innovation alone.



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WHAT STRONG PROPOSITION DEVELOPMENT REQUIRES IN PRACTICE



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Proposition development in practice

Space East's contribution focused on the practical requirements for developing strong, fundable propositions. Drawing on experience supporting bids and business case development, the presentation emphasised that successful proposals depend on early planning, clearly defined work packages, robust risk management and a well-structured approach to delivery. Particular emphasis was placed on the importance of articulating outputs, outcomes, timelines and resource requirements in a way that demonstrates readiness and credibility.

Consortium design and delivery readiness

A central theme was the role of strong consortiums. The presentation highlighted the need to bring together the right mix of partners early, ensure clarity on roles and responsibilities and address gaps in capability from the outset. This includes being explicit about skills, delivery capacity and how risks will be mitigated. The importance of alignment between partners, particularly on objectives, intellectual property and routes to commercialisation, was also emphasised as a key factor in successful delivery.

Relevant routes and requirements

The presentation pointed to [ESA Business Applications \(BASS\)](#) as a particularly relevant route for this audience, alongside other funding opportunities linked to UK Space Agency activity. It highlighted the need to understand what funders are looking for, including strong business cases, clear routes to investment and credible plans for progression beyond initial funding. Match funding requirements and expectations around commercialisation were also identified as important considerations.

What this means for the region

For the East of England, this contribution reinforced that moving from interest to funded activity will depend on stronger proposition development across the region. It highlighted the need for earlier coordination between partners, clearer articulation of shared objectives and a more structured approach to developing investable opportunities if the region is to progress beyond isolated pilots and into scalable programme.



NORFOLK AND NORWICH UNIVERSITY HOSPITAL

AN EMERGING REGIONAL APPLICATION



The case for change

The presentation set out frailty as a priority use case, reflecting the demographic profile of Norfolk and Waveney and the growing pressure on acute services. The focus was on shifting towards a community-first model of care, where earlier identification, prioritisation and intervention can reduce avoidable admissions and support more proactive management of high-risk patients.

This was positioned within a wider need to improve visibility across patient pathways, particularly where current systems do not provide a joined-up view of risk, activity and trajectory over time.

The platform and approach

The project has developed a frailty intelligence platform that brings together multimodal data, predictive modelling and resilient connectivity to support operational decision-making. A key feature is the use of synthetic data to design and test the system architecture, information governance requirements and analytical models before moving to live data environments.

The platform is structured around a set of defined deliverables, including data mapping and interoperability assessment, a data dictionary and governance route-map, an economic and outcomes model, and an implementation blueprint. This creates a structured pathway from concept through to potential deployment.

At the centre of the approach is a dashboard that acts as a translational layer between analytics and clinical operations. This aggregates cohort-level risk, patient-level prioritisation, pathway recommendations and hotspot analysis into a single decision space, supporting both strategic oversight and operational action.



NORFOLK AND NORWICH UNIVERSITY HOSPITAL

AN EMERGING REGIONAL APPLICATION



Norfolk and Norwich University Hospitals
NHS Foundation Trust

What this demonstrates

This case study showed how space-enabled capability can be applied to a defined health and care challenge in a structured and operationally relevant way. By linking predictive modelling, data integration and connectivity to specific pathways such as admission avoidance, virtual wards and proactive outreach, the project provides a clearer line of sight between technical capability and service impact.

For the East of England, it demonstrates that progression is already underway in parts of the region, and that future work is likely to be strongest where it is anchored in clearly defined service problems, supported by a structured development pathway and designed with implementation in mind.





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Discussion summary



DISCUSSION SUMMARY

The roundtable discussion focused on what the national and regional landscape means in practice for the East of England, and what conditions need to be in place to move from promising examples to wider adoption.

From opportunity to progression

A consistent theme was that the opportunity itself is already sufficiently clear. The discussion centred on the gap between established relevance and meaningful progression. Repeatedly, contributors described a pattern in which feasibility work, pilots and localised demonstrations show value, but struggle to move into sustained adoption. The issue was therefore framed less as one of innovation discovery and more as one of progression, coordination and route to scale.

The structural gap between benefit and budget

The strongest barrier identified was the disconnect between who benefits from a solution and who controls the budget to adopt it. In several examples, operational demand was described as clear and the service value tangible. However, that did not translate into uptake because the costs and benefits sit in different parts of the system. Participants argued that this makes it difficult for local organisations to justify adoption, even when a solution improves performance across multiple pathways. This was presented as a central issue for space-enabled health activity, particularly where infrastructure or connectivity investment creates benefits that are shared across services rather than confined to one team or organisation.

Adoption as the real test

The discussion reinforced a wider point about health innovation. The NHS often supports early-stage pilots and evaluation but struggles to create consistent routes into procurement and wider deployment. Participants noted that this weakens confidence for companies and investors, particularly where technologies prove themselves locally but cannot find a viable path into broader NHS markets. Several contributors argued that unless there is a more deliberate connection between innovation support and procurement or commissioning routes, the same cycle of repeated trials and stalled adoption will continue.



DISCUSSION SUMMARY

Connectivity as a strategic capability

Connectivity remained the clearest cross-cutting theme. Participants described it as a strategic capability that underpins multiple policy ambitions. This included ambulance services, care in the home, virtual wards, hospital-edge workflows and broader digital transformation. Several contributors argued that the East of England should articulate connectivity as a regional capability that enables different models of care, rather than treating it as a separate project or discrete technical fix. This reflected a broader view that some space-enabled capabilities are most powerful when understood as enabling infrastructure rather than pathway-specific solutions.

The need for stronger coordination and clearer continuity

The discussion also highlighted the need for a more deliberate mechanism to connect the work between sessions. While there was broad support for the role that Space East and Health Innovation East have played in convening the conversation so far, participants were clear that a stronger regional approach will require a more structured way of bringing partners together, joining up related conversations and reducing duplication across parallel activity. There was particular interest in creating a coalition or forum to carry the work forward and provide clearer continuity between discussions.

The need to strengthen the shared case for action

Participants also suggested that the group needs a clearer and more consistent way of explaining the issue, the opportunity and the barriers to adoption. A short paper or case was proposed as a practical way to strengthen the argument and support future engagement with regional leaders, national bodies and potential funders. This reflected a wider view that the group now needs stronger collective positioning, especially if it wants to connect regional delivery examples to national policy, funding and procurement conversations.



DISCUSSION SUMMARY

The value of bringing in end users, customers and buyers

A further theme was the importance of involving the people who experience the problems, use the services and hold responsibility for implementation. Participants noted that future work should be shaped less by assumptions in the room and more by direct engagement with clinicians, users, customers, adopters and buyers. At the same time, there was recognition that this needs to be done in a disciplined way so that the output remains strategic enough to act on, rather than becoming a long list of disconnected application-specific issues.

Implications for next steps

Taken together, the discussion suggested that the East of England now has both the rationale and the ingredients for a stronger regional proposition. The next phase should focus on building continuity, strengthening the shared case for action and grounding future work more directly in the realities of service need and adoption





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Recommendations and actions



RECOMMENDATIONS AND ACTIONS

The roundtable affirmed that the East of England has a credible opportunity to take this work forward, but that progress will depend on stronger coordination, a clearer shared case for action and more direct engagement with the people who would ultimately need to adopt and support these approaches. The recommendations below reflect the specific actions proposed in discussion.

1. Create a regional coalition to coordinate the space-enabled health agenda

Participants suggested establishing a more structured forum to bring together the organisations already involved in this work, including NHS partners, universities, companies, policymakers and regional convenors. The purpose would be to provide continuity between sessions, join up related conversations and reduce duplication across multiple parallel discussions.

This was discussed as a practical way of giving the work a clearer structure, while allowing ownership to remain shared across the partners involved rather than sitting with one organisation alone. Referring to this as a coalition reflects the need for a more deliberate and coordinated approach to taking the agenda forward.

Actions

- Establish a regional coalition focused on space-enabled health and care in the East of England.
- Use this coalition to connect existing projects, conversations and partners more systematically.
- Use the coalition to support more consistent regional and national engagement on the topic.



RECOMMENDATIONS AND ACTIONS

2. Develop a paper that strengthens the case for action

Participants suggested that Health Innovation East and Space East could develop a short paper or case that sets out the argument more clearly. The purpose would be to give the group a stronger, shared way of describing the problem, the opportunity and why this matters in practice.

Discussion suggested that this should help articulate the adoption challenge, the operational need and the relevance of this agenda to current policy and funding priorities.

Actions

- Develop a short paper that sets out the case for space-enabled health and care more clearly.
- Use it to articulate the adoption challenge, the operational need and the relevance to current policy and funding priorities.
- Use it as a supporting document in future engagement with regional leaders, national bodies and potential funders.

3. Bring end users, customers and buyers more directly into the next phase of work

A recurring point in discussion was that future work needs to be shaped more directly by the people who experience the problems, use the services and hold responsibility for implementation. Participants suggested replacing some room-based assumptions with more direct engagement with clinicians, users, customers and adopters, so that future activity is driven by real problems and clearer demand. There was also recognition that this needs to be done in a disciplined way, so that the output remains strategic enough to act on rather than becoming a long list of disconnected application-specific issues.

Actions

- Convene future sessions or workshops with a stronger presence from end users, customers, adopters and buyers.
- Use these discussions to identify the most important problems that remain unresolved in practice.
- Distil that input into a smaller number of strategic issues that can guide future regional and national action.



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if you would like to discuss any of this work, or would like to be included in any activities going forward, please contact Stuart Catchpole
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