Mental Health Digital Innovation

MANCHESTER 1824
The University of Manchester

# Mental Health Digital Innovation (MHDI) Workstream Meeting

MHG Industry Engagement Forum
London

**8th October 2026**

Health Innovation Kent Surrey Sussex

mindtech bridge

Mental Health Goals NATIONAL PROGRAMME

# Digital Innovation Workstream - Overview

Digital mental health innovation in the UK is hampered by **fragmented infrastructure, unclear procurement and reimbursement pathways, lack of systematic demand signalling, and insufficient integration of lived experience and industry perspectives**. This results in poor adoption, limited scaling, and **missed opportunities for effective, sustainable digital solutions**.

## Solutions/Approach:

- User-centred, real-world industry-aligned infrastructure and services
- Streamlined pathways for procurement, reimbursement
- Implementation support + Digital Navigators
- Accelerated adoption into the NHS
- Investment & sustainability – combining public / private funding models

# MHDI Team Members/Collaborators

**Pauline Whelan**
MHDI Lead

**Trina Histon**
MHDI Lead

## University of Manchester

**Charlie Stockton-Powdrell**
Operations Lead

**Judith Gellatly**
Programme Manager

**Gilson Tam**
Project Coordinator

**Marta Chmielowska**
Research Fellow

## GMMH NHS Trust

**Mia Vines Booth**
Comms Manager

**Ayla Ozkan**
Band 7 Digital Navigator

**Fran Quigley**
Band 5 Digital Navigator

**Olivia Taylor**
Band 6 Digital Navigator

## Health Innovation KSS

**Victoria Betton**
Director AI & Digital

**Becca Randell**
Implementation Manager

**Jenny Brooks**
Translational research assistant

## MindTech Bridge

**Aaron Kandola**
Programme Director

**Chris Hollis**
Director

**Barnaby Perks**
Commercial Director

# Work Package 1 – Aligning Workstream Direction

*Digital mental health infrastructure and services are disconnected from users' real needs and lack the perspective of industry partners.*

Activities to align direction of the workstream

Lived Experience

Industry

Implementation

Digital Phenotyping

Sustainability

# Work Package 2 – Pathway Standardisation

*Fragmented, unclear and inconsistent procurement, reimbursement, regulatory and evidence generation pathways.*

## Shared standards

Informed through collaboration MHRA, NICE, industry, lived experience

International contexts

## Procurement

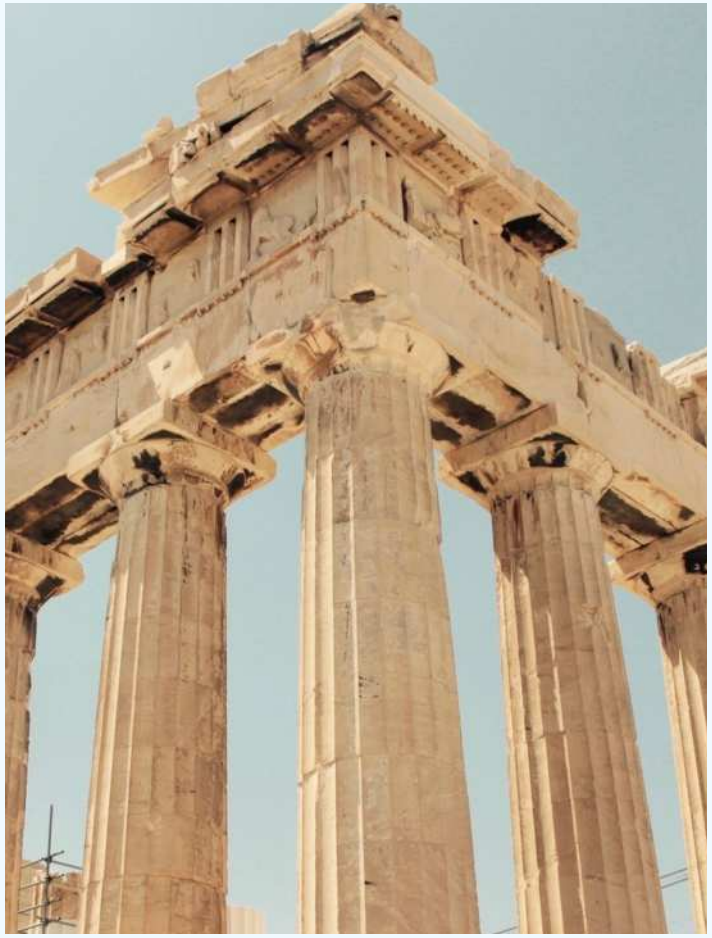
Reduce decision-making burden on individual NHS Trusts

Create visilbility of new innovations

## Reimbursement

Models that link payment to outcomes

Patient acceptability / Quality of Life Measures



# Work Package 3 - Innovation implementation and scaling

## Case Studies

Highlighting success and failures of NHS digital mental health implementation

## Team of Digital Navigators dedicated to implementation

Enabling service users and clinicians to use and understand digital mental health technologies

## Series of Evidence-based Implementation Guides

Enabling Trusts to navigate and engage with digital mental health

# Digital Navigator Model

The model has evolved in scale and structure — while keeping human support at its core.

## FOUNDATIONS

### Co-developed with John Torous

The original model defined a practical, relational role between service users, clinical teams and digital mental health technology.

**A human bridge for real-world adoption.**

## GREATER MANCHESTER

### GM.Digital pioneers the volunteer model

At GMMH, volunteers helped clinicians and service users find, use and benefit from health apps — a pathway that remains in place today.

**Practical support, inclusion and confidence.**

## MHDI WORKSTREAM

### Building the NHS implementation model

Within MHDI, the fully funded Digital Navigator team is deploying the model in NHS services, developing implementation case studies and practical guidance for wider adoption.

**From funded delivery to reusable NHS infrastructure.**

# Work Package 4 - Accelerating Adoption in the UK

## National consortium of innovation-ready Trusts

## Trailblazer case studies utilising accelerated adoption pathway

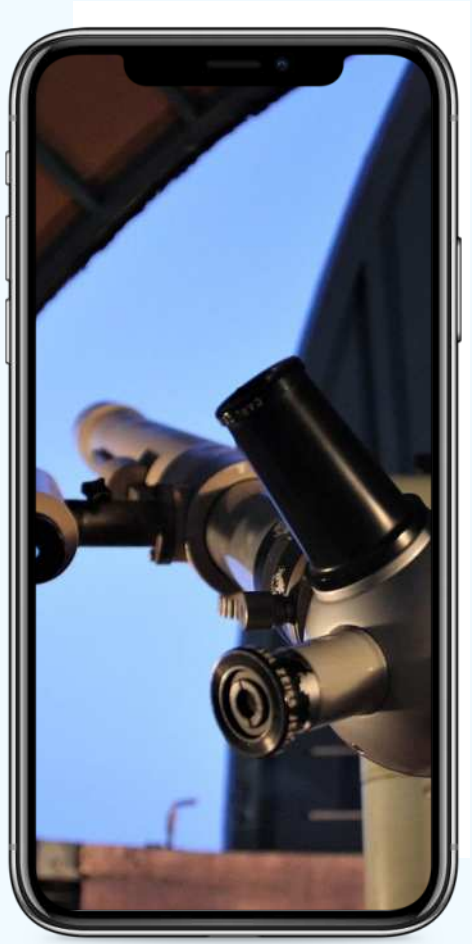
# Work Package 5 - Sustainability

Public-private investment models

Investment pipelines linked to demand signaling

Practical Partnership Frameworks

# Work Package 6 - Mental Health Technology Demand Signalling (MTEDS)



- **Focus on demand, not technologies:** identify and structure unmet needs/challenges across mental health services, rather than primarily cataloguing existing technologies.
- **Bridge the information gap:** Provide developers, researchers and innovators with clearer insight into the real-world priorities of clinicians, service managers, CCIOs and potentially patients and carers.
- **Support better innovation decisions:** Synthesised demand intelligence could help guide technology development, investment, commissioning and procurement towards priority needs.
- **Co-designed:** linterviews, user research and market validation with NHS, academic and industry stakeholders will help refine requirements before moving towards prototype development and piloting.

# Stakeholder Engagement

Mental Health Digital Innovation

Part of the UK Government Mental Health Goals Programme

# Lived Experience Engagement & Contributions

**Mapping exercise** – identification of UK lived experience groups, enabling targeted and inclusive engagement to ensure we maximise use of existing expertise and identify gaps or underserved areas.

**Engaging LE at workshops -** lived experience is integrated into all our recent workshops and our reporting and strategy development

**Advisory board -** two expert advisors are members of our International Advisory Board. Representation from McPin Foundation and Rethink

**VoiceIn (**https://voicein.org/**)** – strategy developed to engage with VoiceIn, a digital platform that supports public contributions to research

# International Advisory Board Members

## Eve Svigethy

Chair, Pediatric Psychiatry and Psychology; The Lois C. Orr Endowed Chair in Pediatric Psychiatry

## Ayesha Rahim

Portfolio Psychiatrist and CCIO, Co-Founder Equity Charter

Clinical lead for digital mental health, NHS E

## Sheetal Shah

GM @SimplePractice. AI in Health (ex. Woebot, SymphonyRM, Microsoft, NIH)

## Marco Mohwinkel

Pharma, Biotech, Health Tech, Med Tech | Executive & Advisor | Strategy, Growth, Innovation

## Alex Kenny

Senior Public Involvement in Research Officer, McPin Foundation

## Mary Patel

Volunteer Group Co-Ordinator, Rethink Mental Illness Manchester Group

## Nick Titov

Scientific Advisor, MindSpot, Macquarie University

## Sheraan Amod

Founder & CEO, RecoMed

# Key Messages

1. Scaling depends on services and implementation, not technology alone
2. Focus on adoption rather than endless pilots
3. Lived experience must move from consultation to partnership
4. Digital Navigators represent a valuable implementation model
5. Sustainable business models require a clearer value proposition
6. Evidence must extend beyond traditional clinical outcomes
7. AI should augment, not replace, human care
8. Data infrastructure is a major UK competitive advantage

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# Thank you

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