Digital Health & Care Innovation Centre

Summary of Key Challenges & Opportunities for Digital Mental Health Research & Innovation in Scotland

August 2025

10 YEARS
Pioneering Innovation in Digital Health and Care

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DOI number
https://doi.org/10.17868/strath.00094189

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DHI was established as a world-leading collaboration between the University of Strathclyde and the Glasgow School of Art and is part of the Scottish Funding Council's Innovation Centre Programme. It is part-funded by Scottish Government.

DHI supports innovation between academia, the public and third sectors, and businesses in the area of health and social care.

Executive Summary

Scotland's Digital Mental Health Innovation Cluster (DMHIC) was established in March 2022 to drive the development, evaluation, and adoption of digital technologies in support of mental health service transformation. Governed by a multi-sector programme board and supported by an advisory board, the cluster aligns cross sector collaboration with national priorities and digital research and innovation (R&I) opportunities. Scotland's Digital Health & Care Innovation Centre (DHI) provides cluster management on behalf of the Scottish Government.

This report captures the outputs from a DMHIC Advisory Board workshop held in August 2024. The Board met to consider how best to build a pipeline of collaborative R&I opportunities through the development and adoption of digital interventions to address priority mental health challenges in Scotland.

The workshop focused on three primary objectives:

1. review and refine a mapping of current digital R&I initiatives to identify gaps and opportunities.
2. identify key challenges for digital mental health,
3. (develop guidance and priorities for a collaborative R&I opportunity pipeline.

The review of existing digital initiatives established a comprehensive baseline from which further progress can be assessed. The workshop identified eight key challenges to the adoption of digital mental health interventions ranging from the need to support change management, targeting early intervention and deriving economic value. This was then aligned against the existing initiatives to identify gaps and opportunities for next stage collaborative projects. A Prioritisation Criteria was then developed to provide focus for the future R&I opportunity pipeline with a Life-Cycle approach scoped out to guide age-appropriate digital intervention strategies.

The report concludes with the following recommendations for the focus of next stage R&I opportunities:

safety and quality enhancements in acute settings,

- system level reform in neurodevelopmental disorder services,
- scalable, digital interventions for population-level mental health, especially for children and young people,
- cross-sector digital integration and referral pathway improvements,
- an outcomes-based framework to robustly assess the heath and economic effectiveness of digital mental health services and technologies

These findings will inform DMHIC's strategic priorities and broader efforts to improve mental health outcomes through digital innovation.

Cluster Overview

The Digital Mental Health Innovation Cluster (DMHIC) was launched in March 2022 to support Action 15.7 of Scotland's Mental Health Transition and Recovery Plan, focused on developing, evaluating, and scaling digital technologies to meet mental health needs.

The cluster fosters collaboration across sectors, bringing together individuals, organisations, academia, and lived experience to inform innovation and align with national mental health and digital health priorities.

It is governed by the Digital Mental Health Programme Board and guided strategically by a dedicated advisory board which meets bi-monthly to ensure cross-sector alignment and evidence-based direction. DHI manages the cluster on behalf of Scottish Government.

DMHIC's work is structured around two core outcomes:

1. Supporting collaboration to develop and adopt digital mental health interventions.
2. Capturing and sharing learning across the innovation ecosystem.

To date, the cluster has strengthened cross-sector communication and engagement, with a growing emphasis on enabling scalable digital solutions.

For more details of the DMHIC's progress please join the DHI network to become a member of our cluster.

The advisory board plays a key role in guiding the strategic direction and content of the DMHIC. Meeting bi-monthly, this group brings together key innovation leads from all three NHS test bed areas, the Programme Manager from the Chief Scientist's Office Innovation Team (focusing on mental health), academic experts, and representatives from SAMH, which represents third-sector organisations. Full details of the advisory board members can be found in the section 10: Appendix 1.

The Advisory Board provides expert oversight, strategic alignment, and cross-sector collaboration, ensuring that the innovation cluster remains focused, evidence-driven, and responsive to Scotland's evolving mental health needs. Its contributions are essential in shaping effective digital interventions, fostering sector-wide engagement, and driving the maturity of the innovation cluster

Current Digital Research and Innovation Initiatives

In August of 2024, DHI conducted a mapping exercise and rapid desktop review of R&I initiatives in the field of digital mental health across Scotland to establish a comprehensive baseline of existing initiatives and to inform the considerations of the Advisory Board.The scope of this work included all relevant digital mental health interventions, initiatives, platforms, and technologies evident within the previous two years in Scotland. The review considered projects led by academic institutions, health and care organisations, government bodies, non-profit organisations, and private sector entities to provide a robust baseline of Scotland's digital mental health landscape.

The research followed a two-pronged approach. Firstly, a desktop review was conducted, examining academic literature, grey literature, government reports, organisational websites, funding databases, and other relevant online platforms. Secondly, a survey was distributed to members of the DMHIC, the NHS Mental Health Research Scotland Network, and the Edinburgh Mental Health Network to capture additional insights. In total, 50 participants completed the survey. Of these, 22 respondents indicated they were unaware of any additional projects beyond those already identified in the desktop review, while 28 respondents named at least one project or service not previously included. Through both the survey and desktop review, a total of 35 digital mental health projects and services were identified.

Output 1 - Baseline Inventory of Digital Mental Health Initiatives in Scotland (Aug 24)

A comprehensive inventory of 35 digital mental health R&I projects, detailing project titles, objectives, methodologies, stakeholders, funding sources, and project status (ongoing or completed). Designed to be a living resource, this inventory will be updated on an annual basis as new projects emerge, status evolves, and further refinements are required. It also provides a clear baseline to track developments and progress. Information on the inventory can be obtained from DHI (see Appendix 2).

Key Challenges

On August 5, 2024, an in-person Advisory Board workshop was held, hosted at DHI's offices in Glasgow. The workshop initially sought to: "Identify key challenges in using digital solutions to transform mental health support in Scotland".

The first part of the workshop was designed to encourage participants to examine the role of digital technologies in mental health transformation. Discussions focused on key considerations such as accessibility, user engagement, integration with existing services, privacy, cultural influences, and technology adoption barriers.

To guide the discussion, the following conversation prompts were used:

1. What does 'Transformation' mean in the Digital Mental Health Innovation space?
2. What is digital good at? What is it not good at?
3. How can digital improve/expand on what we are doing well already?
4. What barriers might there be for the individual besides technical access/literacy – e.g. cultural/community, identity, trauma?
5. Why would someone be motivated or not motivated to use a digital tool?
6. Can the changes brought by digital transformation be implemented?

A facilitated discussion then consolidated ideas, categorised challenges into broader themes, and identified any unique or previously unconsidered barriers.

A prioritisation exercise was then conducted, where participants voted on the most critical challenges. From this, the following eight key challenges were identified which need to be addressed to support the wider adoption of digital mental health:

Output 2: 8 Key Challenges to Adoption

- **Need for Change Management:** to support the transition to digital solutions within mental health services.
- **Trust & Stigma:** Address concerns around digital mental health tools and societal perceptions.
- **Evidence & Impact:** Strengthen the research base to demonstrate effectiveness and real-world impact.
- **Access & Ease of Use:** Ensure digital tools are widely accessible and user-friendly.
- **Blend Digital with Traditional Approaches:** Integrate technology with established mental health support systems.
- **Transition Coordination:** Enhance the connection between digital interventions and non-digital services.
- **Early Intervention & Prevention**: Leverage digital solutions for proactive and preventative mental health care.
- **Economic Value:** Understand and demonstrate cost-effectiveness and long-term sustainability of digital mental health solutions.

These challenges will be used to help assess the most useful R&I opportunities within an emerging innovation pipeline.

Gap Analysis

The second part of the DMHIC advisory board workshop reviewed the digital mental health R&I inventory to add content, analyse patterns, and determine priority areas requiring further development and/or investment. Projects were categorised based on factors such as target patient groups, age demographics (adults/children), service types, funding sources, and readiness for implementation.

A facilitated group discussion then explored potential gaps, clusters, and patterns. Using insights from the mapping exercise and desktop review, participants were asked to reflect on where gaps exist and document their observations using sticky notes. This exercise encouraged collaborative problem-solving and ensured a broad range of perspectives were captured.

To further refine the findings, a prioritisation exercise was conducted. Participants reviewed the identified gaps and assessed how these aligned with the key challenges established in the first focus session. By using a ranking system, the most critical gaps were highlighted and categorised. The session concluded with a summary of key gaps. This process not only validated the findings of the mapping exercise but also provided practical insights into where digital innovation efforts should be focused to support Scotland's evolving digital mental health landscape.

Output 3: A gap analysis which mapped current initiatives against the 8 key challenges.

Change Management Projects that help improve current services, implement changes, or enhance staff capacity	Trust & Stigma Services that address stigma, fear of technology, and data privacy issue.	Evidence & Impact Projects focused on gathering data, research, and evidence to back their approaches	Access & Ease of Use Services that focus on expanding access to mental health support and making it easier to engage with.	Blending Digital with Traditional Approaches Services that combine the best of digital and traditional care approaches.	Transition and Coordination: This involves the transition between different stages of care, ensuring continuity of treatment.	Early Intervention and Prevention: This stage focuses on addressing mental health issues before they become severe, offering proactive support.	Economic Value: This highlights the importance of economic models, emphasizing the affordability and financial viability of mental health innovations and projects.
MXAi Health Uses AI-led cognitive tools to promote brain health and reduce isolation, helping improve care for dementia patients and requiring healthcare staff to adapt to new technologies	**CleverCogs™** In addition to improving access, this tool allows patients to stay connected with formal and informal care, helping reduce stigma around digital mental health interventions	**LifeSavr Project** Using sensor technology for overdose detection, focusing on the technical, economic, and operational viability, which is being studied	**Mood Café** Another key mental health resource website that offers self-help resources for improving emotional wellbeing, reducing barriers to access for individuals	**Wysa** Combines AI with human support systems, offering real-time digital psychological tools while still allowing escalation to traditional care pathways when needed	**RedStar Ltd** Enhanced communication between community mental health services, specialist services, and GPs. This project aims to improve care coordination and patient tracking throughout the recovery process.	**CleverCogs™** A system that helps individuals remain independent and in control at home by providing digital reminders and connections to care and family support. This falls under early intervention for those with potential mental health or cognitive issues.	
Just Checking A system using sensors to monitor patients' movements for assessing health and care needs. This falls under improving service efficiency and assisting staff in long-term care settings	**Tellmi** An anonymous peer support app designed to provide mental health support for healthcare providers and schools, allowing individuals to seek help without fear of stigma	**Saving SAM** AI-powered overdose monitoring system with a focus on usability feedback and data collection to improve the effectiveness of the tool	**Voxsio Ltd. (UB-OK)** This mental health app also falls here, with a focus on young people's access to psychological support when formal services are delayed	**Oxevision** A digital health monitoring system that uses infrared cameras to track mental health patients' vitals without disturbing them, blending tech with traditional in-person care	**Improving Veteran's Health** Collaboration between welfare support and technology to assist isolated veterans, addressing transitional care and long-term support for mental health.	**Voxsio Ltd. (UB-OK)** A mental health app designed to offer immediate psychological support for young people with gastrointestinal disorders. It helps bypass waiting lists and provides early intervention.	
RedStar Ltd. Improving ADHD diagnosis and care pathways by streamlining processes. This improves the efficiency and skills of mental health services through digital tools	**Wysa** An AI-powered mental health app designed for young people, providing anonymous support for common mental health issues like anxiety. The app encourages self-management and offers trust through anonymity	**ZioHealth** A project testing a handheld therapeutic drug monitoring device to improve harm reduction strategies, particularly for benzodiazepine use	**Tellmi** Besides addressing trust, it helps provide immediate, anonymous mental health support for teens, bypassing the need for formal services	**MXAi Health** An AI-powered cognitive behavioural tool that enhances brain health by linking personal memories to biological data, blending digital engagement with cognitive therapy		**Sentireal Ltd.** Using digital tools to support young people awaiting their initial CAHMS (Child and Adolescent Mental Health Services) appointment. This project targets early engagement and pre-clinical support.	
SilverCloud A platform providing existing mental health support resources with on-demand courses to support staff and users	**Voxsio Ltd. (UB-OK)** A digital health app for young people that provides immediate support and bypasses waiting lists, ensuring privacy while offering care	**RESCU2** Clinical validation of a virtual safe drug consumption technology, ensuring real-time overdose detection and intervention based on evidence.	**Maggie's Fife** This website provides easily accessible mental health information, offering convenience and access to care	**Sentireal Ltd.** Uses digital tools to assist young people while they await in-person CAHMS appointments, supporting traditional mental health pathways		**Wysa** AI-driven mental health app targeted at students, offering psychological self-management tools to handle anxiety, stress, and other early mental health challenges.	
CleverCogs™ A bespoke care service that helps integrate housing, care, and communication needs into one service		**InstantQT** A wearable device that allows real-time monitoring of patients' ECG data to detect heart issues linked to psychiatric medication side effects. The real-time data helps demonstrate the efficacy of the tool in preventing life-threatening side effects.	**MyHelp Ltd.** This platform supports psychologists in delivering information for patient self-care, making it easier for patients to engage with their treatment plans			**Luna** Luna is an anonymous teen app, that gives reliable, judgement-free advice on a variety of subjects including mental health and wellbeing	
NHS Talking Therapies (Limbic) A service that improves clinician satisfaction, expands access, and delivers better patient outcomes.			**CleverCogs™** Facilitates independent living by providing access to services from home, making mental health care more accessible				
			ZioHealth Improving Harm Reduction Strategies for Illicit Drug Use: A handheld device that notifies users about potential overdoses, improving access to timely interventions for drug users.				
			RedStar Ltd. This project focuses on ADHD diagnosis and the creation of digital-first approaches to improve diagnosis pathways. It is a key component in enhancing access to mental health assessments.				
			Chatpal Chatbot to support and promote mental wellbeing in rural areas. The trial will measure engagement, adoption and efficacy of the chatbot for supporting mental wellbeing in rural areas.				
			Luna Luna is an anonymous teen app, that gives reliable, judgement-free advice on a variety of subjects including mental health and wellbeing				

Prioritisation Criteria

Discussions which took place at the Advisory Group workshop also informed the development of prioritisation criteria to provide focus for a future R&I pipeline and to support more proactive innovation cluster management.

Output 4: Prioritisation Criteria which highlights key R&I opportunity areas

1. Impact on Public Health and Clinical Needs

- **Target Population:** Prioritise projects addressing significant public health needs, including, mental health (e.g., PTSD, ADHD, and depression), addiction recovery, or underserved communities like veterans and young people
- **Scale and Accessibility:** Emphasise solutions that increase access, break down barriers (geographical or digital), and provide equity in healthcare access
- **Clinical Efficacy:** Select projects with evidence-based outcomes, such as those improving diagnostic accuracy or enhancing therapeutic effectiveness (e.g., AI-enhanced platforms, wearable technologies)

2. Integration with Existing Systems

- **Collaboration Potential:** R&I efforts should aim for partnerships with established institutions like the NHS, universities, and innovation hubs
- **Enhancing Current Programs:** Focus on integrating or improving existing healthcare technologies rather than continual reinvention
- **Support for Traditional Methods:** Blend new digital approaches with traditional healthcare delivery, considering how they complement or enhance existing models.

3. Feasibility and Scalability

- **Technological Readiness:** Prioritise opportunities that are close to or already on the market but require scaling, testing, or validation (e.g., wearable overdose detectors, digital health apps)
- **Economic and Operational Viability:** Ensure that projects demonstrate not only technical but also economic feasibility for long-term use (e.g., reduced costs for NHS)
- **Digital Infrastructure:** Consider whether the project can integrate seamlessly with the existing healthcare infrastructure in Scotland

4. Innovation and Novelty

- **Cutting-edge Technology:** Support projects with innovative technology like AI, VR, or XR devices that offer new ways to tackle mental health (e.g., VR-enhanced therapy, AI-led cognitive tools)
- **Unique Health Applications:** Prioritise solutions with novel applications, such as those targeting self-management or dual challenges (e.g., combining physical health monitoring with mental health support)

5. Barriers and Challenges Addressed

- **User Adoption and Motivation:** Prioritise solutions that address user engagement challenges, particularly for hard-to-reach populations or those facing technical and cultural barriers.
- **Overcoming Data Trust Issues:** Ensure that R&I opportunities address concerns about data privacy, trust, and stigma, which are crucial for the adoption of digital health technologies.
- **Addressing Social Determinants of Health:** Consider solutions that not only provide clinical benefits but also address social factors like isolation, poverty, or housing which impact mental health.

6. Evidence and Evaluation

- **Evidence-based Approach:** R&I efforts must have robust evaluation frameworks, with mechanisms in place to measure outcomes, effectiveness, and scalability (e.g., feasibility studies, clinical trials)
- **Feedback Integration:** Select projects with a closed feedback loop for continuous improvement, drawing from real-time data and user experiences.

Life-Cycle Approach

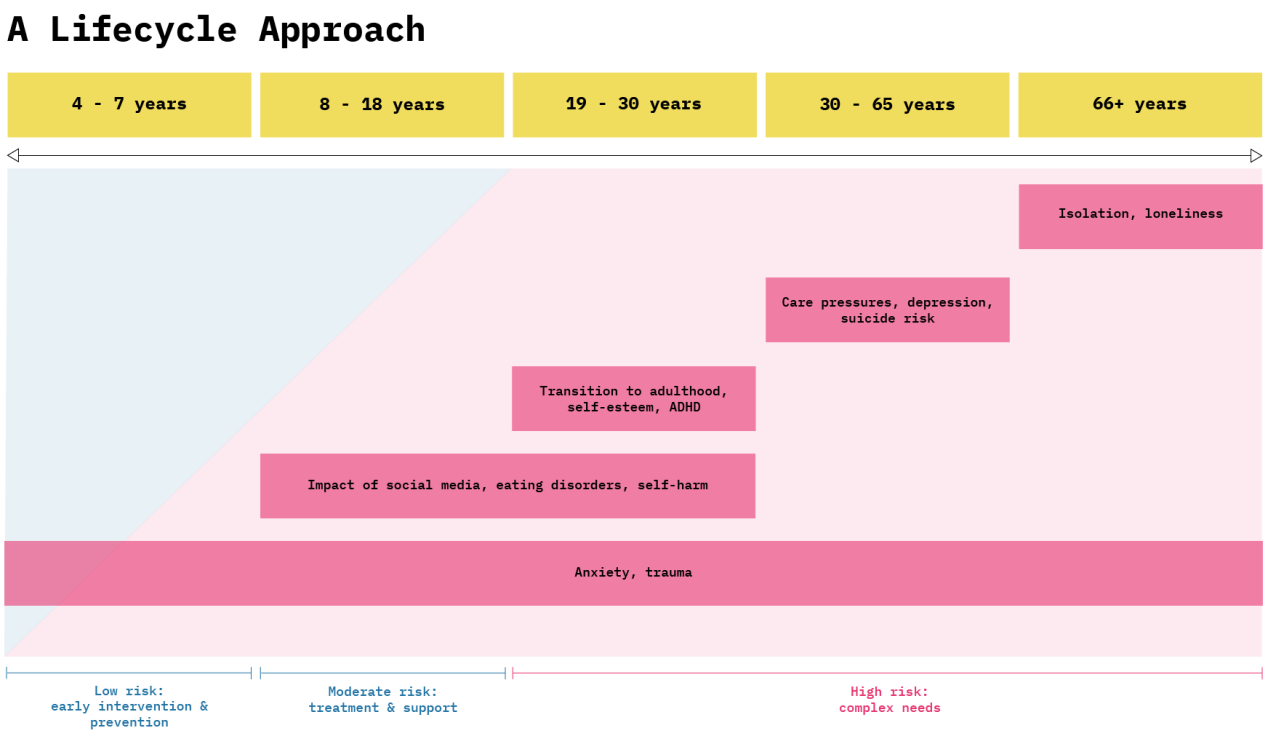
In addition, a life-cycle approach was developed by the advisory board to inform R& I opportunities and to highlight how different mental health challenges emerge or intensify across distinct age groups. This illustrates the need for tailored, age-appropriate interventions across the lifespan.

Key Features:

- **Age Ranges:** The top row segments the population into six key life stages, from early childhood (4-7 years) through to older adulthood (66+ years).
- **Emerging Needs by Life Stage:**
  1. Childhood & Adolescence (4-18 years): Concerns include the impact of social media, eating disorders, self-harm, and early signs of anxiety and trauma.
  2. Young Adults (19-30 years): Issues such as transition to adulthood, self-esteem, and ADHD become prominent.
  3. Working Age (30-65 years): Increasing care responsibilities, risk of depression, and suicide are noted.
  4. Older Adults (66+ years): Isolation and loneliness are identified as significant mental health challenges.
- **Cross-Cutting Issues:** Anxiety and trauma span all age groups, highlighting their persistent and wide-reaching impact.
- **Risk Gradient:** The shaded background illustrates a continuum of risk—starting from low risk (early intervention and prevention), progressing through moderate risk (treatment and support), to high risk (complex needs). This emphasises the growing complexity and intensity of mental health needs if not addressed early.

This lifecycle approach reinforces the importance of early intervention, age-responsive service design, and sustained support to effectively address mental health across Scotland's diverse population.

Output 5: A Lifecycle Approach to Mental Health, prioritising early intervention, age-responsive services, and sustained support across Scotland



Priority Research and Innovation Opportunities

To advance meaningful change in mental health outcomes across Scotland and beyond, a strategic and coordinated approach to research and innovation (R&I) is essential. Drawing on aligned priorities from clinical, third sector, industry, and academic stakeholders, this summary identifies key opportunity areas for investment and collaboration where the DMHIC can influence and support innovation.

1. **Enhancing Acute and Inpatient Care through Technology:**

Improving safety and care quality in high-acuity settings remains a clinical priority. Innovative solutions such as remote monitoring, wearable health devices, and virtual reality (VR) for trauma treatment should be advanced to support both patients and clinical staff.

2. **Scaling Population-Level Support and Self-Management**

Broader population wellbeing requires scalable digital tools, with particular emphasis on:

- Children and Young People (CYP), extending service access to age 25 to support transitions into adulthood.
- Neurodevelopmental Disorders, by developing a national care pathway and accessible, engaging tools such as gamified apps, AI chatbots, and virtual support groups.

These tools should promote early intervention, reduce waiting lists, and empower individuals with greater self-management capabilities.

3. **Driving Digital Innovation Across the System**

Digital approaches are key to modernising services by:

- Supporting assessment, triage, and care navigation
- Scaling blended models of in-person and remote delivery
- Optimising resources by sharing digital assets across organisations

Shifting toward a needs-based, rather than diagnosis-led, model of care is a central goal.

4. **Strengthening Cross-Sector Integration**

There is an urgent need to improve referral pathways and data sharing between NHS, local authorities and third sector providers. Better systems integration can reduce fragmentation and enhance service continuity.

5. **Rebuilding Investor Confidence with Impact-Driven Innovation**

The sector must regain investor interest by demonstrating real-world impact, particularly in high-demand areas like neurodivergent assessments. Evidence-based, scalable solutions are critical to attracting funding and delivering return on investment in both health and economic terms.

6. **Establish a Framework for Measurable Outcomes**

A structured framework of tangible and measurable outcomes should be developed to assess the effectiveness and impact of new and emerging digital mental health services and technologies. This framework should include indicators such as the number of individuals supported, improvements in clinical or functional outcomes, and broader economic or societal impact. It should be designed to align with the key challenge areas identified by the Digital Mental Health Innovation Cluster (DMHIC), enabling consistent evaluation, evidence generation, and strategic alignment across innovation initiatives.

Strategic Direction for DMHIC Members

The following themes are recommended as next stage R&I priorities:

1. Safety and Quality Enhancements in Acute Settings
2. Scalable, Digital Interventions for Population-Level Mental Health especially for children and young people
3. System-Level Reform in Neurodevelopmental Disorder Services
4. Cross-Sector Digital Integration and Referral Pathway Improvements
5. An outcomes-based framework to robustly assess the heath and economic effectiveness of digital mental health services and technologies

Conclusion

The DMHIC Advisory Board workshop provided a timely and focused opportunity to reassess Scotland's digital mental health landscape through expert insight and collaborative engagement. The mapping of current R&I efforts, coupled with the identification of critical gaps and challenge areas, has supported the identification of strategic priority opportunities and an associated assessment process for an R&I pipeline.

Moving forward, DMHIC is well positioned to lead the next phase of digital transformation in mental health, grounded in cross-sector input and aligned with Scotland's evolving population needs.

These strategic priorities must now translate into practical action—ensuring that digital mental health interventions are impactful, equitable, and effectively integrated across care pathways and life stages.

Appendices

Appendix 1: DMHIC Advisory Board Members

The cluster is supported by an Advisory Board whose members provide valuable insights into the clinical, academic, and business aspects of digital mental health. The advisory board attend bi-monthly meeting to discuss and offer high-quality advice to provide a focused scope to make effective strategic change.

Advisory Board Members:

- **Chris Wright, National Advisor for Digital Mental Health at The Scottish Government and Head of the Digital Mental Health Programme**: Chris facilitates the ongoing management of the DMHIC, while overseeing the development of strategy, policy, service, and innovative technologies to be implemented in Scotland.
- **Dawn Robb, Programme Manager:** Dawn has worked in the NHS for over a decade, working in both territorial and national boards. Dawn has been working on the Near Me Programme since 2016 and in her current role is Near Me Project Manager for the Social Services use of Near Me.
- **Andy Keen, Clinical lead for Innovation (NHS Grampian):** Dr Andrew Keen is responsible for all strategic and operational innovation activity in the North of Scotland innovation hub, which is increasingly focused on trying to solve major health and social care delivery challenges.
- **Andrew Gumley, Consultant clinical psychologist:** Andrew Gumley is a professor of psychological therapy in the school of health and wellbeing at University of Glasgow and is an Honorary consultant. One of Andrew's main clinical interests are the development and evaluation of psychological and digital therapies.
- **Nagore Penades, Consultant Psychiatrist (NHS Greater Glasgow and Clyde):** Nagores' role in the team is to continue in the support as the Mental Health Innovation Lead at the West of Scotland Innovation Hub, NRS Senior Research Fellow and e-health Lead for Mental Health at NHS Greater Glasgow and Clyde
- **Donald MacIntyre, Director of the NHS Research Scotland (NRS) Mental Health Network, Honorary Reader Edinburgh University & Consultant Psychiatrist:** Donalds role is to provide guidance on the practicality of technological innovations to improve mental health care and treatment. Donald is an NHS consultant general psychiatrist, currently seconded to NHS 24 as Associate Medical Director, a post which he combines with clinical research.
- **Robert Higginson, Co-founder and Partner at Par Equity:** Robert is a co-founder of Par Equity and serves on the Investment Committee. He acts as the primary point of contact for new investment opportunities and holds board positions in both the UK and the US. Additionally, he oversees Par Equity's technology infrastructure.
- **Ciaran Barbour, Digital Strategy Manager SAMH:** Ciaran's role is to develop and guide the digital transformation of SAMH, overseeing the strategy and implementation of digital health interventions across the organisation. SAMH represents third sector organisations in the advisory board.
- **Janet O'Lowe, Senior Policy Lead and CSO Innovation:** Janet is the Senior Policy Lead for CSO Innovation at the Chief Scientist Office. With extensive experience in science and innovation policy, Janet plays a key role in shaping and implementing strategies that drive scientific advancements and innovation.
- **Moira Mackenzie, Deputy Chief Executive Officer/Director of Innovation at DHI:** Within DHI, Moira leads senior stakeholder engagement, design, finance, comms & marketing functions to identify collaborative health & care opportunities where DHI can add the most value from its expertise in digitally enabled research & innovation.
- **Joanne Boyle, Head of Engagement at DHI:** Within DHI, Joanne is responsible for stakeholder and collaboration management between academic, business and civic partners. Civic partners include health, local authorities and the third sector.
- **Anna Whyte, Project Support Assistant at DHI:** In her role, Anna is responsible for supporting, developing, and managing the ongoing activities of the Digital Mental Health Innovation Cluster.

Appendix 2: Baseline Inventory of Digital Mental Health Initiatives in Scotland (Aug 24)

Full initiative inventory is available upon request. Please email Anna Whyte at anna.whyte@dhi-scotland.com