



Investor presentation

Results for the 6-month period to 30 November 2023

21 February 2024





Connectivity that liberates healthcare

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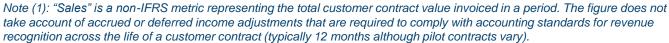
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Company overview

- The frontline clinical technology company, well-positioned to capitalise on digital transformation underway in healthcare in the UK and internationally
- Growing routes to market with Bleepa and CareLocker solutions delivering secure, compliant clinical workforce tools and data management
- Bleepa is the only UKCA marked clinical imaging and communications platform available with a highly scalable SaaS revenue model that can be deployed completely remotely
- 4 ~£10bn annual total addressable market estimate for Bleepa-CareLocker in core target markets
- 5 Focused on commercialisation with a growing customer base
- 6 Strong balance sheet with £5.4m cash and no debt as at 30 November 2023





Operational highlights

Continued focus on high-margin growth opportunities and demonstration of technical improvements, time and efficiency savings provided by its products

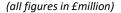
Continued development of Bleepa version 1.6 ahead of imminent release to underpin sales prospects

Granted import license for Bleepa as a registered medical device in India

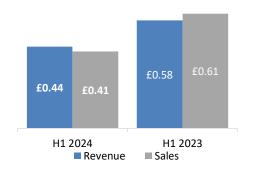
Appointment of in-country Managing Director in India, to support business development and enable the conversion of opportunities for Bleepa

Engaged with a growing pipeline of both domestic and international opportunities

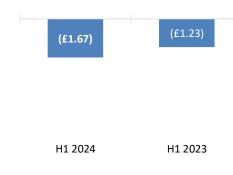
Financial highlights



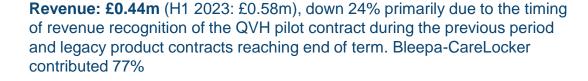
Revenue & Sales



EBITDA loss



Cashflow pre financing



Sales⁽¹⁾: £0.41m (H1 2023: £0.61m) down 33% reflecting lower NHS contract wins in the Period. Bleepa-CareLocker contributed 73% of sales and Image Engineering license fees 20%

EBITDA loss: £1.67m (H1 2023: £1.23m), a 37% widening reflecting the lower revenue and higher operating costs, primarily for staff and for maintenance of the Bleepa-CareLocker platform

Cash as at 30 Nov 2023 was £5.37m (30 Nov 2022: £9.23m)

Cash outflow pre-financing increased to £1.95m (H1 2023: £1.08m) primarily due to the increased EBITDA loss and less favourable working capital movements versus the prior period

Cash - end of period



(£1.95) (£1.08)

Note (1): "Sales" is a non-IFRS metric representing the total value of invoices raised in a period. The figure does not take account of accrued or deferred income adjustments that are required to comply with accounting standards for revenue recognition across the life of a customer contract (typically 12 months, although pilot contracts vary)





Post period highlights

Second paid contract extension with QVH/Sussex ICS worth £225k – to run until 30 June 2024 until formal procurement is progressed

£300k NHS England central funding award for Bleepa pilots in two CDCs – secured due to All-Party Parliamentary Group for Diagnostics report

Agreement to pilot Bleepa-CareLocker with Medical Imaging Partnership to deliver multiple clinical pathways to its customers in the UK private healthcare sector

All-Party Parliamentary Group report on future of CDCs used Bleepa case study to highlight need for integration of patient data and digital tools, with the recommendation of commitment to further digital investment

Product overview





Key features

- Common view of a patient's data, securely accessible from any location, bridging the gap between care settings and enabling seamless clinical pathway delivery
- Asynchronous collaboration environment enabling efficient clinical input.
- Only communication and workflow platform certified as a medical device for clinical image display
- Dashboard view gives oversight of any patient on any Bleepa care pathway.

What this means for care

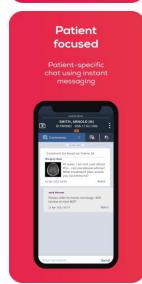
- Clinicians can review and discuss cases at any time, from anywhere, making more rapid clinical decisions and accelerating the patient journey.
- Providers can run coordinated patient pathways across care settings with fewer clinicians, whilst ensuring clinical oversight and appropriate use of diagnostic resources.
- Providers can see where all their patients are in a care pathway across all care settings.

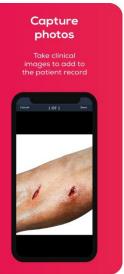
What this means for customers

- Estimated 74% reduction in referral time.
- Estimated potential reduction in length of hospital stay of 1.6 days, on average.
- Flexible working arrangements for staff.
- Auditable capture of all clinical discussions, conforming with CQC requirement for a single contemporaneous record.
- Comply with GDPR/MDD regulatory requirements, avoid ICO fines for WhatsApp data breaches.











CareLocker

Key features

- Patient centric cloud architecture that bridges care settings and follows the patient across provider sites with unparalleled scalability, security and auditability.
- Facilitates direct patient access to clinical results, as directed by the clinical team.

What this means for care

- CareLocker gives commissioners the ability to manage patients in any care setting a centralised, provider-neutral, regional or national data source for the individual patient.
- Patients can have direct access to their results, reducing the workload of GPs/specialists who
 otherwise have to field patient queries or provide results to patients.
- Patients will have access to their results in the event that they are seen by a healthcare provider out of area, or in the private sector, improving the safety of care and reducing the need for repeat investigations.

What this means for customers

- Estimated 63% reduction in patient wait times compared to national 18-week referral to treatment target (RTT)*
- Estimated 88% reduction in outpatient appointments requirement* which could save in the order of £295 per patient episode
- Reduced staff requirements ability to manage a regional/national caseload with a smaller pool of specialists in a timely way.
- Reduce carbon footprint deliver greener services with CareLocker cloud.











^{*} Based on data from September 2022 to December 2023

Growth drivers



Key value proposition by stakeholder



National

- Connecting infrastructure across all care settings
- Patient choice to attend any location and ability to leverage national specialist teams
 - Clinical services based around the patient rather than the care setting
 - Option of centralised national data NOT local site-controlled data storage



Individual trust

- Pager/WhatsApp replacement for compliant communication
- Evidence: 74% reduction in referral response time using Bleepa across NCA



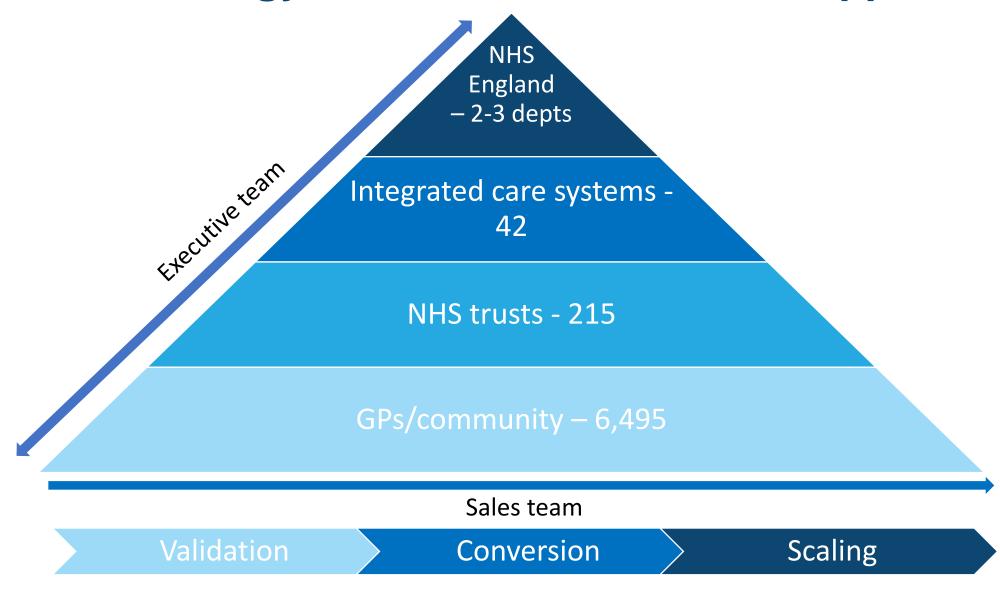
Cross-provider (CDCs / ICSs)

- Connected patient pathways across provider care settings
 - Flexibility to adopt new care models at a regional level

Evidence: Approximate 63% reduction in patient wait times compared to 18-week RTT target



Our sales strategy – vertical and horizontal approach



NHS – contracts

Acute trusts



NHS Foundation Trust

Contract value: £107k/annum + CPI

User base: 1,234 clinicians

Number of specialties: 9

Bleepa referral response times

The average duration from submission to review was 0.55 days, compared to Beattie (2020), which was 2.1 days.

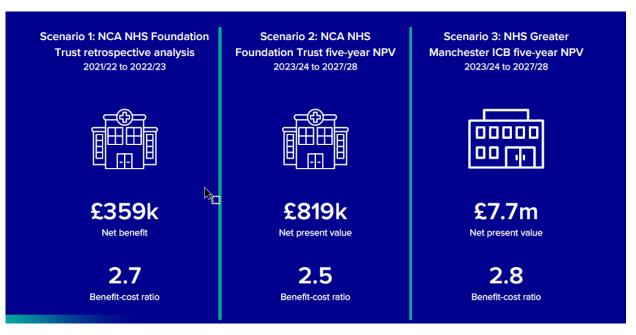


messages exchanged on average per referral



days faster clinical response time across all specialties and hospitals

Forecast modelling for Bleepa use⁽¹⁾



Bleepa user surveys and interviews

76%

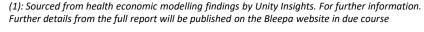
of staff identified time savings through using Bleepa compared to previous referral methods.

88%

of staff noted Bleepa was easy to use.



of staff identified an improvement in staff communication compared to previous referral methods.





NHS - contracts

Acute trusts



Contract value: £112k/

annum + CPI

User base: 374 clinicians

Number of specialties: 3

"Bleepa works very well for us as a 24-hour service in our emergency department, to supplement our stretched medical photography team...Any reduction in the time taken to review patients and help to improve their journey through the hospital is crucial when every second counts."

Justine Loh, Consultant in Emergency Medicine and Paediatric Emergency Medicine, Digital Health Lead in ED



Secure, fast photo capture with Bleepa

Justine Loh, Consultant in Emergency Medicine and Paediatric Emergency & Digital Health Lead, Royal Berkshire Hospital





NHS – contracts

Community diagnostic centres

Contract Value: £450k/12 months (twice

extended at same rate)

User base: 152 users and growing, 10

GP practices, 1 CDC and 1 hospital

Number of specialties: 1

- Connects 10 GP practices with clinicians at
 1 CDC and multi-disciplinary team in 1 hospital
- Pioneering CDC site delivering end-to-end symptom-based pathways
- 264 patients have now been referred to the breathlessness pathway



28% of cases were rejected from the pathway

60% of cases were referred back to their GP

4% of cases were referred onwards to secondary care

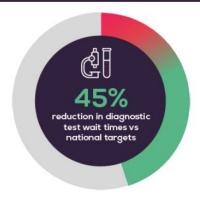
8% of cases were referred to the community diagnostic centre

Referral to treatment wait times in days

63% on average reduction



Reduction to diagnostic test wait times in days



Data from September 2022 to December 2023



NHS - contracts

Community diagnostic centres

Two pilot programmes for community diagnostic centre care pathways funded by a combined award of £300,000. Utilises funds locally disbursed under NHS England's community diagnostic centre programme.





Contract Value: £50k

Pilot will connect GP practices with Amersham

CDC and local hospital(s)



Contract Value: £250k

Pilot will connect GP practices with CDCs

and local hospital(s)



Cross-provider care:Community diagnostic centres (CDCs)

NHS England's ambition is to bring diagnostic investigations closer to patients to reduce the elective care backlog and improve the patient journey. This will enable patients to have tests such as imaging, bloods and ECGs in high-street locations rather than hospitals. This £10bn programme of work is called the community diagnostic centre initiative.

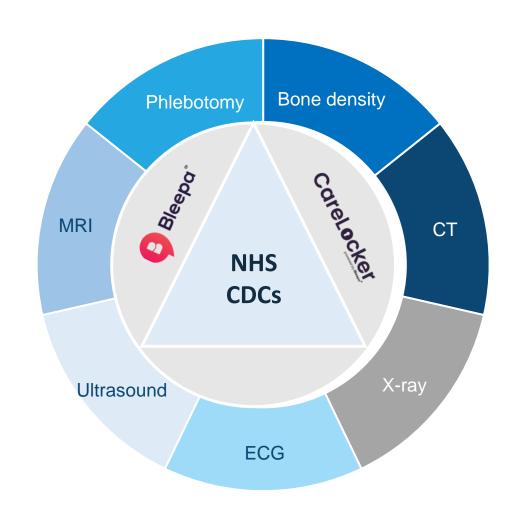
Further 6m contract extension with QVH/Sussex ICS until end of June 2024 (£225k) for CDC programme, ahead of its procurement process completion

Delivering the UK's first symptom-based pathway (breathlessness) at QVH/Sussex ICS. Expanded to two further CDC pilot sites.

Continuing conversations with a number of OEMs around potential joint goto-market strategies

174 new CDCs approved/under construction across England to complete by 2025, with a target of 17 million diagnostic tests to be delivered

Ultimate penetration of three hubs per 1 million population, circa 174 sites providing an estimated annual TAM of c.£96 million





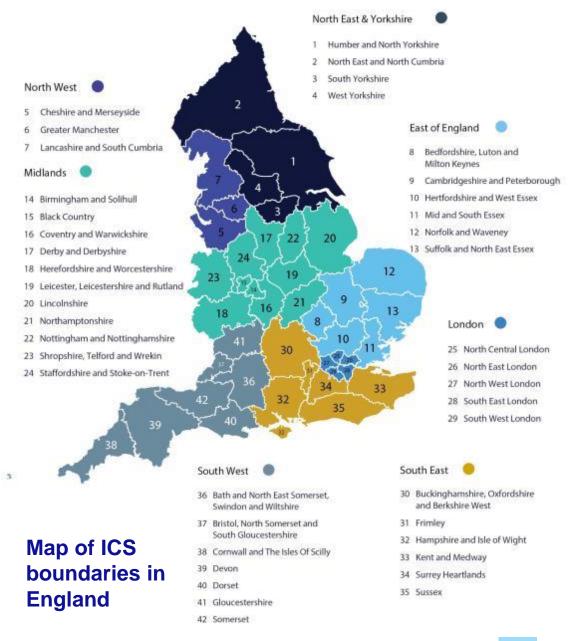
Cross-provider care:Integrated care systems (ICSs)

An ICS is a partnership of organisations that come together to plan and deliver joined up health and care services

42 integrated care systems in England now established and operational with a corresponding integrated care board and integrated care partnership

Ongoing conversations with a number of ICSs on how we can help connect care settings and support integrated care

ICSs offer potential for regional contracts with multiple CDCs, a subset of the estimated annual TAM of £96m for CDCs





Inquiry into community diagnostic centres APPG for diagnostics report

- Report published by the All-Party Parliamentary Group for Diagnostics in January 2024
- Dr Tom Oakley participated in inquiry including two roundtables in 2023
- Report features case study of impact of CDC breathlessness pilot at QVH
- Includes recommendations to increase funding for digital infrastructure and data sharing to improve efficiency and patient engagement
- Promotion across national and trade media and social channels

Participation at the APPG's inquiry led to £300k funding to undertake a pilot at Amersham CDC and at a regional level across BOB ICS

Case study: Feedback Medical Community Diagnostic Centre Pilot at Queen Victoria Hospital

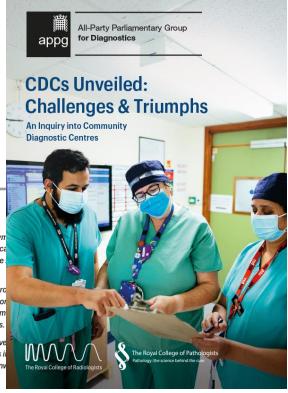
Queen Victoria Hospital in Sussex is one of the first to deliver end-to-end sympathways through the CDC programme. Collaborating with Feedback Medica programme was established using Feedback Medical's digital infrastructure. CareLocker and Bleepa.

CareLocker integrates with multiple clinical systems and centralises data are individual patient. This means that all the diagnostic results can be seen in or across all provider groups, ensuring that relevant data can be collected from clinical settings, travels with the patient and is always available to clinicians.

Bleepa is a digital clinical communication platform that captures patient inva aligns them with specific patient pathways, and presents them to clinicians i primary and secondary care settings for review, discussion and strategic on management.

The pilot achieved an impressive 69% reduction in patient waiting times for the breathlessness pathway. Leveraging digital infrastructure through Bleepa and CareLocker, this initiative achieved remarkable efficiency gains, releasing £1.7 million for every 10,000 patients without requiring extra staff or CDC expansion.

When asked what the barriers to scaling up the pilot were, Feedback Medical referred to the lack of centralised digital leadership historically in the NHS and with the evolution of ICSs.





India – driving the opportunity for Bleepa

Subsidiary now established in India and Managing Director appointed – Rohit Singh joins from UKIBC where, as a director, he supported UK companies for 12 years to establish themselves in India

Focus is on Bleepa – import license granted, providing regulatory approval for Bleepa as a medical device

Opportunity with the forthcoming introduction of the Digital Personal Data Protection Act to build sales pipeline as a compliant clinical tool for healthcare organisations to meet the regulations

Won the Gold Award for Digital Solutions for Rural Healthcare at the IHW Digital Health Awards 2024 for Bleepa and our work supporting a TB screening programme in Odisha

With 44,000 private hospitals in India, we estimate a total addressable market of ~£1,020m for Bleepa







Medical Imaging Partnership

- Radiology specialist Medical Imaging Partnership (MIP) has agreed to pilot Bleepa-CareLocker to deliver multiple clinical pathways in the UK private healthcare sector
- The pilot is expected to start initially with a novel direct access prostate screening service with further pathways across cardiac and women's health services to be onboarded later in the year
- Patient volumes and associated revenue expected to be modest in the early stages
- Feedback's first step towards opening a business line in the UK private sector







Imaging Engineering LLC

Imaging Engineering, LLC Bringing the pieces together

- Leveraging legacy technology to generate additional revenues
- License to develop products based on Cadran technology for X-ray image capture enabling repair and update to existing rather than new equipment
- Large domestic market within the US, approx. 2,000 sites reaching the end of their current kit lifespan
- High margin as little configuration and maintenance
- H1 2024 revenue of £0.08m (H1 2023: £0.07m)
- Ongoing license fees expected as Imaging Engineering expand their offering across the USA





Outlook

- 1 Growing national and regional recognition our CDC solution as evidenced by the APPG for Diagnostics report
- Primary focus on cross-provider care delivery in the UK with higher contract values and operational margins estimated total addressable market of £96m
- Secondary focus on non-NHS markets such as private healthcare in the UK and India, and other international opportunities including USA
- 4 Licensing components of Cadran technology to third parties, generating recurring royalty revenue



Appendices



H1 2024 – Consolidated income statement

	H1 2024 £000	H1 2023 £000	FY 2023 £000
Revenue	437	576	1,025
Cost of sales	(36)	(37)	(84)
Gross profit	401	539	941
Other operating expenses	(2,536)	(2,161)	(4,363)
Operating loss	(2,135)	(1,622)	(3,422)
Net finance income	47	12	48
Loss before taxation	(2,088)	(1,610)	(3,374)
Tax credit	152	242	456
Loss after tax attributable to the equity shareholders of the Company	(1,936)	(1,368)	(2,918)
Translation difference on overseas operation	(1)	_	(2)
Total comprehensive expense for the year	(1,937)	(1,368)	(2,920)
Loss per share (pence)			
Basic and diluted	(14.52)	(10.26)	(21.88)

^{*}The 2022 Loss per share has been presented on a proforma basis by applying the 200:1 share consolidation to the weighted average number of ordinary shares of that period.

H1 2024 – Consolidated balance sheet

	H1 2024	H1 2023	FY 2023
	£000s	£000s	£
Property, plant and equipment	14	16	15
Intangible assets	3,911	3,499	3,711
Total non-current assets	3,925	3,515	3,726
Trade and other receivables	435	39	225
Corporation tax receivable	151	242	456
Cash and cash equivalents	5,372	9,228	7,318
Total current assets	5,958	9,509	7,999
Total assets	0.002	12.024	11 725
Total assets	9,883	13,024	11,725
Called up share capital	6,667	6,667	6,667
Share premium account	15,350	15,351	15,350
Capital reserve	300	300	300
Translation reserve	(213)	(210)	(212)
Share option expense reserve	568	479	531
Retained earnings	(13,703)	(10,217)	(11,767)
Total equity	8,969	12,370	10,869
Current liabilities			
Trade and other payables	914	654	855
Total current liabilities	914	654	855
Contract liabilities			-
Total non-current liabilities			-
Total liabilities	914	654	855
Total equity and liabilities	9,883	13,024	11,724

H1 2024 - Consolidated cashflow statement

	H1 2024 £000s	H1 2023 £000s	FY 2023 £000s
Cash flows from operating activities			
Loss before tax	(2,088)	(1,610)	(3,374)
Adjustments for:			
Net finance income	(47)	(12)	(48)
Depreciation and amortisation	460	396	809
Impairment of intangible assets	-	-	7
Share based payment expense	37	29	81
Translation difference on overseas operations	(1)		(2)
Decrease/(increase) in trade receivables	(229)	196	95
Decrease/(increase) in other receivables	20	73	(12)
Increase / (decrease) in trade payables	124	1	(104)
Increase / (decrease) in other payables	(65)	59	365
Corporation tax received	456	392	393
Total adjustments	755	1,134	1,584
Net cash used in operating activities	(1,333)	(476)	(1,790)
Cash flows from investing activities			
Purchase of tangible fixed assets	(6)	(13)	(19)
Purchase of intangible assets	(654)	(601)	(1,226)
Net finance income received	47	12	48
Net cash used in investing activities	(613)	(602)	(1,197)
			, , ,
Cash flows from financing activities			
Net proceeds of share issue	(0)	(0)	(1)
Net cash generated from financing activities	(0)	(0)	(1)
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Net increase/(decrease) in cash and cash equivalents	(1,946)	(1,078)	(2,988)
Cash and cash equivalents at beginning of period	7,318	10,306	10,306
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Cash and cash equivalents at end of period	5,372	9,228	7,318

~£10bn annual TAM estimated in core target markets

Estimated total addressable market analysis - annual										
	1	2	3	4	5	6	7	8	9	
	NHS trusts	NHS - CDCs	UK veterinary sector	EU veterinary sector	North America veterinary sector	Private hospitals (UK)	Private hospitals (India)	National TB screening	ABDM ⁽²⁾ – health record	TOTAL
Geography	UK	UK	UK	EU	North America	UK	India	India	India	
Product(s)	Bleepa	Bleepa/ CareLocker	Bleepa/ Feedback Connect/ CareLocker	Bleepa/ Feedback Connect/ CareLocker	Bleepa/ Feedback Connect/ CareLocker	Bleepa	Bleepa	CareLocker	CareLocker	
ТАМ	£28m	£96m	£5m	£51m	£43m	£16m	£1,020m	£375m ⁽¹⁾	£8,146m	£9,780m

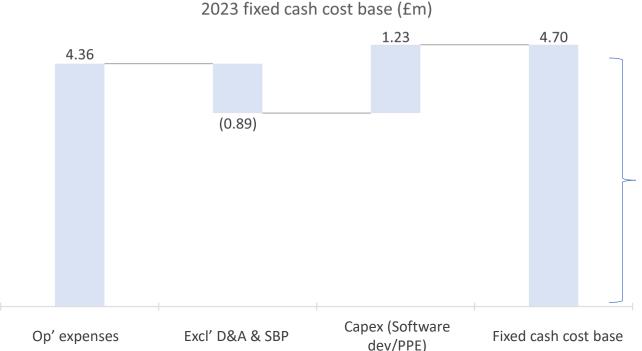
Note (1): Equivalent to an estimated total TAM of £1,875m across an estimated 5-year screening cycle for the population Note (2): ABDM = The Ayushman Bharat Digital Mission, previously known as National Digital Health Mission (NDHM)



Cross-provider care:

Route to breakeven

- Regional CDC contracts with ICSs represent the clearest route to profitability
- Estimated 6% market share required for breakeven considered achievable
 - Equivalent to 10 individual CDC contracts (at assumed average pricing), or
 - Assuming each ICS contains an average of 3 CDCs, equivalent to 3 4 ICS contracts (at assumed average pricing)



CDC customers Assumed average contract value £0.60m Assumed average gross margin 80% Gross profit per CDC customer £0.48m 2023 fixed cash cost base £4.70m # CDC customers to breakeven 10 Implied market share required for breakeven 6.1%

This slide contains Illustrative analysis based on latest (2023) full-year results, assumed contract values and margins, and ignores other sources of revenue



Recent significant activity in the NHS market

APPG for Diagnostics

- Report calls for prioritisation of digital infrastructure
- FBK Medical provided evidence from our QVH pilot and are recognised and highlighted in the report

Cancer target changes

- Removal of 2-week wait standard in favour of the Faster Diagnosis Standard
- Growing need to clearly identify cancer diagnosis standard breaches and improve patient care

Hewitt Review

- Independent review of integrated care systems by Rt Hon Patricia Hewitt
- Key recs:
 - Improve ways of working through digital channels
 - Better multidisciplinary working
 - Flexible infrastructure to scale innovation

ICO NHS Lanarkshire ruling

- Reprimand for NHS trust over clinician use of WhatsApp to share patient data
- Growing need to implement safe, secure clinical communication tools within and across NHS organisations

CQC requirement for tools & care record

- Guidance for provision of appropriate staff tools and maintaining a contemporaneous care record
- Regulator
 requirement for
 staff to have the
 right tools to do
 their job (inc digital
 tools) and maintain
 a full, auditable
 record of patient
 care



Healthcare regulation – confidence in our products

Data governance

- Governed by GDPR
- NHS provider = data controller
- Feedback = data processor
- Data processing agreement between controller and processor over types and use of patient data
- Data privacy impact assessment on impact and risks of patient data use

Medical device regulation

- UK: Medical Device
 Directive UKCA or CE
 mark
- ISO 13485 certification quality management standard for medical device manufacturers

Clinical risk

- DCB 0129 clinical risk and safety standard, risk analysis and mitigation for product design, manufacturing and operational processes
- ISO 13485 certification demonstrating consistent quality of product releases



Our credentials

Standard	What	Why / what it demonstrates	How
UKCA	Regulatory standard – confirming that Bleepa displays digital patient images at a standard suitable for clinical review	Allows the product to be sold for the intended purpose	Class 1 – self certification of conformance with MHRA Development and maintenance of a full technical file.
ISO 13485	Quality management standard	We meet medical device standards as part of our UKCA accreditation. Demonstrates quality of products to customers.	Development and maintenance of a full QMS which is integrated into staff training, internally audited annually, and externally audited every 3 years by a certification body.
ISO 27001	Information management standard	Have defined process, independently audited and externally validated, to securely process and manage sensitive data.	Development and maintenance of full IMS integrated into staff training, internally audited annually, and externally audited every three years by a certification body.
Cyber Essentials Plus	Security standard	Security of product to customer, externally validated.	Document security protocols and processes, externally audited annually. Annual penetration testing.
DCB 0129	Clinical safety and clinical risk standard	Real world application of technology in intended setting and purpose to customers; deliberately designed as much risk out of the product as possible.	Operate a full risk management plan as part of product design, testing and implementation, which considers clinical/patient risk at all stages and mitigation.
NHS information governance toolkit	NHS cyber security standard	Compliance with this is required in order to sell a software product to the NHS	Extensive set of information security requirements that covers much of same subject matter as ISO 27001, but targeted in particular at the management of sensitive personal data
Digital Assessment Technology Criteria (DTAC)	An NHS-specific standard	Demonstrates our conformance with all NHS requirements for the provision of software products	DTAC is largely a summary capture of all the above standards.

Feedback plc Board



Prof Rory Shaw, Non-executive Chairman: Ex senior NHS executive, Medical Director of Healthcare UK, Dept of International Trade, and consultant pulmonary physician.



Dr Thomas Oakley, Chief Executive Officer since February 2019, previously Radiologist and Clinical Entrepreneur Fellow at NHS England.



Anesh Patel, Chief Financial Officer: Chartered Accountant with significant corporate and commercial finance experience, including in healthcare/biotech.



Annemijn Eschauzier, Non-executive Director: Strong healthcare marketing background, ex GlaxoSmithKline and GE Healthcare, now with Hardian Health.



Philipp Prince, Non-executive Director: Chartered accountant with extensive experience in senior finance roles in both private and listed technology companies.



Adam Denning, Non-executive Director: 20+ years' experience at Microsoft and previously assistant technology advisor to Bill Gates.



Feedback Medical Ltd management team



Dr Thomas Oakley, Chief Executive Officer since February 2019, previously Radiologist and Clinical Entrepreneur Fellow at NHS England.



Anesh Patel, Chief Financial Officer: Chartered Accountant with significant corporate and commercial finance experience, including in healthcare/biotech.



Technology Officer: medical imaging scientist and software developer with 32 years' experience, was CEO of Feedback Medical Ltd when it was formed in 2001.

Mike Hayball, Chief



Stephen McAteer, Chief Operating Officer: extensive operational experience with previous NHS roles, including previous frontline clinical experience as a Speech and Language specialist.



Dr Stephen Brown, Chief Information Officer: medical imaging scientist and director of Feedback Medical Ltd since 2001, is our regulatory specialist and system architect.



Nick Mayhew, Chief Sales and Marketing Officer: an experienced marketer within the private and public health sectors.



Sarah Bricknell, Commercial and Legal Advisor: Has operated at a senior board level in medical imaging services for over 17 years and routinely advises OEMs and Government.



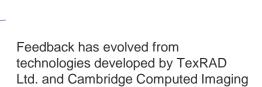
Company history

Bleepa°

CareLocker

Ltd.

Feedback Connect



These companies were acquired by Feedback plc in 2014 and merged to form the operating subsidiary Feedback Medical Limited.

- Won Gold Award for Digital Solutions for Rural Healthcare at IHW Digital Health Awards 2024 in India
 - Awarded funding for two CDC pathway pilots with Amersham CDC and BOB ICS
 - Contract extension with QVH/Sussex ICS for CDC programme
 - Establishment of Indian subsidiary and appointment of managing director for India
- Two Bleepa NHS contract wins
 12-month pilot extension of UK'

2023

2014

2001

- 12-month pilot extension of UK's first end-to-end symptom-based CDC pathway
- First international deployments of Bleepa in India, for TB screening (Orissa) and CareLocker pilot (Indore)
- Bleepa gets 1st commercial contract at Royal Berkshire Hospitals NHS Foundation Trust
- Launch of CareLocker and BleepaBox
- Bleepa achieves veterinary sector contract with CVS and international opportunities via DIT missions
- Bleepa adopted at Pennine Acute Care NHS Trust in response to COVID-19
- · CE mark granted
- Bleepa awarded onto NHSx clinical communications framework
- Dr Tom Oakley joins as CEO
 - Strategic review concludes shift in focus away from TexRAD to the Cadran imaging solution
 - New frontline imaging tool Bleepa developed, launched at NHS Expo and NHS pilot initiated
 - CCI and TexRAD merge to form Feedback Medical Ltd
 - Feedback Plc implements a strategy of focusing on medical imaging and incorporates TexRAD Ltd. and CCI Ltd as part of the group
- Founders of TexRAD® enter into partnership with CCI and Miles Medical Pty. to form TexRAD Ltd.
 - Cambridge Computed Imaging Ltd. (CCI) is formed out of Papworth Hospital, Cambridge, offering the Cadran image viewing and storage software



