

# CCIO Advisory Panel Election Candidates

*Click through and expand each candidates profile to see their bio and manifesto*



**Dr Achim Schwenk**

**CCIO, North London Partners in Health and Care**

**BIO:** My career in Digital Health spans two decades and many roles, from single-handed EPR designer/programmer to system leader. I am now CCIO for North London Partners in Health and Social Care (ICS) and develop my independent consultancy in people aspects of digital health. Until March 2021 I was CCIO and Caldicott Guardian at North Middlesex Hospital, leading their GDE-FF programme with a great team of CxIOs. My clinical leadership roles include a year as medical director. I'm an HIV consultant by trade, and many years ago designed a specialist HIV EPR. I enjoyed the NHS Digital Academy 2019-20.

**MANIFESTO:** Digital health must be all about people: our staff and our patients. It's our responsibility as CCIOs to procure, configure, implement and refine our digital systems, so that they serve the people. I dream of a hospital and health system where the IT just works; clinicians just get on with their jobs, have the information they need just a mouse click away and concentrate on the patient in front of them. Simple?

We know this requires skillful, hard and persistent work, with a multidisciplinary team of clinicians, technicians and project managers, with the executive leaders fully engaged, with the digital programme fully aligned with the overall vision of trusts, systems and the wider NHS. My

digital health journey started with a standalone self-programmed mini EPR; I was fortunate to upscale my experience first to hospital level and now to ICS systems. I can talk the language of nerds and project managers, of clinicians, of exec directors and of patients. Outside of digital, I have worked in many different clinical leadership roles and have met many wonderful colleagues.

I hope I will never stop learning and asking stupid questions. I'm passionate about the new integrated care paradigm in the NHS. We can and must overcome territorial thinking and internal competition. However it will only deliver if we mean it, if we address social inequality and digital poverty, and empower citizens. Our digital contribution to this programme needs to be all about system interoperability, data standards, user-centred co-production, and safe data sharing.



**Dr Alec Price-Forbes**

**Consultant Rheumatologist, University Hospitals Coventry and Warwickshire and CCIO, Coventry and Warwickshire's STP**

**BIO:** Consultant Rheumatologist and Lead for EPR Programme at University Hospital Coventry and Warwickshire NHS Trust (UHCW) and CCIO for Coventry and Warwickshire's STP (HCP - Health and Care Partnership). I have practiced for 15 years and remain passionate about the delivery of holistic, person-centered high quality care. I have successfully deployed technology-enabled change since 2007, led the EPR Programme since 2011 and was appointed CCIO for Coventry and Warwickshire's STP in 2016.

- Vice-Chair of the STP Digital Transformation Board
- Chair the Integrated Care Board (ICR)
- Clinical Lead for the ICR
- Transformation Lead for the West Midlands Shared Care Record

The CCIO Network is a fantastic community for those leading digital transformation in the NHS, where best practice and innovative ideas can be shared and shaped.

**MANIFESTO:** The Health and Care system faces unprecedented challenges and needs modernisation to be fit for purpose. Caring for patients with long term conditions has provided insights into the fragmented care our patients frequently experience. This has highlighted the urgent need to integrate health and care systems and digital remains the golden thread to enable and sustain such transformational change.

We need to future-proof our health and care system, by focusing on the health and wellbeing of every generation to deliver effective population health management. This will focus on the need for improved data quality, integrated information systems, genomics for personalised medicine and the role of AI. Critically, we need effective leadership, blended together in partnership with our citizens to ensure we meet their future needs and reduce inequalities in access. This will enable truly integrated care and the move away from transactional outputs towards values and outcomes based care. I

would value the opportunity to join the panel to contribute to:

- Initiatives that allow network members to harness the experience and knowledge of all stakeholders in shaping the national digital agenda to influence local policy
- Focusing on enabling activated, engaged patients who are able to track, manage and improve their lives.
- Focusing on creating a culture of inclusivity and addressing the skills gap around new digital technologies, whether for patients or clinicians.
- Ensuring the Network is representative of a diverse membership, including patients, to enable it to continue to have an important role in shaping the healthcare of the future.



**Dr Alistair Cannon**

**Psychiatry Core Trainee, South London and Maudsley**

**BIO:** I'm a CT2 doctor training in psychiatry in South East London. I'm interested in medical education, psychosis research, and most importantly clinical informatics.

I dipped my toe into clinical informatics by helping to prepare Jersey's hospital for its ePMA roll-out. This year I've been IT rep to the junior doctors' committee for our training programme. I've loved getting to see how the systems work behind what the end user sees, especially with our own imminent ePMA system.

When I'm not geeking out with that, I'm either singing or tending to my expanding plant collection.

**MANIFESTO:** I want to join the advisory panel despite feeling a little daunted. The existing AP lineup is very impressive, but gives the impression that this is a consultants' game. That's exactly why I need to put myself forward.

It's important to highlight the benefits of having trainees involved in the CCIO community. We see things in a different way and have closer insight into the practical pain points. We've lost the rose-tinted glasses while maintaining persistent hopefulness.

I think it's even more important to show clinicians earlier in their careers that there's an amazing pocket of practice that they might not have even heard of, and now is the time to get involved. I would love to contribute to making a clearer pathway for clinicians to find their way early on, rather than getting discouraged.

I'll be infusing some informatics ideas into the newly minted Maudsley Digital Health Group, alongside its loftier academic pursuits. I also intend to continue my serial quality improvement endeavours—maybe I'll even start doing it more by the book. As a clinical research associate next year I'll be able to scout out the interface with research systems and think about how we can make those easier to use and more fruitful.

I will bring an important perspective, and by example make it clear that being a "junior" is not a barrier to contributing meaningfully to clinical informatics.



**Dr Andy Webster**

**Chief Clinical Information Officer, Leeds Teaching Hospitals NHS Trust**

**BIO:** I have been a Consultant in Emergency Medicine for 15 years in two trusts, and have been interested in using technology to improve patient care either in real time, planning services, and in research and quality improvement. I have been one of four CCIO's in Leeds Teaching hospitals since April 2018 and completed the PG Diploma in Digital Leadership in Cohort 2 of the NHS Digital Academy. As an emergency physician I work at the interface of primary and secondary care, and understand both the potential for digital, and what needs to improve.

**MANIFESTO:** Whether in the emergency department or in my digital role, one has to be able to work within a multi-disciplinary team. We face many challenges every day whether dealing with poor flow and long patient waits or dealing with the impact of a IT system that has malfunctioned. My colleagues recognise me as someone who will give everything to help the team be as successful as it can, ensuring each member of the team is given the opportunity to display their talents.

If I am fortunate enough to be voted in by my CCIO colleagues, I will guarantee that I will work hard with the other members of the panel and ensure that our CCIO voice continues to be heard both locally and nationally. There are many exemplar trusts who are realising great benefit from digital technologies, but we need to ensure more of a level playing field to ensure trusts receive both funding and have the expertise to make sure they are not left behind. The use of digital technologies is no longer a nice to have, but a must have.

The COVID pandemic though it has delivered significant transformation in how we work, whether it is more home working, virtual clinics or better use of data. It has also left the health service with long waits for treatments, an increase in the digital divide and exclusion. Digital health is going to play a key role in the recovery, as CCIO's we need to lead the transformation.



**Anne Marie Cunningham**

**Associate Medical Director Primary Care, Digital Health and Care Wales**

**BIO:** I am a GP in South Wales valleys and Associate Medical Director for Primary Care in Digital Health and Care Wales. Like everyone else I have been very involved in the COVID response in the last year and am particularly proud of our homegrown Welsh Immunisation System used for COVID vaccination scheduling and recording across Wales. I am also Vice-Chair of the Faculty of Clinical Informatics with a particular interest in professional development.

**MANIFESTO:** Like you, I joined the Digital Health community because I wanted to learn with my peers. I was delighted to be elected as the first representative from outside England to the CCIO advisory panel two years ago. Through work on COVID, we are more aware than ever that we need to work together across the UK and further afield on how we use health and care data. In the next two years if re-elected my priorities will be:

- Ensuring that people from all backgrounds and all professional groups in health and care are supported in the networks and have opportunities to develop.
- Supporting the development of whole system perspectives in the use of health and care data, particularly that of patients and the public.
- I would like to see Digital Health consider the development of a citizen panel to help direct our work.



**Dr Anthony Smith**

**Consultant, Yeovil District Hospital**

**BIO:** I have been involved in informatics for over 15 years. During this time I have worked as a CCIO, a Caldicott guardian and a Clinical Safety Officer. I have completed the Digital academy, am undertaking the Masters in Digital Health Leadership and I am accredited with CHIME as a CHCIO (the only or one of the few clinicians with this in the UK). I am also a Fellow of the Faculty of Clinical Informatics. I have been an active member of the CCIO network for around 7 years and attended many events during this time.

**MANIFESTO:** With extensive experience in implementation and clinical engagement I have been involved or led the deployment of multiple clinical systems at trust and regional level. I have also chaired a National EPR customer group. I have a passion for ensuring that systems work and that clinicians are involved and represented in their design and implementation. I support the professionalisation of the clinical informatics roles and collaboration between clinical and technical teams. I am a strong advocate for equality between the CIO and the CCIO role and that both roles should be represented at board level in each trust.



**Dr Ayesha Rahim**

**CCIO, Lancashire & South Cumbria NHS Foundation Trust**

**BIO:** Ayesha Rahim is a consultant psychiatrist, and has been a CCIO for four years. She leads a team of clinical informaticians in her organisation, and has successfully delivered several large scale digital transformation projects. She is a steering group member of the Shuri Network, which supports BAME women in digital health, and offers personal shadowing opportunities and mentoring to other professionals. She is also a member of the Faculty of Clinical Informatics, as well as being an active steering group member of the Royal College of Psychiatrists Digital Special Interest Group. She is a graduate of the NHS Digital Academy.

**MANIFESTO:** I am a current member of the Advisory Panel, and I would be delighted to be re-elected for another term. In the last couple of years I have used my time on the panel to ensure that the events that Digital Health hold, provide a platform for a diversity of views and expertise.

The demand for clinicians working in digital transformation outstrips our current supply, therefore one of my biggest priorities is to encourage clinicians from all disciplines to join the profession, particularly from under-represented groups including social care. It's vital that we as a community support people in the early stages of their careers, to ensure a pipeline of talent ready to take on these roles. I am also keen to support diversity in all its guises, be that related to gender, ethnicity, profession or geographical location. I truly believe that not only is this the right thing to do, the better we as a field represent society, the more robustly we can undertake transformation that works for our patients and staff.

If re-elected, I would be keen to promote several specific initiatives:

- a) To work with Digital Health to create a set of resources to demystify health tech for new entrants.

b) To ensure that Digital Health continue to consider the diversity of its speakers at events, in order to promote diversity of thought.

c) To work with Digital Health and existing clinical networks, in order to encourage clinicians and social care professionals to consider digital careers.



**Catherine McShane**

**Clinical Digital Project Manager, County Durham & Darlington FT**

**BIO:** Catherine qualified as a dietitian in 1998 specialising in the elderly in both the acute and the community setting. As a result of frustrations of not being able to monitor patients regularly she sought a solution to improve the dietetic care provided to patients at risk of undernutrition. This led to the creation of NHS Health Call Undernutrition. Catherine has been instrumental in developing and deploying various digital clinical pathways and has project managed one of the largest digital care home projects. She has a joint role working for both County Durham and Darlington NHS FT and Health Call Solutions.

**MANIFESTO:** There is an underrepresentation of Allied Health Professionals working and leading in digital health. I would like to work towards increasing those under representative health care professionals to ensure they are part of the wider team and ensure they are included in early discussions during the digitisation of health care within the NHS, particularly where they are often key members of a MDT team in providing expert patient care. I am passionate about the benefits that using digital can bring to both health and social care as well as being hugely beneficial to patients and service users. COVID-19 has driven the use of technology within Health and Social care however some of this has been disjointed. I feel that being elected would provide me with a fantastic opportunity to be able to network, learn and hopefully have an influence on what the future could look like.





**Debbie Phillips**

**CCIO & Consultant Surgeon, Milton Keynes Hospital NHS Foundation Trust**

**BIO:** I am Debbie Phillips a consultant emergency surgeon at Milton Keynes University Hospital. About 8 years I was appointed CCIO for the Trust having sat previously on our Clinical Advisory Group during the NPfIT. We are a Cerner Millennium site and I am proud of the progress we have made in the 3 years since our go-live and also our status as a Fast Follower in the Global Digital Exemplar programme. I am a member of cohort 2 of the NHS Digital Academy and also the FCI. When time and Covid allow I am a keen golfer!

**MANIFESTO:** I am passionate about the use of data to drive up patient outcomes and experience – but as a practising surgeon I am also acutely aware of the importance of not overburdening already overstretched clinicians. The user experience is key and structured data should be collected as a natural part of patient centric workflows not an additional task. I am keen to see not only the further development and professionalisation of the CCIO role but also the recognition and development of digital skills for all clinicians in order they deliver the best practice. I also believe another key enabler of better outcomes is more connected care. Our own experience during the pandemic with the expansion of our health information exchange to encompass community services such as mental health, a variety of children’s services and an expanded network of GPs has proved invaluable, and usage continues to rise. I have witnessed the highs and lows of digital transformation in Milton Keynes and having completed the NHS Digital Academy would now value the opportunity to get involved in the wider CCIO and digital agenda.



**Dr Dermot O'Riordan**

**CCIO, West Suffolk NHS Foundation Trust**

**BIO:** I am CCIO (& was previously medical director) in West Suffolk. I led the clinical implementation of our EHR go-live in 2016, leading to our achieving GDE status. Practice clinically as a surgeon and use our EHR for real. Elected member of Council of Faculty of Clinical Informatics. An active contributor to Digital Health Discourse. Existing elected member of CCIO Advisory Panel helping plan Rewired, Summer School etc. Have a proven track record of success.

**MANIFESTO:** I am passionate about:

- Power of digitising health care
- Benefits of interoperability
- Importance improving user experience
- Giving patients access to their health data
- I am not afraid to speak up when things need to be said, even if that is at times uncomfortable
- Believe in making the Digital Health Network (and its Advisory Panels) the go to place to get real world constructive input to improve the way that healthcare digitisation is implemented
- Would be honoured to be re-elected



**Edward Prosser-Snelling**

**Chief Clinical Information Officer, Norfolk and Norwich University Hospitals NHS Foundation Trust**

**BIO:** I am an obstetrician and gynaecologist specialising in endometriosis surgery. I am the CCIO for one of the country's least digitally mature trusts, which is part of a three-hospital Digital Aspirant programme. I am a Caldicott Guardian and associate medical director. I have worked in NHS England as a National Medical Director's Clinical Fellow and served a term on council at the RCOG. I have published on human factors and written and contributed to health policy documents at a national level. I came late to medicine, training initially as a linguist (German and French). Digital Academy Cohort 3.

**MANIFESTO:** I want to see three key changes at a national level, to which I believe I can contribute.

Firstly: A greater voice for those digital health economies who are less mature, less developed and who have received historically less support. As a CCIO from one such region I believe I can represent this position and champion the levelling-up agenda.

Secondly: The creation of an inclusive Royal College of Digital Health, which encompasses, welcomes, educates and sets standards for CNIO, CCIOs and CXIOs. I see this as essential in professionalising digital health care, and would come with associated membership for CIOs as well as the chance to create patient panels and networks which in turn will drive an agenda to tackle inequality and implicit bias in digital healthcare.

Thirdly: A national focus on objective, unbiased and uncompromised evaluation of digital health technologies, with an emphasis on linking their implementation to hard health and social care outcomes. I would like to see national guidance, standards and even legislation on how suppliers must commit to open and honest evaluations of their health information products. This will lead us

to a greater, scientifically more robust understanding of what the implementation of digital health technology means for our patients and citizens.

My experience working at a national level in NHS England, experience in a royal college, but most importantly as a front-line clinical and CCIO, I believe, make me suitable for this role and I would be very humbled to receive your support. Thank you.



**Dr Elizabeth Heitz**

**CCIO, Croydon Health Services NHS Trust**

**BIO:** After being appointed as a consultant geriatrician in 2014, I started my informatics journey as the clinical lead for electronic medicines implementation. I subsequently was promoted to chief clinical information officer at Croydon health services. I balance this role with continuing to work as a physician in both Community and the acute hospital. During the past year I have been doing the diploma in digital health and leadership as part of the digital Academy and intend to complete the MSc next year.

**MANIFESTO:** With over 5 year's experience as chief clinical information in Croydon Health services and the past 6 months as part of the digital Academy, I bring experience which spans both acute hospital and community services. I have also been an active participant in southwest London digital space and strongly believe that collaboration is an essential part of moving forward for the National Health Service and digital. Although I have not held a national role previously, I am always ready to learn and develop when a new challenge is put before me. The Covid pandemic has shown that digital change can occur at pace with some big steps forward having been made. The opportunity to be part of a team influencing and directing how digital progresses at a national level in the coming two years is why I wish to be put forward for this role. The Digital academy has strengthened my knowledge, leadership skills and confidence that I can contribute to this role in a meaningful way.



**Fiona McDonald**

**Associate Clinical Director, Clinical Safety Officer, Health Call**

**BIO:** Fiona McDonald is a Nurse by background with previous national roles for Electronic Prescription Service, Patient/GP online, Director of patient preferences for the Great North Care Record and currently Associate Clinical Director of a regional NHS owned collaborative, NHS Health Call. Fiona is the current Vice Chair of the current CCIO advisory group panel and a member of the Shuri network steering group.

**MANIFESTO:** I have been a huge supporter of diversity in leadership across all areas of the health service, in particular the digital agenda, being instrumental in getting the Shuri network on the main stage at their launch at Digital Health summer school in 2019. I am passionate about getting the right representative balance of gender, backgrounds, skills, and experience, to reflect the population as well as those working within Healthcare. I am passionate about patient privacy and self-access to health information, to promote self-care and management, particularly for those living with long term conditions. I am keen to become involved in the development of the professionalism and community development and engagement working groups within digital health networks. My current role involves working with clinical experts across all areas of health care delivery, to develop digital pathways to support patient outcomes, care and remove unnecessary burden on clinical staff.



**Dr Gareth Thomas**

**Deputy CCIO, NHSX**

**BIO:** Dr Gareth Thomas is National Clinical Director at NHSX and Deputy Chief Clinical Information Officer (CCIO).

Prior to joining NHSX, Gareth worked as Chief Clinical Information Officer at a local and regional level with Salford Royal NHS Foundation Trust, where Gareth still practices clinically as a Consultant in Intensive Care Medicine and Anaesthesia.

Committed to clinical leadership, Gareth was part of the inaugural cohort on the RCP/Birkbeck MSc in Medical Leadership and recently graduated from the UK Cabinet Office Major Programmes Leadership Academy (MPLA) at the University of Oxford Said Business School.

Gareth received the UK “CCIO of the Year” award at the Digital Health Awards in July 2019.

**MANIFESTO:** In my role as Deputy National CCIO at NHSX, I am committed to demonstrable improvement of patient care via digital transformation of clinical services at local and national level. I lead complex, boundary-less programmes with high political sensitivity across a range of care settings and stakeholders. I also champion the professionalisation agenda via HEE, FCI and FMLM, supporting clinical fellowships and the Shuri Network shadowing programme. If elected to the Advisory Panel I would work within 3 broad themes:- Continue to build links between local clinical leaders and the centre, to ensure that national strategy and resultant product set reflect frontline needs- Advance the professionalisation of clinical informatics across all groups within the multidisciplinary team- Champion equality and diversity, both in terms of future workforce development, and the content of our citizen-facing digital offering.



## **Dr Gregor Peden**

### **CCIO, Manx Care, Isle of Man**

**BIO:** MBChB MSc (Emergency Medicine) MBCS FFCI FEDIPAdvPraClinical Informatics, Emergency Medicine, Forensic & Legal Medicine. An experienced and accredited Clinical Informatician with a demonstrable record of delivering integrated, information-rich and intelligent digital health care on the Isle of Man. A passionate believer that #data saves lives and a champion of innovation wherever possible to improve quality and outcomes of care.

Successful deployments: Secondary care Digital Health Record, Digital Order Comms, Integrated eObs, eDischarge, COVID 111 Clinical Call Centre, COVID Vaccination recording/dashboard. In progress: eAssessments & eNoting, ePrescribing, Digital Integrated Record, Smart Paging, Digital dictation, Integrated Care Record, Data Visualisation/Whiteboards.

**MANIFESTO:** 13 years clinical practice, the last 6 of which as CCIO - working an increasing proportion of my time in informatics, now managing an 80:20 split in its favour. I sit on the Health Tech Digital Advisory Board and take part in judging the Health Tech Digital Annual Awards. This past year has seen some incredible innovation in our field. I strongly believe that it's time to stop learning the same lessons and piloting the same solutions - there are many tried and tested options for us to now drive significant improvements in the quality and outcomes of care. Working for an island-based health and care service has unique challenges but also unique opportunities to demonstrate effective digital transformation across a discrete population with a single care provider. I am passionate about driving healthcare digitalisation in order to facilitate true integrated care for the benefit of not just our service users, but also our service workforce. Application and data integration still has room for improvement - we must move away from the stop/start journey of repetitive questions and repetitive data entry to a place of smooth transition and real-time sharing. I am also an advocate for enhanced patient access to, and ownership of their health data and see this as an opportunity to improve data quality and accuracy.



**Dr James Reed**

**CCIO, Birmingham & Solihull Mental Health NHS Foundation Trust**

**BIO:** James Reed is a Consultant Forensic Psychiatrist and Chief Clinical Information Officer at Birmingham & Solihull Mental Health NHS FT. He was first appointed as CCIO in 2013 and during this time has overseen a range of digital projects including BSMHFT's role in the Global Digital Exemplar programme. He is also clinical lead for the West Midlands Shared Care Record programme. James has been involved in the CCIO network since its inception and has been on the advisory panel for the last 6 years and was elected chair in 2019.

**MANIFESTO:** I have been very privileged to see and be involved in the development of clinical leadership in digital health over the last ten years. The 'digital health and care professional' is now regarded as a key part of any significant change in services. However, we are still very much at the start of the journey – we need CCIOs to be more than just the people who help with the big implementations, but to become those who can drive sustainable developments and improvements in the long term. We can't allow our organisations to believe that they have "done" digital when the projects are over; instead, we need to be showing how thinking differently about our work can change not only what we do, but how we do it and this is something that staff at all levels can do.

I am also very keen to develop through the CCIO network and in collaboration with other bodies (FCI, CHIME and others) the structure of a careers in digital health for all professional groups, and also to provide for diverse career pathways involving healthcare providers, central and local management and the software and technology industry. Everyone working in this area should be encouraged to have aspirations, and without this we risk losing talented people. If I was elected, I would pursue these agenda through the activities of the CCIO network in all its forms, using the influence and recognition we have increasingly gained. I would like to continue to build on this and establish the CCIO network as the definitive voice of the digital health and care profession.





**Jay Vasani**

**CCIO, North Tees and Hartlepool NHS Foundation Trust**

**BIO:** I am a Consultant Gastroenterologist and CCIO at North Tees and Hartlepool NHS Foundation Trust. My clinical role is that of an NHS Consultant for over 20 years. I am also the CCIO and provide clinical leadership to our digital programme, which has led to the Trust becoming a Digital Fast Follower and recently to a Global Digital Leader. I am a member of the steering committee and Professional Advisory Group for the regional Great North Care Record. I am a member of the Faculty of Clinical Informatics and a graduate of the first cohort of the National Digital Academy.

**MANIFESTO:** I am an NHS Consultant in an acute Trust with 20 years experience and passionate about digital technology in healthcare. Having held held various informatics positions over the years, as CCIO, I currently lead a digital transformation programme in my Trust leading to its nomination as a Global Digital Leader. Regionally, I am part of the ICP digital transformation board and the Professional Advisory Group for the Great North Care Record connecting health and care records for 3.2 million citizens.

If elected I would bring my extensive digital expertise in an acute clinical setting to the CCIO advisory panel. Clinicians like me working in ED and acute medical units need fast, user-friendly, interoperable systems to view and enter information for their patients. When this does not happen, especially on a busy Sunday evening in an acute hospital, clinical colleagues disengage with 'digital'. The National CIO has recently announced 7 success measures ranging from Board engagement to laying smart infrastructure foundations and establishing national standards for designing and delivering safe systems for health and care to support professionals and empower citizens. The Secretary of State has outlined his vision to separate patient data from the application layer for it to flow through the system transforming care pathways. If elected to the advisory panel, I promise to be the voice of acute clinicians in these key policy areas and will constantly strive to push hard for simple, practical solutions to make 'digital' work for them and their patients everyday in the hospital.



**Dr Jim Ritchie**

**CCIO, Northern Care Alliance**

**BIO:** Jim is a kidney doctor and the CCIO at Salford Royal, a GDE site. He has worked on a range of digital health initiatives. These range from EPR optimisation, to system design and implementation, as well as large scale commercial partnerships. He is an alumni of the NHS Digital Academy, and supports trainees interested in digital healthcare.

By developing partnerships between clinicians, technical experts and research teams, Jim has helped the Salford “Digital Factory” to drive innovations. These have focused on solving real world problems and improving care for patients.

**MANIFESTO:** I believe in ‘Digital Through Design’ over ‘Digital by Default’. The rate of change in digital health requires long term thinking and intentional action. As CCIO I try to focus on where digital fits best, not just where digital can fit. Through the Advisory Panel I would hope to use this model to focus efforts and attention to where the greatest impact from digital can be realised.

As a member of the advisory panel, I would have three other key aims.

Firstly - to support the great work delivered to date on creating clear career paths for healthcare staff who want to develop roles within digital healthcare. I will drive forward the conversation about how we develop recognised real world models of learning to support the foundations laid by HEE and the Digital Academy.

Secondly - to help define what progress can or should mean in digital healthcare. For systems I have a bias towards open platforms; for users a passion for interoperability; for patients the ability to own and contribute to their own healthcare.

Thirdly - to advocate for opportunities to improve services and pathways outside of organisational boundaries. Working in both an ICO and a developing hospital group I am faced with the realities and limitations of local optimisations. Starting from what we want our healthcare systems & services to deliver and working backwards from this is a more sustainable approach.



**Dr Jonathan Prosser**

**Chief Clinical Information Officer, Solent NHS Trust and Hampshire & Isle of Wight ICS**

**BIO:** After many years as a child and adolescent psychiatrist, a clinical director of child and family services, and a stint in a medical director role, I have now been given the opportunity to concentrate on a focused digital development role in my region. I spend two days a week for our community and mental health Trust driving a step change in our digital maturity as an organisation, whilst offering a day a week for the newly formed Integrated Care System, leading the digital workforce and the digital citizens agenda, and helping to bring clinical leadership to the emerging digital agenda.

**MANIFESTO:** I'm seeking the chance to represent our patients, our front line staff, and the taxpaying public in the quest to reduce the eye watering inefficiencies inherent in many of our existing applications and systems (as well as exploiting the mouth watering opportunities already making their way into other sectors) by demanding better end user awareness, human friendly design, and improved supplier accountability and partnership, in order to transform the products, services and systems interconnections upon which we increasingly rely to do our work, or to receive our care .

To achieve this would not only eliminate the biggest source of waste in the NHS, but also tap into the greatest opportunity for better outcomes through digitally enabled collaborative care, much smarter use of data, information, and knowledge, replacement of unnecessary, repetitive, slow and error prone human processing with well designed automation, and to ready ourselves for the AI revolution.

I like to think that the combination of my years (and long memory) as a digital evangelist (I got started before Windows was born), my front line clinician experience wrestling with poorly designed systems and woeful data flow (Lloyd George folders anyone?), and latterly my time as a Clinical and Medical Director (with the requirement for political acumen, nuanced communication and influencing strategies, and proficiency in the dark arts of creating silk purses out of sows ears) equip me to play a meaningful part in the CCIO and digital leadership community. I do hope you agree!



**Dr Lia Ali**

**Consultant Psychiatrist, Clinical Adviser NHSX, Fellow - FCI**

**BIO:** I am a Consultant Psychiatrist and have held senior digital health roles in the NHS and industry. I believe in a holistic approach to healthcare system design underpinned by responsible innovation and user centred ethics and safety by design. I am currently Clinical Adviser to the Innovation Team at NHSx and hold Clinical/Strategy Advisory, Chief Safety Officer and Chief Product Innovation Officer roles in industry. Previously I was Clinical Lead for Digital Health Innovation at SLaM NHS FT and Head of Mental Health Strategy in virtual primary care.

**MANIFESTO:** Since joining the CCIO network in 2014 I've seen seismic shifts in the system's understanding, willingness, and ability to engage with digital health. Proposed are three areas of focus to take forward the Digital Health Network's mission:

1. Connection: Optimisation of DHN community diversity Collaboration across health and social care, primary and secondary care, physical and mental health, academia, industry, and NHS is vital. Taking a 'People Powered' approach<sup>1\*</sup> the DHN can continue to be a crucible for this by rapidly extending

and diversifying membership and creating new opportunities for network engagement that coalesce around big issues e.g. professionalisation, standards etc.

2. Creation: Design thinking is key to digital healthcare systems. DHN should promote key design principles through, for example, thought leadership and influence on policy and standards. In particular, the DHN can surface the experience of innovators and implementers.

3. Care: Speaking all the languages for maximum impact on care Responsible innovation relies on commercially viable, digital health systems embedded in a culture of clinical governance, ethics and safety by design accepted by all stakeholders. The DHN is well placed to influence this through targeted campaigns. For example, through cross-sector insight communication such as the interplay between the patient/system need, state of the market, innovation, and regulation.

If elected I would bring connections and insights from frontline, national and international health and social care networks (including arm's length bodies, Royal Colleges and industry), my proven skill set in communication (BBC Academy and broadcast experience) and digital leadership.

1\*People Powered by Jono Bacon



**Dr Manoj Srivastava**

**Consultant Radiologist & CIO, George Eliot Hospital NHS Trust**

**BIO:** 1. Deputy CCIO – GEH NHS Trust Nuneaton 2. NIHR Imaging Champion, West Midlands Registration: 1. GMC 2. Faculty of Clinical Informatics – London - Associate Member 3. CHIME- College of Healthcare Information Management Executives Member of the 3rd Cohort of the NHS Digital Academy – PG Diploma In Digital Health by Imperial College- Completion in July 2021 Winner of the NHS X Skunkworks Dragons Den Style Competition for AI Algorithm - April 2021

**MANIFESTO:** As a member of the Digital Health Network Advisory Panel, I will be dedicating my time and energy, to support digital transformation of the much-anticipated perfect Digital NHS. I believe this journey of million steps has to start with educating, inspiring and bringing along every member

of the NHS (clinical and non-clinical) with the aim to incorporate the Digital DNA in the entire workforce. This revolution is a herculean task and requires vision, focus and dedication to the core. Together we will be able to achieve a data-rich digital universe with the patient at the centre of it, with innate ability to have a seamless two-way communication and be able to control of his/her own health data. With my close association with AI, as someone who is involved in developing an AI algorithm, I am in a better placed position to understand the impact of AI and the various challenges and shortcomings, which any budding AI aspirant might face. If elected, I will be helping our fellow clinicians and health care staff to dream of utopia i.e., digital NHS and will help them to make their dream a reality. This will help to make NHS even better and the undoubtedly best healthcare system in the World.



**Prof Martin Curley**

**Director, Digital Transformation and Open Innovation, Health Service Executive**

**BIO:** Martin Curley is Director of the Digital Transformation and Open Innovation at the Health Service Executive (HSE), helping enable the digital transformation of Ireland's health service. Most recently Martin was Chief Information Officer (CIO) at the HSE. Prior to joining the HSE Martin was Senior Vice President Global Digital Practice at Mastercard. Previously Martin was vice president at Intel Corporation and Director/GM of Intel Labs Europe, Earlier in his Intel career, he held a number of senior positions for Intel in the US and Europe. He also worked in research

**MANIFESTO:** I am leading digital transformation at the HSE in Ireland. My ambition and goal is to transform Ireland from a digital health laggard to a European Digital Health leader by 2025. I lead a small team who act as a catalyst and force multiplier for digital transformation. We work with a broad network of large and small companies to deliver transformational digital change across the Irish Healthcare system. Example solutions we have recently delivered are remote monitoring of Covid 19 and chronic respiratory patients as well as automated respiration rate management. I wrote a book called Open Innovation 2.0 which describes key patterns to drive a structural change in an industry using digital technology. My personal mantra is Dream, Dare, Do. I think I could provide valuable and concrete advice and experience to the CCIO network.



**Dr Max Hodges**

**CCIO, Consultant Anaesthetist, The Dudley Group NHS Foundation Trust**

**BIO:** Max Hodges is an experienced Consultant Anaesthetist and CCIO for The Dudley Group NHS Foundation Trust, based in the West Midlands. He is passionate about facilitating the delivery of high-quality clinical care through digitisation, particularly spanning the communication gap between primary and secondary care. A Bristol University graduate (2000), he has worked within a spectrum of healthcare organisations, in the UK and Australia and is excited to put this experience to work digitally shaping care delivery. Outside of healthcare, Max is an enthusiastic apiarist who annually assures his wife that 'this year' honey sales will cover the hobby costs!

**MANIFESTO:** The NHSx Tech plan has already concisely described the themes of my manifesto – digitise, connect and transform. If elected, I would focus on the following to advance these principles:

- Digitiseo Enhancement and advocacy of 'in-direct care systems' – integration of rosters, job plans, staff records etc which play a significant role in safe delivery of care but are often overlooked.
  - Unlocking data Information must be secure but accessible and not hidden within application silos. Expanding on this, lengthy supplier contracts should be deprecated to incentivise ongoing improvements to the Ui and Ux for clinical users.
  - Connecto Raise the profile of digital exclusion across the populace. Poverty in a digital environment leads to significant healthcare inequality whilst simultaneously degrading population health analysis and outcomes.
  - Transformo Work to forge partnership to commit to data standards so that advanced analytics and AI will work across systems to provide insight.
  - Assist with re-designing multi-agency pathways of care through collaboration and leadership.

The COVID-19 pandemic has highlighted the need to progress the benefits of digitisation within healthcare, from infection control advantages over paper records, through quality of life and efficiency benefits (to healthcare workers and patients) of video consultations to environmental benefits from reduction in transport pollution from hospital visits and commutes. As we emerge from the pandemic, now is the time pause, listen to colleagues and collaborate outside of our own micro-systems to derive the transformational benefits that clinical informatics can offer across the healthcare sector.



**Melissa Andison**

**Associate CCIO and Associate Director of Digital Health Transformation, Surrey and Borders Partnership NHS Foundation Trust**

**BIO:** Hello, my name is Melissa Andison and I'm an Occupational Therapist. I have a diverse clinical background having worked across acute and community health care settings and was an independent digital health consultant for five years for start-ups and transformation programmes. Currently, I'm the Associate Director of Digital Health Transformation and Associate CCIO for a mental health organisation in the South East. As an AHP and women's digital health leader, I am proud to hold these roles. I'm a BCS, RITTech and FCI Associate Member, NHS App Ambassador, Cohort 1 Minerva Programme and Digital Health Academy Cohort 3 student.

**MANIFESTO:** I am proud that my career over the last six years has been nurtured by the Digital Health Network and learning from the Summer Schools and I wish to give back to this community. As an early career CCIO, I will help role model Digital AHP leadership on the Advisory Panel as I believe we can achieve great things with a collaborative and multi-disciplinary mindset.

As an Advisory Panel Member, I will champion the contribution of AHPs and raise awareness of the digital health needs for people living with mental health conditions. I desire to help shape the future of the CCIO Network by welcoming complex and challenging conversations in an open and



transparent forum to facilitate collective problem solving and advocating meaningful change for our industry.

I bring a positive attitude to partnership working on the Advisory Panel between digital health suppliers and providers of healthcare. I will help the CCIO Advisory Panel to foster a culture of inclusion and accessibility to ensure we do not leave anyone behind in the ability to collectively shape the future of digital health. I hope to achieve supporting the Network by setting priorities to shape the professionalism of the CCIO role, developing further learning opportunities for early career CCIOs and contributing to the evolving digital technologies safety and evaluation agendas. My peers should vote for me because I am committed to give the CCIO Network Advisory Panel the energy, passion, and dedication it deserves to continue to thrive in 2021/2022.

#PeopleBeforeTechnology #AHPsIntoAction



**Dr Michael Kriger**

**Junior Doctor, Betsi Cadwaladr UHB**

**BIO:** Michael Kriger is an NHS Junior Doctor working as an Anaesthetist. His professional background in IT gives a rare perspective on the challenges of delivering digital change in healthcare. He helps run NHS Hack Days a grassroots event that helps attendees appreciate the possible and how to approach innovating within their organisations.

**MANIFESTO:** You may remember me from last Summer Schools "Up and coming" digital leaders panel. I am a member of the Faculty of Clinical informatics (by peer-review) with a professional background in IT and ongoing frontline clinical role. As someone early on in their informatics career I hope to offer different/fresh perspectives to the advisory panel and help gently challenge the status-quo while being able to offer my technical expertise.



**Phil Stamp**

**CCIO/ Regional Clinical Safety Officer, Great North Care Record and Northumbria Healthcare NHS Foundation Trust**

**BIO:** I am an Emergency Medicine Consultant in the North East of England, a CCIO since 2014, CSO since 2016, and was Chair of my Trust Clinical Records Committee from 2013 to 2020. During this time I'm particularly proud of the roll out of a track & trigger system with real time patient flow and task management; the replacement of our Trust PACS system; polishing our single-sign-on Clinical Portal, and an EPMA. I've been lucky enough to be the Regional CSO for the Great North Care Record since October 2020, helping to shape this fantastic resource and loving the regional collaboration.

**MANIFESTO:** I have had a longstanding Lead role for my Trust's Clinical Guidelines and improving access to these lead to my interest in digital systems. Now I am frequently told by my junior staff that it is the best they have experienced in the North of England. I am happy that I've been able to combine this interest with my clinical career in order to improve the healthcare our patients receive. Being a CCIO has impacted many more patients' care than I could ever have achieved as an individual clinician. I'm a strong believer in trying to make accessing information easier and making the supporting infrastructure for staff as seamless as possible so we can concentrate on the important health and social care stuff! I have a particular interest in safety and in my work as a CCIO and CSO, so I'm constantly pushing suppliers for greater awareness of safety standards in the NHS. In my experience, as an Emergency Medicine Consultant, I frequently see patients from a Social Care environment and feel that these individual's data have, for too long, been in separate silos. I would particularly like to see a greater emphasis on joining Health and Social care information and am proud to say that I'm helping that in some small part through my CSO work in the Great North Care Record. I am grateful for the nomination and look forward to the opportunity to add my experience and knowledge to the advisory panel and help shape future direction.



**Ramandeep Kaur**

**Lead EPMA Pharmacist, Barking, Havering & Redbridge University Hospitals NHS Trust**

**BIO:** I am an enthusiastic individual, who is passionate about digital innovation, clinical informatics, patient and medicines safety and developments in technology. My passion stems from my first role as an EPMA Pharmacist in 2014. I am currently a Lead EPMA Pharmacist at Barking, Havering and Redbridge NHS Trust (BHRUT) and have over six years experience in the digital field. I am currently part of the Digital Health.London Pioneer Fellowship Programme and a member of the Faculty of Clinical Informatics and Shuri Network. My ambition is to become a Consultant Pharmacist in Digital Innovation and Clinical Informatics/Chief Clinical Information Officer.

**MANIFESTO:** Ramandeep Kaur - I would be a great addition to the CCIO Network Advisory Panel as I am an enthusiastic pharmacist who has an aspiration to promote digital transformation to aid the delivery of excellent quality care for our patients. I am the Lead Electronic Prescribing and Medicines Administration (EPMA) Pharmacist at Barking, Havering and Redbridge University Hospitals NHS Trust and have led on the deployment of an EPMA system to over 120 clinical areas in a year in a previous role. In my opinion, the digital market is fast expanding and as a shielding pharmacist during the Covid-19 pandemic I have adapted to working from home by using remote technologies. I am also excited by the fantastic digital innovations which have been introduced across the different disciplines within pharmacy and healthcare during the pandemic.

I am looking for a new opportunity in my career and I am keen to get involved at a national level for my profession and admittedly, I am not a CCIO but I recognise there is currently significant variation

nationally for digital in pharmacy and would love to work with others to bridge the gap and be a leader and provide expertise in this field whilst taking the time to listen and learn from the experiences of others. My personal interests include running, writing poetry, puzzles and collecting stationery! I hope you strongly consider voting for me to join the panel and be a 'voice for all'.



**Richard Slater**

**CCIO, The Rotherham NHS Foundation Trust**

**BIO:** Richard Slater is a Consultant General and Colorectal Surgeon at Rotherham Hospital. He has clinical interests, in laparoscopic and minimal invasive surgery techniques, in the fields of general surgery and coloproctology. He has an interest in Peri-Operative Care optimisation and Enhanced Recovery. He has been Chief Clinical Information Officer since 2013, and has clinically led the turnaround of the Trust's EPR implementation. He is actively engaged in delivering the Trust's digital strategy. He was part of Cohort 1 of The NHS Digital Academy.

**MANIFESTO:** I have always had a strong interest in computers and informatics, as an enabler for delivery of clinical care. Many years ago I was responsible for the implementation of an electronic reporting system in the Endoscopy department. Since then I have continued to engage with digital development of services, and became CCIO at Rotherham Foundation Trust several years ago. I was in Cohort 1 of the NHS Digital Academy, and learned much from being part of that journey. I believe that IT can be a major enabler of quality clinical care. I am keen that we engage with clinicians during IT developments, and espouse user centric design principles, and iterative development cycles to deliver solutions quickly and effectively.

My focus is helping clinicians to use digital tools to deliver quality services to patients and use technology to leverage improvements, on the front line, using evidence based best-practice clinical decision support tools wherever possible. In my Trust I have established a digital clinical leadership team to help in the delivery of our IT Strategy, driven through mandatory training in EPR for all clinicians, Chair the Digital Transformation Committee and been SRO on a number of project including eObs, Clinical Noting, EPMA, and Results Acknowledgement. I hope that my experience, enthusiasm and creative thinking would be a valuable asset to bring to the panel.



**Dr Rob Waller**

**Digital Mental Health Lead and Consultant Psychiatrist, NHS Lothian**

**BIO:** I am a General Adult Psychiatrist with 15 years experience working in Edinburgh. I lead our Health Board's Mental Health Digitisation Programme. We don't tend to have CCIO roles in Scotland, but if this were a Mental Health Trust south of the border then this is an equivalent role. I am on the Informatics Committee of the Royal College of Psychiatrists and on the Scottish Digital Mental Health Board.

**MANIFESTO:** To raise the profile of clinical informaticians in Scotland.

To share lessons learned in other specialties to Mental Health.

To advocate that planned digital initiatives should work in these areas.

I am passionate about the place of technology in mental health services and solutions that work for all parts of the UK. The technical solutions are often there - instead it is more about finding the will to change and the desire to collaborate. Freeing up patient data from acute healthcare systems is a key part of this - for sharing locally or even beyond. The voice of the patient or service user is especially strong in mental health, with a similar imperative that we empower people to own and manage their own mental health.



**Dr Robert Allcock**

**Consultant Chest Physician and Acute Physician, Gloucestershire Hospitals NHS Foundation Trust**

**BIO:** After initially studying engineering at Cambridge, I became a consultant in Gateshead in 2004. There I served as Divisional Director, Clinical Safety Officer, Associate Medical Director, and CCIO. I trained in lean with Virginia Mason hospital of Seattle under Gary Kaplan in Japan. I am a graduate of the North East Leadership Academy. In Gateshead we successfully procured and deployed Ordercomms (2010), replacement PAS/EPR (2012), PACS 2007 and 2015, ePMA (2015), eObs (2015), and joined the Digital Exemplar program. Gateshead is now rated Outstanding by the CQC. In 2020 I relocated to Gloucestershire to live with my new partner Clare.

**MANIFESTO:** Implementing digital systems in hospitals is difficult; it's easier to disrupt care than to improve it. Understanding how to add value, and how to avoid traps, is my core interest. I see digital systems as a way to eliminate waste from the value stream of care. "Going paperless" is not the goal; our objective is to improve safety, effectiveness, and patient experience through reducing waste – which usually means less paper. I have a lot of experience of procurement, deployment, and development of clinical IT systems, including membership of the advisory panel for the Great North Care record.

The best ideas come from people doing the day job. The role of CCIO is to listen to clinical colleagues, technical colleagues, primary care and commissioning colleagues, to spot synergies, and to see ways to reduce waste and improve visibility of what needs to be done next. And then make that happen. I'm passionate about the importance of culture in successful organisations; I see visibility of information, and how information is represented, as powerful tools to enable people to improve care.

Whilst our goal of quality are shared across the NHS, sometimes initiatives from the centre produce paradoxical harm through mistaken assumptions, or through clumsy responses at hospital level. I

want to serve on the CCIO advisory panel to help bridge that gap, to bring my experience of lean improvement to share what worked and what didn't, and to help shape policy to make the NHS even better.



**Ronke Adejolu**

**Associate CNIO-Community Nursing, NHSX**

**BIO:** I work in strategic leadership & digital transformation in NHS. I have a diverse portfolio of work across the NHS, Private Healthcare, AHSN, Management Consultancy & Telecommunications. I have worked in the digital/IT health tech for 15 years leading & managing complex clinical systems deployment across healthcare settings. I am passionate about people transformation & to ensure the frontline healthcare professionals play active roles & lead the design, implementation, adoption, transformation subsequent utilization of usable, scalable & sustainable digital health technology & solutions. I am a nurse, with a background in health services management and an Associate CNIO at NHSX.

**MANIFESTO:** I struggled initially to put myself forward for because I felt a part of my professional background put me in a box. Following a conversation with my mentor & a personal reflection, I decided, this is the right table for me. I am an aspiring CCIO, I will bring diverse knowledge, varied experience, perspective to the network. I have led multiple digital health tech deployments across the NHS & private sector with experience of what works, how we can harness, embed, adjust & embrace a common goal for patient safety. I am passionate about people, processes & digitally enabled tech, it needs to work for clinicians & patients. I want to continue to encourage a cultural shift & focus on reducing the burden of clinicians. I want to ensure we keep building a learning culture, sustainable digital transformation goes beyond adopting new tools. It requires a culture change & reorientation around more data-driven care models, a digital ready workforce confident in the use of digital technology for the provision & delivery of standardised & joined up care. I am further developing my leadership skills as a Topol digital fellow, I will continue to be a role model, encourage & inspire other aspiring CCIO's & women of colour who are potentially at the start or considering roles in digital health. I am keen to work alongside CCIO's on the network to provide valuable insight & service to members, facilitate & advocate for clinical leadership & involvement in digital health at all levels.



**Venkatesh Kairamkonda**

**Consultant Neonatologist, University Hospitals of Leicester NHS Trust**

**BIO:** Venkatesh is a full time consultant since 2005 in neonatal intensive care at University Hospitals of Leicester (UHL) NHS Trust and clinical digital lead for neonatal electronic patient record (Badgernet). He has been a long standing member of safety and quality board and IM&T and provided leadership to many digital transformational projects. He was part of the advisory team to procure and award contracts to right UHL EPR, EDRM project and digital dictation system leading. Under his leadership the neonatal service has embraced digital working. Currently he is leading on implementing ePMA system in women and children directorate

**MANIFESTO:** Venkatesh is neonatal intensive care consultant with interest in digital transformation projects so as to provide better and safer care to children. He has completed his NHS digital academy and share that knowledge in connecting primary and secondary care systems so that integrated care system goals can be realised. He is keen to provide leadership and guidance in digitising neonates and paediatrics particularly as there is limited activities happening in this speciality. However he can also contribute to the wider digital transformation activity happening in the health and social care community. Venkatesh can provide strategic direction as an advisory panel member and share his implementation practical transformational change experience and contribute to develop applications using deep learning techniques and data analytical methods. There has to be more to enthusiasm than the skill set for digital healthcare. If you are looking for a fresh and innovative approach to digital healthcare, you can vote for Venkatesh as he is a bubbly, energetic and enthusiastic leader who wants to make a difference in the work he is doing and bring value to the organisation and the society.





**Dr Zaki Almallah**

**Council Member, Faculty of Clinical Informatics**

**BIO:** I am a very active Council Member of the UK Faculty of Clinical Informatics (FCI). This experience would enable me to give the appropriate advice on the CCIO advisory panel. I am a clinician, and will always be, for 14 years as a Consultant Urologist at University Hospital Birmingham NHS Foundation Trust – The Queen Elizabeth Hospital, I witnessed the exciting time of the digital transformation of this NHS global exemplar acute trust. Currently, I am a surgeon at Cleveland Clinic Abu Dhabi- a fully digitalised Institution. My research focus is using AI algorithms to enhance patient care and experience.

**MANIFESTO:** The last twelve months brought us together with technologies that preserved our personal and working lives. Our pivotal role as digital leaders is to galvanise digital health skills. We will need to embrace all clinical disciplines and embed professionalism into the workforce through clearer informatics career paths for doctors, nurses, clinical coders, dentists, social workers and pharmacists. Developing the already very successful Digital Health Network and sharing ideas are vital for all for us to achieve this goal.