

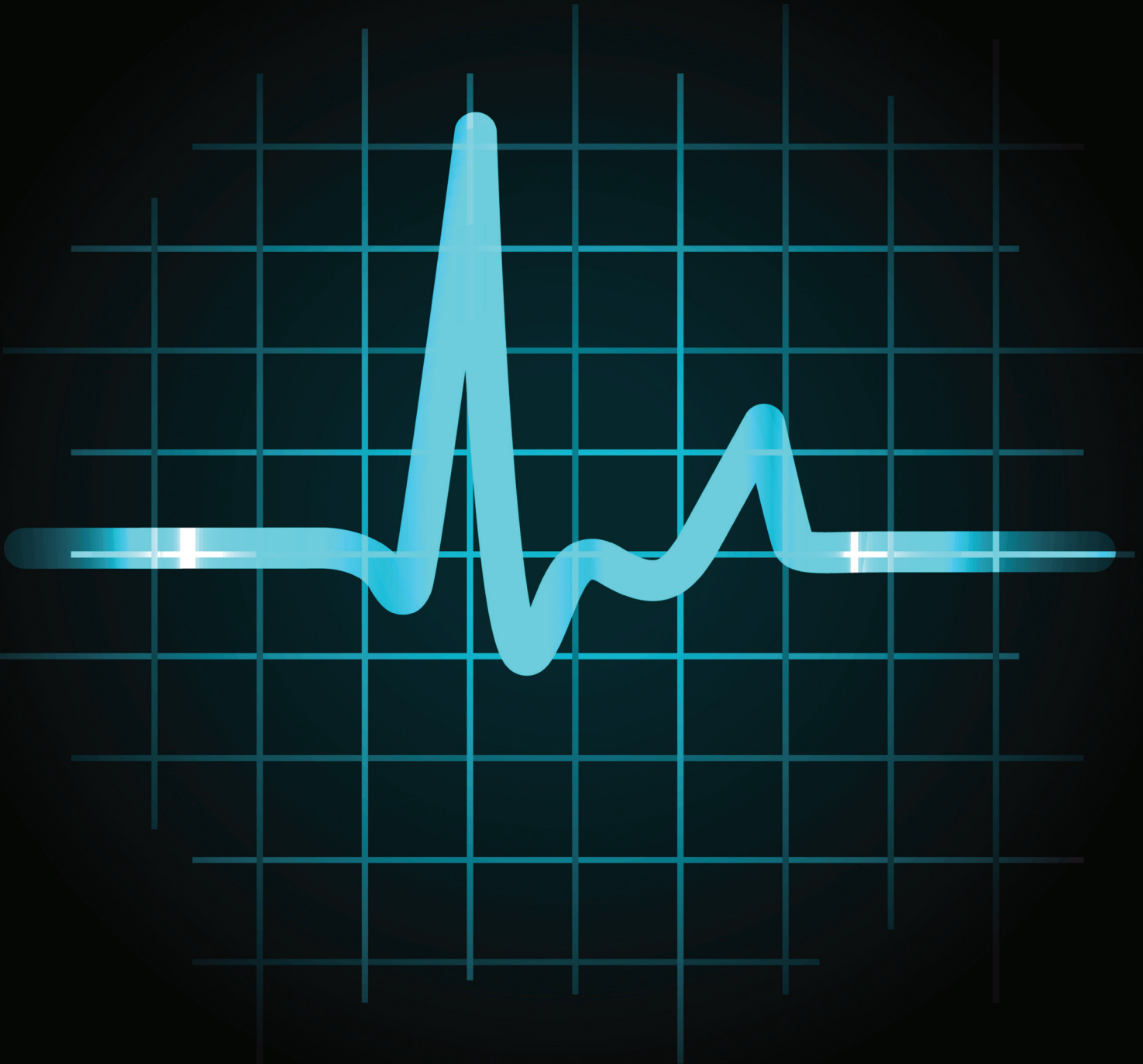
FOR HEALTHCARE LEADERS

HSJ

**CLINICAL
LEADERS**



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VEREDUS

Dave West



This is the third year of *HSJ's* 100 Clinical Leaders. It is only right and proper that, as clinical leadership cements itself at the heart of healthcare, this celebration has become a firm fixture in our calendar.

In your hands is a supplement which highlights 100 individuals whose clinical background is shaping the work that they do. These are people who are taking the experience they have had as a doctor, a nurse or an allied health professional and using it to influence healthcare.

For many, that influence is at the policy level: these are the people who have had the ear of politicians during the run up to the general election and will continue to have it in the coming months, or have pressed for major public health policy shifts. For others, it is influence at the service level – those who will be charged with delivering the sort of transformation detailed in the *NHS Five Year Forward View*. Others still are at the cutting edge of science and research, using their clinical knowledge to transform treatments for patients.

Together, these are people who tell the tale of where clinical leadership stands today in the health service. We see an NHS in which the clinically qualified are taking a leading role, even as some argue that clinicians are insufficiently represented at the most senior levels in healthcare providers. It is interesting to note that only four of this year's *HSJ* Clinical Leaders are trust chief executives, for example.

The person at the top of our list remains unchanged – Professor Sir Bruce Keogh has been in number one position for each of the three years we have published this supplement – but there are plenty of new names here.

As ever, our judges faced a daunting task. The prestigious panel engaged in serious and energetic debate. We thank them for their efforts, and await with interest your thoughts on their decisions. ●

Dave West is senior bureau chief, commissioning and performance, HSJ



These are people who tell the tale of where clinical leadership stands today in the health service



THE JUDGES

Kamran Abbasi international editor, *The BMJ*

Professor Timothy Evans medical director and deputy chief executive, Royal Brompton and Harefield Foundation Trust

Professor Sir David Fish managing director, UCLPartners

Professor David Haslam chair, National Institute for Health and Care Excellence

Dr Timothy Heymann non-executive director, Monitor

Samantha Jones director of new care models, NHS England

Des Kelly executive director, National Care Forum

Professor Alison Leary chair of healthcare and workforce modelling, London South Bank University

Dr Mahiben Maruthappu senior fellow to the chief executive, NHS England

Simon Potts director, healthcare, Veredus

Theresa Shaw chief executive, Centre for Nursing Innovation

Annette Sergeant director and head of healthcare, Veredus

Sir Richard Thompson past president, Royal College of Physicians

Dr Sylvia Tang group medical director, Priory Group

Dave West senior bureau chief, commissioning and performance, *HSJ* (chair)

Commissioning editor
Nosmot Gbadamosi
Writer Claire Read
Project assistant
Tom McFarland

HOW HSJ CLINICAL LEADERS IS JUDGED

For the third year of *HSJ* Clinical Leaders, we sought to identify individuals whose clinical background clearly influences the work that they do. We were seeking those who have made a significant impact on health service policy, healthcare delivery or clinical advances in the last 12 months or who were likely to do so in the next 12 months.

Our long list was created from March to May through a combination of a public nomination process and input from an expert panel. Our judges reviewed the list and added their suggestions, deciding on the final 100 at a judging evening held in May. During this session, they also ranked the

top 20 clinical leaders among this 100.

Judges considered the following criteria in coming to their decisions:

Political influence To what extent has the individual influenced healthcare policy nationally in the run up to the election? To what extent is he or she likely to influence policy in the coming 12 months?

Service transformation To what extent has the individual influenced improvements in services as envisaged in the *NHS Five Year Forward View* or are likely to do so in the coming 12 months?

Innovation To what extent has the individual used

his or her clinical leadership to influence innovative solutions in health and care?

Influence in these areas is highlighted in the supplement and our online graphic using the colour coded symbols below.

Judges who were nominated excluded themselves from the selection process. However, in the interest of producing a credible list, judges who met the criteria as clinical leaders were considered by HSJ editor Alastair McLellan after the judging process.

 **POLICY**

 **INNOVATION**

 **TRANSFORMATION**

1 Professor Sir Bruce Keogh

MEDICAL DIRECTOR, NHS ENGLAND



HSJ Clinical Leaders is now in its third year and it is the third year that Sir Bruce has sat atop it. No one would argue against this former cardiac surgeon being named England's most important clinical leader, other than perhaps the

man himself. This represents both Sir Bruce's incontrovertible influence, and the modesty with which he wields it.

Seven day services and emergency care have remained a key focus for Sir Bruce this year. Promises on the former found their way into the Conservative manifesto, and have become a

theme of many post-victory speeches by David Cameron. On the latter, the new care models outlined in the *NHS Five Year Forward View* drew heavily on the recommendations of the care review led by Sir Bruce.

This year, he will take on another review: this time of the professional codes of practice for doctors and nurses.

Instigated by Jeremy Hunt, it is in part a reaction to the report on failings at University Hospitals of Morecambe Bay Foundation Trust. Mr Hunt will be optimistic that the review will have an impact.

In February, statistical analysis by healthcare information body Dr Foster suggested that the Keogh "special measures" trusts have since seen lasting falls in their mortality rates.



No one would argue against him being England's most important leader, other than perhaps the man himself



2 Professor Sir Mike Richards

CHIEF INSPECTOR OF HOSPITALS, CARE QUALITY COMMISSION



Sir Mike Richards and Dame Sally Davies (3) swap places in this year's *HSJ* Clinical Leaders, with the chief inspector of hospitals moving up a slot to number two. The new inspection model is now 18 months old, and by the end of the year Sir

Mike hopes that all hospitals will have been through the regime – receiving individual ratings for urgent and emergency services, medical care, surgery, critical care, services for children and young people, end of life care and outpatients and diagnostic imaging.

He contends that this constitutes a better view

of NHS quality than ever before, and certainly the process is more rigorous. There is also no doubt over his determination to improve the inspection regime. Consistency remains a problem – though one about which Sir Mike is refreshingly open. He used an *HSJ* webinar to call on trusts to help address the issue by releasing their top clinicians to lead CQC inspections.

The introduction of the fit and proper person test last November introduces another responsibility for Sir Mike. As is characteristic, it is one he plans to discharge sensitively – he told *HSJ* he did not think it right "to name individuals at a triage stage" – but with a clear focus on quality. He argued that the shortage of NHS senior managers was no reason not to pursue action against those about whom concerns are raised.

3 Professor Dame Sally Davies

CHIEF MEDICAL OFFICER FOR ENGLAND, DEPARTMENT OF HEALTH



Dame Sally can surely take some of the credit for the recent, belated appearance of mental health at the top of the political agenda.

It is no coincidence that the chief medical officer's most recent annual report, published

in late 2014, focused on the longtime Cinderella service.

In it, she called for more funding and much greater emphasis on mental health and wellbeing.

The report also suggested the introduction of waiting time targets.

Less than a year later and such targets are now in place for access to talking therapies and for people who have experienced a first episode of psychosis. It is evidence of the extent to which, when Dame Sally speaks, people sit up and pay attention. For the past two years, she has emphasised her support of the creation of babies with DNA from two women and one man – dubbed "three-parent IVF" – as an option for women with mitochondrial disease. In February, MPs and the House of Lords passed legislation to legalise the technique.

4 Professor Steve Field

CHIEF INSPECTOR OF GPs, CARE QUALITY COMMISSION



Healthcare is a world in which many firsts are claimed, often inaccurately. But Professor Field can take credit for something genuinely new: the

nationwide process to inspect the standards of care provided by family doctors. Its full launch has not been without its teething problems.

Almost as soon as the first inspection reports were published in November, there were concerns about inaccuracies. One in 10

GP practices were assigned the highest risk rating, but the revelation of mistakes in the calculations led to an apology. The use of banding has now been dropped, and Professor Field promises to speak not of risk but of variation.

What was perhaps more revealing was the one inspected practice declared to be providing outstanding services across the board. Salford Health Matters runs three surgeries in Greater Manchester, prioritises prevention, and runs an extended set of services. By highlighting it, Professor Field played an important role in mapping out a post-forward view model of primary care. Expect him to continue to do so.

5 Dr Sarah Wollaston

MP FOR TOTNES AND CHAIR OF HOUSE OF COMMONS HEALTH SELECT COMMITTEE



Sarah Wollaston first broke into the top ranks of *HSJ* Clinical Leaders last year. Back then we wrote that “if she continues her spirit of taking a stand, expect to see her here again next

year”. She has. Dr Wollaston has always insisted that she is not a “tribal politician”. Her continuing willingness to publicly speak out when she disagrees with her party leader constitutes compelling proof.

In recent months, she passionately opposed David Cameron’s suggestion that

those who cannot work due to obesity or substance misuse should have their benefits cut if they refuse treatment. She suggested the plan was “illegal and unworkable”.

The former GP is also unconvinced by pledges to institute 8am to 8pm and weekend GP access by 2020.

It has not been entirely possible for Dr Wollaston to sidestep tribalism in the run up to the general election – the select committee’s usually routine annual report on health and social care expenditure became bogged down in party political arguments – but with 7 May out of the way, she should return to her usual mode of operation: passionate views based on personal clinical experience.

6 Professor Cathy Warwick

CHIEF EXECUTIVE, ROYAL COLLEGE OF MIDWIVES



A jump of more than 10 places for Professor Warwick, who was ranked 18th in last year’s *HSJ* Clinical Leaders. The change largely represents the importance of this

former midwife as the NHS responds to the findings of the Morecambe Bay investigation report. Published in March, Dr Bill Kirkup’s review concluded that serious failures in clinical care led to unnecessary deaths of

mothers and babies. It also spoke of a dominant group of midwives whose “over zealous” pursuit of natural childbirth “at any cost” sometimes led to unsafe care.

That means Professor Warwick will need to work hard to prevent members of her profession becoming demonised in the way nurses did post-Mid Staffordshire. Morale is already challenging. Midwives went on strike for the first time in the history of the college last October, protesting over pay, and there have long been concerns over staffing levels. Many eyes will be on the RCM – and on Professor Warwick – to help pick the profession back up.

SIMON POTTS ON GREAT LEADERS

“ The move towards a 24/7 clinically led sustainable NHS along with the impact of the 2012 Health and Social Care Act is placing greater demands upon our clinical leaders. In the current climate, to deliver what’s right for patients, we need to optimise the opportunities for clinical leaders to respond with pioneering, contemporary and innovative solutions while creating and shaping the environments for change to happen.

Providers, once sovereign organisations, now operate on a changing landscape made more complex by increased regulation, changing commissioning priorities, workforce challenges, risk management and financial constraints. Consequently, amongst organisational leaders, the appetite for service integration and budget devolution is building, recognising the need for ‘whole system’ collaboration as the enabler to providing high quality health and social care services that wrap

‘Building consensus will be more effective than beating the enemy into submission’

around patients’ needs.

Future sustainability of the NHS is firmly dependent upon the quality of its future clinical leadership and whole systems working together. For trail blazing, innovative clinical leaders with the ambition and capability to lead beyond an organisational level, your moment to thrive is here.

Ambitious clinical leaders will need to develop leadership skills sooner than in previous generations through taking on several leadership responsibilities in parallel. This will enable progression up the ladder of influence more quickly, rather than simply making sequentially progressive promotions. Learning from leadership mistakes will be an important aspect of mastering authentic leadership and clinical leaders will need to develop exceptional influencing, team working and negotiating skills to become effective system leaders. This is while maintaining their clinical credibility.

Above all, success will be judged by “what and how” change is delivered. Building consensus by working in partnership will be more effective than beating the enemy into submission. Delivering the right results in the right way will have the most significant impact on clinical careers; get it right and opportunities are plenty, get it wrong and the opportunities may be hard to find.

Simon Potts is director of healthcare, Veredus



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7 Dr Clifford Mann

PRESIDENT, ROYAL COLLEGE OF EMERGENCY MEDICINE



Clifford Mann enters the top 20 ranks for the first time, a representation of how central he now is in the discussion over emergency care.

During a winter in which A&E performance against targets was the worst on record, his was a powerful voice defending his colleagues. He has argued that the key issue was not A&E departments but inadequate flow through hospitals, which saps morale and leads to problems with staff retention.

“The risk to patient care in the future will not be whether they’ve met the four hour target or missed it by five minutes, it’s whether there are experienced clinicians to see them in the emergency department when they first attend,” he told *HSJ* in April.

He has proved adept at playing the media game – a post-Christmas suggestion that police crack down on binge drinking to reduce pressures on A&E was a perfectly timed headline-grabber – but the judges recognised him as “doing a huge amount to transform emergency care”.

As A&E departments begin to approach winter he will be called on to do a huge amount more.

8 Dr Kate Granger

CONSULTANT IN ELDERLY MEDICINE, MID YORKSHIRE HOSPITALS TRUST



Dr Granger has already been named one of *HSJ*'s Most Inspirational Women, a Social Media Pioneer, and a member of 2014's *HSJ*100.

Now she joins our Clinical Leaders – and right at the top of the list. It is difficult to overstate the impact she has had. Diagnosed with a rare and terminal cancer in 2011, she soon started writing about her experiences of moving to “the

other side” – from doctor to patient. One of the major themes is the difference small acts of compassion can make.

Her #hellomynameis campaign – which encourages staff to introduce themselves and their role to patients – built on that thought, and has become a truly national movement embraced by national political figures. Later in 2015, NHS Employers will run the Kate Granger Awards for Compassionate Care for the second year. Despite her impact, Dr Granger remains a humble presence. When she got the letter announcing her MBE, she said: “I thought I'd been chosen for jury service”.



One of her major themes is the difference small acts of compassion can make



9 Dr Geraldine Strathdee

NATIONAL CLINICAL DIRECTOR FOR MENTAL HEALTH, NHS ENGLAND



One imagines that the way politicians fell over one another to make promises over better mental healthcare in the run up to the general election must have been

immensely gratifying for Dr Strathdee.

On the other hand, she could surely be forgiven for feeling a simultaneous hint of irritation – what on earth has taken them so long? This consultant psychiatrist has been a leading figure in mental healthcare for more

than 20 years, determined to push parity of esteem.

In two years at NHS England, she is widely recognised as having more or less single-handedly kept mental health at the top of the agenda. Her tenacity is widely admired and if politicians' interest might have been a mixed blessing, the announcement of increased mental health funding and the Mental Health Taskforce is surely unreserved good news.

The taskforce – which will be designing a new five year strategy for mental health – will put the sector, and Dr Strathdee, at the centre of delivering the sort of changes envisaged by the forward view.

10 Professor Keith Willett

DIRECTOR FOR ACUTE EPISODES OF CARE, NHS ENGLAND



A slight climb up our Clinical Leaders ranks for Professor Willett, who last year occupied 14th position. Few would have envied him as he sought to navigate the

A&E “crisis”, which was rarely out of the headlines this winter. It is his use and explanation of data which has helped

politicians and other leaders understand the true nature of the problem: that it is system wide.

He has coupled his explanation of the issue with suggested solutions, embodied in the urgent and emergency care review and the forward view.

Urgent and emergency care is to undergo a “complete redesign” within three years, according to a recent announcement by NHS England’s chief executive, and no doubt Professor Willett will be at the helm of this transformation.

11 Dr Fiona Godlee

EDITOR, THE BMJ



A second year among the top ranks for former general physician Dr Godlee. Her guiding aim, she says, is to “improve health and healthcare internationally and

to help doctors make better decisions wherever they are in the world”. She is not afraid to speak up about sometimes controversial issues.

Last year, *The BMJ* began an international

campaign against corruption in healthcare from which this year Dr Godlee made very clear the UK was not exempt.

In an editorial, she called for a register of financial interests, following a *BMJ* investigation suggesting UK doctors were receiving covert financial incentives to refer patients to private hospital groups.

The journal stepped into the general election debate too, publishing an open letter in which Dr Godlee spoke of an NHS “stretched close to breaking point” which was “still reeling” from the “costly and distracting reforms” of the 2012 Health and Social Care Act.

12 Professor Viv Bennett

CHIEF NURSE, PUBLIC HEALTH ENGLAND



Viv Bennett is not a new name to *HSJ Clinical Leaders*, but she makes her debut within the top 20. A big reason is the recent change in her role. Having been director of nursing at the Department of

Health and Public Health England, in April she took on the new role of chief nurse for PHE and the title of chief government adviser

on public health nursing and midwifery. It was a move welcomed by our sister title *Nursing Times*, which argued that “giving nursing a strong voice in this arena can bring about tangible, positive change in the health of the nation, and ensure that NHS services face less demand in the future”.

Certainly Professor Bennett has long espoused the benefits of prevention, and embedding her belief that all nurses should consider public health as part of their practices will be key to realising the ambition of the forward view.

Top 10 women



Dr Maureen Baker
Chair, Royal College of GPs

Professor Viv Bennett
Chief nurse, Public Health England

Jane Cummings
Chief nursing officer, NHS England

Professor Dame Sally Davies
Chief medical officer, Department of Health

Dr Fiona Godlee
Editor, *The BMJ*

Dr Kate Granger
Consultant in elderly medicine, Mid Yorkshire Hospitals Trust

Dame Julie Moore
Chief executive, University Hospitals Birmingham Foundation Trust

Dr Geraldine Strathdee
National clinical director for mental health, NHS England

Professor Cathy Warwick
Chief executive, Royal College of Midwives

Dr Sarah Wollaston
MP for Totnes and chair, House of Commons health select committee

13 Jane Cummings

CHIEF NURSING OFFICER, NHS ENGLAND



Two and a half years on from the launch of her nursing strategy *Compassion in Practice* – known largely for its 6Cs of care, compassion, competence,

communication, courage and commitment – Jane Cummings is confident that it has made a difference.

Early survey data from Ipsos MORI

suggested an upward trend in the number of patients reporting they were treated with compassion post-strategy.

A formal academic evaluation is now being conducted. She admits there is more to be done to make the 6Cs truly universal, however, and is also continuing a focus on safe staffing levels. Earlier this year, *HSJ* learnt that Ms Cummings had written to all trusts about the introduction of a new safe staffing indicator, which will sit alongside a recommended twice yearly assessment of the time nurses spend giving direct care to patients.

14 Sir Mark Walport

UK GOVERNMENT CHIEF SCIENTIFIC ADVISER



During his time as director of the Wellcome Trust, Sir Mark had a significant influence on medical research. In just over two years as chief scientific adviser to

the UK government, he has shown a clear desire to keep such research high on the agenda. It is one shared by the *NHS Five Year Forward View*, which suggests ways to accelerate the adoption of breakthroughs in

treatments and diagnostics. Sir Mark has welcomed the impending introduction of test bed sites to trial technologies and innovations that might improve care.

The potential of digital is one he explored in *The Internet of Things: making the most of the Second Digital Revolution*, the 2014 report he authored, in which he argued digital technologies “could help shift healthcare from cure to prevention, and give people greater control over decisions affecting their wellbeing. In turn, these technologies could integrate the delivery of care, improve clinical outcomes and yield considerable cost efficiencies for the NHS.”

15 Colonel John Etherington

NATIONAL CLINICAL DIRECTOR FOR REHABILITATION AND RECOVERING IN THE COMMUNITY, NHS ENGLAND



A consultant in rheumatology and rehabilitation, Colonel Etherington led the development of complex trauma rehabilitation services during the Iraq and Afghanistan

conflicts. His successes there led him to being appointed to his role at NHS England, where he is charged with nothing less than transforming rehabilitation services. He is keen for these to be seen as integral rather than a bolt-on, and is driving understanding of how timely input can help patients recover, often away from hospital. His entry on this list reflects how crucial his work is as new care models aim to shift care away from hospitals.

GPs



Dr Charles Alessi
Co-chair, National Association of Primary Care

Dr Maureen Baker
Chair, RCGP

Dr Mike Bewick
Deputy medical director, NHS England

Dr Nav Chana
Chairman, National Association of Primary Care

Dr Amanda Doyle
Chief clinical officer, Blackpool CCG

Sir Sam Everington
Chair, Tower Hamlets CCG

Professor Steve Field
Chief inspector of GPs, Care Quality Commission

Dame Barbara Hakin
National director of commissioning operations, NHS England

Dr Amir Hannan
GP at Houghton Thornley Medical Centres

Dr Nick Harding
Chair, Sandwell and West Birmingham CCG

Dr Steve Kell
Chair, Bassetlaw CCG

Dr Margaret McCartney
GP and health writer

Dr Peter Melton
Chief clinical officer, North East Lincolnshire CCG

Dr Chaand Nagpaul
Chair, GP committee, BMA

Dr Hugh Reeve
GP and chief clinical officer, Cumbria CCG

Dr John Ribchester
GP at Whitstable Medical Practice

Dr Richard Vautrey
Deputy chair GP committee, BMA

Dr Sarah Wollaston
MP for Totnes and chair, House of Commons health select committee

16 Dame Julie Moore

CHIEF EXECUTIVE, UNIVERSITY HOSPITALS
BIRMINGHAM FOUNDATION TRUST



Another year at the top of *HSJ* Clinical Leaders for Dame Julie, one of the NHS's great characters and its most prominent chief executives. A nurse who spent 10 years in clinical

practice before moving into management, she has regularly been ahead of the game on developing new ways to deliver care. Back in 2013, she spoke of the potential for the trust to acquire local GP practices. Meanwhile the

organisation's "buddying" arrangement with Medway Foundation Trust provided an early trial of the potential of hospital chains over a large geographic area – though she admitted to *HSJ* that it was not an unqualified success: "It was testing the concept of whether you can operate [with a trust from a] distance and I think over time that it will be possible but not as a first go."

It is an example of her refreshingly outspoken honesty, mirrored too in the *HSJ* Commission on Hospital Care for Frail Older People, which she chaired – and which argued that greater integration would not save money.



17 Dr Mark Porter

CHAIR, BRITISH MEDICAL ASSOCIATION COUNCIL



The profile of Mark Porter in the run up to the election, and that of the BMA, was high. That was in part due to an interview with *The Guardian*, in which he argued that any winning

party would be tempted to bring in NHS

charges. It was a clever political move, and a guaranteed way of bringing attention to the concerns of the BMA, even if its juxtaposition with their simultaneous campaign for the depoliticisation of the NHS debate might have provoked a wry smile in some quarters. With the election out of the way, and a clear government in power, Dr Porter's work is far from over: expect him to be a prominent voice in the debate over how to introduce seven day services.



Expect Dr Porter to be a prominent voice in the debate over how to introduce seven day services



18 Dr Maureen Baker

CHAIR, ROYAL COLLEGE OF GPs



A fall from fifth position last year to 18th this, but Dr Baker remains in the top ranks of our Clinical Leaders nonetheless. As the public face of general practice,

she has continued to speak forcefully about what she sees as the need for more

resources. She has welcomed the forward view's proposed solutions, saying the college particularly supports GP practices working within federations. In a December interview with *HSJ*, Dr Baker contended that the models were needed because "the people we're caring for now and the problems that people have now, are quite different". While describing GPs as "feeling absolutely overwhelmed" by workloads, she said they could not "sit back and let everybody else organise around us".

POLICY 

INNOVATION 

TRANSFORMATION 

19 Professor Sir Ian Gilmore

CHAIR, LIVERPOOL HEALTH PARTNERS; CHAIR, ALCOHOL HEALTH ALLIANCE UK



Sir Ian Gilmore is a real force in the debate about reducing harm from excessive drinking. As chair of the Alcohol Health Alliance, he described the chancellor's

decision to reduce the duty on some types of alcohol in the March budget as "disgraceful".

"This decision is a slap in the face to our doctors, nurses and emergency services on the frontline that are paying the price for this cut," he argued.

The reality is that there are one million alcohol related hospital attendances each year, and that alcohol related harm costs in England £21bn yearly, so expect the debate to continue – and Sir Ian to be at the centre of it.

His role at Liverpool Health Partners also ensures real influence.

20 Dr Neil Bacon

FOUNDER, IWANTGREATCARE.ORG



Another new member of the top 20, Dr Bacon was seen by judges as pushing "significant cultural changes on transparency in healthcare".

Through *iwantgreatcare*, this former nephrologist has pioneered new ways of turning the important but often nebulous concept of patient experience into a clear

metric. He is more than willing to challenge the status quo: when the site launched in 2008, the BMA was up in arms at the idea that patients would be rating the quality of care they felt they had received from healthcare professionals.

Yet by 2013, the Friends and Family Test had been introduced by the government – a single question similar in style to those asked by *iwantgreatcare*, which at many trusts helps deliver the test. Dr Bacon has often shown himself to be ahead of the game, and our judges believe he will remain there.

Professor David Haslam

CHAIR, NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE



David Haslam was a member of the judging panel and he was therefore not eligible for inclusion in the list. However, it would stretch credibility not to include him among the most significant clinical leaders in the country. NICE's influence continues to grow and Professor Haslam has formed a partnership with its chief executive Sir Andrew Dillon as successful as the long-standing one he had with

previous chair Sir Michael Rawlins.
Alastair McLellan, editor, HSJ

Nurses and midwives



Gail Adams

Head of nursing, Unison

Professor June Andrews

Director of Dementia Services Development Centre, Stirling University

Professor Viv Bennett

Chief nurse, Public Health England

Sally Brearley

Chair, Nursing and Care Quality Forum

Professor Hilary Chapman

Chief nurse/chief operating officer, Sheffield Teaching Hospitals Trust

Jane Cummings

Chief nursing officer, NHS England

Susan Hamer

Organisational and workforce development director, National Institute for Health Research Clinical Research Network

Professor Tricia Hart

Chief executive, South Tees Hospitals Foundation Trust

Ruth May

Nursing director, Monitor

Dame Julie Moore

Chief executive, University Hospitals Birmingham FT

Professor Anne Marie Rafferty

Professor of nursing policy, King's College London

Professor Elizabeth Robb

Chief executive, The Florence Nightingale Foundation

Dame Eileen Sills

Chief nurse and director of patient experience, Guy's and St Thomas' Foundation Trust

Professor Cathy Warwick

Chief executive, Royal College of Midwives

Jane Whittome

Head of improvement programmes: long term conditions and experience of care, NHS Improving Quality

Suzette Woodward

Campaign director for Sign up to Safety, NHS England

Top Clinical Leaders



LISTED ALPHABETICALLY

● Cheryl Adams

Founding director, Institute of Health Visiting
A second successive appearance for Ms Adams among our top clinical leaders. She founded the Institute of Health Visiting in November 2012, and is seen as having significantly raised the profile of the profession. Health visiting is a profession that continues to need huge amounts of support, so do not discount the likelihood of a third successive appearance.

● Gail Adams

Head of nursing, Unison
A consistently vocal and prominent champion and defender of nursing, Ms Adams' influence was particularly felt this year. In November, the union was the largest of nine whose members took part in a four hour strike over the government's decision not to implement the recommendations of the NHS pay review body.

● Dr Charles Alessi

Co-chair, National Association of Primary Care, and senior adviser, Public Health England
The outspoken Dr Alessi commands attention. This year he has expressed his firm belief that primary care should be co-commissioned by CCGs, and continued to keep focus on vascular disease and dementia – he is PHE's lead for preventable dementia.

● Dr Mohammad Al-Ubaydli

CEO and founder, Patients Know Best
A third year among *HSJ's* Clinical Leaders for Dr Mohammad Al-Ubaydli. The social enterprise he founded gives patients access to their medical records, and allows them in turn to grant access to healthcare professionals and carers.

● Professor June Andrews

Director of Dementia Services Development Centre, Stirling University
A former nurse, Professor Andrews is a key leader in improving dementia care. She is not afraid to express her views – in a recent book she suggested that hospitals are consistently failing people with the condition.

● Professor Dame Sue Bailey

Chair, Academy of Medical Royal Colleges
Hugely important in putting mental health on the agenda when president of the Royal College of Psychiatrists, Dame Sue was elected chair of AoMRC in January. She is proving to be no less challenging in her new role: in May, a *BMJ* piece penned by her and other senior doctors decried a culture of over-treatment.

● Professor Sir John Bell

Regius chair of medicine, Oxford University
The founder of the Wellcome Trust Centre for Human Genetics, Sir John has long been at the cutting edge of healthcare research. In March, it was announced that he was leading the expert advisory group for the national innovative medicines and medical technology review. The review will find ways to ensure the speedy implementation of medical breakthroughs.

● Dr Mike Bewick

Deputy medical director, NHS England
The new care models set out by NHS England in the *NHS Five Year Forward View* envisage new forms of out of hospital care, with primary care central to this. As "England's most senior GP", Dr Bewick will be influential as the vanguard projects gather pace.

● Professor Dame Carol Black

Adviser on work and health, Department of Health
A new entry among our Clinical Leaders but Dame Carol has had long term influence – she is former national director for health and work, and a previous chair of the Academy of Medical Royal Colleges. In February 2015, David Cameron asked her to review how best to encourage those with treatable conditions back into work. Since that includes those with obesity and drug or alcohol problems – and one of the options on the table is withdrawing sickness benefits – she will have to navigate difficult waters.

● Professor Nick Black

Professor of health services research, London School of Hygiene and Tropical Medicine and chair, National Advisory Group on Clinical Audit and Enquiries, NHS England
Research by Professor Black and colleagues has this year become the genesis of Jeremy Hunt's national study into avoidable deaths. The government plans to replicate his study of case notes to assess how many preventable deaths there are in hospitals – though Professor Black expresses scepticism that it will be possible to make such an assessment at an individual hospital level.

● Professor Richard Bohmer

International visiting fellow, The King's Fund
This year has seen multiple reviews of NHS leadership, and so one imagines Professor Bohmer must have found his views being even more keenly sought than ever before. The professor of management practice at Harvard Business School is rightly seen as an expert on how to make the desire for more clinical leadership a reality.

“

Sally Brearley was unafraid to oppose government policy and recommend a minimum nursing staffing level

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● Professor Len Bowers

Professor of psychiatric nursing, King's College London
Mental health truly gained a place on the national agenda in the run up to the election, with parity of esteem central to the forward view. It was a change which has – rightly – served to increase focus on the work of those in the field. Professor Bowers, a former mental health nurse, has spent many years researching how to reduce conflict on psychiatric wards. His Safewards model has been adopted by trusts across the UK, and is gaining attention worldwide.

● Sally Brearley

Chair, Nursing and Care Quality Forum
Despite being chair of the prime minister's Nursing and Care Quality Forum, Ms Brearley was unafraid to oppose government policy and recommend a minimum nursing staffing level. The forum was unofficially scrapped in early 2014 but Ms Brearley remains active, primarily focusing on the importance of patient involvement in care.

● Professor John Britton

Director, Centre for Tobacco and Alcohol Studies, Nottingham University and consultant in respiratory medicine, Nottingham University Hospitals Foundation Trust
A new entry among our cadre of clinical leaders, Professor Britton is at the front of the fight to prevent the respiratory disease caused by cigarettes. In recent months, his work has influenced two significant changes: the forthcoming English ban on smoking in cars when children are present and the introduction of plain cigarette packaging from 2016.

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Top Clinical Leaders

LISTED ALPHABETICALLY

● Professor emeritus Tony Butterworth

Chair, Foundation of Nursing Studies

Professor Butterworth has a string of previous chairmanships and chief executive roles to his name – among them chairmanship of the NHS Institute for Innovation and Improvement – and is said to have a continuing influence. At the Foundation of Nursing Studies he is raising the profile of nursing and innovation, and is described as “one of those people who other people of influence go to for advice”.

● Howard Catton

Head of policy and international affairs, Royal College of Nursing

With the impending introduction of nursing revalidation, Mr Catton's voice is an important one. He is said to have influence over policy, and will be a key source of consistency and expertise as RCN chief executive Peter Carter prepares to stand down.

● Dr Nav Chana

Chair, National Association of Primary Care

A first appearance among *HSJ's* Clinical Leaders for Dr Chana, who was elected chairman of NAPC in September 2014. Notably his interests include driving quality in primary care and population-based healthcare – which are both prominent on the NHS England agenda.

● Professor Hilary Chapman

Chief nurse/chief operating officer, Sheffield Teaching Hospitals Foundation Trust

Professor Chapman is one of the most prominent of England's chief nurses, not least because Sheffield is part of the Shelford Group of leading teaching hospitals. She continues to complete at least one clinical shift per month, and co-led the development of the Safer Nursing Care Toolkit. Used by hospitals across the UK to help set appropriate staffing levels, it was last year endorsed by NICE.

● Professor Jane Dacre

President, Royal College of Physicians

Professor Dacre has now been president of the RCP for just over a year, and has already succeeded in putting her stamp on things. It is surely no coincidence that one key focus of the organisation's five year strategy, published at the beginning of the year, is education – she is on secondment from University College London Medical School during her presidency.

● Professor Lord Ara Darzi

Chair of surgery, Imperial College London and Institute of Cancer Research and director of the Institute of Global Health Innovation

As director of the Institute of Global Health

Innovation at Imperial College, Lord Darzi's influence is increasingly a worldwide one. He has played an important role, for instance, in developing healthcare in Qatar. But do not discount his continuing impact on home shores. He may no longer be a minister of health but he is still making recommendations to which politicians pay attention – most recently, as chair of the London Health Commission.

● Professor Erika Denton

National clinical director for diagnostics, NHS England

A new entry, but consultant radiologist Professor Denton has proved herself adept at handling challenges. As national clinical director for imaging until 2013, she led a programme of work which delivered additional capacity and reduced waiting times. Her next challenge: managing the end of the National Programme for IT contracts, which supplied imaging IT systems to trusts.

● Dr Jennifer Dixon

Chief executive, The Health Foundation

Dr Dixon appears among our top clinical leaders for the third year in succession, previously as chief executive of Nuffield Trust and now at the helm of The Health Foundation, which is becoming an increasingly important voice. Significantly, its new policy and economics teams are “attempting clearer diagnoses of the challenges and suggesting solutions, not least new models of care”.

● Dr Amanda Doyle

Chief clinical officer, Blackpool CCG, and co-chair, NHS Clinical Commissioners

It has been quite the year for commissioning: pre-election debates over the role of CCGs, the introduction of co-commissioning of primary care, and the problems over the tariff. Throughout it all, Dr Doyle has been a determined and vocal defender of the role of clinical commissioners.

● Sean Duffy

National clinical director for cancer, NHS England

Survival rates for cancer have never been higher, and Mr Duffy points to the results of the national patient survey as evidence that experience is improving too. But work to ensure more integrated services continues, not least through proposals to consolidate stereotactic radiosurgery and stereotactic radiotherapy services in fewer locations, but across seven days rather than five.

● Dr Mike Durkin

National director of patient safety, NHS England

In July, the new national patient safety collaboratives will launch. Next area of focus for Dr Durkin: the possibility of creating an independent patient safety investigation unit

similar to the Air Accidents Investigation Branch. Jeremy Hunt has asked Dr Durkin to consider the proposal as part of the reaction to the Morecambe Bay scandal – along with “much clearer guidelines” for standardised incident reporting.

● Baroness Audrey Emerton

Cross bench peer, House of Lords

The only nurse in the House of Lords, Baroness Emerton continues to be an important and tireless champion of the profession. She was key to the development of the Culture of Care Barometer, a tool to assess whether workplaces are suffering from a poor culture. An academic study published this year reported positive results in hospitals at which it has been implemented.

● Sir Sam Everington

Chair, Tower Hamlets CCG

The new year addition of the “Sir” to the beginning of this GP's name indicates the importance he has had over many years. That in the same month he was appointed by NHS England to lead national work on new primary care driven care models ensures his continuing importance.

● Dr David Fearnley

Medical director, Mersey Care Trust

A new entry among our clinical leaders, our judges were impressed by Dr Fearnley's commitment to achieving a zero suicide rate at his organisation and the trust's No Force First initiative. The aim of the programme is for physical and medication led restraint to become an absolute last resort, and audit shows it has an impact. He is said to be the driving force behind a partnership between the trust, Stanford University and Lockton, an insurance brokerage firm to manage and predict risk in mental health.

● Dr Kevin Fenton

Director of health and wellbeing, Public Health England

Dr Fenton was in our inaugural collection of Clinical Leaders but absent last year. His return reflects the important role prevention and public health will play in making the spirit of the *NHS Five Year Forward View* a reality.

● Dr Jonathan Fielden

Medical director, medicine board, University College London Hospitals Foundation Trust

As a medical director at one of the largest trusts in the country, Dr Fielden immediately commands influence. But as the lead inspector at the Care Quality Commission, which inspected Hinchingsbrooke Hospital, he has gained additional importance this year which sees him included among our Clinical Leaders for the first time.



“

The scourge of pedlars of poor science, Dr Ben Goldacre remains an important presence

”

● Dr Paul Flynn

Chair of the consultant committee, British Medical Association

With a clear push to make seven day services a reality, Dr Flynn is an important negotiator. In October, the BMA walked away from an 18 month negotiation over changing consultants' contracts to increase their presence at weekends. But Dr Flynn told *HSJ* he and the BMA would be “open for business” if obstacles to talks on how to increase consultant presence at the weekends were removed.

● Dr Ben Goldacre

Author, *Bad Science* and *Bad Pharma*; co-founder, AllTrials campaign; and senior clinical research fellow at the Centre for Evidence-Based Medicine, University of Oxford

The scourge of pedlars of poor science drops out of the top ranks of our Clinical Leaders but remains an important presence. He is a keen advocate for clinical transparency and the importance of good, properly governed clinical data. He says: “Medical data, rarefied and condensed, presents huge power to do good, but it also presents huge risks.”

● Professor Sir Muir Gray

Director, Better Value Healthcare

A public health doctor for the past 43 years, Sir Muir has had enormous influence over the course of his career – not least as the founding director of the UK national screening programme. In January, he published the book *Sod 70! The guide to living well*, detailing how small changes in lifestyle can lead to living well for longer.

● Dame Barbara Hakin

National director of commissioning operations, NHS England

Former GP Dame Barbara retains a central role at NHS England. The election result means that she will not find herself having to lead a dramatically different commissioning system, though she is once again facing the spectre of historic complaints against her: the General Medical

Council is to review a decision made during its investigation.

● Susan Hamer

Organisational and workforce development director, National Institute for Health Research Clinical Research Network

A former nurse, Ms Hamer is seen as hugely important in advancing clinical academic careers for nurses and allied health professionals. One of *HSJ*'s judges highlighted that “the entire academic structure for non-medics is really her work”. With new care models requiring new types of professionals, hers will be an important voice, hence her debut here.

● Dr Phil Hammond

GP, writer and broadcaster, vice president of the Patients Association

Dr Hammond remains a regular media presence, including his role at *Private Eye*. He has recently published a book on the importance of self-care – widely acknowledged as hugely important if the health service is to be sustainable.

● Dr Amir Hannan

GP, Houghton Thornley Medical Centres, long term conditions lead, Tameside & Glossop CCG

A new entry among our Clinical Leaders, but already an *HSJ* Innovator, Rising Star and BME Pioneer. In 2000, as a newly qualified doctor, Dr Hannan took a job at 21 Market Street – the GP practice previously run by Harold Shipman. It is an experience which has informed his work, leading him to advocate patient access to their own records.

● Dr Nick Harding

Chair, Sandwell and West Birmingham CCG, and non-executive director, Vitality Partnership

At Vitality Partnership in Birmingham, Dr Harding is helping pioneer a very different type of care. Vitality is a single GP organisation operating in 13 locations and is committing to increasing patient access through digital and extended opening hours. He also chairs a CCG which, intentionally, straddles local authority boundaries. Having been named as a multispecialty community providers (MCP) vanguard, Vitality's influence – and that of Dr Harding – is only set to increase.

● Professor Tricia Hart

Chief executive, South Tees Hospitals Foundation Trust

A former nurse, Professor Hart falls away from the top 20 of our Clinical Leaders this year. But she remains one of the most important and well respected chief executives around.

● Dr Carl Heneghan

Director, Centre for Evidence-Based Medicine, Oxford University

Dr Heneghan describes himself as having an interest “in evidence based medicine and the truth behind health research findings”. It is an area in which he has become a prominent figure, working with *The BMJ* among others to evaluate the real case for treatments.

● Professor David Heymann

Professor of infectious disease epidemiology, London School of Hygiene and Tropical Medicine; head of the Centre on Global Health Security at Chatham House; and chair, Public Health England

Professor Heymann's profile has risen yet further during a year in which the world confronted the ebola crisis. Through both his academic work and his role at Public Health England, he is a prominent voice on infectious diseases.

● Dr Richard Horton

Editor in chief, *The Lancet*

Asked in March what he would do as prime minister, Dr Horton told *The Independent* his first act would be to “repeal Andrew Lansley's disastrous Health and Social Care Act”. The election result means the act will stay, but so too will the influential voice of the man who has edited the world's leading medical journal since 1995.

● Celia Ingham Clark

National director for reducing premature deaths, NHS England

An important presence at NHS England since its inception, Celia Ingham Clark has played a particularly important role in thinking on seven day services. If they are to become a reality, she will be a crucial source of expertise.

● Professor Lord Ajay Kakkar

Chair, UCLPartners

Chair of the world's largest academic health science centre, Lord Kakkar keeps busy – he is also a practising surgeon and an active business ambassador for healthcare and sciences.

● Dr Steve Kell

Co-chair, NHS Clinical Commissioners, and chair, Bassetlaw CCG

With his fellow NHSCC chair and *HSJ* Clinical Leader Amanda Doyle, Dr Kell is a key proponent of the virtues of clinical commissioners. The election result may have given reassurances over CCGs' future but there are further challenges ahead, among them specialist services co-commissioning and the role of commissioning support.

● Professor Tim Kendall

Chair of the National Collaborating Centre for Mental Health, Royal College of Psychiatrists

At the NCCMH, Professor Kendall has helped drive evidence based guidelines, standards and measurements for mental health. His entry among *HSJ* Clinical

Top Clinical Leaders

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Leaders reflects the increased profile of mental ill health.

● Professor Sir Robert Lechler

Executive director, King's Health Partners

Speaking at the London Innovation Summit late last year, Sir Robert hailed advances in healthcare and spoke of a biomedical revolution. He will be keen to ensure that King's Health Partners remains at the forefront of such developments.

● Professor Gillian Leng

Deputy chief executive and director of health and social care, National Institute for Health and Care Excellence

Professor Leng is leading the development of quality standards across both health and social care. That makes her a significant influencer as focus continues on better integration of the two sectors.

● Dr Geraint Lewis

Chief data officer, NHS England

The publication of *Personalised Health and Care 2020* underscores the extent to which health and social leaders believe data is central to transforming healthcare – and means Dr Lewis remains at the centre of a major area of innovation.

● Dr Arvind Madan

Chief executive, Hurlay Group

As an organisation running multiple GP practices over a large population in London, the Hurlay Group is seen by many as an exemplar of the future form of primary care. That makes its chief executive an increasingly important figure.

● Professor Sir Michael Marmot

Professor of epidemiology and public health, University College London

Sir Michael has long researched the social determinants of ill health. With integration of health and social care – and the third sector – a central focus of the *NHS Five Year Forward View*, his understanding is now at the heart of the vision for the future.

● Dr Anthony Marsh

Chief executive, West Midlands Ambulance Service Foundation Trust and East of England Ambulance Trust

Dr Marsh makes his debut in our collection of top clinical leaders, but has twice been named one of our top chief executives. His voice is a valued one – not least as an articulate spokesman for the Association of Ambulance Chief Executives.

● Clare Marx

President, Royal College of Surgeons of England

Ms Marx has now spent just over a year as the first female president of the Royal College of Surgeons. Recently, she has spoken out on the government's desire to

introduce seven day services, saying it is a welcome priority but that care must be consultant led – and that significant change will be required to the NHS as a result.

● Dr Hugo Mascie-Taylor

Medical director and executive director of patient and clinical engagement, Monitor

Dr Hugo Mascie-Taylor ended his spell as special administrator at Mid Staffordshire last November, a process which led to the downgrading of Stafford Hospital's A&E, maternity and paediatrics departments. But through his role at Monitor, he continues to be an important clinical leader.

● Ruth May

Nursing director, Monitor

In March, it was revealed that Ms May had been appointed nursing director at Monitor. As the first person to hold the post, she will very visibly introduce a nursing voice to the regulator.

● Dr Margaret McCartney

GP and health writer

A GP in Glasgow, Dr McCartney writes regularly for an array of publications. She often expresses frustration but writing in *The BMJ* recently, she contended that “despite political interference, wasteful awareness campaigns, misleading advertisements, poor evidence, and ridiculous media stories, general practice is still the best job in the world”.

● Dr Keith McNeil

Chief executive, Cambridge University Hospitals Foundation Trust

As one of the rare breed of clinically trained chief executives in the NHS, Dr McNeil is immediately notable. He has brought fresh approaches to the troubled health economy in Cambridgeshire and Peterborough, which has gained him rapid respect.

● Dr Peter Melton

Co-chair, NHS Commissioning Assembly, and chief clinical officer, North East Lincolnshire CCG
North East Lincolnshire is a unique CCG: it has commissioning powers for both social and healthcare. As the new care models programme accelerates, Dr Melton's opinion will be frequently sought.

● Dr Chaand Nagpaul

Chair, GP Committee, British Medical Association

Dr Nagpaul remains a vocal representative of GPs' interests. He recently generated headlines by urging the government to “halt its surreal obsession for practices to open seven days when there aren't the GPs to even cope with current demands”.

● Dr Yvette Oade,

Chief medical officer, Leeds Teaching Hospitals Trust

“

Dr Oade is trying to make the sort of system wide changes encouraged by the forward view

”

As lead on clinical transformation projects which go beyond the trust into the city of Leeds, Dr Oade is trying to make the sort of system wide changes encouraged by the *NHS Five Year Forward View*.

● Professor David Oliver

President, British Geriatrics Society

Professor Oliver is a prominent leader of the British Geriatrics Society, speaking frequently of the need to provide better care for older people. He was a notable member of the *HSJ* Commission on Hospital Care for Frail Older People.

● James Palmer

Clinical director, specialised commissioning, NHS England

A consultant neurosurgeon, Mr Palmer makes his *HSJ* Clinical Leaders debut. He does not have an easy role at NHS England: spending on specialised commissioning has been over budget, to the tune of nearly £400m in 2013-14. Mr Palmer is advocating the transfer of some of this commissioning back to CCGs, though the course may not be a straightforward one.

● Dr David Pencheon

Director, NHS Sustainable Development Unit

A third successive *HSJ* Clinical Leaders appearance for medically trained Dr Pencheon, whose practical approach to building sustainability in healthcare wins hearts and minds.

● Dr Mark Porter

Medical correspondent, *The Times*, and media doctor

Ever since the 2012 election of his namesake to the BMA chairmanship, this media doctor has been destined to be known in healthcare circles as “the other Dr Mark Porter”. But the reality is that – as a regular fixture in *The*



Times and on BBC radio and television – for the general public he is probably the only Dr Mark Porter, and an important voice at that.

● **Professor Anne Marie Rafferty**

Professor of nursing policy, King's College London
Professor Rafferty's role at King's College was the first of its kind in the country. In the run up to the election, she told our sister publication *Nursing Times* that there was a "gap" in the thinking on how to fund adequate community staffing to deliver seven day service access.

● **Dr Hugh Reeve**

GP and chief clinical officer, Cumbria CCG
As one of the judges put it, Dr Reeve is "superb at openness and transparency in a very challenged health economy. He has the right style of behaviour and values for the future". NHS England agreed, making Lancashire North one of the integrated primary and acute care systems (PACS) vanguard sites.

● **Dr John Ribchester**

GP at Whitstable Medical Practice, long term conditions lead, Canterbury and Coastal CCG
Another new entry among *HSJ* Clinical Leaders, and another GP leading a vanguard programme – the Whitstable Medical Practice is one of those chosen to fast track the development of the multispecialty community provider model.

● **Lord Bernard Ribeiro**

Chair of the Independent Reconfiguration Panel
A former president of the Royal College of Surgeons, Lord Ribeiro chairs the body which reviews contested proposals for service change. As the pace of change accelerates, he may find his workload increases – and his influence as well.

● **Professor Elizabeth Robb**

Chief executive, The Florence Nightingale Foundation
Professor Robb heads a charity which awards scholarships to advance the study of nursing. In March, it was announced that the body had joined with NHS England to create leadership scholarships specifically for BME nurses and midwives.

● **Dr David Rosser**

Executive medical director, University Hospitals Birmingham Foundation Trust
A long time proponent of the value of better use of IT and informatics, earlier this year Dr Rosser argued in the national media that the NHS neither had nor was training as many doctors as it needed.

● **Professor Anthony Rudd**

National clinical director for stroke, NHS England
A second successive year as an *HSJ* Clinical Leader for Professor Rudd. He was

previously London's first clinical director for stroke, a role in which one of the judges said he "revolutionised treatment". He is continuing efforts to do the same country wide.

● **Dame Eileen Sills**

Chief nurse and director of patient experience, Guy's and St Thomas' Foundation Trust
A move out of the top 20 for Dame Eileen, but she remains a well respected and prominent chief nurse. She is a key leader on dementia, holding the clinical director role for the London Dementia Strategic Clinical Network and training MPs to become "dementia friends".

● **Professor Terence Stephenson**

Chair, General Medical Council
Professor Stephenson has only been in post since January 2015, but expect him to wield real influence in this role in due course. After all, he was part of the campaign that led to the formation of the NHS Future Forum.

● **Professor Sir John Tooke**

President, Academy of Medical Sciences
Sir John is a respected voice, and as academic director of UCLPartners and head of the UCL Medical School, has an important role in the development of academic health science centres and in medical education.

● **Professor Jonathan Valabhji**

National clinical director for obesity and diabetes, NHS England
A new entry among our Clinical Leaders this year, Professor Valabhji has a crucial role in combating the rising tide of obesity and of diabetes. These are exciting times in the field of diabetes, Professor Valabhji notes, as the *NHS Five Year Forward View* puts emphasis on disease prevention.

● **Dr Richard Vautrey**

Deputy chair, GP Committee, British Medical Association
An accomplished political player, Dr Vautrey is stressing the pressure that GPs are under and pushing for ways to reduce it. He has advocated that the government be committed to extra funding for general practice in order to deliver a seven day service.

● **Professor Sir Simon Wessely**

President, Royal College of Psychiatrists
In his first year as president of the Royal College of Psychiatrists, this consultant liaison psychiatrist has been a powerful force in bringing political attention to mental health issues. In March, he wrote in *The Guardian* that, while politicians say all the right things about mental health, "where is the money so desperately needed to

improve mental health services going to come from?"

● **Jane Whittome**

Head of improvement programmes: long term conditions and experience of care, NHS Improving Quality
Ms Whittome previously played an important role in Mike Richards' reform of cancer services. Our judges felt that this former nurse does not currently have the profile her work warrants. NHS IQ recently launched a buddy scheme for trusts to provide peer to peer support in improving patient experience.

● **Dr Peter Wilmshurst**

Consultant cardiologist and whistleblower
In the year in which Robert Francis published his *Freedom to Speak Up* report – and concluded that there was "a serious problem in the NHS" with the treatment of those who raise concerns – the experiences of former whistleblowers such as Dr Wilmshurst became even more important.

● **Suzette Woodward**

Campaign director for Sign up to Safety, NHS England
A past director of the National Patient Safety Agency, Ms Woodward makes her first appearance among the ranks of *HSJ* Clinical Leaders. This former paediatric intensive care nurse is leading NHS England's efforts to reduce avoidable harm by 50 per cent over three years. ●

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