

2023

The Healthcare Leadership Academy

COMMUNITY REPORT

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Foreward

Professor Neena Modi

I was honoured by the invitation to write a few words of introduction to the 2023 Healthcare Leadership Academy Community Report. I have known the Academy since it was no more than a gleam in Johann Malawana's eye, and have been delighted to watch it grow over the years in confidence, influence, and impact. This year, as every year, the Academy has inspired and supported scholars in a multitude of ways. Scholars are impressive individuals who bring their ideas to life with commitment and passion. Each scholar has a goal; each has a desire to solve a problem. The world needs problem solvers, and as we can see very clearly, the world needs health service leaders.

In the UK, a catalogue of ineptitude and error has brought the once magnificent National Health Service to its knees, even though its founding principles - free at the point of need; publicly funded; publicly delivered; available to all - remain a clarion call to equity, efficiency, justice, societal responsibility, and moral strength. As I write, there are over 100,000 vacancies in the NHS workforce; the waiting list exceeds 7.5 million; health disparities are widening; maternal mortality is rising; child health is deteriorating; and poor public health is placing ever-greater burdens on a struggling system. Yet, in but one example of incomprehensible policy-making, in England, expenditure on public health has decreased by 13% per cent over the last 10 years. Is it any wonder that deep frustration, a sense of hopelessness, and anger at the stewardship of the NHS have led to strikes that were unthinkable in times gone by?



If ever there was a mission for healthcare leadership, it is now, to save the NHS. Some countries have systems that serve their citizens very poorly. These are countries in which healthcare is viewed as a commodity, where illness is an opportunity for profit. Other healthcare systems may serve their countries well enough, but none has achieved the value-for-money, equity, efficiency and quality, of the NHS in its heyday, and none has so successfully integrated research into healthcare for the benefit of all as we saw so clearly during the COVID-19 pandemic. Young scholars of the Healthcare Leadership Academy have not known an NHS as it could be if managed and funded well, with politicians of all colours united in the view that a strong NHS, administered to be true to its founding principles, serves a common good.

So, as I offer my congratulations to Johann and his team, and the scholars they have inspired, may I pose the Healthcare Leadership Academy a challenge? Healthcare has dedicated individuals of all ages and all career stages. Many have powerful ideas for improvement, but long careers in front-

line healthcare have not necessarily equipped them with the tools of change, or the knowledge of how best to navigate the tortuous routes to impact. However, they too, could be leaders. So I suggest to the Healthcare Leadership Academy, eschew ageism, welcome people of all ages, and all career stages. Let the only criterion be a desire to bring about change, and make the world a better place for everyone.

Neena Modi

Professor of Neonatal Medicine
Past-President of The BMA

The foreword by Professor Modi reflects her personal opinion. It does not represent a statement of HLA policy. The HLA believes in robust debate and we absolutely agree with Professor Modi's wish to challenge us to strive to be a force for positive change

Johann Malawana

Director, The Healthcare Leadership Academy

When I started my journey in healthcare as a student, the glass ceilings I first saw were related to factors like race, gender, and socio-economic background. Sadly, those factors still continue to act as a barrier at times. However when the HLA started in 2016, I saw different factors at play. There was a more polarised world, I saw increasing amounts of imposter syndrome from individuals who had broken through many of the glass ceilings they had faced. This seemed to be - at least in part - due to an increasingly hostile leadership environment where individuals genuinely questioned whether they wanted to, or deserved to, be part of leadership in general.

From the very beginning, the HLA was about creating an environment and community where we not only learn about leadership, but we celebrate the successes of each other and we try and feel the joy of sharing the leadership success of others. I often speak to scholars about the positive impact of ambition and drive for changing society, the environment around us and the world of healthcare generally. Every scholar is asked at their interview how they have changed the world and how do they intend on doing

so in the future? This is to ensure that they know that society, systems and the world can be changed and improved by individuals and their teams. Ultimately, the ability to inspire others to affect that wider change is a crucial part of effective leadership.

The HLA continues to attract some extraordinary individuals from across the world. We have a vibrant community doing some incredible things. As our community matures, we are seeing our members increasingly achieve their ambitions and potential, and we hope they will continue to contribute back to the development of others. Alongside this we see increasing institutional recognition for our organisation. This has resulted in a growing ability to support our scholars, faculty and community. The HLA has made a commitment to offer support for scholars who complete the programme for the rest of their careers. We do this through a variety of ways, particularly ensuring the vibrancy of the community and the communication tools allow schol-



ars and the community to network, mentor and support one another. We continue to develop initiatives across the community, based on our 6 pillar framework, that nurture aspects of leadership. Initiatives such as HLA IDEAS, HLA THINK, HLA Live, and HLA Listen give more opportunities for individuals to engage with the community. As we gain more institutional recognition, we are leveraging that to develop further opportunities for the scholars and community to find more and more ways to contribute, blossom and grow.

The HLA sets ambitious goals, and as such, we encourage our scholars and community to set ambitious goals. We hope that as we continue to execute and deliver on our goals, it will inspire our community and the wider healthcare environment to strive for excellence.

In the coming years, we will continue to evolve based on the experience, data and feedback we receive. We actively monitor the long term outcomes of our scholars and the impact they are having within health systems, in order to understand where we are adding value and influencing our scholars in a positive way. Through this process we also monitor what we think our impact is on the wider healthcare environment and ensure we are making a positive impact for the future.

Johann Malawana

George Miller

Chair of the HLA Executive

I would like to offer my warmest congratulations to those scholars who have completed the HLA Scholar's Programme this year. It is a fabulous achievement. I very much hope that you enjoy celebrating your success and sharing the celebrations with your families and friends. This is a very big moment for you, and one that you have earned through hard work and dedication.

Reflecting on the last year I am aware that our healthcare services, like the nations they support, have been especially strained and challenged over the past year in the wake of the pandemic. Indeed the general opinion is, in many quarters, that we live in an increasingly divided world with healthcare systems that are inevitably unsustainable. But the collective choices we make between optimism and pessimism, between hope and giving in, could still yet become the story of our societies. The HLA is fundamentally committed to the belief that things can and must be changed for the better, often by a thousand small decisions to try to help, day-by-day.

Burnout in this strained sector is all too common and invariably reflects a lack of the system (rather than individual)

resilience. Nevertheless our scholars and Faculty making the choice to be hopeful, or further still to actively seek to create a better world, can seem incongruent with our current trying times. Yet I suspect that human life has always been lived against a backdrop of uncertainty, and if the search for excellence and hope had been postponed until security was certain, the search would never have begun. With that in mind, I am constantly inspired and moved by the progress of our scholars and the meaning of their work. Their projects are innovative and have reached remarkable prominence but they also succeed because of, rather than despite, the challenges they have faced. After all unless the challenge is felt to be significant, without that, there is no innovation, no call for hope. It comes down to a choice. To see the challenges along the journey in such a way as to tend towards a goal and to avoid hopelessness as an error of interpretation, as we attempt to intuit a deeper structure. All journeys and adventures are only an inconvenience I suppose (and vice versa), differently considered.



George Miller

Mentoring

While leadership roles can often feel isolating, through HLA mentorship we hope to foster long term connections and relationships between scholars and mentors that provide avenues for support in later life. To this end, this year we have enjoyed an exciting mentorship programme helping scholars address a full range of practical and theoretical challenges. We have been fortunate to have a mentorship team consisting of past scholars and current faculty from many healthcare and non-healthcare backgrounds and every stage of training.

The purpose of the HLA mentoring scheme is to provide additional support and guidance in the HLA through a semi-formalised structure. Scholars frequently comment that one of the main benefits and appealing factors of the HLA programme is the opportunity to develop relationships with fellow healthcare professionals at an early

stage in a scholar's career. For most healthcare students and professionals, this is relatively rare. The mentoring scheme connects scholars with faculty members with a vast array of leadership experiences and skills, and with other scholars across cohorts with peer mentoring encouraged.

The mentoring schedule has always allowed faculty members and scholars to undertake the sessions remotely, even prior to Covid-19. Mentoring involves a mixture of a small group, ranging from two to five scholars, and individual meetings between the faculty tutors and scholars. We encourage all HLA scholars to have a mentor, either through our formal mentorship programme or by approaching anyone within the HLA community and asking if they would be able to be their mentor.

We hope that the network of connections fostered by mentees during their time in the HLA will enrich and inspire their future work. In this way, the continued growth of our mentorship scheme creates a community that celebrates the many successes and talents of our members. We look forward to helping our next cohorts grow and develop, whilst we also watch our alumni continue to flourish.

HLA Research Collaborative

Arian Arjomandi Rad

HLA Research Collaborative
Research Director

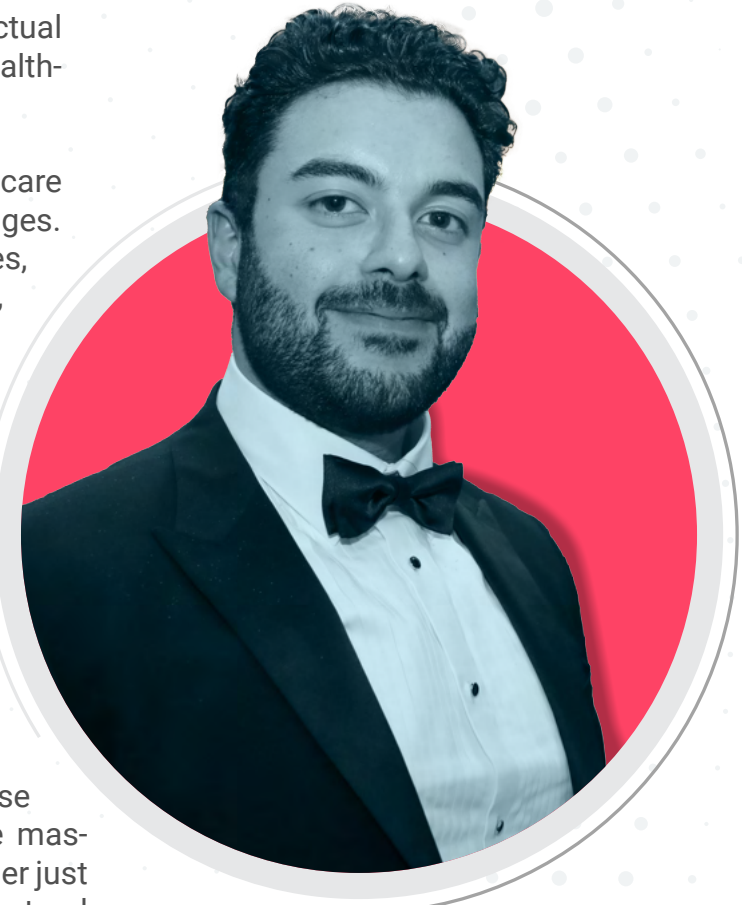
In today's rapidly advancing world, the complexities of healthcare delivery are constantly evolving, impacted largely by the integration of technology and the persistent global health challenges. The Healthcare Leadership Academy Research Collaborative (HLARC) stands at the forefront of this evolution, driven by its mission to investigate research outcomes related to technology in healthcare. The research collaborative has been directed by Dr George Miller, Dr Arian Arjomandi Rad and Dr Aleksander Dawidziuk. Its goals are deeply intertwined with the resolution of global health issues and addressing the pressing challenges of the worldwide healthcare workforce.

With an ever-expanding horizon of technology, healthcare systems worldwide witness a transformative shift. From telehealth platforms to AI-driven diagnostics, the landscape is ripe with innovations aiming to enhance patient outcomes, streamline processes, and drive efficiencies. The HLARC delves deep into the research of these technologies, deciphering their real-world implications, efficacy, and potential pitfalls. Such informed research is not just an academic exercise but a lifeline to

ensuring that technology meets the actual needs of patients, practitioners, and healthcare systems.

Beyond technology, the global healthcare workforce is facing its set of challenges. Ageing populations in many countries, coupled with increasing patient loads, have brought workforce shortages and burnouts into sharp focus. The HLARC's research endeavours to offer insights into optimising workforce capacities, training paradigms, and sustainability strategies, ensuring that healthcare professionals can serve efficiently and effectively.

Recognizing the necessity for healthcare leaders to stay abreast of these changes, the HLA RC emphasises the mastery of research skills. To lead is no longer just to manage or oversee – it is to understand deeply, predict intelligently, and strategize effectively. In a realm as critical as healthcare, decisions are more than administrative; they can be matters of life and death.



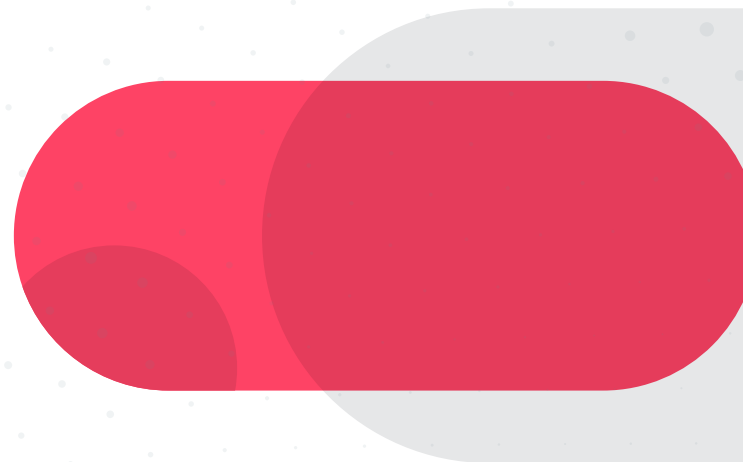
To bolster this philosophy, the HLARC has launched the HLA Research Masterclass, a targeted program designed to equip scholars with robust research skills. This masterclass is more than just a course; it is an enabler, allowing participants to venture confidently into academic research. Given the nuanced nature of healthcare challenges, having a strong foundation in research methodology, data analysis, and interpretation is imperative. By nurturing these skills, the masterclass aims to cultivate a new generation of healthcare leaders who are not just informed but also influential.

In particular, this year we have significantly expanded our joint research unit, built alongside our partners at Medics.Academy and The University of Central Lancashire.

A. Arjomandi Rad

Aleksander Dawidziuk

HLA Research Collaborative
Research Director



I graduated from Imperial College School of Medicine and intercalated in Biomedical Engineering. I was also the President of the Students Section at The Royal Society of Medicine. I have a keen interest in healthcare transformation and have published on digital healthcare, surgical innovation and medical technology. I was a scholar in The Healthcare Leadership Academy London 2020 cohort. Since completing my scholarship, I have been researching healthcare leadership, medical education and technology-enhanced learning with The HLA and Medics.Academy.

Aleksander Dawidziuk

Our most recent publications have included:

Arjomandi Rad A, Vardanyan R, Rabiee P, Arjomandi Rad R, Miller G, Malawana J, Zubarevich A, Schmack B, Ruhparwar A, Weymann A. Implantable cardiac soft robotic sleeve: A promising technology for the millions with end-stage heart failure in low and middle-income countries. *Artif Organs*. 2023 Sep 7. doi: 10.1111/aor.14642. Epub ahead of print. PMID: 37676107.



Khan H, Buaki-Sogo MA, Barlow P, Vardanyan R, Zatorska A, Miller G, Arjomandi Rad A, Malwana J, Shah NM. Efficacy of pharmacological and mechanical cervical priming methods for induction of labour and their applicability for outpatient management: A systematic review of randomised controlled trials. *European Journal of Obstetrics & Gynecology and Reproductive Biology*. 2023 Jun 3.



Chou WK, Ullah N, Arjomandi Rad A, Vardanyan R, Shah V, Zubarevich A, Weymann A, Shah N, Miller G, Malawana J. Simulation training for obstetric emergencies in low-and lower-middle income countries: A systematic review. *European Journal of Obstetrics & Gynecology and Reproductive Biology*. 2022 Jul 8.



Soh CL, Shah V, Arjomandi Rad A, Vardanyan R, Zubarevich A, Torabi S, Weymann A, Miller G, Malawana J. Present and future of machine learning in breast surgery: systematic review. *British Journal of Surgery*. 2022 Aug 10.



Nanchahal S, Arjomandi Rad A, Naruka V, Jacob Chacko, Guiqing Liu, Jonathan Afoke, George Miller, Johann Malawana, and Prakash Punjabi. Mitral valve surgery assisted by virtual and augmented reality: Cardiac surgery at the front of innovation. *Perfusion*. 2022;0(0). doi:10.1177/02676591221137480

Arian Arjomandi Rad, Hariharan Subbiah Ponniah, Viraj Shah, Anya Nanchahal, Robert Vardanyan, George Miller, Johann Malawana.

Leading transformation in medical education through Extended Reality.
(Book Chapter)



Sharmaine Yen Ling Quake, Fatimah Khoda, Arian Arjomandi Rad, Hariharan Subbiah Ponniah, Robert Vardanyan, Paolo Frisoni, Hoshang Arjomandi Rad, Martina Brasesco, Sophie Mustoe, Jenna Godfrey, George Miller, Johann Malawana. The current status and challenges of pre-hospital trauma care in low and middle-income countries: A systematic review.



Viraj Shah, Chien Lin Soh, Karanjot Chhatwal, Joanna Kucharczak, Arian Arjomandi Rad, Robert Vardanyan, George Miller, Johann Malawana. Challenges facing Autologous Breast Reconstruction in Low- and Middle-Income Countries (LMICs): a systematic review.



Subbiah Ponniah H, Shah V, Arjomandi Rad A, Vardanyan R, Miller G, Malawana J. Theatres without borders: a systematic review of the use of intraoperative telemedicine in low-and middle-income countries (LMICs). BMJ Innovations. 2021 Oct 1;7(4).



Dawidziuk A, Miller G, Malawana J. Visualisation Approaches in Technology-Enhanced Medical Simulation Learning: Current Evidence and Future Directions. 2022 (Book Chapter)

Conferences

Dawidziuk A, Cham SCC, Ali F, Abdi Z, Miller G, Malawana J, Evolution of an Innovative Healthcare Leadership Course: A Comparative Study, Oral Presentation at Association for Medical Education in Europe AMEE Conference, Virtual Conference, 27-30 August 2021.



Chan SCC, Dawidziuk A, Miller G, Malawana J, Learning to Lead: A Systematic Review of Leadership Training in Undergraduate Medical Education, Poster Presentation at Association for Medical Education in Europe AMEE Conference, Virtual Conference, 27-30 August 2021.



Dawidziuk A, Chan SCC, Ali F, Abdi Z, Miller G, Malawana J, Development of a Novel Healthcare Leadership Curriculum: A Comparative Study, Poster Presentation at Association for the Study of Medical Education (ASME) Annual Scholarship Meeting 2021, Virtual Conference, 8-9 July 2021.



Chan SCC, Dawidziuk A, Miller G, Malawana J, Leadership Education in Undergraduate Medical Curriculum: A Systematic Review, Poster Presentation at Association for the Study of Medical Education (ASME) Annual Scholarship Meeting 2021, Virtual Conference, 8-9 July 2021.



Dawidziuk A, Chan SCC, Miller G, Abbas N, Lissman R, Malawana J, Key Objectives of a Novel Leadership Programme for Healthcare Students and Young Professionals, Poster Presentation at Faculty of Medical Leadership and Management (FMLM) Leaders in Healthcare 2020, Virtual Conference, 17-20 November 2020.

Spotlight: Scholar Projects

Project Report: **Volunteering Partnership Project**

HLA Scholar: **Daniele Cotton**

Cohort: Cohort 35- London Virtual

I hoped to provide medical students with an opportunity to form longitudinal relationships with patients, as this has been shown to impact training clinicians very positively but is rarely available. I also wanted to help medical students build a strong positive presence in their communities. I also noticed, towards the end of the pandemic when I started this project, many local charities had been hit hard by financial pressures and loss of volunteers, and I wanted to do something to help.

Drawing from these ambitions, I devised a proposal to create long-term volunteering partnership schemes between community care charities and higher education organisations training healthcare students.

I then created three objectives to get my project off the ground. First, to recruit one educational and one charity partner and work with them to create a volunteering partnership scheme. Next, I aimed to get students volunteering this academic year.

Finally, I hoped to help others start similar projects by creating a guidance document based on my experiences.

I began my project by recruiting a higher education partner (Green Templeton College, Oxford University) and secured an endorsement and grant through an application to their Annual Fund scheme. I then gained an endorsement from our first community partner, Helen & Douglas House Children's Hospice, and worked with them to ensure the programme met their needs.

Next came the recruitment campaign, involving various mixed-media promotional efforts to raise awareness and get sign-ups. After that, volunteering started! I was thrilled that students started volunteering during the project year. We filled key roles the hospice had been struggling to fill, such as finding an ICT specialist, a gamer to play video games with the children, and a signifi-



cant home care volunteer role. I also considered other ways the scheme could help the hospice and nominated them for a university charity award, securing a £500 donation.

I then started working on my final objective, producing a quick-start guide to help others set up volunteering partnership schemes that shared insights and advice from my experience.

Towards the end of the year, my project received the Aularian Award, a prize from the St Edmund Hall Alumni Association that includes a fund to continue the project work. This will help me achieve my next steps – forming a committee to ensure project sustainability, adding further partner charities, bringing the scheme to all colleges at my university, and supporting others in setting up similar partnerships elsewhere.

Finally, I'll mention my reflections. Developing this project from scratch in such a short time helped me improve my project management skills. The project was also a wonderful experience, and it was rewarding to do something that tangibly helped people. I've learned so much about leadership in the process, particularly decision-making, resilience and perseverance.

I would like to say an enormous thank you to the HLA, Green Templeton College, Helen & Douglas House, the St Edmund Hall Alumni Association, and the amazing volunteers who made this project possible.

Danielle Cotton

Project Report: **MyHealthKits**
HLA Scholar: **Nitish Nachiappan**
Cohort: Cohort 31 - Bristol

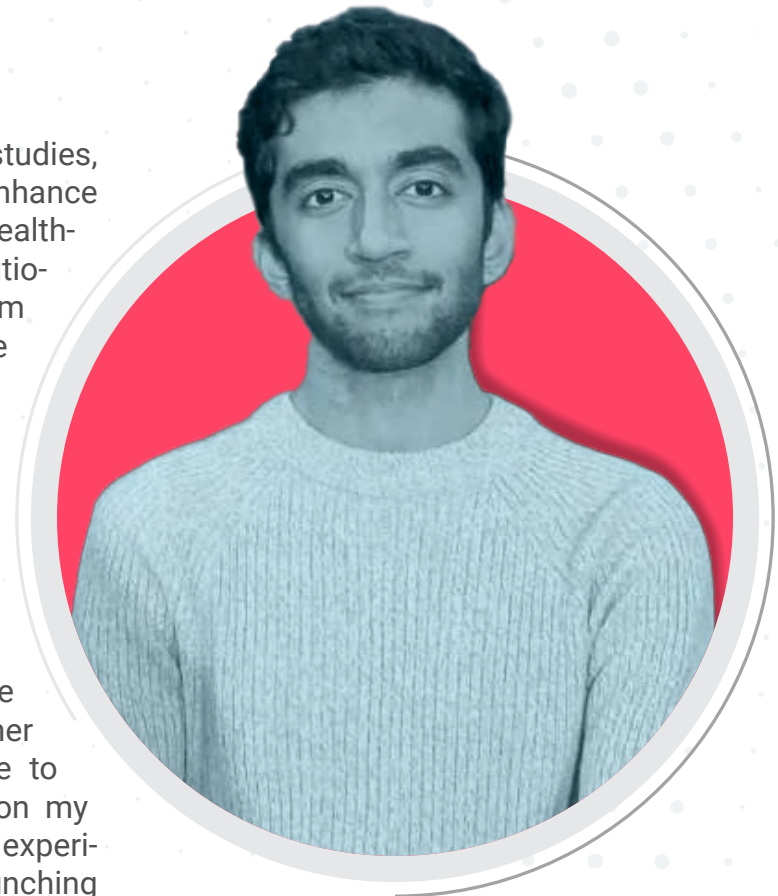
As the UK's healthcare system faces increasing pressure, more and more people with long-term illnesses are managing their conditions at home. However, due to a lack of awareness about available tools and resources, they often struggle to effectively manage their health problems, leading to complications and unnecessary strain on healthcare services.

MyHealthKits addresses this challenge by providing individuals with a box of essential tools and resources tailored to their specific health condition. Our innovative approach empowers people to take charge of their health, ensuring they have the tools they need to manage their conditions effectively and improve their overall well-being.

Backed by published peer-reviewed studies, MyHealthKits is proven to enhance self-care and reduce reliance on healthcare services. We are eager to revolutionise the way individuals with long-term illnesses manage their health. We aim to launch our MVP before the new year.

We are always open to collaboration so please reach out to me on twitter/LinkedIn

The HLA programme helped me by connecting me with people who have experience in different fields and other like minded peers. This helped me to stay motivated and keep working on my project. It has been a challenging experience balancing a full-time job and launching this project, but I'm excited for it to launch soon.



Nitish Nachiappan

Project Report: **She Heals, We Heal.**

HLA Scholar: **Kokob Gebru Kidanu**

Cohort: Cohort 30 - Amsterdam Virtual

This accomplishment is truly one of the greatest in my life, especially considering the difficult circumstances in which I pursued the training. During a time when my peaceful home in Ethiopia was torn apart by war and the once strong health system crumbled under deliberate attack, I witnessed health professionals struggling to work on empty stomachs. It was this experience that motivated my colleagues and me to join the HLA and study healthcare leadership. What makes this journey even more remarkable is that we completed the virtual cohort during a time when internet access was limited, and we made sure to never miss a session. My HLA project combines my passions of mental health, youth empowerment and quality education. I designed this project alongside three other colleagues and applied for, and was awarded, the Malala fund grant.

This experience not only instilled resilience within me but also served as a beacon of hope during those dark times in Tigray, Ethi-

opia. I am forever grateful for the opportunity provided by HLA and for the support and guidance received from cohort members and directors of the Amsterdam virtual cohort.

Ethiopia's recent civil war has been one of the most brutal conflicts in recent history, with an estimated close to a million deaths on the Tigrayan side alone. The displacement of people and the use of public services, aid, and sexual violence as weapons by Ethiopian and Eritrean forces have had a devastating impact on women and girls in the region. Additionally, education facilities have been destroyed and schools repurposed to house Internally Displaced Persons (IDP's), leading to a three-year hiatus in education in Tigray. The psychological trauma of living through war has also left a lasting impression on children and girls.



To address these issues, the “She Heals, We Heal” program aims to promote self-reflection among girls in Tigray who have been affected by war, violence, and displacement. It is a small but important step towards healing and rebuilding the lives of those affected by the conflict in Tigray.

The project focuses on girls in high schools in five cities across the Tigray region. It includes two main activities: structured learning led by mentors trained in providing psychosocial support twice a week, and drop-in learning to provide flexible support for these girls. The program creates safe and secure spaces for girls to have an opportunity to self-reflect and share personal stories. It can be incredibly therapeutic, while also helping them develop skills based on their interests. Currently we have established three safe spaces in three schools in Tigray, the project has also created job opportunities for young women in the region. Overall, the program aims to empower girls in the Tigray region by provid-

ing them with opportunities for personal growth, skill development, and mentorship. It seeks to create a supportive community where girls can express themselves freely and pursue their passions.

Kokob Gebru Kidanu

Project Report: **The 'Let's talk about it' Project**

HLA Scholar: **Delina Amare**

Cohort: Cohort 34 - London Virtual

1 in every 5 people in the world live with at least 1 mental disorder and mental illnesses are common causes of disability. In a developing country like mine, Ethiopia, non communicable diseases are on the rise and the government has been developing and updating guidelines and policies to address them. But mental health remains largely ignored.

Our community's understanding of mental health is strongly associated with an individual's traditional and spiritual background. This is because most people in our community have never received formal information on mental health. As a clinician I have seen patients silently suffering from mental illness and the sense of hopelessness that comes with the diagnosis.

Although addressing mental illness requires a multi-sectoral approach, it can also start by a conversation. 'LET'S TALK ABOUT IT' is the title I chose for my project because it begins the call to start a normal conversa-

tion on mental health. The project aims to provide evidence-based mental health information for our community, and by doing so we want to;

- Fight the stigma associated with mental illnesses
- Mobilise and inspire advocates for mental health
- Promote help seeking behaviour and emotional well being within the community

We started planning the project by identifying stakeholders and recruiting volunteers from non profit clubs and associations. Carefully prepared training and teaching materials were provided to volunteers, seminars were given to students and groups of local people were taught in small gatherings.



So far we have:

- Provided in-person and online mental health education.
- Prompted many individuals, including volunteers, to seek treatment and then linked them to available treatment programs
- Created a success network of individuals leading mental health projects
- Begun developing partnerships with NGOs
- Inspired volunteers to pursue careers in Mental health

The project is first of its kind for the area therefore we have encountered challenges such as a need for regular volunteer recruitment, limited contact time with our audiences, a shortage of resources to provide materials such as brochures or info-graphs, and limited available treatment options in our area for those who wanted to get treatment. I have learned the practical aspect of project development and leadership. I was also able to reflect and work on my weaknesses and learn from the mistakes I have made.

This project will continue to grow and hopefully will have an impact on a national level. We have planned different activities for the project and we are constantly looking for opportunities to grow. I would like to thank the HLA for giving me the opportunity to grow, for exceptional leadership training and for the constant encouragement. I also want to thank our cohort directors and my fellow scholars for providing feedback and suggestions.

Belina Amare

Project Report: **Establishing a Parents Advisory Group for Research**

HLA Scholar: **Eimear O'Rourke**

Cohort: Cohort 34- London 2 Online cohort

Over the past decade, food allergies have increased by 50% worldwide and up to 10% of the population have a food allergy. Treatments and a cure will be found the same way they are found for other major diseases—through research. Unfortunately food allergy research is severely underfunded, compared to both the size of the epidemic and the funding provided for other diseases with fewer patients. Incorporating the patient perspective into research projects is a transformative step towards achieving results that are not only scientifically robust but also relevant and beneficial to those living with allergic disease.

When I was selected as a scholar for the HLA programme, my goal was to establish a Food Allergy Parental Advisory Group for allergy research, and the HLA Programme played a pivotal role in my project's success. Through the programme, I gained invaluable insights and skills that have empowered me to lead and manage this initiative effectively. The programme's

focus on communication skills enabled me to convey the purpose and benefits of the advisory group to potential participants and stakeholders. I collaborated with a team of Allergy healthcare professionals and researchers at Cork University Hospital and partnered with In4kids, the national paediatric clinical research network. The Leader as a Manager aspect of the programme equipped me with essential organisational and project management skills to plan and execute the group meetings while taking into account budgeting, timelines, and ensuring productive engagement among members of the advisory group. The programme's emphasis on innovation and entrepreneurship as key leadership traits inspired me to think creatively and strategically in promoting the group and attracting members. We successfully engaged parents in the PPI group by raising awareness of the valuable opportunity for their involvement.



The project resulted in the establishment of Ireland's first Food Allergy Parents' Advisory Group. The group provides valuable feedback on research materials, study design, data collection, and methods, ensuring that allergy research in Ireland meets the needs of parents and children. Their perspectives enhance the understanding of research findings and facilitates improved communication between researchers and patients affected by allergic disease in Ireland.

In summary, the HLA Leadership Programme has not only equipped me with essential leadership skills but has also fostered a holistic approach to leadership, enriching my ability to develop and manage the Parent Advisory Group. Moving forward, the project aims to broaden the reach of parents in different geographical locations with the goal of enhancing inclusivity and representation. Furthermore, there will be an expansion of engagement with healthcare professionals and stakeholders, aiming to bolster allergy research efforts nationally and globally. Our goal is to drive research to be completed in collaboration

with patients, healthcare professionals, researchers and stakeholders, improving healthcare and research quality, leading to better outcomes.

If you are involved in the field and share our commitment to improving the lives of those affected by allergic disease, we encourage you to reach out and connect.

Email: eorourke05@qub.ac.uk

Linkedin: <https://www.linkedin.com/in/eimear-o-rourke/>

Eimear O'Rourke

Project Report: **Improving the Clinician-IT Interface**

HLA Scholar: **Oliver Kennion**

Cohort: Cohort 37 - Newcastle

In order for our healthcare systems to advance to the more advanced stages, the simple things have to be done right. My project aim was to increase awareness and communication between clinicians and information technology (IT) staff within my trust in order to allow the ground level errors to be raised and corrected as well as informing the staff using the systems of the capabilities and future expansion possibilities.

I first set about organising meetings with staff members who are involved in IT projects and governance and thus formed a network of people. After a while, I became aware of a similar project run by the IT team which I was enthusiastic to become involved with, however I was told they did not need my input. I felt frustrated and dejected that they would not want my help, but also unsure as to how I would develop a new project. I approached one of my previous contacts and we one to improve the utility and function of the operative note

within the trust. I realised I was in a unique position as the only surgeon interested in improving the clinician-IT interface and thus offered the best ability to carry this project forwards.

The aim of the new project is to develop an operation note that makes use of electronic records to incorporate data in as well as allow information from the note be automatically used and implemented, reducing duplication of work. It also increases the ability to audit and evaluate work, accelerating quality improvement within the trust.

I assembled a group of consultants from various surgical specialties in order to draft salient and important factors for the project. The first iteration is with the designing IT team which will then be trialled amongst the group and rolled out to the entire trust.



Outcomes will be measured quantitatively through utilisation of new features and direct observation of information feeding into the patient workflow as well as qualitatively through feedback from surgeons and others impacted by the changes such as GP's.

The greatest success and learning point from this project has been establishing myself within the trust and amongst those who are involved in implementing change in the IT workspace. The scholarship and project have taught me to actively seek out opportunity and to be polite yet relentless in my approach. One of my previous challenges had been putting myself out there and making tangible progress, so by doing the scholarship I have drastically improved my ability to do this.

A future challenge will be ensuring I stick to my timeline, but the skills I have learnt from the scholarship about being a leader will help with this.

This has led on to an application for Flexible Portfolio Training in Clinical Informatics where I will be able to continue with my project as well as become involved in new ones and set the stage for future applications for other schemes involving development of projects involving informatics.

Oliver Kennion

Project Report: **Transforming Psychiatric Education Through Neuroscience**

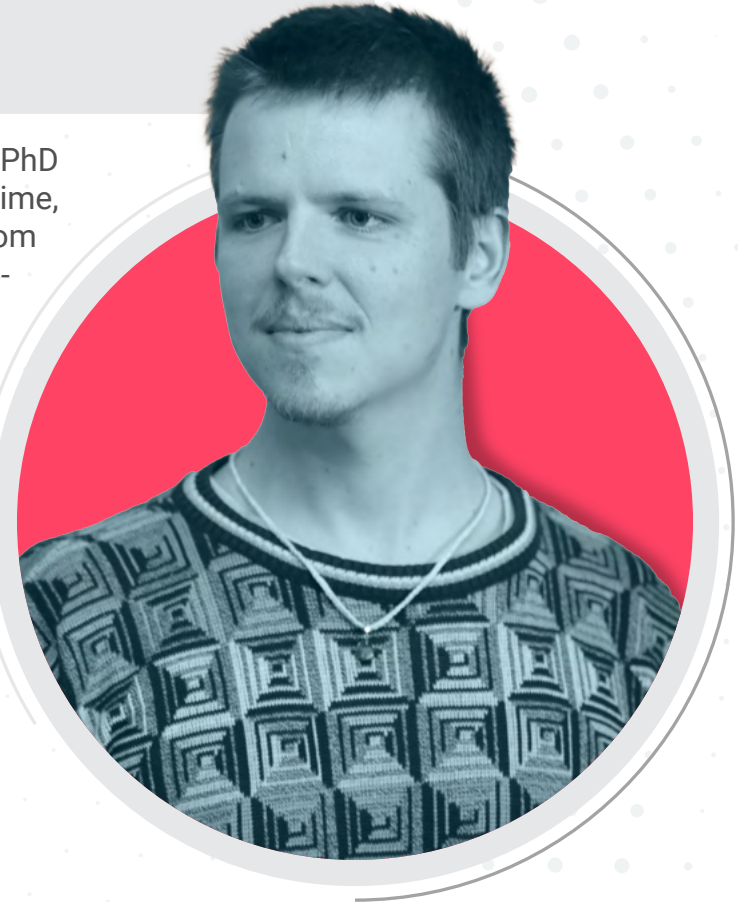
HLA Scholar: **Hugo Labat**

Cohort: Cohort 37 - Newcastle

Throughout medical school, I observed that psychiatric education lacked emphasis on disease mechanisms compared to other medical teaching, and alternative resources were either expensive, obfuscated by jargon, or non-interactive. Fortunately, my intercalated MSc in Cognitive Neuroscience and Human Neuroimaging addressed the gaps in typical medical school psychiatric teaching, and complemented my earlier elective course in medical education. I combined both skill sets to share my knowledge in a free, accessible, and interactive format, creating the 'Neuroscience of Psychiatry' series in collaboration with the Sheffield PsychSoc, which advertised and hosted my events.

To execute this project, I used digital tools such as Zoom for hosting and recording sessions, Microsoft 365 to store materials online and collect feedback, PowerPoint for presentations, and PubMed for cutting-edge resource material. Furthermore, I was fortunate to receive permission

to use the artwork of Greg Dunn, a PhD neuroscientist artist, in my slides. Over time, I covered a wide range of topics, from basic to advanced neuroscience, neuroimaging, neuromodulation, computational approaches, and depression. The series attracted over 140 engaged attendees, comprising both medical professionals and laypeople; teaching the latter helped me develop crucial communication skills for my future psychiatric practice.



Challenges were part of the journey, including occasional internet connectivity issues during hybrid sessions, difficulties in coordinating talks at conferences while pursuing my MBBS degree, and the challenge of ensuring up-to-date information. These obstacles taught me valuable lessons in problem-solving and collaboration.

Throughout this scholar year, I learned essential skills in marketing and promoting educational content, as well as adapting to unforeseen challenges along the way. Additionally, I gained insights into motivating and organising teams, identifying committed collaborators, and improving team

dynamics. As I look to the future, my goal is to assess the demand for my content and broaden its audience beyond neuroscience and medicine. This will involve stakeholder surveys to determine what topics people want to learn from me.

My scholar journey has been a transformative one, not only impacting psychiatric education but also my personal growth. It has shown me the power of perseverance, adaptability, and collaboration in effecting change, and I'm excited to continue this journey and make a lasting impact in the field of psychiatry.

Hugo Lakat

Project Report: **Political Medics UK**
HLA Scholar: **Marguerite O'Riordan**
Cohort: Cohort 36 - London

This year, alongside fellow HLA Scholar Dr. Tabitha Atkinson-Seed, I had the privilege of founding "Political Medics UK." We co-founded this organisation with the objective of educating, empowering and engaging medics with medical politics and systemic factors affecting our healthcare systems. We believe that all policy is healthcare policy. Through a national students champion scheme, talks, and an e-learning course, we aimed to empower medics to affect positive change in our healthcare systems, to best serve the populations we care for.

We utilised resources including social media, a dedicated Blogspot, and various other collaborative efforts, to execute our project. Our structured approach, guided by a Gantt chart, ensured the momentum of Political Medics UK throughout the year, while streamlined communication within our executive committees via WhatsApp groups fostered efficient and effective action plans.

This level of organisation meant that we had a number of successful outcomes throughout the year. We recruited Political Medics student champions from over 20 medical schools in the UK. We held a number of talks which have been broadcast across our social media platforms, as well the social media platforms of those organisations that we collaborated with. This includes an informative talk on the Junior Doctors strikes with the UKMSA. We interviewed esteemed medical politicians, including Dr Dean Eggitt, Professor Adam Layland and Dr Chaand Nagpaul CBE (past Chair of the BMA Council). We continued to develop e-learning material with the eLearning executive subcommittee. We managed to get ethical approval granted at Bristol medical school to carry out a pilot teaching programme there entitled "How to Make an NHS – Learning to Lead for medical students," along with researching the effects of this programme afterwards.



Some student champions have already established local Political Medics chapters, including Cambridge, Exeter & Bristol medical school. We ran a national essay competition, with a top prize sponsored by MDU. We also collaborated with "That Medic Network" to create a Telemedicine handbook for students.

Our journey was not without challenges. Rapid growth tested our ability to engage consistently, and the initial absence of a full executive committee meant a heavier workload for us as co-founders. Additionally, the timing of our essay competition could have been more strategic, but these experiences have only sharpened our strategic planning.

Through establishing Political Medics UK, I learnt that with tenacity, consistency and resilience, a concept can be transformed into a national organisation. Furthermore, I learnt that a key feature of being an effective leader is to convey passion for your project to their team in such a way as to

ensure those who you recruit are just as eager to work towards the common goal as you are. Moreover, when encountering issues, the same passion that a leader avails of to kickstart their journey must also be utilised in order to overcome issues; preventing the team from losing momentum, and propelling the organisation forward through adversity.

The project's success has been testament to the conviction that leadership, powered by perseverance and collaboration, can translate a vision into a tangible force for change in healthcare.

Marguerite O'Riordan

Project Report: **Saving Little Lives Project**

HLA Scholar: **Simret Niguse**

Cohort: Cohort 35 - London virtual

Ethiopia is one of the five countries with the highest total number of newborn deaths globally (99,000 annually). In Ethiopia, about 52% of under-five mortality is related to newborn death. The common causes of newborn death are prematurity, infection and birth asphyxia; and they contribute to more than 80% of neonatal deaths. Latest study on the common causes of preterm birth identified respiratory distress (45%), infection (30%) and birth asphyxia (13%) as the most common causes of preterm deaths. Consequently, evidence for strategies to effectively identify and manage neonatal problems are critically needed to promote both neonatal and child survival—particularly because an ever-increasing proportion of under-5 deaths are neonatal.

Our primary goal is to reduce neonatal mortality by 35% at the population level at the scale-up sites using our synergistic interventions which target the primary drivers of perinatal and neonatal mortality. Overall, the intervention package will reach 80% of

small babies at the intervention sites. At each site:

- 80% of small babies receive effective Kangaroo Mother Care
- 80% of asphyxiated neonates are resuscitated
- 80% of sepsis cases receive treatment
- 80% with respiratory distress receive non-invasive breathing support

We will optimise services for small babies across the home-health center-hospital continuum of care by customising existing evidence-based interventions to each level of care in the health system.



Our implementation package addresses three focused areas:

- Minimum care package at labour and delivery
- Minimum care package at the Neonatal Intensive Care Unit (NICU)
- Kangaroo Mother Care

This implementation package aims to address these areas to achieve the project's set goal of neonatal mortality reduction mainly by providing clinical mentorship to frontline care providers at NICU and Labor /delivery units.

Our project has been implemented in 4 regions of the country. Tigray region is one of the sites to implement this research project working alongside partners at Mekelle University.

After the project was started and implemented for three months, a war erupted in the Tigray region of Ethiopia and the project was interrupted for one year (June 2021-June 2022) as there were restrictions on cash transfer and a lockdown of the state by the Federal government. Later, through negotiations orchestrated with the

implementing partner UNICEF, the project was made to partially resume in relatively secure areas of the region. So, the project was started ahead of my HLA enrollment and continued with a revised and accelerated mode of implementation to compensate for the lost time during the year.

We have completed the implementation of the project in first-phase hospitals and currently we have started implementing it in second and third-phase hospitals.

Simret Niguse



HLA Communications & Networks

Pedra Rabiee

Director of Communications

As the new Director of Communications, it is both an honour and a responsibility to share with you the profound impact that effective communication has had on our organisation, especially in these transformative times.

In the dynamic landscape of healthcare leadership, communication is not merely a function; it is the beating heart that connects us all. It is the conduit through which ideas, aspirations, and accomplishments flow, knitting together the rich tapestry of our diverse community. Over the past year, we have undertaken a comprehensive review of the HLA's communication strategy, recognising it as the lifeline that sustains our vision and propels us forward.

Through various channels, including our dedicated platforms and the integration of Medics.Academy's app, we have established a vibrant dialogue with our scholars, alumni, facilitators, and partners. This engagement has been instrumental in tailoring our initiatives to align more closely with the evolving needs and aspirations of our community. It's not just about broadcasting information; it's about creating a

space for meaningful conversations, collaboration, and collective growth.

This year, as we navigate the aftermath of the pandemic and witness a heightened awareness of public miscommunication, the role of effective communication becomes even more pivotal. Our scholars, driven by dedication and resilience, have undertaken impactful projects that not only address the challenges of their respective fields but also contribute to a broader narrative of positive change.

In addition to the vital role of communication, it is equally paramount to acknowledge the significance of networks within and beyond The HLA. Networks serve as the intricate web that binds our community, fostering collaboration, mentorship, and the exchange of ideas. Within the HLA community, the interconnectedness of this network not



only enhances the learning experience but also contributes to the overall sustainability of our programs. As we navigate the ever-evolving landscape of healthcare, nurturing and expanding these networks becomes not just a strategic imperative but a key piece of our sustainability, ensuring that the HLA remains a beacon of innovation, collaboration, and positive change in the global healthcare community.

As we delve into the next chapter of The HLA's journey, I am inspired by the collective dedication and unity within our community. The hard work and spirit of common purpose among our teams, facilitated by effective communication, have been the driving forces behind our expansion. From the inception of The HLA seven years ago with 11 scholars in London to now, with over 500 individuals completing the program across 38 cohorts from more than 20 countries, The HLA's journey has been nothing short of extraordinary.

As the new scholars begin their HLA journey, in my role as the Director of Communi-

cations, I am committed to amplifying the voices within our community, ensuring that every achievement, every project, and every individual story is shared and celebrated. The HLA is not just an organisation; it is a movement, a collective effort to redefine healthcare leadership for the 21st century.

In closing, I extend my deepest gratitude to each member of our community. All of this demonstrates our determination to put these issues at the heart of our organisation. Our organisation's ethos, principles and focus on social change are not slogans tacked on a wall. They define us, make us different from other organisations, enable us to attract and retain exceptional people and are integral to our success and sustainability. Despite the magnitude of challenges we face as a community, we will continue to foster positive impact for our healthcare systems, the countries we serve for, and the global community.

Pedra Rabice

HLA CAFÉ

In our second year of launching the HLA Café for our scholars, we've created a dynamic virtual space that adds a refreshing touch to our academic weeks. Over the span of seven engaging weeks, the HLA community came together to participate in the diverse sessions held at the onset of each academic week. Each week was dedicated to a unique theme, ranging from discussions on Women in Healthcare Leadership, Nurses and Allied Health Professionals, Wellbeing, Global Health, Innovation and Entrepreneurship.

The HLA Café served as a vibrant hub where both new and seasoned scholars connected with one another and alumni. It became a lively forum for delving into new and ongoing projects, exchanging ideas, and delving into thought-provoking discussions centred around the weekly themes. This collaborative environment not only facilitated networking but also ignited a spirit of cooperation and camaraderie. The HLA Café, much like our broader community, embodies the ethos of shared learning and support, where scholars can nurture meaningful connections that extend beyond the confines of a conventional academic setting.



HLA IDEAS

Programme Manager - Natalia Skorupska
Director - Ali Jawad

HLA:IDEAS is an innovative incubator programme for social enterprises and not-for-profit organisations in healthcare. It was launched in September 2020 after seeing the lack of support in the not-for-profit sector, compared to the for-profit sector. We focus specifically on organisations working within healthcare as we recognise the specific needs and challenges that healthcare professionals face. Furthermore, our aim is to foster leadership in healthcare through entrepreneurship, by empowering healthcare professionals to take their ideas further, to achieve the most significant impact.

HLA:IDEAS is designed to provide support through challenges associated with starting and growing an organisation in the not-for-profit sector. From setting up solid foundations by outlining the vision and values of the organisation and writing a founders agreement, through working on branding and developing partnerships, to scaling up one's impact - we guide them through each stage, with focus on being sustainable.



Achievements

Since launching in September 2020, we have enrolled 23 organisations onto the programme. They work to tackle various societal issues, such as:

- Widening access to Medicine, e.g. TAMS, We Are Medics, In2MedSchool
- Promoting diversity in Medicine, e.g. Melanin Medics, Widening Participation Medics Network
- Supporting displaced doctors to practice in UK, e.g. The Phoenix Project
- Mental health, e.g. Project Talk
- Global health issues, e.g. FGM Education Project

HLA:IDEAS created a network of like-minded individuals, motivated to bring about a positive change and help solve societal issues that they have witnessed, or experienced themselves. Individuals enrolled on the programme value being part of this community, learning from others and creating partnerships to support each other.

Since joining the programme, our initiatives have focussed on setting up solid foundations, expanded their teams, and continued

to deliver their work, with focus on creating sustainable solutions to ensure longevity of their organisations. They have flourished and their success speaks for the hard work that they have put in.

Two of our HLA:IDEAS scholars, Kirsty Morrison and Khadija Owusu, were awarded the prestigious Diana award for the achievements of We Are Medics and Melanin Medics, respectively. Founders of the Portfolio Clinic, Dr Saajan Basi and Dr Shiv Sharma, have both been accepted onto the NHS Clinical Entrepreneur programme.

We have set up a mentorship programme by recruiting external mentors with a wide range of expertise, enabling us to provide the initiatives with guidance tailored specifically to their needs.

We have created the Board Observer programme which is a unique opportunity for healthcare professionals to gain board level experience, while providing organisations with independent support, helping them focus on their long-term strategy.

The Board Observer training involves a faculty of NHS Chief Executives, NHS Clinical Leaders, NGO Chairs and CEOs of successful businesses in the healthcare space. For the Board Observers, the experience at strategic leadership level will enable them to gain transferable skills and empower them to take on further leadership roles, at ever higher levels of responsibility. They will also have the requisite experience to be successful in future Board applications. One of the Board Observers has already been successfully appointed to a Board committee of a UK University.

In addition to the above support, The Healthcare Leadership Academy also awarded financial awards to Melanin Medics and The Aspiring Medic's Support (TAMS) organisations, and we are currently developing more financial grants in order to support the work of HLA:IDEAS initiatives.

Feedback from our initiatives

"HLA IDEAS has been an incredible platform to engage with like-minded individuals who want to affect sustainable change, [it] has been eye-opening to further understand the unique complexities of navigating the voluntary sector."

Jacob Oguntimehin, Founder of The Aspiring Medic's Support

"One of the most useful elements of HLA IDEAS for us has been the mentorship. It's provided significant support during some teething issues we have experienced over the last few months."

Kirsty Morrison, Founder of We Are Medics

"HLA:IDEAS has helped In2MedSchool grow from a small organisation into a national initiative through its support in delivering workshops and exercises that are aimed at improving its sustainability and overall reach."

Brian Wang, Founder of In2MedSchool

"The HLA IDEAS programme was exactly what I needed. HLA IDEAS has continued to provide the perfect opportunity to develop individual leadership capacity, strengthen peer support and promote organisation development"

Olamide Dada, Founder of Melanin Medics

"What we have loved about HLA:IDEAS is the facilitation to grow but also the guidance to do it in a sustainable way. This enables us to have a larger impact whilst still making sure we maintain our original vision and purpose. We have also met some inspiring individuals both on and through the programme who have been brilliant to work and collaborate with."

Megan Pode, Founder of Medics&Me

"Working within HLA:IDEAS has provided a great platform to reflect on the structure and objectives of our organisation, as well as to meet people with similar interests. It has also been clear how hard the HLA:IDEAS team works to promote opportunities for collaboration and growth."

Jonathan Bowley, CEO of The Phoenix Project

Events & Conferences

HLA Winter Conference 2023

4th - 5th of March 2023



This year's HLA Winter conference delved into the profound theme of 'The Side-Effects of Healthcare Systems,' a subject of critical importance in our ever-evolving landscape. It was an esteemed privilege to welcome Sir David Haslam, the immediate past Chair of the National Institute for Health and Care Excellence (NICE), as our keynote speaker. Sir Haslam shared his ethical insights on the trajectory healthcare systems should consider for future sustainability including within the realm of healthcare finance.

The conference workshops were thoughtfully curated around the theme of crisis management, providing delegates with a platform to collectively explore short and long-term strategies to address pertinent challenges. This collaborative approach allowed participants to pitch innovative solutions, fostering a shared commitment to navigating the complexities of healthcare systems. Just as in the broader HLA community, the conference served as a space for meaningful dialogue, shared learning, and a collective endeavour to shape a more sustainable and resilient future for healthcare.

Day 1

Workshop 1: The Closure of General Practices in a Rural Area

Workshop 2: Bed Crisis Management

Day 1 unfolded with two insightful workshops, each delving into pressing healthcare challenges. In Workshop 1, the focus was on 'The Closure of General Practices in a Rural Area,' sparking discussions on the merits, challenges, and potential solutions to healthcare sustainability in such contexts. Workshop 2 shifted the spotlight to 'Bed Crisis Management,' a critical issue requiring thoughtful strategies. Together, these workshops provided a deep dive into the multifaceted dimensions of healthcare sustainability, addressing both slow-growing and acute crisis issues that resonate globally.

In parallel, participants seized the opportunity to hone their public speaking skills for media engagement, recognising the pivotal role effective communication plays in the leadership toolkit. This skill development aligns with our commitment to nurturing well-rounded healthcare leaders equipped to address challenges on all fronts.

Day 2

Healthcare-Themed Hackathon

Day 2 took an innovative turn with a Healthcare-Themed Hackathon, bringing together a diverse cohort of participants. This collaborative forum facilitated the application of all six HLA pillars of leadership, allowing participants to channel their skills into finding solutions to prevalent healthcare system challenges. The hackathon exemplified our commitment to hands-on, practical learning, fostering a spirit of creativity and problem-solving among our future healthcare leaders.

HLA Community Weekend

20th - 22nd of October 2023



Our inaugural HLA Community Weekend, set against the picturesque backdrop of Devon, marked a significant milestone for our community. This special weekend served as a unique opportunity for our diverse community, including esteemed alumni, to come together, connect, and foster meaningful networks. The highlight of this year's weekend was an engaging workshop focused on the current hot topic of evaluating the impact of healthcare strikes from various perspectives. The discussions and insights garnered over the weekend underscored the profound impact of such communal gatherings on our community. These invaluable experiences are integral to shaping the long-term strategy of the HLA, reinforcing our commitment to creating platforms that go beyond traditional learning, emphasising collaboration, and community engagement.

Cohort Director Weekend

Friday 19th to Sunday 21st of May 2023



In our second year of hosting the Cohort Director Weekend, we returned to the idyllic setting of Devon, inspired by the success of our previous community weekend in the same location. This annual gathering provides a dedicated space for our cohort directors to come together. Beyond the opportunity for bonding and catching up, the weekend serves as a crucial forum to delve into the upcoming strategy and progression of the HLA in the coming year. As stewards of our programs, the cohort directors play a pivotal role in facilitating the development of our scholars. This event not only ensures their continued growth and cohesion but also contributes significantly to the longevity and sustained impact of the HLA.

Spotlight: HLA Cohort Directors

Newcastle Cohort Directors



Carina Dowson

Women in Healthcare Leadership (WIHL) Network Lead, and Executive Lead for Cohort Director Development in the HLA. Since starting as a scholar whilst a senior medical trainee, I have qualified as an acute medicine consultant and taken on the clinical lead role for our department. I have no doubt that what I've learned from the HLA helped me make that transition.



Yamen Jabr

Surgical trainee in Orthopaedics. I have been part of the HLA family since 2020, and the dynamic and engaging groups of scholars I've been fortunate to meet have truly reflected the big leaps the HLA has taken in creating a more inclusive environment for students and healthcare professionals, including dentists, midwives and physician associates to name a few.



Vassili Crispi

Brain Tumour Junior Research Fellow at Leeds Teaching Hospitals, and an aspiring academic neurosurgeon. As a trade unionist, I have worked towards significant changes at undergraduate and postgraduate levels in areas of representation, recruitment, and improvements in pay, rotas, and working conditions.

Scotland Cohort Directors



Iain Campbell

HLA Artificial Intelligence Lead. It is my belief that the full potential of A.I. technology should be harnessed in healthcare, while significant leadership is needed on the regulation and policy fronts. Whilst there are ethical questions in many areas, in healthcare these are particularly significant.



Jacob Bloor

Mentorship Program Lead for the HLA. Since becoming a scholar in 2019, I've been fortunate to engage in various HLA initiatives, including the HLA Ideas Program, HLA Café Sessions, and HLA Curriculum Discussions. The community truly holds a special place in my heart, and I hope that soon, it will also be yours.



Flora Jobson

I became a cohort director in 2020 when moving to Glasgow to do the Foundation Programme there. We have had a wonderful diversity in the projects being undertaken by scholars, and an enriching experience of Scotland thanks to the bountiful local knowledge of my fellow cohort director Ian Campbell. I am also excited to soon undertake a Diploma in Tropical Medicine and Hygiene.

London Cohort Directors



Asha Thompson

Dentist by background with a portfolio career focused on surgery, education and authentic leadership. My clinical passion is currently in oral and maxillofacial surgery, and you can find me teaching at King's College University as a Senior Clinical Teacher in Oral Surgery and a group lead for the humanities module for dentists and dental therapists.



Emma Boxley

As a current medical student, I also serve as the Co-Founder, Trustee, and COO of Mind Health, the first UK charity supporting medical student wellbeing. I am dedicated to equipping medical students and doctors with the skills they need to not just survive but thrive in their medical careers.



Nadine Abbas

Doctor in London with a passion for improving women's health using medical technology. She is a current cohort director at the HLA. She was part of the first ever HLA cohort as a scholar. She's been involved in numerous projects and has won multiple prizes.

Leeds Cohort Directors



Emma Tonner

I am a National Medical Director's Clinical Fellow currently working at the National Institute of Health and Care Research in health research and policy. I am passionate about empowering healthcare professionals to be change-makers within their systems and communities at all levels; providing them with the skills and voice to achieve this.



Chevonne Risbrooke

The transition from being a scholar to a cohort director brought a new perspective and appreciation for the HLA and the work it does. Being a CD has challenged and motivated me to acquire new skills and take hold of opportunities. I have learnt so much from my fellow cohort directors, scholars, and wonderful speakers we were able to have.



Eleanor Morris

I am now entering my third year as a Cohort Director, having joined the HLA as a scholar in 2020. I am an Academic Clinical Fellow and Core Trainee in Psychiatry, and a Trustee for a Global Health charity called Students for Kids International Projects (SKIP).

Bristol Cohort Director



Eamon Rawlins

Working with the HLA has resulted in some of the most rewarding years of my life. During my HLA Scholar year I was involved in a national educational conference, and since becoming a Cohort Director I've learned so much more about guiding others and creating innovative ways to bond and learn together remotely.



Pedra Rabiee

Pedra is the Director of Communication for The HLA and is also an Education Fellow in London. She acts as a Junior Advisor for the Gender Equity Initiative in Global Surgery and serves as a Trustee at Students for Global Health. With previous experience at international health organisations such as The World Health Organization, Doctors of the World UK, and THET, Pedra conducts research on global health.



Leila Ellis

Leila is a NIHR Academic Clinical Fellow in Paediatrics based in Bristol with a research interest in childhood cancer. She is also undertaking an MSc in Healthcare Management, Leadership and Innovation. Leila joined the HLA in 2020 as a scholar and co-founded the HLA Café and HLA Clubhouse international networking sessions. She is currently a Cohort Director, mentor and lead for HLA Community activities.

London Virtual Cohort Directors



Ece Nur Cinar

Orthopaedic registrar based in London and pursuing an MSc in global public health at Queen Mary University of London. Additionally, I am honoured to serve as a member of the Young Surgeons Committee for SICOT (International Society of Orthopaedic Surgery and Traumatology).



Soham Bandyopadhyay

Academic clinical fellow in neurosurgery with an affinity for global health and medical education. Over the past year, we have focused not just on leadership skills but also on the multidimensional aspects of healthcare, echoing my own pursuits in medical education and healthcare business and finance.



Jonathan Fee

General Practitioner and partner in a rural practice in Northern Ireland, with interests in primary care research and medical education. I am a member of RCGP Northern Ireland Council.

London Virtual Cohort Directors



Alex Lee

Doctor working in general practice in the East of England with a background in medical politics and Law. I represent colleagues on the BMA Regional Council and on the Local Medical Committee. With the HLA I have been a Cohort Director for several years.



Kieran Robinson

Paramedic working in the East of England. I've developed somewhat of a portfolio career and have worked within NHS and private ambulance services, telephone triage, and most recently within a new virtual ward team.



Johann Malawana

In 2016 he founded the Healthcare Leadership Academy to elevate leadership teaching within healthcare. In the same year he founded Medics.Academy, bringing technology-enhanced formal teaching of all kinds to healthcare. Johann has held several Board and leadership roles over the years and is an active academic in Health Education with an active research group in the School of Medicine at UCLan.

Amsterdam Virtual Cohort Directors



Andrea Johnson

Co-lead for the Dental Network. I became a cohort director because the HLA is a genuinely supportive community, where ambition to become a better leader is nurtured regardless of where you are in your career. Outside the HLA I am a highly specialised dental technician, the chair and co-founder of the dental charity Den-Tech, among many other things.



Jim Determeijer

International Expansion Lead. I am a medical Doctor and Global Health PhD candidate who grew up in various African countries and The Netherlands. I set up the first International HLA Cohort in Amsterdam together with Ilse Blomberg and Emma Oostenbroek, and later created the HLA: International Expansion to bring the opportunities of the HLA to more people.



Ilaf Moslawy

Ilaf is a doctor in the West Midlands with an interest in holistic healthcare, medical anthropology, global health, sustainable and green practice, expedition medicine, and exploring healing modalities. She joined the HLA in 2020 as a scholar and founded Medics4Medics, a student society rooted in peer support through workshops and talks on mental health, at the University of Southampton.

Amsterdam Virtual Cohort Directors



Anne Meierkord

Medical doctor based in Berlin, Germany. She works clinically at the Charité Institute for International Health, training in infectious diseases, and academically as a health policy analyst at the Centre for International Health Protection at the Robert Koch Institute, Germany's national public health institute. She has a keen interest in pandemic preparedness and tackling global health challenges.

**Thanks to our HLA community
for a successful 7th year and
we wish many more to follow**