

# CV Martin Sandler FRCP

## Career Aspiration

I am an experienced medical practitioner and an accomplished clinical manager and leader . My professional intention is to improve the effectiveness and efficiency of clinical care along the healthcare economy continuum primarily by education and innovation.

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## Medical Training and Career

University of Glasgow MRCP (UK) 1986	Graduated MB ChB July 1983
Joint Accreditation in General & Geriatric Medicine Cert Health Economics University of Aberdeen FRCP (Glasg) 1997	October 1990 1990

## Additional Qualifications

British Association of Medical Managers Advanced Medical Leader Award Q Learning Leadership in Business Award, incorporating NLP Practitioner Prince II practitioner Nationally accredited mediator – London School of Mediation	2007
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## Relevant Examples of Initiatives/Experience

- Integration of Elderly and General Medicine Solihull Hospital
- Seminal merger between Trusts – high level political exposure
- Single Patient Record – precursor to electronic patient record
- Closure of Yardley Green Hospital, planned transfer to Heartlands and community
- Development of MAU/MIU at Solihull to sustain emergency services
- Addressing MRSA/C Diff epidemic by support, education and development
- Developed acute elderly ward at Solihull as a “lean” project – “Lean Champion”
- Management of Acute Medicine, Elderly Medicine, Rheumatology and Neurology
- Board level experience as Medical Director
- Hospital Group
- Inception of Rapid Access Services eg Stroke/TIA, Hot Joint, Lung Cancer
- Re-engineering of hospital efficiency eg “Perfect Week”, efficiency by redesign
- Redesigning at hospital level eg front door acute and frailty Services, development of discharge to assess projects, raft of IT system initiatives, redesign community hospitals, end of life care.
- Leadership of system integration, healthcare system wide redesign in frailty, PLACE level developments
- Stroke Centralisation in Coventry and Warwickshire Integrated Care System
- NHSEI Clinical Leadership of Virtual Ward Implementation across Midlands ( approx. 10 million population, 11 ICS)
- NHSE Regional Clinical Lead for Frailty improvement programme across Midlands

## Career History

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<b>George Eliot Warwick Hospital Regional Clinical Lead NHSE Midlands</b>	<b>Deputy Medical Director Associate Medical Director</b>	<b>2018 to 2025 2018 to present 2021 to present</b>
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I recently relinquished operational responsibility as Deputy Medical Director at George Eliot Hospital and focused on Community and Rehabilitation Services as Associate Medical Director across Warwickshire. At the same time my Regional NHSE remit has grown significantly.

- Chair the Expert Advisory Group for developing Frailty across the Coventry and Warwickshire Health Care Partnership.
- Chair C&W A&E Delivery Board, Virtual Health & Care Board, Integrated Care Board
- Leading Ageing Well programme, Virtual Ward development for ICS
- Worked through the challenges of Covid and Winter pressures in a small beleaguered Trust and at the same time have developed community services and innovated constructively and with engagement of all partners.
- Helped deliver integrated stroke service across Coventry & Warwickshire
- Routinely deputise for Medical Directors in both acute Trusts in the range of MD roles including Trust Board attendance and presentation, serious disciplinary issues
- Lead on clinical quality systems including implementing PSIRF system
- Medical leadership in implementation of erostering , agency programme, job planning

### **Wye Valley Trust      Deputy Medical Director      2016 - 2018**

The opportunity to be seconded arose in December 2016 when SWFT developed a supportive relationship with Wye Valley Trust. The latter had just emerged from special measures (quality) and had developed a £38 million deficit on a base budget of £180 million. There are residual quality issues eg highest mortality in the country (as judged by SHMI), an ongoing financial challenge and significant medical staffing and cultural difficulties.

The 2 trusts were thought to be similar in some aspects eg size, combination of acute and community services, population makeup though SWFT has been more successful and consistent. Geographically they are 75 miles apart.

I was fortunate in having had complete autonomy and have managed all aspects of the medical director role other than Responsible Officer duties.(training now completed)

- managed disciplinary issues
- attended and presented to Trust Board routinely and acted as Caldicot Guardian,
- Designated Individual for the Human Tissue Authority.
- Close involvement in the STP, a developing ACO and local CCG/primary care have been features of this role along with the opportunity to work closely with NHSI, NHSE and the CQC.
- Addressing large staffing deficiencies by active and creative recruitment, restructuring the medical management arrangements and putting in place a development programme have been significant contributions.
- Enhancing the clinical quality regime and redesigning the mortality management policy and process have also been important.
- Establishing relationships with a consultant body who had previously been disconnected from “management” has brought a new sense of collaborative purpose to a Trust which has undergone serial changes of management and external “support” over recent years. This in the context of an ongoing requirement to manage down the financial deficit and provide more cost effective care in an isolated rural District General Hospital

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### **Warwick Hospital      Associate Medical Director Emergency Division      2015**

I was invited to move trusts and quickly developed good working relationships and became a significant and flexible clinical contributor within Medicine and Care of the Elderly. Achievements included clinical integration within urgent care services, development of new clinical protocols and frailty services, and managing some complex team behavioural issues.

### **Solihull Hospital      Clinical Director      2001-2009, 2013-2015**

Consultant Physician and Clinical Director for Elderly Medicine with remit across 3 hospital sites and Solihull Community. Initiation of frailty services at a time of financial stringency was a particular challenge in previously neglected clinical area. We initiated multiple projects (50+) and delivered on the majority.

- Challenges of emergency medical care and a relatively isolated general/elderly medical service.
- Responsible for the establishment of a system of Acute Physicians with a redesigned Emergency Medical Admission ward and Medical Assessment Unit.
- Management of “problem children” in Neurology and Rheumatology, and achieved satisfactory job plans and working arrangements in difficult circumstances in both specialities, as well as among diverse general medical colleagues.
- Establishment of stroke units and services
- Development of a community assessment and rehabilitation team (CART)
- Development of successful proposals to move off the Yardley Green site.
- Maintained a clinical workload at least equivalent to colleagues.
- I initiated and chaired the Strategic Health Authority Training Committee for Acute Medicine, establishing and developing the speciality in our Region before handing this committee over 3 years later. At that time we had 15 SPRs in acute medicine.

### **Solihull Hospital      Consultant General Physician      1992-2016**

I was appointed as consultant physician at Solihull Hospital April 1992.

- Remit to develop an integrated Medical and Elderly Service which we achieved rapidly and which has withstood the test of time.
- We opened a newly built District General Hospital in July 1994, appointed 4 Consultant colleagues and merged with the nearby Birmingham Heartlands Hospital NHS Trust (1996).
- Closely involved in high level negotiation in relation to the merger (first in the UK).

### **PreConsultant clinical experience**

Teaching District General and University Hospitals initially in the West of Scotland and subsequently as senior registrar in Birmingham and Coventry on the West Midland Senior Registrar Rotation in General and Geriatric Medicine.

Involvement in service development as a trainee led early to Regional and National responsibilities eg Training Committee for British Geriatric Society, BGS Council, Hospital Consultants and Specialists Committee. While training I initiated a medical audit programme at Selly Oak/ QE hospital, and developed a national management development initiative for senior registrars in conjunction with Henley School of Management. On rotation to Coventry I was the medical link for negotiating development of the CCHA progressive village of care initiative, which replaced Whitley Hospital services and remains a seminal reference model of care.

### **Additional Information**

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- PACES examiner ( chair of examiners in UK and abroad)
- Honorary Senior Lecturer for Birmingham University.
- TeamSteps trainer – human factors training programme
- Nationally accredited mediator, I was the medical lead for HEFTs informal resolution service with an unblemished success rate. I assisted other Trusts in dispute resolution.
- Common Purpose Training, a training programme run on a charitable basis and focussed on leadership beyond authority, development and use of networks and recognition of the shared challenges across diverse systems and organisations.
- Contributed to the Muir Gray Better Value Healthcare culture development programme.
- Completed Responsible Officer Training

### **Managerial and Leadership Skills**

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- Presentable and personable, articulate and charismatic
- Excellent interpersonal, influencing and negotiating skills
- Hardworking and outcome focussed, driven to provide exceptional care
- Lateral thinking and innovative, supportive and developmental
- Analytical but decisive, able to take considered risks.
- Robust financial management, managing to invest in people and projects.
- Politically experienced, past exposure to managing the media
- Substantial experience of managing culture to generate performance
- Track record of integrating people, teams and services
- Well connected within the local community including Primary Care
- Project management experienced, thrives on driving positive change
- NLP Practitioner, BAMB Advanced Medical Leader Award, Prince II practitioner
- Experienced in investigation, case management, conflict resolution and disciplinary issues
- Operationally savvy beyond medical services
- Above all first and foremost patient centred!