

# Coventry and Warwickshire Trailblazer Fellowship

## Final Reports Cohort 5 - 2024/25

October 2025



### Fellows:

Dr Charlie Averill – Woodside Medical Centre, Coventry

Dr Mary Bronwen – Bulkington Surgery, Bulkington

**Contact:** CWTH Fellowship Lead - Dr Sarah Hall [sarah.hall24@nhs.net](mailto:sarah.hall24@nhs.net)

The Trailblazer scheme allows motivated, qualified clinicians, to work in practices in areas of socio-economic deprivation. The aim is to develop the skills, knowledge, experience, and resilience to stay working in these challenging, but incredibly rewarding, environments and to help practices in under-resourced areas to recruit and retain clinicians.

*These fellowships are offered by NHS England - Midlands, via the Workforce, Training & Education Directorate, with Coventry and Warwickshire Training Hub supporting their delivery locally since 2020.*

## **Mary Bronwen**

### **Trailblazer Fellowship 2024 -2025**

#### **Coventry & Warwickshire Cohort 5**

I enrolled on the Trailblazer fellowship as my practice is situated in an area with a large, predominantly resident, Gypsy and Irish Travelling community. I remember several conversations with young mums who were unsure about vaccinating their children and I felt under equipped to be having those conversations – the words I normally used didn't seem to have the same effect.

I wanted to see if we could improve our rates of childhood immunisation and I set out with the hope of tailoring a resource or a service that could achieve that. What I found as I entered the journey of learning about these communities and trying to understand the challenges that they faced led me in a different direction. The more I began to learn, the more I realised that the issues that result in such stark differences in health for these communities compared with the general population, are complex and require care and reflection if we want to respond meaningfully.

I have had the privilege of having some wonderful conversation throughout this year. Conversation that includes health professionals, the headteacher of our local school, the GRT lead in Warwickshire police, researchers at the University of Worcester, the lead person at Lincolnshire Traveller Initiative and one of the Assistant Directors at the Race & Health Observatory. These have been conversations with people who care and where I feel I was imparted deep wisdom. The space and time given by the fellowship has afforded me the chance to be reflective and find ideas that can be sustainable and are likely to make a meaningful contribution.

One of the key things I've learnt this year is about building trust. With a community that has been chronically excluded and misunderstood and continues to experience this countries' last remaining socially acceptable form of racism, this will take time. Time and sustained care, acceptance and understanding. I remember one of my first conversations, with Ian Tait, NHS Health Inequalities Ambassador in Hereford and Worcester, in which he shared a story with one of his patients when he worked as a GP. And how after 16 years of treating this patient, he turned to Dr Tait and said, "What do you think Doctor, I'll trust you?"

I really wanted to have something tangible to show at the end of this year, a project that could demonstrate the usefulness of the fellowship and would honour all of that wisdom I've been able to marinate in! However, although I've had some ideas which I think could be very valuable, I've been hesitant to press ahead with something before there is the adequate resources and structures in place to ensure these interventions are sustainable and invited. Importantly I think one of the best next steps is to have some sort of patient engagement forum, where the listening is continued and informs any further steps, but also contributes to building bridges just by its very act.

What I failed to recognise until recently is that everything I've learnt and all the thinking I've done has contributed to me being a better GP for my patients from these communities, and for my patients in general. I think as GPs we are in a privileged position, in that we see people and families over years and decades. Feeling better equipped myself I find the complexity of these interactions rewarding because I feel I can offer something of value. More often than not it's listening. Worry that I'm not going to be able to meet a need can distract the quality of my listening. However, I've noticed that I experience this less and less because I feel more confident that I have something to offer. For example, a few weeks ago, I saw a patient who I had seen several times before with a difficult problem. On this occasion I was able to ask him about his wider life, and he opened up to me that he was actually living homeless. By the time we'd finished and organised a several point management plan together, including social prescribing, he thanked me for listening, noting it was a rare experience for him.

One of the key themes for me this year has been about the way trauma can impact on health. We had a teaching session about trauma informed care early on. I've been able to build on this by using the study budget to learn more through a couple of courses, including one I'm going to attend at the end of this month. I feel that the impact of difficult life experiences on health is something I see frequently, not only in mental health, but in physical health problems too. Understanding this helps me be a better GP and I often relish the more chronic and complex problems that traditionally could cause that "heart-sink" feeling. For me this is something I'd love to build on as a GP and I'm grateful for the opportunity this fellowship programme has given me to discover this. I was also able to use some of the study budget to do some training in managing chronic pain, noting how frequently I saw people with this issue, and how frequently these came alongside stories of difficulties and trauma.

I am chairing a collaborative group of different professionals across Warwickshire who work with Gypsy and Travelling communities and whose roles include immunisation in some way. This is a subgroup of a wider group being led by Warwickshire police of people working with

the GRT community. It's been a privilege to start this up and draw people together. It is helping to facilitate the sharing of ideas and resources, but is also allowing us to think together creatively about this complex issue. I had some training in The Thinking Environment and looked at incorporating these approaches into our meetings, so I felt better prepared as the Chair, something I've not done in a professional context before. It's been an enjoyable way to run a meeting!

I'd highly recommend the Fellowship Programme. For me it's helped me understand what enthuses me and how I'd like to develop my career to sustain me in a very demanding job where I'm worried about burnout. It's given me time to grapple with complex issues in a way that allows a more meaningful response. This year has encouraged my creativity and there are several ideas and next steps that have emerged that could potentially help us serve our populations better.

On a personal note, this fellowship programme has helped me bring together difficult experiences I've had alongside who I am as a doctor and has helped me to feel more integrated. Being amongst other like-minded people in a kind and inclusive environment has helped me to feel that the difficult things I've been through can be brought into the person I am as a doctor. It has helped me heal and feel more able to respond and serve people who have or are experiencing difficulty.