Dr Mohamed Hafsal – Meridian Practice, Coventry
Trailblazer Fellow
Coventry and Warwickshire Cohort 6 2025/26

Qualifying as a GP in 2024 and beginning independent practice towards the end of the year was an exciting but challenging transition. My main practice, Meridian Practice, serves a highly deprived population, including asylum seekers, refugees and people experiencing homelessness. Alongside this, I also work one day a week at Moseley Avenue Surgery, which is a more typical general practice. Early in my career, I began to feel that although I had completed my GP training, I did not yet have the knowledge or confidence to address the wider health inequalities and complex social barriers affecting many of my patients. I often questioned whether I had enough to offer beyond treating medical conditions.

When I came across the advertisement for the Trailblazer (TB) Fellowship, I felt it was exactly the opportunity I had been searching for. Being accepted onto the programme has been one of the most valuable experiences of my early GP career. The fellowship has been truly eye-opening. Many of the concepts, approaches and practical strategies I have learnt were not covered during my GP training. Although my initial motivation was to improve care for my own patient population at Meridian Practice, the fellowship broadened my understanding significantly. I realised that health inequalities exist everywhere, and in many settings, they are hidden or masked. Recognising these inequalities is the first step towards addressing them effectively.

The fellowship has provided protected time to learn, reflect and develop professionally. One of the greatest strengths of the programme has been the national teaching sessions. These covered complex and challenging topics while allowing sufficient time for discussion, reflection and consideration of how learning could be implemented in everyday clinical practice. Equally valuable was the opportunity to interact with colleagues from across the country, sharing experiences and learning from different perspectives. These discussions reinforced that many of the challenges we face are shared nationally, while also highlighting innovative local solutions.

As part of the fellowship, I selected a project focusing on metabolic health in adults under the age of 35. This area particularly concerned me because many young people living in socioeconomically deprived communities experience a disproportionately high burden of preventable metabolic disease. Their health is influenced by a range of factors including financial hardship, poor access to healthy food, housing instability, mental health challenges and limited opportunities for physical activity.

Through my project, I have begun working more closely with this patient group using a motivational interviewing approach. Rather than simply advising patients what they should do, I have focused on understanding what matters most to them, exploring their priorities and working collaboratively to develop realistic goals. This coaching-style approach has strengthened my consultations and improved patient engagement. I have become more aware that sustainable change is achieved by empowering patients rather than directing them.

The study bursary provided through the fellowship has made a significant contribution to my professional development. I used the funding to enroll on a Postgraduate Certificate in Metabolic Medicine, which has greatly expanded my clinical knowledge and understanding of metabolic disease prevention and management. Alongside this, I have attended additional local educational events and explored wider community resources, including diabetes prevention programmes, DESMOND education programmes, health and wellbeing coaching services and local charities. These experiences have enhanced my ability to support patients through both medical and non-medical interventions.

One of the most valuable outcomes has been developing stronger links with local voluntary organisations and community services. I now have a much better understanding of the support available outside the consultation room and am more confident in signposting patients to appropriate services. This has strengthened my ability to provide holistic, person-centered care. I have also become more aware of the benefits of multidisciplinary approaches, particularly in areas such as chronic pain management, where non-pharmacological interventions can often provide greater long-term benefit than medication alone.

Within my practice, I have shared my learning with colleagues through discussions and practice meetings. We have explored ways to improve the identification and support of patients at risk of metabolic disease, including increasing referrals to diabetes prevention and diabetes remission programmes where appropriate. Although these may appear to be small changes, I believe they have the potential to make a meaningful difference for our local population.

Personally, the fellowship has significantly increased my confidence as a newly qualified GP. Working with patients facing multiple health inequalities is challenging, but it is also one of the most rewarding aspects of general practice. The fellowship has equipped me with practical skills, broadened my perspective and strengthened my belief that GPs have an important role in reducing health inequalities, not only through clinical care but also through advocacy, collaboration and prevention.

Although my formal fellowship is coming to an end, I see this as the beginning rather than the conclusion of my journey. I plan to continue developing my knowledge through my postgraduate studies, ongoing CPD, specialist clinics and continued engagement with community organisations. I also hope to develop further quality improvement work within my practice, particularly around metabolic health and prevention. The fellowship has opened career opportunities that I had not previously considered and has inspired me to continue pursuing work that combines clinical practice with population health and health equity.

I would strongly recommend the TB Fellowship to other clinicians, particularly those in the early stages of their careers. It provides far more than academic learning; it offers time to reflect, opportunities to network, exposure to national expertise and practical skills that can be directly applied to patient care. Most importantly, it develops clinicians who are better equipped to understand and address the wider determinants of health. I am extremely grateful for the opportunity and believe it has made me a more

knowledgeable, confident and compassionate GP, with lasting benefits for both my career and the patients I serve.