

Tom Sanders, Northumbria University

Position:

2018- Reader, Department of Social Work, Education and Community Wellbeing, Northumbria University

Web link: <https://www.northumbria.ac.uk/about-us/our-staff/s/tom-sanders/>

Statement:

I have over 15 years' experience of reviewing articles in journals such as Social Science & Medicine, Sociology of Health & Illness, Health, and Journal of Health Services Research & Policy. I am also an Associate Editor of BMC Family Practice. My core research interest includes the social organisation of health interventions and their implementation. I am particularly interested in the 'emergence' of new research derived tools and their translation into clinical practice by patients and medical teams. Recently I researched how one particular healthcare tool (StarTBack) was used by GPs and physiotherapists in the context of their daily work, and the key determinants affecting uptake. Professional autonomy played a surprisingly important part in the process. This field of enquiry has direct relevance to the sociology of professions, and the part 'role boundaries' play in shaping evidence uptake. My interest in the use of evidence by clinicians originates from a post-doctoral post I held from 2002 to 2005, involving an ethnography of clinical routines in a heart failure clinic, where I observed how the NICE Guideline for heart failure influenced patient care. The findings uncovered a highly standardised and bureaucratic system of patient management, which constrained patient choice about therapeutic interventions. The findings echoed some of Phil Strong's insights about the institutionalisation of medical routines, and the bureaucratized forms of social interaction influencing medical care. My other area of research includes the clinical consultation, on which I have carried out several ethnographic studies, in the areas of bowel cancer, back pain, osteoarthritis and heart failure. Currently, I am working on a large primary care based study to develop a model consultation for the management of people with medically persistent (unexplained) symptoms. My contribution to SHI would be through the application of a broad knowledge of medical sociology and specifically in the above areas of enquiry.

Education:

BA Hons Social Policy Research 1992

MSc Medical Sociology 1993

PhD Health Services Research 2000

Posts held:

2014-18 Senior Research Fellow, SchARR, University of Sheffield

2010-14 Senior Research Fellow, ARUK Primary Care Centre, Keele University

2005-10 Lecturer in Medical Sociology, Medical School, University of Manchester

2002-05 NHS Exec Post-Doc Research Training Fellow, Dep of Applied Social Sciences, University of Manchester

2000-02 Research Associate, Family studies Research Centre, Cardiff University

1998-00 Research Associate, Department of Primary Care, University of Bristol

1995-99 PhD Student, Department of Social and Policy Sciences, University of Bath (MRC Studentship)

1994-95 Research Assistant, Department of Social Medicine, University of Bristol

Key publications:

Disruptive illness contexts and liminality in the accounts of young people with Type 1 diabetes, Sanders, T., Elliott, J., Norman, P., Johnson, B., Heller, S. 9 Apr 2019, In: Sociology of Health & Illness (Early View).

Social Representations of Diagnosis in the Consultation, Sanders, T., Roberts, D. 1 Dec 2018, In: Sociology 52, 6, p. 1185-99.

Incorporation of a health economic modelling tool into public health commissioning: evidence use in a politicised context. Sanders T, Salway S, Grove A, E, Hampshaw S, Goyder, 2017. *Social Science and Medicine*, 186. pp. 122-129.

Behaviour change and social blinkers? The role of sociology in trials of self-management behaviour in chronic conditions. Ong BN, Rogers A, Kennedy A, Bower P, Sanders T, Morden A, Cheraghi-Sohi S, Richardson JC, Stevenson F. 2014. *Sociology of Health & Illness*, 36(2), 226-238.

Changing policy and practice: Making sense of national guidelines for osteoarthritis. Ong BN, Morden A, Brooks L,

Porcheret M, Edwards JJ, Sanders T, Jinks C & Dziedzic K. 2014. *Social Science & Medicine*, 106, 101-109.

Personalizing protocol-driven care: the case of specialist heart failure nurses. Sanders T, Harrison S & Checkland K

2010. *Journal of Advanced Nursing*, 66(9):1937-45.

Evidence-based medicine and patient choice: The case of heart failure care. Sanders T, Harrison S & Checkland K

2008. *Journal of Health Services Research and Policy*, 13(2), 103-108.

Professional legitimacy claims in the multidisciplinary workplace: the case of heart failure care. Sanders T & Harrison

S. 2008. *Sociology of Health & Illness*, 30(2), 289-308.