Career Co-Pilot

A GUIDE FOR DOCTORS

Doctors Into Digital Health

The Roles, What the Adverts Ask For and How to Make the Move

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Why This Guide Exists

Doctors ask us versions of the same question: can I do something in digital health without throwing away my training, and where do I even start? The answer is yes, and most doctors who do it keep some clinical work. The difficulty is that there is no training number, no single route and very little written down.

This guide fills that gap with evidence. We grouped 113 NHS adverts in our database into the role families doctors move into, read the requirements in 46 job packs for CCIO, clinical lead, fellowship, clinical safety and informatics posts, checked what doctors ask on forums and in webinars, and gathered the public accounts of doctors who made the move. Every number comes from real adverts, not opinion.

> **ONE THING BEFORE YOU START**
>
> If you take only one thing from this guide, take section 4. Almost nobody starts as a CCIO. Doctors get there in steps, through a fellowship, a clinical lead post or clinical safety work, and most keep seeing patients along the way.

SECTION 1

Why Digital Needs Doctors

Every digital system in healthcare changes how clinical decisions are made. Health systems need doctors to shape those changes and to say when something is not safe.

Wherever a digital system touches patient care, someone has to make sure it supports clinical decisions rather than gets in the way. A hospital replacing paper orders and results with an electronic patient or health record (EPR or EHR), a health system bringing in AI to read scans, a region linking GP and hospital records: each one changes how doctors order, prescribe, document and decide. Someone with clinical judgement has to be in the room when those systems are designed, tested and signed off.

This guide uses the NHS as its evidence, because the NHS publishes its adverts and job descriptions in full. The work itself is the same in any health system going digital.

Some Roles Need Your Registration

The NHS clinical safety standards, DCB0129 for suppliers and DCB0160 for the organisations that deploy their systems, require a Clinical Safety Officer: a clinician with current professional registration who signs off that a system is safe to use. Your GMC registration qualifies you for that role, which most people working in digital health cannot hold. GMC registration is named in 14 of 46 job packs we read, and every time it appears it is essential.

Senior Leadership Wants Clinicians

The Chief Clinical Information Officer (CCIO), or Chief Medical Information Officer (CMIO), is the clinician on the board-level digital team. BCS guidance for employers says the post should be held by a registered clinician. That makes it one of the few senior digital roles that is effectively reserved for people like you.

> **IF YOU WORK OUTSIDE THE UK**
>
> Read the NHS findings as a map of the work, not a list of local rules. The CCIO is called a CMIO or Chief Health Information Officer in many systems, EPR becomes EHR or EMR, and DCB0129 and DCB0160 have equivalents in national health IT safety rules. Programmed activities are the NHS unit of a doctor's time, so compare sessions or full-time equivalent. Registration with your own medical regulator does the same job your GMC licence does here.

SECTION 2

The Roles, Explained

Job titles vary between trusts. The duties, the seniority and how your time is split tell you more than the label.

ROLE	USUAL SENIORITY	WHAT YOU DO	TYPICAL PAY
Digital or Informatics Clinical Fellow	FY3 to ST, or SAS	Spend one to two days a week on a digital project, such as an EPR module, an AI evaluation or a data dashboard, alongside clinical work.	Your grade's pay; Somerset 2025: £49,909
Clinical Lead for Digital	Registrar to consultant or GP	Be the clinical voice for one programme: EPR design, a pathway going digital or a new system for a specialty.	Band 7 to 8b, or sessions on your contract
Clinical Safety Officer	Any registered doctor	Run hazard workshops, write clinical safety cases, keep the clinical risk register for digital systems.	Band 7 to 8a: £49,387 to £64,750
Clinical Informatician or Clinical AI Lead	Registrar and above	Turn clinical data into evidence: real-world data analysis, AI validation, decision support content.	Usually Band 8a: £57,528 to £64,750
Deputy or Associate CCIO	Consultant or GP	Lead clinical input to digital strategy for a division or service and deputise for the CCIO.	Band 8a to 8c, or sessions
CCIO or CMIO	Consultant or GP, usually with a record of delivery	Lead the clinical side of the organisation's digital strategy with the Medical Director and Chief Digital Officer.	Band 8c to 9, or consultant scale

A Week in Three of These Roles

Digital Clinical Fellow. Three days on the wards or in clinic, two with the digital team. You test a new results-acknowledgement screen with colleagues, write up what confused them, present the fixes at the EPR design group and run a small audit to show whether it worked.

Clinical Safety Officer. You chair a hazard workshop for an AI triage tool, write down what could go wrong and how it is controlled, and sign off the safety case before go-live. When a clinician reports that the EPR hid a critical result, you are the first person the digital team calls.

CCIO. You sit on the digital board, decide with the Chief Digital Officer which clinical changes come first, chair the clinical design authority and still do your clinical sessions, which is what gives you credibility when you ask colleagues to change how they work.

Pay is Agenda for Change 2026/27 for England and the 2026/27 medical pay circular, from NHS Employers. Fellowship pay is from a published 2025 advert. Seniority is what the adverts we hold ask for.

SECTION 3

The Market in Numbers

We grouped every NHS advert in our database into the role families doctors move into. Together they hold 113 adverts, posted between March and October 2026.

ROLE FAMILY	ADVERTS	EMPLOYERS	MOST COMMON SENIORITY	BUSIEST EMPLOYERS
Clinical Safety Officer	30	22	Band 8a	Norfolk and Norwich, Doncaster and Bassetlaw
Clinical Informatics, Other	23	11	Band 8a	UCLH, East Lancashire, George Eliot
Clinical AI or Data	19	12	Band 8a	Cambridge, North Bristol
Clinical or Medical Lead for Digital	17	9	Band 8b and above	Leeds, Livewell Southwest
Digital, Informatics or AI Fellow	11	7	Training grade	GSTT, Oxford, UCLH
CCIO or CMIO	10	9	Band 8b and above, or consultant	Leeds, spread across the country
Deputy or Associate CCIO	2	2	Band 8a	Central London Community Healthcare
Medical Director for Digital	1	1	Consultant	NHS England

Career Co-Pilot jobs database, adverts posted between 31 March and 29 October 2026, grouped by job title. Clinical safety and informatics posts are open to other registered clinicians too, so not every one of these is written for doctors.

What These Numbers Tell You

- **It is a small, senior market.** 113 adverts is a fraction of what nurses or analysts see. Each post matters, and many are never advertised widely: they are filled by people already in the trust's digital team.
- **Clinical safety is the biggest door.** 30 adverts at 22 employers, open to any registered clinician. It is also the role most likely to be advertised as a stand-alone job rather than sessions.
- **Fellowships are few but well placed.** 11 adverts at 7 employers, mostly large teaching trusts. They are the clearest entry point for doctors in training.
- **CCIO posts are rare.** 10 adverts at 9 employers. Most organisations have one, and it changes hands slowly.

Consultant Posts With Digital Built In

A growing number of clinical posts now carry a digital interest in the title. Our database holds, among others: Anaesthetic Consultant with Obstetric Anaesthesia and Digital Innovation (Homerton), Consultant in Maternal and Fetal Medicine with a digital interest (St George's), an intensive care consultant post with AI research (Royal Marsden), and a Deputy Chief Medical Officer for Clinical Transformation and Digital. If you want to stay mainly clinical, these are worth searching for.

SECTION 4

The Ladder: From Fellow to CCIO

There is no training number, but there is a pattern. These are the rungs the adverts and the people who climbed them describe.

RUNG	TYPICAL POST	REAL EXAMPLES FROM OUR DATABASE	WHAT GETS YOU TO THE NEXT RUNG
1. Get Involved	Super user, digital champion, QI project with data	No advert: you ask your trust's digital team	One delivered change you can describe with a before and after
2. Fellowship	Digital, informatics, innovation or AI fellow	Clinical Informatics Fellowship in Acute Medicine (UCLH); Senior Critical Care Clinical Fellow, Digital Health and AI (Oxford); Clinical Fellow in Digital Transformation, O&G (GSTT); Innovation Clinical Fellow (Alder Hey)	A project you led to completion, clinical safety training
3. Clinical Lead or CSO	Clinical lead for a digital programme, Clinical Safety Officer	Clinical Lead, Digital Transformation Delivery (NHS England, consultant); Lead Clinical Safety Officer (Royal Marsden, Band 8a); Digital Doctor, GP (First 4 Health)	Leading other clinicians through a go-live; a seat on the design authority
4. Deputy CCIO	Associate or deputy CCIO, CMIO for a service	Associate CCIO (Central London Community Healthcare, Band 8a); CMIO for Community Services; CMIO, Local Care Organisation (Manchester)	Owning a strategy, not a project; board-level reporting
5. CCIO	CCIO or CMIO for an organisation or system	CCIO (North West Ambulance Service, Band 8c); CCIO (Central London Community Healthcare, Band 8d); CCIO and CSO (Central East ICB, Band 9); CCIO, General Practice (Kernow Health)	Regional or national roles: Regional Medical Director and CCIO

IN PRACTICE

You can enter at rung 3 if you are a consultant or GP, and many do, by taking a few sessions as a clinical lead. Doctors in training usually enter at rung 2. Rung 1 is open to everyone tomorrow, and it is the one people skip.

SECTION 5

What the Adverts Actually Ask For

We read 46 NHS job packs for CCIO, CMIO, clinical lead, fellowship, clinical safety and informatics posts and counted where each requirement appears, and whether it is essential or desirable.

REQUIREMENT	ESSENTIAL	DESIRABLE	MENTIONED ANYWHERE
Data or Analytics	31	9	38 of 46
Clinical Safety, DCB0129 or DCB0160	21	11	30 of 46
EPR or EHR	11	4	26 of 46
Research or Publications	7	18	21 of 46
Professional Registration, Any	13	3	18 of 46
A Masters	16	2	17 of 46
GMC Registration	14	0	14 of 46
Change Management	10	1	13 of 46
Quality Improvement	6	5	12 of 46
PRINCE2 or a Project Method	1	11	12 of 46
Leadership Qualification	3	8	11 of 46
Teaching or Training Others	4	7	9 of 46
AI or Machine Learning	0	0	8 of 46
Informatics Qualification	1	7	7 of 46
CCT or Specialist Register	3	1	6 of 46
Licence to Practise	5	0	5 of 46
Programming: Python, R or SQL	2	2	5 of 46
Royal College Membership	4	0	4 of 46

Job packs read by Career Co-Pilot, March to October 2026. Some posts were advertised more than once and are counted each time. A few packs are for clinical safety or informatics posts open to nurses, pharmacists and allied health professionals as well as doctors.

What This Tells You

- **Data is the skill most asked for.** It is essential in 31 of 46 packs. Audit, QI with run charts and service dashboards are all evidence. You do not need to be an analyst, but you do need to be comfortable with numbers.
- **Clinical safety is close behind.** Essential in 21 packs and mentioned in 30. If you do one course, make it clinical safety.
- **GMC registration is never optional when it is named.** It appears in 14 packs and is essential in all 14.
- **A masters is essential in 16 packs.** That is more than in the nursing packs we read, because CCIO and lead posts make up much of this sample. For fellowships it is rarely asked.
- **Research helps, but as a bonus.** It is desirable in 18 packs and essential in 7.
- **AI is talked about, not asked for.** It appears in 8 packs and is never in the essential or desirable criteria.
- **How your time is split is rarely written down.** Sessions or PAs are mentioned in only 1 pack. Ask at interview, and get it in your job plan.

Qualifications and Programmes Worth Knowing

OPTION	WHAT IT IS	STATUS IN 2026
NHS Clinical Safety Training	Essentials and Intermediate e-learning from NHS England, then a Practitioner course.	E-learning free for NHS staff; Practitioner £475 for NHS delegates, often fully booked.
NHS Digital Academy, Digital Health Leadership	Postgraduate diploma (one year) or MSc (two years) with Imperial College London, part time.	Fully funded for NHS staff in England, with a September 2026 start.
Topol Digital Fellowship	A year-long NHS fellowship for clinicians leading a digital project.	Cohort 5 completed; future offer under review as of May 2026.
BCS Membership and FEDIP	Professional membership and registration for health informatics.	Replaced the Faculty of Clinical Informatics after it closed in 2024. FEDIP costs £25 a year.
Masters in Health Informatics or Data Science	University programmes, many part time and online.	Most useful at deputy CCIO and CCIO level.
PRINCE2 or Agile	Project method certificates.	Desirable in 11 packs, essential in 1.

SECTION 6

Keeping Your Licence and Your Clinical Work

The question doctors ask most is whether digital work means giving up medicine. For most NHS routes, it does not.

Most Roles Are Blended

NHS digital posts for doctors are usually built around clinical work rather than instead of it. The adverts we and others hold show the pattern:

- **CCIO, Cambridgeshire and Peterborough, 2025:** 6 sessions CCIO and 4 clinical, with the clinical part substantive, not honorary.
- **Digital Clinical Fellow, Somerset, 2025:** 60% clinical duties and 40% digital leadership.
- **Senior Critical Care Clinical Fellow, Digital Health and AI, Oxford, 2026:** one day a week for digital work.

Revalidation

You can revalidate in a role without patient contact, as long as you have a designated body and a responsible officer and you keep up annual appraisal. If you stay with an NHS employer on blended work, nothing changes. If you move into a purely managerial or industry role, the Faculty of Medical Leadership and Management can act as a designated body for doctors in medical management roles, for an extra fee.

The GMC asks a simple question when you are thinking about a role: will it need you to use medical knowledge and skills that have to be up to date? If the answer is yes, keep your licence. Most digital roles for doctors say yes.

Job Plans and Sessions

The BMA Consultant Charter says leadership time should be recognised in your job plan, through supporting professional activities, extra programmed activities or a separate contract. Because only 1 of 46 job packs said how sessions would be split, agree it in writing before you start. Unpaid digital work done on top of a full clinical job plan is how doctors burn out of digital roles.

IN PRACTICE

Keep at least some clinical work for as long as you can. It keeps your licence simple, keeps your skills current and is the reason colleagues listen to you when you ask them to work differently.

SECTION 7

Where the Jobs Are

A handful of trusts hire doctors into digital work again and again. They are worth watching closely.

ROLE FAMILY	BUSIEST EMPLOYERS	WHAT THAT TELLS YOU
CCIO or CMIO	Leeds Teaching Hospitals (2), Bromley Healthcare, Central London Community Healthcare, Dorset HealthCare, Kernow Health CIC, NHS Central East ICB	Community, primary care and ICB posts are as common as acute ones
Digital, Informatics or AI Fellow	Guy's and St Thomas' (2), Oxford (2), Princess Alexandra (2), UCLH (2), Alder Hey, Newcastle	Large teaching trusts with research and innovation units
Clinical or Medical Lead for Digital	Leeds (5), Livewell Southwest (3), Birmingham Women's and Children's (2), Mid and South Essex (2)	Trusts in the middle of EPR programmes
Clinical Safety Officer	Norfolk and Norwich (4), Doncaster and Bassetlaw (3), Hampshire (2), HCA Healthcare UK (2), Royal Cornwall (2)	Spread widely, including independent providers
Clinical Informatics, Other	UCLH (5), East Lancashire (4), George Eliot (3)	Often open to any registered clinician
Clinical AI or Data	Cambridge (4), North Bristol (3), Bradford (2), London Ambulance Service (2)	Trusts with data science teams and research links

Primary Care Has Its Own Market

GPs have routes that hospital doctors do not: CCIO for general practice (Kernow Health in Cornwall), Digital Doctor posts in GP groups (First 4 Health), CPD Lead for Digital Learning (HEIW in Wales) and clinical lead roles in PCNs and ICBs. Some of these are well paid and close to full time.

ROLES THAT COME BACK

Doctor-facing digital posts are often re-advertised. UCLH's Clinical Informatics Fellowship in Acute Medicine and Manchester's CMIO for its Local Care Organisation both appeared more than once in 2026. If you miss one, set an alert.

SECTION 8

Sponsorship and GMC Registration

For international medical graduates, two questions decide what is open to you: does the post need full GMC registration, and will the employer sponsor you?

ROLE FAMILY	ADVERTS	SPONSORSHIP WELCOME	WHAT THE REST SAY
Digital, Informatics or AI Fellow	11	9	Most are open to sponsored doctors
Clinical Informatics, Other	23	12	About half welcome sponsorship
Clinical AI or Data	19	6	2 stated not available; the rest say nothing or are unclear
Clinical or Medical Lead for Digital	17	4	8 are unclear or conditional
Clinical Safety Officer	30	5	Most say nothing; ask
CCIO or CMIO	10	1	1 stated not available; most are internal or senior appointments

Career Co-Pilot reading of each advert's sponsorship statement, adverts held to 30 October 2026.

If You Are Waiting for GMC Registration

- **Fellowships and CCIO posts need full registration with a licence.** Every one we read asked for it.
- **Clinical safety officer posts ask for current registration with an appropriate professional body.** That wording may include overseas registration, and some employers have accepted it in the past. Ask the employer before you apply, and check the outcome of the 2026 review of the standards.
- **Data, analyst and project posts usually ask for no registration.** They are a way to start building NHS experience while you wait.
- **Clinical attachments and observerships in a digital team** are worth asking for. Gaining UK-specific experience is the barrier doctors who moved say held them back most.

If You Are Sponsored as a Doctor Now

Your visa is tied to your current job. Moving into a digital role means a new certificate of sponsorship for the new post, and the new role has to meet the rules in its own right. Check this before you resign from anything.

WHAT WE SHOW, AND WHAT WE DO NOT

An advert that says nothing about sponsorship is not an advert saying no: ask. This section reports what adverts say. It is information, not immigration advice. For your own circumstances, an immigration adviser regulated by the IAA is the right source.

SECTION 9

Beyond the NHS: Abroad and Industry

Doctors are hired into digital work around the world, and by the companies that build health technology. The rules and the pay are very different.

COUNTRY	ROLE TYPE	LISTINGS	EMPLOYERS	MIDDLE OF STATED PAY
United States	Physician informatics or medical director, informatics	121	8	About USD 325,000
United States	Clinical AI	42	16	About USD 94,000
Canada	Clinical AI	19	n/a	About CAD 120,000
Spain	Clinical AI	17	n/a	Not comparable
Australia	CMIO	10	n/a	Not comparable
United Kingdom, Outside Our NHS Feed	CMIO or CCIO	7	5	About £78,000

Career Co-Pilot international jobs feed (Adzuna), listings held to 30 October 2026, grouped by job title. Some US figures are estimates made by the job board rather than pay stated by the employer, and some listings repeat. Australian and Spanish pay was left out because the units could not be compared.

Reading the US Market

The United States has the largest and best-paid market for physician informatics, but it is not open to most UK-trained doctors. US roles usually expect a US licence and, increasingly, board certification in clinical informatics. From 2026 that certification needs a US fellowship and US or Canadian primary board certification.

Health Tech Suppliers

Suppliers hire doctors as clinical safety officers, medical directors, clinical product leads and AI clinical leads. Several of the doctors in section 12 made their move that way. Our supplier feed found only one doctor-facing post this year, a CCIO at Altera Digital Health, so we cannot measure this route reliably yet. Search supplier careers pages directly, and know that DCB0129 is the standard suppliers work to.

IN PRACTICE

Industry roles tend to want clinical credibility plus one specific thing: safety cases, product thinking or data. If you are aiming at a supplier, build that one thing deliberately inside the NHS first.

SECTION 10

Routes by Grade and Background

Your best first step depends on where you are in your career.

WHERE YOU ARE	REALISTIC FIRST STEP	WHAT HELPS MOST
Foundation Doctor	EPR super user, digital QI project, an FY3 or clinical fellow year with a digital element	One project you delivered, clinical safety e-learning
Core or Specialty Trainee	Digital, informatics or AI clinical fellowship; out-of-programme year agreed with your deanery	A supervisor in the digital team, a project with a measurable result
SAS or Locally Employed Doctor	Clinical safety officer, clinical lead sessions, informatics fellow posts	Clinical safety training, go-live experience
Consultant	Clinical lead for a programme, deputy CCIO, consultant post with a digital interest	Job-planned sessions, chairing a design or safety group
GP	PCN or ICB digital clinical lead, CCIO for general practice, Digital Doctor posts	Experience of GP systems such as EMIS or SystmOne, remote consultation work
IMG Awaiting GMC Registration	Data, analyst or project posts; clinical safety posts where overseas registration is accepted	A clear account of your clinical work in NHS language, UK experience of any kind
Doctor Ready to Leave Clinical Work	Clinical safety, medical lead or product roles at a health tech supplier	DCB0129 knowledge, a record of delivery

Beyond Digital: Other Routes Doctors Take

Digital is one of several ways doctors broaden their careers. In a search of non-ward posts written for doctors, the adverts fell into four groups.

ROUTE	ADVERTS	EXAMPLES
Public Health	About 18	Consultant in Public Health, Consultant in Health Protection, Consultant Epidemiologist, Population Health Clinical Fellow
Digital and Informatics	About 18	CCIO, Digital Specialist Clinician, Senior Critical Care Clinical Fellow in Digital Health and AI, Innovation Clinical Fellow
Clinical Research	About 15	Clinical Research Doctor, Clinical Research Facility Clinical Fellow, Clinical Research Fellow in Urology
Medical Leadership	About 10	Deputy Chief Medical Officer, Medical Director, GP Associate Dean, Associate Medical Lead for Patient Safety

Career Co-Pilot jobs database to 30 October 2026, by job title; counts are approximate because some titles fit more than one group. Our separate guide, Getting Into UK Clinical Research, covers the research route in full.

SECTION 11

Your Questions, Answered

The questions doctors ask most on forums, in webinars and in medical press, with honest answers.

Can I Do Digital Part Time and Keep Seeing Patients?

Yes, and most doctors do. NHS adverts are built that way. A Cambridgeshire and Peterborough CCIO post in 2025 was 6 sessions of digital work and 4 of clinical work, and said the clinical part was substantive, not honorary. A Somerset Digital Clinical Fellow post split the week 60% clinical, 40% digital. Oxford's critical care fellowship in digital health and AI gives one day a week to digital work.

Do I Need a Masters?

Not to start. A masters is essential in 16 of the 46 job packs we read, and those are mostly CCIO, CMIO and lead posts. Doctors who have made the move say the same thing in different words: experience inside a real project counts for more than a certificate. If you are aiming at CCIO, study then. If you are aiming at your first fellowship, get onto a project first.

Is Clinical Informatics a Specialty With a Training Number?

No. There is no CCT and no national training programme for clinical informatics in the UK. Doctors get in through clinical fellowships, out-of-programme years, local digital roles and, at consultant or GP level, sessions in the trust's digital team. Plan your own route rather than wait for a formal one.

How Do I Become a CCIO?

Usually in steps: digital clinical lead or clinical safety officer, then deputy or associate CCIO, then CCIO. The posts we hold are senior. Central London Community Healthcare advertised an Associate CCIO at Band 8a and a CCIO at Band 8d, North West Ambulance Service a CCIO at Band 8c, and University Hospitals Birmingham asked for the Specialist Register. Expect to need consultant or GP seniority and a record of delivering change locally.

Do I Need to Learn to Code?

Only for data and AI roles. Programming appears in 5 of 46 packs and is essential in 2. CCIO, clinical lead and clinical safety work is about workflow, safety and leadership. If you want to build tools or work with clinical data, Python or R is worth learning, but it is not the entry ticket.

Should I Finish Training First?

The common advice from doctors who have moved is to complete at least a few years of practice first, because clinical credibility is what digital teams hire you for. Leaving early is possible, especially into industry, but it is harder to come back to. A fellowship year inside training keeps both doors open.

Will I Take a Pay Cut?

It depends on the route. Senior NHS digital posts are paid on the consultant contract or at Agenda for Change Band 8c to 9, and Birmingham's CCIO in 2025 paid £105,504 to £139,882. Fellowships pay at your training grade. Early industry and data roles can start below clinical pay, and doctors who moved say to expect that. Compare basic pay, not pay with on-call supplements.

Can I Be a Clinical Safety Officer?

Yes. The NHS clinical safety standards, DCB0129 and DCB0160, need a registered clinician to sign off that a digital system is safe. Your GMC registration qualifies you. NHS England runs free Essentials e-learning for NHS staff and a paid Practitioner course, £475 for NHS delegates, which often fills up. The standards were under national review in 2026, so check the current version before you train.

Is Paid AI Training Work for Doctors Worth It?

Treat it with care. In October 2026, doctors doing paid side work to train AI models reported rates well below what they expected, and several said they felt taken advantage of. It can add a line to your CV, but it is not a route into a digital career on its own.

Myths Worth Ignoring

Some advice doctors pass around is out of date. These are the ones we see most.

WHAT YOU MAY HEAR	WHAT IS ACTUALLY TRUE
Join the Faculty of Clinical Informatics	The Faculty voted to close in 2024 and its members moved to BCS, The Chartered Institute for IT. Its credentials now sit with BCS membership and the FEDIP register.
There Is a Topol Fellowship Every Year	Cohort 5 has finished and, as of May 2026, the NHS Digital Academy said it was working out what its future offer for digital leaders would be. Watch for an announcement rather than plan around a date.
You Have to Give Up Medicine	Most NHS digital posts for doctors are blended, and some CCIO adverts require you to keep substantive clinical sessions.
A Certificate Gets You in	Informatics qualifications appear in 7 of 46 packs and are essential in 1. Delivery counts for more.
US Board Certification Is an Option	From 2026 the American Board of Preventive Medicine route needs a US fellowship and US or Canadian primary certification, so it is not open to most UK-trained doctors.

SECTION 12

Doctors Who Made the Move

Each person below told their own story publicly. Most kept some clinical work, and several did it without a masters.

FROM	TO	WHAT GOT THEM THERE
GP, 18 Years	One of the NHS's first CCIOs	A long-standing interest in IT, used inside his own organisation
GP, 25 Years	Clinical AI lead, then founder of a clinical AI consultancy	Moved into a digital health company building symptom checking and triage, kept a link to practice
Consultant Radiologist, London Teaching Trust	AI regulation and consultancy	Work on AI in imaging, then regulation of medical AI products
Locum GP and Emergency Physician	Healthcare software developer and Clinical Safety Officer	Taught himself to code while working clinically
NHS Doctor, London	Healthcare cyber security and clinical safety advisory	Combined clinical knowledge with security
GP, Trained in Nigeria	Health tech founder, maternal and child health	Projects from early in his career; kept clinical work
GP and Emergency Doctor, Trained in Nigeria	Co-founder of a telemedicine company, still in the NHS	Saw a problem in his own community and started small
Doctor, Five Years in Practice	Data scientist in public healthcare	Masters in health data science, then projects in his own workplace

Their advice lines up. Start with a real problem, use projects inside your current job as your evidence, and talk to people who have done it. One GP founder put it simply: "Fall in love with the problem, not the solution." A doctor who moved into data science added: "Don't get stuck in endless courses. Once you know the basics, start a project immediately."

Sources for each account are listed at the end of this guide.

SECTION 13

Asking for Help Well

Most CCIOs and digital clinicians are glad to help. What they cannot do is answer a message that asks for everything at once.

A message that says "can you help me get into digital" is honest, and almost impossible to answer. The reader does not know who you are, what you have done or what kind of help you need, so they do the easy thing and say nothing. A good message makes it easy to say yes.

The Shape of a Good Message

- **Who you are, in one line.** Your grade, your specialty and where you are now.
- **Why them.** Their role, their trust or something they wrote.
- **One small, clear ask.** A question they can answer in a few minutes, or a short call.
- **An easy way out.** People reply more when they do not feel cornered.

TO THE CCIO IN YOUR OWN TRUST

Hi Dr Okafor, I am an ST4 in respiratory medicine and I have been testing the new results screens with the EPR team since the spring. I would like to understand how doctors get involved with the digital team here. Could I have 20 minutes with you in the next few weeks? No problem if it is a busy time.

TO A CLINICAL SAFETY OFFICER YOU HAVE NEVER MET

Hi Priya, I am a GP with an interest in remote consultation tools. I read your post about safety cases for AI triage. If you were starting again, which training would you do first? Any pointer would really help.

WORTH DOING

- Start with your own trust's digital team and CCIO.
- Ask one question, not five.
- Follow up once, after a week.
- Tell them later what happened next.

NOT WORTH DOING

- Sending your CV before anyone asks for it.
- Asking for a job rather than for advice.
- Copying the same message to 50 people.
- Chasing more than once.

Where to Find People

Your trust intranet usually lists the CCIO and the EPR or digital team. On LinkedIn, search for CCIO, CMIO or Clinical Safety Officer plus a trust name. The Digital Health CCIO Network runs events and summer schools. Career Co-Pilot's Community Hub has members who have made the move.

SECTION 14

Your First 30 Days

A plan that fits around rotas. Four weeks, one focus each.

WEEK	FOCUS	ACTIONS
Week 1	Get Close	Find your trust's CCIO and digital team. Volunteer to test or champion the next system change in your department.
Week 2	Read Real Adverts	Save five live adverts and their job packs for roles in section 2. Mark every requirement you already meet and every gap.
Week 3	Reach Out and Train	Send three short, specific messages using the shape in section 13. Start the free clinical safety e-learning.
Week 4	Apply or Agree a Project	Apply for a fellowship or lead post, or agree one digital project with a named supervisor. Talk to your educational supervisor about an out-of-programme year if you are in training.

Translate Your Experience

Shortlisters look for familiar words. Say "led a QI project that cut unacknowledged results by a third", not "interested in digital". Name the systems you have used, the audits you have run and any safety incidents you helped investigate. A clear example of a time you spotted that a system or form put patients at risk is worth more than a paragraph about your passion for technology.

IF YOU ARE A CAREER CO-PILOT MEMBER

The Digital Transformation, Clinical Safety, Clinical Informatics and AI and Data areas show live roles, the skills employers ask for in their job packs and which employers hold a sponsor licence. Set an alert there and the posts that come back in section 7 come to you.

SECTION 15

The Checklist

Everything in this guide, on one page. If you are short of time, this is the guide.

- [ ] CCIO and digital team in my trust identified, and a conversation asked for.
- [ ] One digital project or super user role taken on, with a named supervisor.
- [ ] Free clinical safety e-learning started.
- [ ] Two target roles chosen to match my grade and background.
- [ ] Five live adverts and job packs saved, named for the role.
- [ ] Every essential criterion matched to one specific thing I have done.
- [ ] Data and QI examples ready, not just clinical ones.
- [ ] How my clinical sessions would work agreed before accepting any role.
- [ ] Licence, revalidation and designated body checked for the new role.
- [ ] Sponsorship and GMC registration position checked in the advert and with the employer, if it applies to me.
- [ ] Three short, specific messages sent, each with one clear question.
- [ ] Alerts set for Digital Transformation, Clinical Safety and Clinical Informatics.
- [ ] Everyone who helped me thanked, and told what happened next.

About Career Co-Pilot

Career Co-Pilot is a career intelligence platform for healthcare professionals. We read NHS job adverts at scale and turn them into something you can act on: live roles by band and area, what employers actually ask for, which organisations hold sponsor licences, trust level intelligence, and tools for building an application from your own real experience.

We were built by a doctor working in the NHS, for people making the moves the system does not help you make: into digital and data, from clinical into management, from overseas into an NHS career, or simply from one grade to the next.

What You Can Do on Career Co-Pilot

Live Roles and Alerts

Every NHS digital, informatics and clinical safety role by area and band, with an email alert so posts that come back reach you.

Skills and Certifications

Check yourself against what job packs in your target role actually ask for, and see the certifications that close the gap.

Career Fit Finder

Upload your CV and see which career areas fit your experience best.

App Tracker and Checker

Track every application and check your supporting statement against the person specification before you submit.

Interview Prep

Practise answering role-specific questions, with AI follow-up questions like a real panel.

Simulation Lab

Work through real NHS scenarios to build the examples shortlisters look for.

Trust Intelligence

Board papers, CQC ratings, digital plans and culture for the trust you are applying to.

AfC Financial Modeller

See what a band move means for your take-home pay.

Events Directory

Webinars, conferences and meetups in digital health, filtered by area and place.

Community Hub

Accountability partners and members who have already made the move.

Free to join. Every tool above is open to members at no cost while we are in our pilot.

Join at careercopilot.academy

You are welcome to share this guide with anyone it would help.

Sources

Every figure in this guide comes from published NHS adverts or a named public source. Nothing here is our opinion presented as a rule.

Career Co-Pilot Data

- Career Co-Pilot jobs database, adverts held to 30 October 2026: role families by job title, employers, bands and sponsorship statements; non-ward posts written for doctors; consultant posts with a digital interest.
- Requirement counts from 46 job packs for CCIO, CMIO, clinical lead, fellowship, clinical safety and informatics posts, March to October 2026.
- Career Co-Pilot international jobs feed (Adzuna) and supplier jobs feed, held to 30 October 2026.
- Career Co-Pilot transition profiles and transition stories.

Public Sources

- NHS Employers, Agenda for Change pay scales 2026/27 and Pay and Conditions Circular (M&D) 1/2026, nhsemployers.org.
- NHS standards DCB0129 and DCB0160, standards.nhs.uk; NHS England, national review of clinical risk management standards, consultation 29 June to 11 September 2026, engage.england.nhs.uk; NHS England, clinical risk management training; Safehand, review of the DCB0129 and DCB0160 standards (January 2025).
- BCS, CCIO job description guidance v1.0 (2021); Digital Health, FCI votes to close down and transfer to BCS (February 2024); BCS, Faculty of Clinical Informatics members invited to join BCS.
- NHS England, Reflections on Cohort 5 of the Topol Digital Fellowship (May 2026); Imperial College London, Digital Health Leadership 2026.
- GMC, discussion points for employers and doctors; Faculty of Medical Leadership and Management, designated body; BMA, Consultant Charter (2022).
- Adverts: CCIO, Cambridgeshire and Peterborough (2025); Digital Clinical Fellow, Somerset (2025); CCIO, University Hospitals Birmingham (2025); Senior Critical Care Clinical Fellow, Oxford (2026).
- American Board of Preventive Medicine, clinical informatics eligibility; HISTalk, physician AI training work (October 2026).
- Questions doctors ask: Student Doctor Network, Reddit r/healthIT, Royal Society of Medicine, Mind the Bleep with Let's Do Digital, Mozibox, iatroX and NHS Digital blogs (2020 to 2026). Many forum threads are from the US; UK answers come from NHS, GMC and BMA sources.
- Doctors' own accounts: Digital Health interview with Dr Phil Koczan (2012); podcast interviews with Dr Keith Grimes (2022) and Dr Hugh Harvey (2020); HTN, Clinicians That Code, Dr Marcus Baw (2021); Dr Saif Abed, InSecurity podcast; Career Co-Pilot transition interviews with Dr Yusuf Shittu, Dr Ahmed Abdulkareem and Dr Lolu Adebayo.

What This Guide Does Not Cover

Supplier and industry recruitment in detail, which varies by company. Deanery rules for out-of-programme years, which vary by region. Individual immigration, licensing or revalidation advice, which must come from an IAA regulated adviser, the GMC or your responsible officer.

Career Co-Pilot, Doctors Into Digital Health. First edition, October 2026. Figures change as adverts do. Where this guide and an employer's own instructions differ, follow the employer.