



ANNUAL REVIEW

2020-2021

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BAPM'S MISSION

Our mission is to improve standards of perinatal care by supporting all those involved in perinatal care to optimise their skills and knowledge, deliver and share high quality safe and innovative practice, undertake research and promote the needs of babies and their families.

LETTER FROM THE PRESIDENT

Dear BAPM Members

I can hardly believe that it is again time to put pen to paper (that phrase shows my age!) and reflect upon another BAPM year. Both personally and professionally, we are all still hugely affected by the coronavirus pandemic although, with the recent lifting of many restrictions, there is a sense that life is gradually returning to a new normal. I hope that most of you have been able to enjoy a holiday away from home this summer – even if it did not involve an aeroplane – and perhaps you have explored previously undiscovered parts of the UK and found new activities and challenges to keep you busy.

Over the past year the hardworking BAPM team has produced a potpourri of guidance, QI resources and events as well as inputting to many national maternity and neonatal programmes. New this year is our Data and Informatics Group, headed up by Cheryl Battersby which aims to unravel the complexities of neonatal data, and ensure that neonatal professionals are fully represented in decisions around collection and analysis of our data. In conjunction with Bliss and RCPCH, we have regularly updated our COVID FAQs – just as pertinent as we emerge from the worst of the pandemic and evidence emerges of the full extent of the strain placed upon families by restricted access to our maternity and neonatal units.

Two highlights of the past year were our Perinatal Update Conference in December and our Spring Conference in May, the latter aimed largely at trainees and ANNPs. These virtual events were both very successful, attracting audiences of 750 and 400 respectively. While many of us missed the camaraderie of a face-to-face conference (not to mention the annual BAPM quiz), virtual conferences have much to commend them including less travel, more flexibility and the ability to attend in one's pyjamas. Special thanks must go to Kate and Marcus for a huge amount of work in ensuring that these events ran smoothly, and we are also indebted to the highly professional team at CSF Events for technical support. Looking to the future, I very much hope that we will be able to host a more traditional BAPM Conference in 2022, but I am sure that we will be retaining at least some of the elements of a virtual meeting, to allow our members (and others!) even better access to a fantastic learning and networking opportunity.

No one who attended the December conference will have failed to be impressed by the achievements celebrated in the inaugural Gopi Menon Awards. We were especially delighted to be joined by Val, Natasha and Jessica in celebrating Gopi's life with so many incredible examples of Excellence in Perinatal Care.



Helen Mactier
BAPM President

“Over the past year the hardworking BAPM team has produced a potpourri of guidance.”

LETTER FROM THE PRESIDENT

Our plan is for the awards to become an integral part of each BAPM Conference; it was with great pleasure (and difficulty) that a team of BAPM members judged even more applicants for the 2021 awards.

Safety is paramount in all medical practice and there are unique challenges in ensuring safe neonatal care. While greatly supportive of the launch of the Maternity and Neonatal Safety Champions Toolkit and the appointments of Matthew Jolly and Professor Jacqueline Dunkley-Bent as National Maternity Safety Champions, we are disappointed that there is currently no National Neonatal Safety Champion. BAPM has written to the Minister of State to express our very strong conviction that the Government should appoint a National Neonatal Safety Champion, and we will continue to campaign for this.

As we look forward to another BAPM year, I should like to pay tribute to our out-going EC members. As Representative for Quality, Julie-Clare Becher has done an incredible amount of work in leading a team of volunteers to create an enviable bank of resources for QI. Julie-Clare has been ably assisted by Sarah Bates, our out-going Representative for LNU and SCU, whose energy and enthusiasm know no bounds. Steve Jones has represented the networks and also overseen the development of the BAPM framework on therapeutic hypothermia for neonatal encephalopathy with his trademark good humour. As Representative for Research, Elaine Boyle has managed to juggle items too numerous to mention. While they all leave very big shoes to fill, I have no doubt that there are many BAPM members capable of rising to the challenge and I look forward to meeting our new team in due course. If you are reading this report and have never previously been involved with BAPM activities, do please consider volunteering. We have pledged that every new BAPM Working Group will include at least one 'newbie' – you just might be that person!

Special thanks are due to my friends and fellow Officers, Wendy and Steve, who have been enormously supportive over the past two years. Kate and Marcus do a wonderful job in the BAPM virtual office, restricted only by the number of hours in the day and it was with great pleasure that we were able to appoint Laura earlier this year to assist with communications. We hope that this will help further to raise our profile. The growth of the BAPM office team has been made possible by our increasing membership as well as the success of our online events; your support really does make a difference and is helping to ensure that BAPM is truly Leading Excellence in Perinatal Care. Lastly, may I thank each and every one of you who, day after day and night after night, often in very difficult circumstances, helps to make a very real difference to babies and their families. Your work truly does matter. Peter Dunn would be very proud of us all.

“Your support really does make a difference and is helping to ensure that BAPM is truly Leading Excellence in Perinatal Care.”

CHIEF EXECUTIVE'S REPORT

This has been another strong year for BAPM with member numbers increasing and our output of resources continuing to expand. I continue to be amazed by the amount of work our members put in to BAPM's work programme for no financial reward but because they believe in BAPM's aim to improve standards in perinatal care. I really hope you all feel appreciated, but I'll take this opportunity to say thank you again.

BAPM works well because of a successful partnership between the office and the members. The work of the BAPM office is to facilitate members' needs. We advise on business and logistics issues but the work programme is entirely decided by BAPM members. In the past year we have really focused on increasing communication with members and offering more opportunities for members to be able to share their views and ideas. In June we were really pleased to expand the BAPM team to welcome Laura Fountain as Communications Officer.

There are also more opportunities than ever for BAPM members to get actively involved in our work programme with more groups than before helping to deliver BAPM's strategic aims. Based on feedback from the survey we have tried to make joining a working group more accessible with a new 'How To' guide on joining a working group and a commitment for each working group to include at least one person that has not been on a BAPM working group before.

Earlier this year we published a new strategy which identifies the key themes for BAPM's work for the next three years. Agreeing these priorities was a long process as we wanted to make sure that as many members as possible got the chance to feed in their ideas. In 2020 BAPM held a series of focus groups and issued a survey to all members asking what should be BAPM's priorities for the next three years. The BAPM Executive Committee reviewed all the comments received before taking part in workshops to produce a first draft of the strategy which was shared for member consultation and finally published in the summer.

A closer relationship with our members allows us to be more reactive in campaigning on the issues important to our member and their patients. Our current campaign for a national neonatal safety champion is ongoing now and we have garnered a lot of support from many other organisations with influence in perinatal care. None of us know what the next year will bring but I can promise that the BAPM Office and Executive Committee will continue to listen to our members and do our best to support you and implement the improvements you want to see in perinatal care.



Kate Dinwiddy
BAPM Chief Executive

"There are more opportunities than ever for BAPM members to get involved."

ACTIVITY SUMMARY

Another year has passed by and it feels again that BAPM has gone from strength to strength. We have grown in numbers in terms of membership, finances have remained stable despite the pandemic and we have produced more frameworks for practice, QI toolkits and other resources. All of these things have happened as a result of the tremendous work of the EC team, office staff and many members of BAPM who have contributed to our work.

Over the past year, we have hosted many virtual webinars and two conferences and a session at the RCPCH conference. We have contributed as an organisation to national guideline reviews, Department of Health safety reviews and produced national guidance. It feels as though BAPM's influence continues to grow and we hope to maintain this presence inclusively representing the UK's neonatal professionals and working collaboratively with organisations representing parents.

The loss of Perinatal 2020 as a face-to-face conference felt like a big loss at the time, but it was replaced by the very successful Perinatal Update virtual conference in December 2020. This was hosted jointly with BMFMS who we continue to work in collaboration with and who will be one of our partners, along with the NNA, BICS and AHPs for the upcoming Addressing Inequalities in Perinatal Care our annual conference for 2021.

The other conferences we hosted this year were the Spring Conference and a session at the RCPCH conference. The Spring Conference was previously known as the BAPM trainees meeting but we decided, based on feedback in previous years, to include ANNPs. This proved very successful with an incredible 400 attendees, and an excellent programme of informative and knowledgeable speakers. It had to be a virtual meeting unfortunately but we hope that in the coming year we can have face-to-face meetings. There is no doubt, though, that virtual meetings are here to stay and we will be looking at the use of hybrid conferences in the future with content available online.

The BAPM/Neonatal Society joint session of the RCPCH meeting was also successful and we continue to collaborate with the Neonatal Society on this session each year and will continue to work collaboratively in other ventures where possible.

Several important and influential frameworks for practice have been produced this year and we recognise at BAPM that the production of these frameworks is an important part of our role. These have included frameworks for ANNP and hypothermia.



Stephen Wardle
BAPM Honorary Secretary

*“It feels as though
BAPM’s influence
continues to grow.”*

ACTIVITY SUMMARY

They influence, guide and help to standardise practice which is important in improving safety. There are several more in the pipeline. If you have suggestions for frameworks you would like to see BAPM produced please let us know.

BAPM continues to be represented by officers and members of EC at various important national meetings and groups (see list on page 10). This is another important part of BAPM's work. These include the CRG and Neonatal Implementation Board which are important in the progress of the implementation of the Neonatal Critical Care Review in England. We are already starting to see funding for improved nurse staffing and the development of the care coordinator role for networks which are important parts of this and will be important for the development of neonatal care in England.

Safety in maternity and neonatal care is also important and this year BAPM called for the introduction of a neonatal safety champion to mirror those roles in obstetrics and midwifery. We plan to continue the campaign for this. We will also continue to work closely with Bliss and other parent groups to improve and to campaign for improved conditions for parents of babies in neonatal care.

Special mention should go to my fellow officers Helen and Wendy, and Kate and Marcus in the BAPM office who have worked tirelessly to help to maintain BAPM's work rate and responsiveness. The recent appointment of Laura who will be responsible for BAPM communications including social media will hopefully continue to help raise our profile.

We have worked hard to improve representation on all of our groups and have recently recruited new members to EC in various roles. We are very keen that all BAPM members should feel represented and feel able to be involved with BAPM work where possible so please get involved in any area of BAPM work if you can. It is very rewarding and you will be working with a great group of people.

“This year BAPM called for the introduction of a neonatal safety champion to mirror those roles in obstetrics and midwifery.”

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Please note that due to the delay of our AGM in 2020 the following covers the period from December 2020 – September 2021.

Frameworks for practice

- REVISED: Optimal Arrangements for Neonatal Intensive Care Units in the UK
- Therapeutic Hypothermia for Neonatal Encephalopathy
- Advanced Neonatal Nurse Practitioner Capabilities Framework

Coming Soon

- Family Integrated Care
- Managing Moderate to Late Preterm Infants
- REVISED: Neonatal MRIs
- REVISED: Neonatal Support for Community Births
- REVISED: Newborn Early Warning Trigger and Track (NEWTT2)
- Pre-hospital Care of Extremely Preterm Infants
- Sudden Unexpected Postnatal Collapse

QI Toolkits

- Optimising Early Maternal Breast Milk for Preterm Infants - A Quality Improvement Toolkit
- Optimal Cord Management in Preterm Babies - A Quality Improvement Toolkit

Coming soon

- Successful Perinatal Teams to improve preterm outcomes

QI Resources

- New section on QI Made Easy including steps by step guide to the 5 phases of quality improvement.
- QI Storyboard: Adopting Baby Friendly standards in a Special Care Baby Unit



ACTIVITY

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Additional resources

- How to join a BAPM Group
- BAPM FAQs

Webinars

- Optimising Early Maternal Breast Milk for Preterm Infants
- Optimal Cord Management in Preterm Babies
- The Wider Impact on Neonatal Services During COVID - The Evidence
- CPD Forum: Optimising unwell term babies requiring intensive care for LNUs and SCUs
- CPD Forum: Preterm Perinatal Optimisation for LNUs and SCUs

BAPM Meetings

- Perinatal Update Conference (Online, December 2020)
- Spring Conference – for Trainees and ANNPs (Online, May 2021)
- Neonatal Session at the RCPCH Conference (Online, June 2021)

BAPM membership has grown to a community of 1,748 members.*

In 2021 BAPM Representatives attended meetings of the following groups:

- BMFMS Executive Committee
- HEE Paeds Neonatal Pathway Academy
- Maternity Surveillance
- Maternity Transformation Programme Stakeholder Council
- MatNeoSIP Steering Group
- MBRRACE UK
- National child mortality database group
- National Maternity and Perinatal Audit Clinical Reference Group
- NDAU Board
- Neonatal Board
- Neonatal CRG
- Neonatal Critical Care Review - Model of Care Working Group
- Neonatal CSG
- Neonatal implementation board (MTP)
- NHS Digital Neonatal EWG / Neonatal Critical Care Review Pricing
- NIHR study on impact of COVID-19 on neonatal families
- NNAP Board
- NNAP IAG / HQIP
- RCOG Specialist Societies Liaison Group
- RCPCH Expert Group (COVID)
- RCPCH Research Consultation Committee
- RCPCH Second Opinion Group
- RCPCH Specialty Board
- RCPCH - ROP document review

*Correct at time of publication, September 2021.

GOPI MENON AWARDS

2020 AWARD WINNERS

Improving Quality in Perinatal Care Award

Dr Sujoy Banerjee, NICU Singleton Hospital

Supporting the Perinatal Team Award

Dr Shree Vishna Rasiah, Birmingham Women's and Children's Hospital

Excellence in Research or Innovation Award

[Joint winners]

Premature Infants' Skills in Mathematics
(PRISM) Study Team

and

Dr Neil Patel and the HUG Team, Royal Hospital for Children, Glasgow

Making a Difference for Families Award

Imperial Neonatal Service IFDC team - Queen Charlotte's and Chelsea Hospital (NICU) and St Mary's Hospital (LNU)

Outstanding contribution to BAPM by a trainee

Lauren Shaw, Ninewells Hospital, Dundee

Outstanding contribution to BAPM by a nurse, ANNP, midwife or AHP

Kelly Harvey, North West Neonatal Operational Delivery Network

BAPM DATA & INFORMATICS GROUP

The BAPM Data and Informatics Group was formed in January 2021 in recognition of the increasing importance and complexity of neonatal data. BAPM's vision is to champion and support perinatal professionals to use data to inform improvements in perinatal clinical care and services. The group will also be the voice of BAPM on external boards and respond to consultations seeking specialist input in all matters relating to data.

The group is made up of:

- i) a steering group of nine members representing the UK neonatal community (data managers, networks, NICU graduates, NICU, LNU, SCBU, nurses, allied health professionals, trainees).
- ii) a stakeholder group representing organisations with important roles in the use of perinatal data (Clinical Reference Group, MatNeoSIP, MBRRACE-UK, NDAU, NMPA, NNAP, GIRFT, RCPCH, networks, NHS Digital, representation from the devolved nations and individuals with subject expertise).

To date, we have held three steering and one stakeholder group meetings. There was unanimous support for the group, enthusiasm and commitment to work together to achieve shared goals. There was recognition for the opportunity to complement and align workstreams, improve consistencies in data demands at local, network and national level to reduce inefficiencies, duplication and confusion.

The remit of the group was agreed and includes four workstreams:

Advocacy: champion the collection and use of accurate neonatal data for audit, quality improvement, benchmarking and research.

Resources: create and signpost resources to educate and inform professionals, patients and families.

Standardisation: champion consistency in quality measures, definitions, coding, interoperability of systems. This will reduce duplication, inefficiencies, confusion and improve data quality.

Collaboration: inclusive stakeholder involvement to improve communication and streamline data uses for common purposes.

Each workstream will be led by a steering group member with contributions from members of the stakeholder group as appropriate. We have several outputs planned; one of the first projects is the development of a resource provisionally entitled 'The landscape of neonatal data in the UK' with contributions from all the stakeholders.



Cheryl Battersby
Representative for Data

"BAPM's vision is to champion and support perinatal professionals to use data to inform improvements in perinatal clinical care and services."

TREASURER'S REPORT

Despite the costs of the global pandemic, both financial and humanitarian, BAPM has achieved an increase in total funds at the end of the financial year 2020-2021 due to the collaboration, dedication and support of its wider membership. As the Honorary Treasurer I thank you all on behalf of our organisation.

In 2020 we braced ourselves for a significant financial loss due to the cancellation of Perinatal 2020. Thanks to the knowledge and negotiating skills of Kate, our Chief Executive, this cost was minimised for both ourselves and our partners BMFMS and the Neonatal Society.

Following the series of free educational webinars, a small charge was introduced for non-members to register. These webinars and our virtual Annual Conference 2020 held jointly with BMFMS, and our Spring Conference 2021, have prompted many more perinatal professionals to join BAPM leading to a healthy income from membership fees contributing significantly to the increase in total funds. The virtual platforms have enabled exhibitors to remain in contact with BAPM members and this is reflected in their continued support of our virtual events. A particular thank you to Cheisi who kindly supported a series of webinars in 2020. Thank you also to all of our sponsors for their support over the financial year.

Throughout the year the Executive Committee, Officers and the BAPM team have continued to run BAPM business as usual, meeting virtually together, representing BAPM, and chairing multiple framework working groups online. Whilst the virtual nature of these meetings has permitted greater flexibility and contributed to the reduction in expenditure, we look forward to meeting in person with you again.

I have had the pleasure of chairing the revision of the NEWTT framework during 2021, with my co-chair Dr Kathryn Macallister our BAPM trainee representative. Kathryn, the working group, and colleagues from the Maternity and Neonatal Safety Improvement Programme have worked tirelessly to develop NEWTT2 which is currently undergoing prototype testing prior to consultation and implementation testing. A personal thank you to Kathryn, the NEWTT2 team, and to the BAPM membership for responding to the NEWTT user survey.

The global pandemic has demonstrated that as an organisation we should aim to have reserves sufficient to offset a year's expenditure. Thanks to innovative and committed executive committee members producing key educational events, the hard work of the office staff, and the support from the wider membership, BAPM has maintained a secure financial balance in these challenging times.



Wendy Tyler
BAPM Honorary Treasurer

“BAPM has achieved an increase in total funds at the end of the financial year 2020-2021.”

ACCOUNTS SUMMARY

Statement of financial activities

(Incorporating income and expenditure statement)

Year ended 31 March 2021

		Unrestricted Funds	Restricted Funds	Total Funds 2021	Total Funds 2020
	Notes	£	£	£	£
Incoming resources	1				
Incoming resources from generated funds					
Donations and legacies					
Members' and corporate subscriptions		112,956	-	112,956	99,411
Donations			-	-	3,979
Gift aid receivable		19,455	-	19,455	15,893
Other activities					
Sponsors and exhibitors	4	20,200	-	20,200	24,468
Investment income					
Bank interest		-	129	129	455
Income from charitable activities					
Events and conferences	4	39,010	-	39,010	60,865
Total income and endowments		191,621	129	191,750	205,071
Resources expended	1				
Expenditure on Raising funds	5	16,269	-	16,269	16,692
Expenditure on Charitable activities					
Events and conferences	5	70,488	1,356	71,844	78,731
Members' services	5	17,431	-	17,431	17,884
Other meetings	5	7,914	-	7,914	13,296
Advice & information and library costs	5	20,556	-	20,556	21,068
Other Expenditure	5	37,061	-	37,061	41,435
Total expenditure	5	169,719	1,356	171,075	189,106
Net income/expenditure	2	21,902	(1,227)	20,675	15,965
Transfers between funds	11	-	-	-	-
Net movement in funds		21,902	(1,227)	20,675	15,965
Total funds at beginning of year	11	105,275	88,633	193,908	177,943
Total funds at end of year	11	127,177	87,406	214,583	193,908



British Association of Perinatal Medicine

BAPM Executive Committee 2020-21

Dr Helen Mactier	President
Dr Wendy Tyler	Honorary Treasurer
Dr Stephen Wardle	Honorary Secretary
Dr Elaine Boyle	Research Lead
Dr Steve Jones	Networks Lead
Dr Julie-Clare Becher	Quality Lead
Dr Cora Doherty	Education, Training and CPD Lead
Dr Judith Simpson	Working Groups and Publications Lead
Dr Cheryl Battersby	Data Lead
Ms Diane Keeling	Representative for Nursing, ANNPs and Midwifery
Kathryn Macallister	Representative for Trainees
Dr Sarah Bates	Representative for LNU/SCUs
Ms Hilary Cruickshank	Representative for AHPs
Dr Tracey Johnston	Representative for BMFMS
Ms Caroline Lee-Davey	Representative for Bliss

BAPM Office Staff

Kate Dinwiddy	Chief Executive
Marcus Hook	Finance and Membership Coordinator
Laura Fountain	Communications Officer

5-11 Theobalds Road
London, WC1X 8SH

Tel: 020 7092 6086
Email: bapm@rcpch.ac.uk
Twitter: @BAPM_Official
www.bapm.org

Registered Charity No: 285357

