



2021/2022

# ANNUAL REVIEW

British Association of  
Perinatal Medicine



# BAPM's Mission

BAPM is a membership organisation that is here to support all those involved in perinatal care to optimise their skills and knowledge, deliver and share high-quality, safe and innovative practice, undertake research, and speak out for babies and their families.

We are a professional association of neonatologists, paediatricians, obstetricians, nurses, midwives, trainees, network managers and other health professionals dedicated to shaping the delivery and improving the standard of perinatal care in the UK.

Our vision is for every baby and their family to receive the highest standard of perinatal care. Join us today.

[www.bapm.org/join](http://www.bapm.org/join)

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# PRESIDENT'S LETTER

## Helen Mactier, BAPM President

As I come to the end of my Presidency, it's time to reflect upon yet another very successful and productive year for BAPM as well as 12 years as part of BAPM Executive Committee.

Membership of BAPM has doubled since 2010 and the organisation is currently a large and vibrant multidisciplinary group of more than 1800 perinatal professionals. As evidenced by the requests and queries received by the BAPM team, it could fairly be said that we are the "go to" for all things neonatal in the UK.

There have, of course, been some challenges along the way, not least neonatal unit staffing; in recognition of this, one of BAPM's four strategic aims is to provide support and advocacy for perinatal professionals. Our ANNP Capabilities Framework acknowledges the need to provide career progression within the entire neonatal team and we have just completed a survey of neonatal consultant work patterns which we hope to publish by the end of the year and then extend to other professional groups.

In the past year BAPM has published five new Frameworks for Practice encompassing a wide range of topics. Accompanying webinars have been very popular, building on the improved provision of virtual meetings consequent upon the Covid pandemic. We also produced a range of CPD sessions specifically for those BAPM members working in LNU/SCUs, as well as a couple of research prioritisation webinars; in total, 1,556 people registered for BAPM webinars in the past year; what a success!

Quality improvement is key to excellence in neonatal care, and BAPM continues to lead the field with a range of resources freely available

to all perinatal practitioners. Due at least in part to the vision of Gopi Menon, we are all now familiar with the concept of neonatal service quality indicators; these have been incorporated into the soon to be launched 2022 version of Service Standards and Quality Indicators for Provision of Neonatal Care in the UK. Good data help to drive improvement and BAPM had advocated strongly for the continuation of a single UK neonatal database, inputted once and accessible to all; this will be increasingly important as data collection changes across the four nations.

I am enormously grateful to all the members of BAPM who give so freely of their time to write our documents (sometimes after quite challenging discussions) and thanks are due to the dozens of stakeholders and members who take time to feedback during consultation periods. Your feedback is listened to and helps to ensure that BAPM resources reflect a consensus view of neonatal practice in the UK and remain relevant. We are always on the lookout for BAPM members to join our

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“It could fairly be said that we are the ‘go-to’ for all things neonatal in the UK.”

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various working groups, and/or to represent BAPM at national meetings; it's a great way to get involved in neonatal issues out with your own unit or network and to meet lots of new, like-minded people. One of the pledges that I made as President was to foster new talent; as highlighted in last year's report, each Working Group now includes at least one 'newbie' – it could be you!

Since its inception, BAPM has promoted the importance of working together as a perinatal team and we were delighted to host our 2021 Annual Conference in conjunction with British Maternal and Fetal Medicine Society, British Intrapartum Care Society, Neonatal Nurse Association, Scottish Neonatal Nurses Group and Allied Health Professionals National Neonatal Groups. Almost 600 delegates joined us online with the main theme of Addressing Inequalities in Perinatal Care. At the time of writing, preparations are well in hand for our 2022 Annual Conference in Manchester in September – we have a great line up of speakers and workshops to gladden your 'Hearts and Minds' with something for everyone involved in perinatal care. I acknowledge with gratitude our sponsors, without whom your conference tickets would be much more expensive.

This year we welcomed some new faces to EC: Louise Weaver-Lowe has done a sterling job keeping us in touch with the networks, Jon Dorling has been busy expanding BAPM's activities in support of neonatal research and Sankara Narayanan has taken over as the representative for LNU/SCU. Sarah Bates adopted a new hat as the representative for




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“We are always on the lookout for BAPM members to join our various working groups.”

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quality and Eleri Adams has hit the ground running as President Elect, bringing with her a wealth of experience at national level.

The Annual Review acknowledges with thanks the contributions to BAPM of many people, but I must make special mention of my fellow Officers and friends, Steve, Wendy and Eleri. We have shared many decisions, ideas and quandaries (not to mention a few frustrations) over the past year; I will be eternally grateful for their support, good humour and wise counsel. BAPM is extremely lucky to have such an inspirational CEO as Kate at the helm, backed up by the talents, hard work and commitment of Marcus and Laura.

As I hand over the baton to Eleri, I know that BAPM will continue to flourish. It has been an enormous privilege to serve as your President during the past three years; I wish each and every one of you success in all that you do, and encourage you to remember during the busiest and most challenging times that you do a really important job and that you truly can make a difference.

# TIME TO IMPLEMENT



**Kate Dinwiddy, BAPM Chief Executive**

The past few years at BAPM have been a time of growth and development. The team has expanded, our membership is growing and we are producing more resources than ever. Going forward we are focusing on implementation and consolidation, ensuring that BAPM resources are practical and easy to pick up and use by teams looking to make improvements. We are seeking to work collaboratively wherever possible to avoid duplication of effort and ensure buy-in across the full perinatal team.

The BAPM Quality Team continues to focus on reducing preterm mortality and brain injury through implementation of the perinatal optimisation pathway. Led by Sarah Bates and Louise Weaver-Lowe, the team has met virtually with representatives from each network across all four nations, with further meetings planned for the autumn. In partnership with MatNeoSIP (across NHSE), and in collaboration with the PERIPrem team from the South West region, BAPM is releasing a series of helpful resources to support teams across the UK with implementation of the preterm perinatal optimisation pathway. Please get in touch with the BAPM office to find out what's happening in your region. We look forward to even better rates of optimal antenatal steroids, optimal cord management, early maternal breast milk etc, and improved outcomes for babies and families.

We are also developing a new resource that will underpin all our other quality work – our document on Building Successful Perinatal Teams led by Julie-Clare Becher. This resource will enable Perinatal Teams to assess their quality context, team interactions, functioning and ways of working and to use this assessment to

provide intelligence about culture and readiness for change. It will then become possible to plan improvements in team relationships and infrastructure towards the shared goal of improving preterm outcomes.

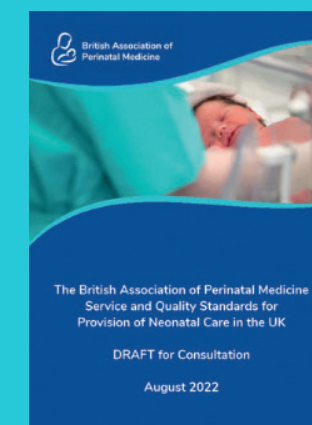
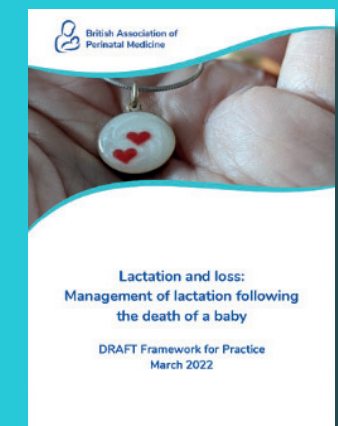
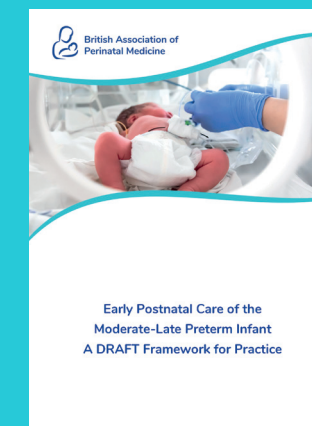
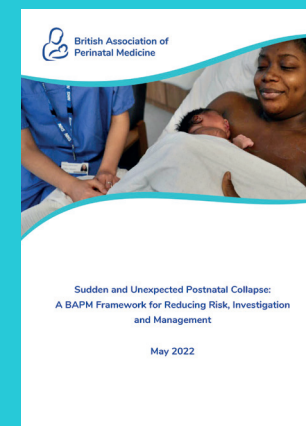
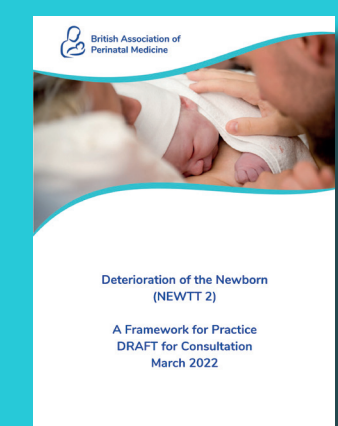
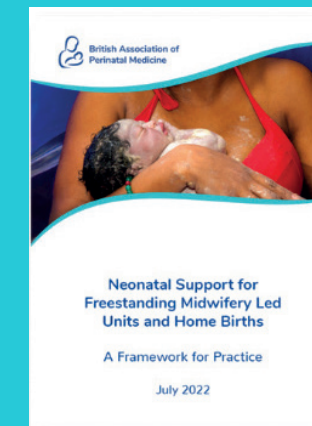
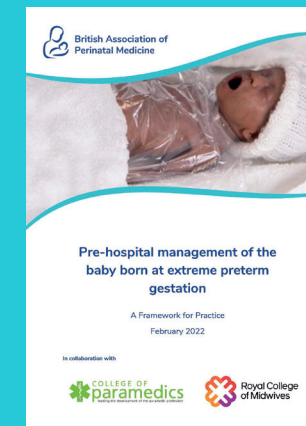
Our conference this year is on Hearts and Minds, a topic that suggests a lot of clinical and cultural topics. Despite needing to completely re-learn the way we deliver events several times over the past few years, we always strive to make our programmes as inclusive as possible so all our members feel there is something for them.

I am always amazed by the dedication and enthusiasm of our members who give their time and expertise so generously to BAPM projects. Our working groups negotiate their way through tricky topics finding evidence-based, common sense solutions. The Executive Committee do a huge amount in front of and behind the scenes to keep BAPM running. I'd like to thank everyone who supports BAPM and allows us to continue and grow each year. You are all amazing.

“The team has expanded, our membership is growing and we are producing more resources.”

# LAYING THE FRAMEWORK

**BAPM documents produced this year**



Find them all in the 'Resources' section of the BAPM website.



# ACTIVITY SUMMARY

## Stephen Wardle, Honorary Secretary

As I write this summary of the past year I am very aware of the huge steps that BAPM has made as an organisation in the last few years. Our membership has grown substantially, it feels like we represent a wider range of neonatal professionals and our outputs have increased with more meetings, webinars, frameworks for practice and QI toolkits. All of these things have happened as a result of the tremendous work of the Executive Committee, 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. In addition, a number of new frameworks for practice, quality improvement toolkits and other web resources have been published. 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 has continued to grow and we hope to maintain this presence inclusively representing the UK's neonatal professionals and working collaboratively with organisations representing parents.

Last year's Annual Conference was a virtual one with the theme of addressing inequalities. There were some excellent invited speakers including international ones - Mikael Norman from Sweden and Edward Bell from Iowa. The attendance was excellent, as we have found with many of the virtual conferences.

The Spring Conference in May 2022 in Birmingham was aimed at trainees and ANNPs. I note the meeting was attended by many others including consultants and AHPs so clearly

the programme was of wider interest. This was our first in-person conference since Covid and it was great to get back to this and actually meet real people again! The programme received very good feedback and we had an excellent range of speakers. We ran it as our first hybrid event and, although this brings some additional challenges, it appears to be a good format going forward, allowing some who cannot travel to still attend.

The BAPM/The Neonatal Society joint session of the RCPCH meeting in Liverpool 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 including joint meetings, where possible. The two organisations complement each other well with the The Neonatal Society focus on research and BAPM's focus on standards, education, quality improvement and professional representation.

BAPM has also developed good relationships with other specialist interest groups over the past two years including the transport group

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“It feels as though BAPM's influence has continued to grow and we hope to maintain this.”

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(NTG), nutrition group (N3), neonatal follow up group (BANNFU) and AHPs. It is hoped that all of these will benefit from the association with BAPM and contribute usefully to BAPM's objectives and work.

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 Sudden and Unexpected Collapse, Early Postnatal Care of the Moderate-Late Preterm, Deterioration of the Newborn (NEWTT2), Lactation and Loss, Pre-hospital Management of the Baby Born at Extreme Preterm Gestation, Neonatal Support for Freestanding MLU and Home Births and Family Integrated Care.

These frameworks influence, guide and help to standardise practice which is important in improving safety. There are several more in the pipeline including Radiology and Bilious Vomiting, a review of the Palliative Care Framework, Repatriation, Hypoglycaemia and Standards for Neonatal Airway Management. If you have suggestions for frameworks you would like to see BAPM produce, 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 16). 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 and other important groups involved in neonatal data: NNAP and NNRD.

More recently the Special Health Authority for




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

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Maternity Investigations which will be involved in discussions around the replacement for HSIB. Safety in maternity and neonatal care is important and this year BAPM called again for the introduction of a neonatal safety champion to mirror those roles in obstetrics and midwifery. We plan to continue the campaign for this and to continue to work closely with Bliss and other parent groups to improve conditions for parents of babies in neonatal care.

We have worked to improve representation on all of our groups and are currently recruiting new members to EC in various roles. 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.



# ACTIVITY REPORT

## Frameworks for Practice

- Family Integrated Care
- Lactation and loss
- Neonatal Support for Freestanding MLU and Home Births
- Pre-hospital management of the baby born at extreme preterm gestation
- Sudden and Unexpected Postnatal Collapse

## Coming Soon

- Early Postnatal Care of the Moderate-Late Preterm Infant
- NEWTT 2 - Deterioration of the Newborn

## QI Resources

QI Storyboard: Transitional Care Virtual Training Programme

## Coming soon

- Service and Quality Standards for Provision of Neonatal Care in the UK
- Building Successful Perinatal Teams

## Webinars

- CPD Forum: Preterm Perinatal Optimisation for LNUs and SCUs, 19 Apr 2021
- CPD Forum: Improving intensive care & stabilisation for term sick infants for LNU and SCUs, 19 Jul 2021
- CPD Forum for LNU/SCU staff: Research and Surgical Management, 25 Nov 2021
- Implementing the new BAPM framework on FICare, 16 Dec 2021
- Prioritising Neonatal Research Questions, 7 Feb 2022

- Neonatal Research Questions for Parents, 22 Feb 2022
- Aligning pre-hospital care and neonatal services, 22 Mar 2022

## BAPM Meetings

- Perinatal Update and Networks Meeting (Online, Jan 2022)
- Spring Conference – for Trainees and ANNPs (Birmingham and Online, May 2022)
- Annual Conference (Online, October 2021)

## This year BAPM has contributed to the following external groups:

BMFMS Executive Committee, BPSU, Dietitian Staffing Standards, Emergency obstetric checklists, HEE Paeds Neonatal Pathway Academy, HEE QIS Review, Maternity Equality, MatNeoSIP Steering Group, MBRRACE – UK, National child mortality database group, National Maternity and Perinatal Audit Clinical Reference Group, National Maternity Perinatal Audit - sprint audit advisory group, National Perinatal Equity and Equality; Ethnic Minority Workforce Steering Group, National Perinatal Safety Surveillance and Concerns Group, Neonatal CRG, Neonatal implementation board, Neonatal Programme Board, Network Pharmacists, NHS Digital Neonatal EWG, Neonatal Critical Care Review Pricing, NHSE/I Culture Working Group, NMPA audit on bloodstream infections, NNAP Board, NNAP IAG / HQIP, NNRD Board, Psychology Staffing Standards, RCOG Specialist Societies Liaison Group, RCPCH Research Consultation Committee, RCPCH Specialty Board, Saving Babies Lives V3.

## Thank you to outgoing Executive Committee Members

Sincere thanks to those members of EC who will be stepping down this year: Judith Simpson has been instrumental in driving forward Frameworks for Practice for Family Integrated Care and Provision of Donor Milk with refreshing pragmatism and Cora Doherty has brought a plethora of ideas to education and training and steered the Lactation and Loss Framework to completion. Kathryn Macallister has made huge contributions both to the development of NEWTT2 and to organising the Spring Conference. Wendy Tyler has helped to lead BAPM with tact and diplomacy as well as a strict eye on probity and fiscal prudence! Helen has been on EC for 12 years and has shown great leadership, kindness and wisdom in her time as president and achieved much, including her amazing charity Land's End to John O'Groats cycle ride raising money for BAPM and Bliss.



# BAPM Gopi Menon Awards 2021

These Awards showcased the talent and dedication shown by individuals and teams in the field of perinatal medicine. Our judges had a difficult task shortlisting and deciding on the winners.

## Improving quality in perinatal care

Category winners: Sarah Bates and Tracey Kay

## Supporting the perinatal team

Category winner: the MIST and MISTe project

## Excellence in research or innovation

Category winner: Janet Berrington and the Neonatal Biobank

## Making a difference for families

Category winner: Josie Anderson for her work on the 'Parents Aren't Visitors' campaign

## Outstanding contribution to BAPM by a trainee

Category winner: Amarpal Bilkhu

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

Category winners: Jo Hodson and Sara Clarke

# LOOKING FORWARDS



## Eleri Adams, BAPM President Elect

A year as President Elect has whizzed by and I have thoroughly enjoyed getting to know everyone in the BAPM office, and the executive team. It is an exciting time to be taking over as President.

BAPM is growing and evolving, and I see our widening membership across the multidisciplinary team as a real strength. I am delighted that there will be a new post for leading Equality, Diversity and Inclusion on the BAPM Executive. This role will be important for influencing BAPM's work as well as representing BAPM at national perinatal health care projects targeting improvements in this area.

We have several new Frameworks for Practice and Quality Toolkits underway next year, and members are very keen to be involved. Thank you to everyone for volunteering so enthusiastically and we are doing our best to ensure we widen opportunities for active involvement across the membership. I am delighted to be chairing the Neonatal Airway Standards Framework, which I feel is much needed at this time, given the reduction in opportunities for developing and maintaining intubation skills across all units.

I am particularly interested in how we can use systems to improve care. I am delighted that a new BAPM EC role will have a specific safety remit to help us develop this work further. I have a particular interest in drug safety and have begun work with the Neonatal & Paediatric Pharmacists Group (NPPG) to see if we can improve drug safety through national standardisation.

One of BAPM's strengths is that it remains determinedly a UK-wide organisation and I

want us to be able to continue to learn and evolve together. I am developing a BAPM webinar series to run over the next 12-18 months highlighting some of the areas from the GIRFT report where we still have progress to make. This will be topic based and will focus on specific examples of excellent practice from across the whole UK as I feel we are very good at inspiring each other.

Having met a huge number of staff working in neonatology/perinatal medicine during my GIRFT visits, I am constantly struck by how interested everyone is in improving and how much energy everyone has to keep doing it. I am really going to enjoy working with everyone in BAPM to keep that spirit alive.

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"I am delighted that new roles for Equality, Diversity and Inclusion and Safety will be commencing on BAPM's Executive Committee."

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# TREASURER'S REPORT

Wendy Tyler, Honorary Treasurer

As a result of our ever-increasing membership numbers, we are stable financially. Good news indeed as membership fees will remain static yet again this year at a time when the cost of living in the UK soars. Our membership is not only greater in numbers but also in breadth and depth, representing the true multidisciplinary nature of perinatal care.

Increased income provides stability and permits expansion and development. Stability has been achieved through the development of the reserves policy ensuring BAPM as an organisation has sufficient funds to continue for at least a year should income be at risk. BAPM is now a Charitable Incorporated Organisation.

We have invested in support for members through increased provision of our wonderful BAPM office team. Kate our CEO is now full-time but honestly, she must have a “time-turner” as she seems to juggle so many projects simultaneously, is ever-present, wise and supportive. Marcus, our true BAPM financial hero, not only makes me look good as Treasurer but he supports all those webinars and conferences we attend, and receives and deals with members’ expanding suggestions for BAPM Frameworks for Practice. Laura has enabled BAPM to reach out so much further through Twitter as well as our website and it is Laura who turns our Frameworks for Practice into professional publications.

BAPM still has a home at RCPCH but with a modernised contract which includes hybrid working, as we continue to strengthen our relations with the College. The Peter Dunn Library has moved into a new space within the members area of the College ensuring that

pertinent historical texts are available to you. One of the most exciting benefits of a healthy income is being able to re-instate face-to-face events in 2022, providing both a physical venue and the technology required to project virtually to a wide audience.

This is my last Treasurer’s report for BAPM. The Treasurer role is so much more than money. Representing BAPM, hearing the breadth of opinion, and supporting developments in perinatal care provision has been an immense honour and a privilege that I will miss more than I can say, but the time has come to hand over to my successor Anoo Jain and I wish him all the best. BAPM has a bright and exciting future with you all, led by the immensely capable Eleri Adams.

“Our membership is not only greater in numbers but also in breadth and depth representing the multidisciplinary nature of perinatal care.”



# ACCOUNTS SUMMARY

British association of Perinatal Medicine  
Statement of Financial Activities  
(Incorporating income and expenditure statement)  
Year ended 31 March 2022

	Notes	Unrestricted Funds	Restricted Funds	Total Funds 2022	Total Funds 2021
		£	£	£	£
<b>Incoming resources</b>	1				
<b>Incoming resources from generated funds</b>					
<b>Donations and legacies</b>					
Members' and corporate subscriptions		134,468	-	134,468	112,956
Donations		2,525	-	2,525	-
Gift aid receivable		22,869	-	22,869	19,455
<b>Other activities</b>					
Sponsors and exhibitors	4	25,345	-	25,345	20,200
BAPM Special Interest Group BANNFU		-	3,040	3,040	-
<b>Investment income</b>					
Bank interest		-	15	15	129
<b>Income from charitable activities</b>					
Events and conferences	4	46,090	-	46,090	39,010
<b>Total income and endowments</b>		<u>231,297</u>	<u>3,055</u>	<u>234,352</u>	<u>191,750</u>
<b>Resources expended</b>	1				
<b>Expenditure on Raising funds</b>	5	19,973	-	19,973	16,269
<b>Expenditure on Charitable activities</b>					
Events and conferences	5	76,378	-	76,378	71,844
Members' services	5	21,401	-	21,401	17,431
Other meetings	5	6,915	413	7,328	7,914
Advice & information and library costs	5	18,922	-	18,922	20,556
<b>Other Expenditure</b>	5	49,052	-	49,052	37,061
<b>Total expenditure</b>	5	<u>192,641</u>	<u>413</u>	<u>193,054</u>	<u>171,075</u>
<b>Net income/expenditure</b>	2	38,656	2,642	41,298	20,675
<b>Transfers between funds</b>	11	-	-	-	-
<b>Net movement in funds</b>		<u>38,656</u>	<u>2,642</u>	<u>41,298</u>	<u>20,675</u>
<b>Total funds at beginning of year</b>	11	127,177	87,406	214,583	193,908
<b>Total funds at end of year</b>	11	<u><u>165,833</u></u>	<u><u>90,048</u></u>	<u><u>255,881</u></u>	<u><u>214,583</u></u>





# BAPM

## Leading Excellence in Perinatal Care

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### BAPM Executive Committee 2021-22

Dr Helen Mactier	President
Dr Eleri Adams	President Elect
Dr Wendy Tyler	Honorary Treasurer
Dr Stephen Wardle	Honorary Secretary
Prof Jon Dorling	Research Lead
Louise Weaver-Lowe	Networks Lead
Dr Sarah Bates	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, ANNs and Midwifery
Kathryn Macallister	Representative for Trainees
Dr Sankara Narayanan	Representative for LNU/SCUs
Ms Hilary Cruickshank	Representative for AHPs
Dr Tracey Johnston	Representative for BMFMS
Ms Caroline Lee-Davey	Representative for Bliss

### BAPM Staff

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

British Association of Perinatal Medicine (BAPM)  
is registered in England & Wales  
under charity number 285357 at  
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