

2024/2025

# ANNUAL REVIEW

British Association of Perinatal Medicine



# PRESIDENTS' **LETTERS**

### Eleri Adams, BAPM President

This will be my last report as President, and I would like to use it to focus on BAPM's work on safety and advocacy. The drug safety group has been very active over the past year producing a position statement on minimising inconsistent drug delivery of iv infusions; agreeing national standardised fixed drug concentration for all commonly used neonatal infusions for babies from 400g, and issuing a safety alert regarding chlorhexidine and burns. There is ongoing work, in conjunction with GIRFT, to develop a guide for safe insulin use in neonatal units and a guide for laboratory handling of insulin requests for hypoglycaemia. Other important safety work, led by Louise Leven, BAPM Safety Lead, includes end this September and I cannot believe how safety alerts about ET tubes, microstream ET CO2, umbilical catheters, look-alike giving sets for exchange transfusion, and burns from external heat sources used during capillary sampling.

As BAPM has grown as an organisation, so has our ability to influence and advocate for staff, babies and families. Following on from our work responding to national reports in the last few years, we have now formalised our national policy subgroup to provide an ongoing focus in this area. BAPM is represented at all major national policy groups and is therefore able to influence and shape policy and decision-making in line with BAPM's key aims and values. I am indebted to the many people from EC and the membership who support BAPM's work in this way and feedback information to shape BAPM's responses and identify new areas where advocacy is needed.

I am particularly pleased at the outcome following our letter to the Chair of the JCVI and Deputy Chief Medical Officer last summer regarding the lack of protection against RSV for preterm babies following the role out of maternity RSV vaccination. This has resulted in a change in the green book guidance to include a recommendation for nirsevimab to be offered to all preterm babies <32 weeks and in July 2025, we learnt that the government has now purchased nirsevimab to be available in September 2025 to protect preterm babies <32 weeks from RSV this coming winter. This is great news not only for our babies and families but also for the wider paediatric community.

My time as BAPM President will come to an quickly the time has gone. I have really enjoyed working with everyone involved with BAPM and send particular thanks to the officers, Cheryl, Steve, Anoo, and Kate, the office staff, Laura, Jess, Marcus and Ruby, and the Executive Committee members for their help and support over the past four years. I feel so lucky to have worked with such a proactive multidisciplinary group who have such a positive attitude to making things better for babies, their family and staff. I feel confident that BAPM will continue to go from strength to strength and leave the presidency in the very capable hands of Steve Wardle.

Find the 2024 **BAPM Gopi Menon** Award winners on page 4.



### Stephen Wardle, BAPM President Elect

I am delighted to be taking over from Eleri as President this year. During her term in office we have seen BAPM go from strength to strength with the great support and teamwork from Kate Dinwiddy the Chief Executive, the other officers, the executive committee, BAPM members and the permanent staff.

Looking forward, BAPM has much to anticipate in the coming months and years. 2026 is our 50th anniversary year, a milestone I am looking forward to celebrating at next year's annual conference where I am sure we will reflect on all BAPM has achieved during this time and where it may go in the future.

Our new strategy was launched after input from members in 2025 and this helps to shape our aims and goals for the future and three year work programme, which I am excited about.

As our organisation has grown, I am particularly keen to see us develop more working in collaboration with other organisations and developing our own specialised groups. We now have three special interest groups (BANNFU, NeoFocus and Nanopreterm) as well as several affiliated membership organisations, all of which can contribute to BAPM's output. In addition, we have always worked closely with BMFMS and will continue to do so.

BAPM's outputs are becoming more and more highly regarded and we will continue to ensure that we always maintain the quality and professionalism of our events and publications.

We are also gradually trying to increase our influence over the direction of neonatal and maternity services within the NHS. It feels as though BAPM is now routinely seen as the voice

"There are several significant publications due in the near future which are likely to influence the delivery of neonatal care."

of neonatology in the UK. We will continue to raise the issues that we feel are important to you, our members, to try to influence NHS England (and whatever replaces it) and the Department of Health. There are several significant publications due in the near future which are likely to influence the delivery of neonatal care. (These include the Thirlwall Inquiry Report and a number of maternity reviews.) It will be important for us as an organisation to contribute to these and use the opportunity to advocate for the views of our members and stakeholders.

As President of BAPM please contact me via the BAPM office if you have ideas about how we could do things better or things that you feel we should do or develop. I look forward to continuing to work within such a brilliant team.



# BAPM Gopi Menon Awards 2024

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.

## Best National /Regional Project

North West Optimisation Team

# **Best Local Project**Immune Boost Team

### **Outstanding Team**

Surgical Neonatal Nutrition Team, NICU, Great Ormond Street

### **Outstanding Individual**

Sujoy Banerjee

## **Outstanding Contribution to BAPM**

Joint winners

- Topun Austin
- Hilary Cruickshank
- Vix Monnelly
- Wendy Tyler
- Kirstin Webster

# VOICE OF THE NEWBORN



### Kate Dinwiddy, BAPM Chief Executive

Part of my role is to find members to represent BAPM at external meetings. (Sometimes we are invited, sometimes we have to invite ourselves!) We continue to strive for 'and neonatal' to be added to the focus of maternity working groups and transformation projects, and often hear comments from our members along the lines of 'I just had to keep reminding them about the baby.'

Last month BAPM was one of the key stakeholders that helped to deliver the Progress in Partnership Maternity and Neonatal Safety Summit. This event was aimed at NHS Chief Executives and Chairs, to address the challenges in maternity and neonatal safety and give

"BAPM's latest three year strategy, published in May, reflects the changing needs of the organisation as we respond to policy and political change."

them the tools to address them. Politicians Wes Streeting and Jeremy Hunt were also in attendance. The word 'maternity' was probably mentioned a lot more than 'neonatal' throughout the day but with neonatal professionals or service users on all panels we did feel like the needs of neonates were starting to be acknowledged. Several of us at the event said that five years ago we wouldn't have even been invited, so although we have a way to go to keep raising the profile of neonates, we are making advancements.

This kind of progress has been hard fought and now with the relentless spotlight on neonatal and maternity care at the moment we are receiving more requests than ever to take part in national conversations. BAPM is a tiny organisation compared to the Royal Colleges but we will do our best to keep getting people to the right places so we can be part of these discussions. All this is only possible because of the BAPM members that are so passionate about advocating for the needs of their patients they work tirelessly to make sure the neonatal voice is heard.

BAPM's latest three year strategy, published in May, reflects the changing needs of the organisation as we respond to policy and political change. But we also balance this with plans to continue to do what BAPM does best – bring all those involved in neonatal care together to discuss, share and inform. If you have any thoughts about what you want to see from BAPM in the future please get in touch. As I always say – as a member of BAPM, this is your organisation and you can be a part of the next chapter of BAPM's development.

## **ACTIVITY** SUMMARY

### **Cheryl Battersby, Honorary Secretary**

With BAPM's growing profile, relevance and influence, it has been another busy year.

Our membership numbers continue to increase (now around 3,000), and this year's Annual Conference has had a record number of abstract submissions (from 153 last year to 250) and award submissions (from 38 to 66). Writing this annual report is a chance to pause and reflect on the activities and achievements of the year before. I hope as you read this report, you will feel inspired and motivated to get involved in BAPM's work, if you aren't already.

I want to draw your attention to the revised BAPM vision, values and strategy 2025-28, which underpins the breadth and depth of BAPM's work highlighted in this report.

#### **BAPM** values

BAPM's strength lies within its multi-professional membership. We believe in working inclusively and collaboratively across the MDT, and promoting positive perinatal team culture. This ethos underpins this year's annual conference theme 'Transition: Leading together' and we are delighted to receive many excellent abstract submissions to the new category 'MDT working and service pathways', showcasing examples of fantastic perinatal team working.

We listen, respond, anticipate and speak up for the needs of babies, families and perinatal professionals. We represent the perinatal voice on many external groups and will continue to use this to advocate on behalf of our members, babies and families. Please see full list of external meetings on page 9. We value 'transparency and integrity, equality and inclusivity'. We strive to actively seek out different perspectives and do

this by embedding processes that ensure fairness and transparency:

- Every framework comprises a multiprofessional working group appointed through open application, and all frameworks continue to be put out for open consultation.
- Since April this year, Chairs of Special Interest Groups and frameworks are appointed based on open election, for example the newly formed BAPM Nanopreterm Specialist interest Group has over 30 members, including five elected officers and regional MDT representation.
- Conference abstract marking and BAPM awards involve judges who are all non-EC members.

Our conferences and webinars throughout the year support our strategic aims: 'To support and promote quality improvement, research and innovation in perinatal care' and 'facilitate effective perinatal working through multiprofessional education and networking.'

We had four successful conferences: Perinatal Update & Networks meeting (February, online), Spring Conference (April, Leicester and online),

"Our webinars continue to be very popular and provide an excallent forum for education."

RCPCH (April, jointly held with Neonatal Society in Glasgow) and Annual Conference (September, Sheffield). Thank you to the CSAC and BAPM EC members involved in leading and organising.

We received very positive feedback from last year's annual conference in Sheffield, themed 'Precision Medicine and personalising neonatal care'. We thank Patrick McNamara, Professor of Pediatrics, University of Iowa who delivered the excellent Founders lecture on 'Haemodynamic precision for the critically ill or extreme preterm infant' and Andrew Shennan, Professor of Maternal and Fetal Health, Kings College London, who delivered the Peter Dunn Lecture 'Precision medicine in perinatal care'. Both were extremely informative and inspiring. The other fantastic talks covered aspects of personalised care from the perspectives of technology, rapid genomic testing and critical surgical decision making.

This year's 2025 conference theme 'Transition: leading together to improve newborn care' is underpinned by the recognition of importance of a MDT approach. I am honoured to be chairing The Gopi Menon Awards again this year; it was a hard task choosing winners given the many excellent applications. I have enjoyed reading all the inspiring work across the country and look forward to announcing this years' worthy winners. Please see a list of last year's winners on page 4. I hope you will enjoy this year's Annual Conference and leave inspired, with a feeling of having connected with new and old friends/colleagues! Our webinars continue to be very popular

and provide an excellent forum for education, disseminating information, and interactive panel discussions. Since last September, we have delivered seven webinars (full list page 8).

Our frameworks of practice support our strategy "To develop best practice guidance and set quality standards". They guide and influence clinical care. We have published three new including the Routine Pulse Oximetry Testing for Newborn Babies, Peri Operative Care of Extremely Premature Babies and Neonatal Outreach Service. Other publications "How to guides" include Inutero transfer, Writing a professional Neonatal CV and developing your profile in the neonatal world.

### **Looking forward**

Six new or revised frameworks in consultation or near completion include Management of neonatal pain, Recommended Medical Workforce Standards for Local and Special Care Neonatal Units in the UK, Transition to Paediatrics, Mortality Governance and the Perinatal management of Extreme preterm birth born before 27 weeks of gestation (revision), Metabolic Bone Disease of Prematurity.

Future frameworks in development will focus on the prevention and treatment of necrotising enterocolitis and neonatal haemodynamics. If you have a suggestion for a framework please contact us; these are collated and prioritised at our regular EC meetings. Exciting events to look forward to include next year's annual conference and BAPM's 50 year anniversary celebrations.

Finally, it leaves me to thank you, the members of BAPM, who help shape the work we do, to every single one of you who has taken the time to feedback on framework consultations, join our working groups, participate in our webinars, Special Interest Groups and Affiliated groups. Thank you to the executive committee who volunteer so much of their time, the BAPM office staff and external stakeholders.

# **ACTIVITY** REPORT

### **BAPM Conferences**

- Perinatal Update & Networks Meeting (Online, 11 February)
- Spring Conference (Leicester and Online, 1-2 April 2025)
- **Annual Conference** (Sheffield and Online, 10-11 September 2024)
- BAPM session at the RCPCH Conference (April 2025)

### Frameworks for Practice

- Routine Pulse Oximetry Testing for Newborn
- Peri Operative Care of Extremely Premature
- Neonatal Outreach Service

### Other publications

- In-utero transfer
- How to Write a Professional Neonatal CV
- How to develop your profile in the neonatal world

### **Coming Soon**

- Perinatal Management of Extreme Preterm Birth Before 27 Weeks of Gestation
- Management of neonatal pain
- Recommended Medical Workforce Standards for Local and Special Care Neonatal Units in the UK
- Neonatal Mortality Governance
- Transition from neonatal to paediatric care for babies with long term or complex healthcare

#### Webinars

- Implementing the BAPM Neonatal Airway Framework (Oct 2024)
- Safer Infusion Management in Neonates (Nov 2024)
- Routine Pulse Oximetry Testing; implementation and practise (Dec 2024)
- BAPM Extreme Preterm Framework webinar (Jan 2025)
- · Neurological examination and neurodevelopment assessment tools

- BAPM Neonatal Outreach Service Framework webinar (April 2025)
- LNU/SCU Updates: Commissioning, Palliative Care, Airway Skills, SPIN (June 2025)
- How to develop your profile in the neonatal world (July 2025)

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

**RCUK - Perimortum Caesarians** RCUK ReSPECT wider stakeholder group NNAP Data and Methodology Group **NNAP Board** 

**RCPCH - Palate Examination** 

**RCPCH Specialty Board** 

**RCPCH Research Consultation Committee** RCPCH Climate Change Member Reference Group

(CC-MRG)

**RCOG Specialist Societies Liaison Group RCM Research Prioritisation Project** 

NMPA Clinical Reference Group

NIHR - Neonatal Clinical Studies Group

Equity and Equality in NHS maternity and

neonatal care

Programme)

NHSE - Neonatal Digital and Data Special Interest Group

NHSE - National Medical Workforce Data Collection

NHSE - Neonatal Resusitation Steering Group National Child Mortality Database Group

NHSE - Reading the Signals - Outcome data

NHSE - Reading the Signals - Coordination Group

NHSE - Quality, Performance and Surveillance (QPS) Committee (Maternity and Neonatal

NHSE - Neonatal implementation board

NHSE - Maternity & Neonatal New Action Forum

NHSE - Maternity and neonatal programme: Strategy & Policy

NHSE - Interprofessional experience innovation project (IPEX project)

NHSE - Maternity and Neonatal Programme national experience survey - service user voice stakeholder group

NHSE - Maternity and Neonatal Transformation Stakeholder Council

NHSE - Maternity & Neonatal Programme:

Training and Education

NHSE/RCPCH Paediatric and Child Health

Advanced Practice Curricular Framework (PCHCF)

**HEE QIS Review** 

NHS Digital Neonatal EWG / Neonatal Critical Care **Review Pricing** 

Neonatal CRG

NHSE NIB Leads and BAPM Leads Meeting Independent Maternity Working Group (IMWG)

NHSE - Perinatal Culture and Leadership Steering Group (PLSG)

NHSE - Pandemic Planning Task and Finish Group **Network Pharmacists** 

NNRD Board

NCEPOD Stabilisation of the critically ill child study

James Lind Alliance - Stillbirth PSP

National Clinical Leads Meeting

Infection in Critical Care Quality Improvement

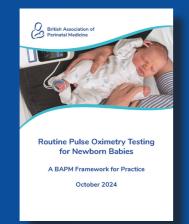
Programme (ICCQIP) Board

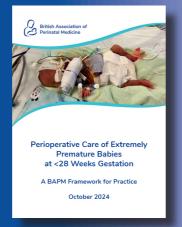
**BMFMS Executive Committee** 

APAGBI/DAS Review of National guidance on paediatric difficult airway management

## Some of the BAPM documents produced this year...

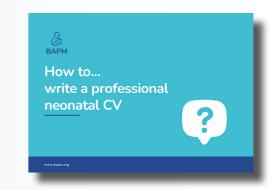












# TREASURER'S **REPORT**

### **Anoo, Honorary Treasurer**

Thank you to the Executive Committee for your continued support for our finances. Marcus' and Kate's knowledge and judgement have been excellent in helping to keep our finances in a good state. BAPM accounts are in a solid position and a copy is available on the BAPM website (see summary on the facing page).

I am pleased to inform you that we have been advised that we are able to claim Gift Aid on our membership fees and we are in the process of putting in an application. This will provide an important boost to BAPM's income.

We have around 3,000 members that represent the breadth of professionals working in perinatal care. We continue to attract commercial sponsors to our events and this reflects the growing influence that BAPM has cultured over years.

Our reserves remain at a level that has sufficient funds to continue for nine months in the (unlikely) event that BAPM's income is at risk. Following approval at our 2024 AGM, we invested unrestricted reserves to employ Ruby in our office in the role of Admin Officer to expand the capacity of our hard working office team - a warm welcome to Ruby.

We gave out four Bursaries from Professor Peter Dunn's legacy fund and money from the appropriate restricted funds has been spent on the travel costs of the Peter Dunn and Founders Lecture speakers for our Annual Conference. We have reviewed our meeting costs, commercial sponsorship funding and membership fees. There are some challenges with each of these, but we plan to hold the membership fees at the current rate and review in due course.

"We continue to attract commercial sponsors to our events and this reflects the growing influence that BAPM has cultured over years."

We have future plans to develop a fund that enables BAPM to extend support for its advocacy, partnership and leadership roles. In addition, we continue to have strong relationships with RCPCH, BMFMS, RCOG and other organisations.

It is my privilege to be your Treasurer and to represent and support the excellent family and patient-focused work that BAPM does.

Find new publications from BAPM on pages 8-9.



## **ACCOUNTS** SUMMARY

3APM Annual Review 2023/2

British Association of Perinatal Medicine Statement of Financial Activities (including Income and Expenditure Account) for the year ended 31 March 2025.

	Unrestricted funds	Restricted funds	2025	2024
	£	£	£	£
Income and endowments from:	_	_	_	_
Donations and legacies	186,633	-	186,633	160,275
Charitable activities	80,742	-	80,742	80,338
Other trading activites	43,895	45,400	89,295	184,179
Investments	-	-	-	1,804
Total	311,270	45,400	356,670	426,596
Expenditure on:				
Raising funds	(6,414)	-	(6,414)	(5,412)
Charitable activities	(229,633)	(27,389)	(257,022)	(330,379)
Other expenditure	(91,755)	-	(91,755)	(73,165)
Total	(327,802)	(27,389)	(355,191)	(408,956)
Net income/expenditure	(16,532)	18,011	1,479	17,640
Reconciliation of funds				
Total funds brought forward	204,871	94,575	299,446	281,807
Total funds carried forward	188,339	112,586	300,925	299,447



### **Leading Excellence in Perinatal Care**

### **BAPM Executive Committee 2024-2025**

Dr Eleri Adams President

Dr Stephen Wardle President Elect
Dr Anoo Jain Honorary Treasurer
Dr Cheryl Battersby Honorary Secretary

Dr Rachel Collum Family Advocacy and Support Lead

Prof Shalini Oiha Research Lead

Mrs Tamsyn Crane Staff Education and Wellbeing Lead

Dr Chantelle Tomlinson Quality Lead
Dr Sam Oddie Data Lead
Dr Louise Leven Safety Lead

Ms Moriam Mustapha Equality, Diversity and Inclusion Lead

Dr Ajit Kumar Mahaveer Networks Lead

Natalie Anders Representative for Nursing
Olivia Houlihan Representative for Midwifery
Sara Clarke Representative for AHPs

Dr Katherine Pettinger Representative for Trainees and Students

Dr David Bartle Representative for LNU/SCUs
Ms Caroline Lee-Davey Representative for Bliss
Dr Victoria Hodgetts Morton Representative for BMFMS

#### **BAPM Staff**

Kate Dinwiddy Chief Executive

Marcus Hook Finance and Membership Coordinator

Laura Fountain Communications Officer

Jessica Smith Working Groups & Events Officer

Ruby Simmons Team Administrator

British Association of Perinatal Medicine (BAPM)

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