



Application statements for the Newborn Brain Care Group (BAPM special interest group) Committee 2026

Role – Family Engagement Lead

Instructions

BAPM has received the following application statements from members wishing to join the Committee in the role of FAMILY ENGAGEMENT LEAD.

Please read the statements and cast your vote using the online form by **11:59pm, 2nd August 2026**. All Newborn Brain Care Group members will be emailed a link to the form to vote. If you have not received this, please contact bapm@rcpch.ac.uk

Votes will be counted by BAPM Office staff and will be treated with complete confidentiality.

Family Engagement Lead (19 applications)

Trisha Bellingham

Neonatal Intensive Care Nurse/FINE coordinator, University Hospitals Plymouth/Torbay and South Devon NHS Foundation Trust

I have over 25 years of neonatal nursing experience across intensive, high dependency and special care settings, with a particular focus on family-integrated and neurodevelopmentally supportive care. I am currently a Senior Lecturer and FINE (Family and Infant Neurodevelopmental Education) Level 1 Coordinator, delivering education programmes nationally and supporting neonatal teams to embed evidence-based neurodevelopmental practice. I am FINE Level 3 trained and have undertaken additional training in Newborn Behavioural Observation (NBO) and Sensory Beginnings. As a Developmental Care Lead, I have championed practices that support infant brain development, minimise stress and optimise family involvement in care. My clinical and educational roles have enabled me to promote brain-orientated care through staff education, mentorship, quality improvement and multidisciplinary collaboration, with the aim of improving both short- and long-term outcomes for infants and their families.

Throughout my career I have contributed to a range of educational, developmental care and quality improvement initiatives within neonatal services. As FINE Level 1 Coordinator, I work collaboratively with multidisciplinary professionals across the UK to coordinate, deliver and evaluate national education programmes focused on family-integrated and neurodevelopmental care. I contribute to curriculum development, quality assurance and professional networking, and have contributed to publications within the Journal of Neonatal Nursing. In my clinical role, I have led developmental care initiatives, supported service improvement projects, acted as a Practice Supervisor and Assessor, and worked closely with families and colleagues to promote evidence-based care. I am recognised for my strong communication, organisational and leadership skills and enjoy bringing together diverse professional perspectives to achieve shared goals. I am passionate about ensuring that family voices are represented and embedded within neonatal practice, education and service development.

Andrada Bianu

ST5 Paediatric Trainee, Queens Hospital, BHRUT

Through my foundation and paediatric training I have developed clinical skills that help me offer patient-centered and family integrated care as well as safe practice using evidence based medicine. Working in both general paediatrics and community paediatrics in neurodevelopmental clinics I have strengthened my skills in outpatient settings and witness the outcomes of babies who were admitted to NICU from different perspectives. Having worked in both NICU and LNU as an SHO and then at Registrar Level, I have diagnosed and managed cases of HIE, congenital brain malformation, extreme premature infants and meningitis among others. But not only infants with a neurological abnormality need brain oriented care. Any baby admitted to NICU is at risk and would benefit from evidence based care to promote brain health. Brain oriented care is best provided through a multidisciplinary approach offered by clinicians, nursing team, AHPs and parents and education and training regarding the optimisation of newborn brain health for lifelong benefits sits at the cornerstone of better outcomes and safe practice.

I strongly believe that I would be a great addition to the committee team after having been a NeoTRIP's regional lead for the last 3 years. During this time, I have successfully coordinated 5 different projects developing my skills in collaborative work as well as enhanced my communication and time management skills. Having coordinated Morbidity and Mortality meetings in a large tertiary Paediatric Hospital I have developed team working skills that involved multidisciplinary members. My work there involved organising and advertising monthly meetings, organising the schedules and coordinating the presentations of different subspecialties, taking minutes and creating and distributing the learning points from each meeting through posters.

During the pandemic I created a new emergency SHO rota for 30 juniors spread across 9 subspecialties in a tertiary hospital making sure there was enough staffing for the clinical care to continue smoothly and safely. The feedback I have received was overwhelmingly positive.

Jo Bussey

Parent & Family Engagement Lead, West Midlands ODN

I'm the mum of a child born at 26 weeks. He is soon to be 21, has completed further education and is working, while living with long-term effects of prematurity, including Cerebral Palsy, Autism and ADHD. Our family's journey has given me insight into how early neonatal care shapes neurodevelopmental outcomes, the importance of early intervention, continuity of care, and sustained family support, from the neonatal unit through community, therapy, education services and into adulthood. In my professional role as Parent and Family Engagement Lead for the West Midlands ODN, I have developed a strong understanding of brain-oriented care, through close working with MDTs and families. I understand the principles of neuroprotective, developmentally supportive care, including minimising stress, supporting attachment, optimising the sensory environment, and promoting parental involvement as key contributors to brain development. I will combine these perspectives on why brain-focused care matters and how it can be strengthened.

A project manager by background, I bring experience of collaborative working across MDTs, neonatal units and with families to design and deliver engagement and improvement projects. In my current role, I lead and contribute to initiatives that embed co-production, strengthening family voice in service development. This includes coordinating our PAG and facilitating co-production with stakeholders to shape network priorities. I'm experienced in organising workshops, co-production sessions and feedback mechanisms, ensuring that insights are translated into clear, actionable improvements. A confident communicator, I'm skilled at bridging perspectives between families and professionals, and supporting psychologically safe, inclusive discussions. I'm organised, able to manage competing priorities and maintain momentum across workstreams. I've worked across health systems; regionally and nationally, as well as in the voluntary sector, focusing on maternity and neonatal care. I'm passionate about women's and children's health. I believe in bringing people together, creating networks to progress and find solutions collectively.

Paul Cawley

Consultant in Neonatology, Evelina Children's Hospital/ St Thomas'

Researcher at the Department of Early Life Imaging and Centre for the Developing Brain; focusing on early life origins of neurodevelopmental disorders, imaging associations of brain injury and translation of developing technologies to enhance diagnosis, prognosis and management of brain injury in the neonatal period.

Co-lead for the 'one brain for life' neuroprotection group at the Evelina neonatal Unit. Medical lead for Family Integrated Care, Evelina Neonatal Unit. Experienced in secretarial duties including arranging meetings, minutes, action logs and leadership of MDT. Author/Faculty: BAPM Framework: The Perinatal Optimisation Team. Being able to job plan role within BAPM SIG would be transformative.

Thomas Dunne

Neonatal GRID Trainee, Liverpool Women's Hospital

My interest in neonatal brain health and neurodevelopment has shaped both my academic and clinical career. During a first-class intercalated degree in Psychological Medicine, I undertook neuroimaging research using fMRI to investigate brain networks, publishing and presenting this work nationally and internationally. I subsequently completed an Academic Foundation Programme researching childhood development and disability outcomes.

As a Neonatal GRID trainee in a tertiary NICU, neurodevelopmental optimisation is central to my practice. I consider brain-orientated care throughout the patient journey, from antenatal optimisation and prevention of perinatal brain injury to intensive care management, developmental care, nutrition, family-centred support and discharge planning. I have completed modified Sarnat staging training, recruit to neonatal neurology studies including COMET, and presented a case on HIE at the North West National Cooling Seminar. I am currently developing a PhD proposal investigating the impact of neonatal surgery and nutrition on brain imaging biomarkers and neurodevelopmental outcomes.

I have extensive experience leading multidisciplinary quality improvement, governance and educational projects. Most notably, I was resident doctor lead for implementation of the NOAH (Neonatal Oral Antibiotics at Home) pathway within a tertiary NICU, coordinating clinical and administrative teams, developing guidelines and parent information resources, navigating governance processes and supporting implementation and ongoing oversight, with this work accepted for national and international presentation. As a lead for unplanned extubation reduction within our NICU, I implemented a locally adapted SEIPS-based review process, using incident review to drive improvement and inform audit methodology. As regional SAFE-Neo lead, I collaborated across centres to improve patient safety and share learning. I co-founded a Rare Disease Society, organising a CPD-accredited conference and lecture series, and co-organise a regional MRCPCH clinical examination course involving candidates, patients, families and examiners, strengthening my communication, organisational and collaborative working skills while ensuring patient and family perspectives inform programme delivery.

Emma Frudd

Advanced Neonatal Nurse Practitioner, Leeds Children's Hospital

I work on a level three NNU caring for a variety of patients of different gestations and conditions. I am also an active member of the unit developmental care team. These babies are a challenging group as when they are with us on the neonatal unit parents often want answers as to any damage that may have been sustained and often we are unable to tell them whilst they are on the unit with us. Our role is to explain as best we can what has happened and what we can do to support them and what the outlook may be and being honest and open.

I am a member of our units developmental care team which is an MDT comprised of nursing staff, physios, OT, SLT and play therapists, we are in the process of running monthly ward rounds, due to a change in staff. We are trying to update our documentation and the how we undertake the ward round to have more input from parents and include them in any decision making. I am also a member of a QI group looking at the IVH care bundle and how we can improve its use on the unit following an audit of the data.

Sophie Griffith-Jones

Clinical Psychologist, Royal London Hospital

As a clinical psychologist working in NICU, I specialise in promoting positive parent-infant interactions and bonding. This can include psychoeducation about a premature baby's neurodevelopment (e.g., limiting exposure to bright light and noise) and supporting long-stay families with promoting healthy brain development once their babies reach full-term. I also have experience in supporting families whose babies have been diagnosed with HIE or IVH. This can include joining conversations with consultants to help families process the news, and supporting with adjustment to diagnosis and decision-making about ongoing treatment.

In a previous role at Great Ormond Street Hospital, I contributed to the Psychology Neonatal SIG. This involved strategic planning on how to improve care for neonates at GOSH, discussing and disseminating policy, and developing training for hospital staff. I presented at this SIG on a recent policy document developed by the London Neonatal Operational Delivery Network (ODN) on outpatient staffing standards for psychological professionals. I have also worked for the London Neonatal ODN in my final year of training, which involved regular meetings to

discuss service development at a regional level, and how to support a range of professional disciplines to deliver psychologically informed care across neonatal units in London. This involved the design and delivery of trauma-informed care study days for all staff working in neonatal units in London, and organising a stakeholder day for London-based psychological professionals in relevant infant and child services.

Heba Hassan

Consultant Paediatrician, Basildon Hospital (Mid and South Essex Foundation Trust)

My practice incorporates principles of neuroprotection, developmental care, and family-integrated care throughout the neonatal journey. I have experience in supporting evidence-based neuroprotective strategies, including thermal optimisation, developmental handling, pain reduction, and promoting parental involvement and Kangaroo mother care and skin-to-skin care where appropriate. I value the importance of creating a neonatal environment that minimises stress and supports brain development through attention to positioning, sleep, and sensory exposure. I am experienced in designing practical skills teaching programs to support safe practice, standardise interpretation, and improve diagnostic consistency within the neonatal team when it comes to cranial US scanning. I also led quality improvement projects to improve uptake and optimise perinatal neuroprotection.

I have contributed to service development and quality improvement work within neonatal care with a strong emphasis on family-integrated care and improving communication with parents. I have led and contributed to regional quality improvement projects, working collaboratively across multiple neonatal units. This involved coordinating data collection, engaging stakeholders from different hospitals, and supporting the implementation of shared learning across the network. These projects strengthened my ability to work across organisational boundaries and communicate effectively with a wide range of professional groups, including consultants, trainees, nurses, and allied health professionals. I have also led a project aimed at improving parent experience and engagement during neonatal transport, including reinforcing consistent messaging within the MDT to ensure families receive clear, unified information. I value adapting communication to individual family needs, including cultural, emotional, and health literacy considerations, to support understanding and shared decision-making. These experiences have developed my contribution to neonatal networks and the importance of collaboration, consistency of practice, and shared learning to improve patient care.

Serah Koshi

Speciality Doctor, Grange University Hospital

I am a Specialty Doctor with over 8 years' experience in a Level 3 neonatal unit, with a strong focus on brain-orientated care aligned with BAPM guidance. My practice includes minimising pain and stress using evidence-based measures such as expressed breast milk and non-pharmacological strategies, optimising neuroprotection, and improving the NICU environment through noise and light reduction. I have extensive experience managing high-risk infants, including those with hypoxic-ischaemic encephalopathy and extreme prematurity, with an emphasis on developmental care and therapeutic hypothermia. I am a strong advocate for Kangaroo care, delivery room cuddles and cuddles during cooling. I actively promote Family Integrated Care, recognising parents as key partners. I have led the Golden Drops project to support early breast milk expression and serve as a local lead for Periprem Cymru initiatives. With these initiatives, I am involved in feedback from families and parents on a regular basis. My work reflects a strong commitment to combining neuroprotective care with meaningful family engagement to improve long-term outcomes.

I have experience contributing to multidisciplinary projects and working groups at both local and national levels. I was a member of the BAPM Metabolic Bone Disease working group, where I have collaborated with a diverse team of clinicians to develop guidance and improve practice and helped form the new BAPM MBD framework. As part of this work, I worked closely with a parent and a BAPM executive, to co-produce a parent information leaflet, ensuring that resources are clear, accessible, and family-centred. In my clinical role, I regularly work with

multidisciplinary teams, including nurses, ANNs, dietitians, and allied health professionals, to deliver and improve neonatal care. I have strong communication and organisational skills, demonstrated through leading QI projects, contributing to teaching programmes, and supporting colleagues as a QI coach. I value collaboration and actively seek input from both staff and families to ensure inclusive, effective, and sustainable improvements in care.

Amanda Lawes

Neonatal OT/ODN Lead OT for Thames Valley and Wessex Neonatal Network, Singleton Hospital / Thames Valley and Wessex ODN

My knowledge of this area began in 2007 -attending a NIDCAP study day, learning about synaptogenesis and how the brain is experience dependent, particularly in the neonatal setting where the cerebral cortex is highly vulnerable to stress and disruption. I have undertaken extensive training in neuroprotective care, and I have an in-depth understanding of preventing injury, protecting normal maturation and providing a neuroprotective environment. I have taught neuroprotective care including cue-based care, pain assessment and management, optimised sensory environments, positioning, Fi Care, neuroprotective medical strategies for over 10 years. I am trained in General Movements Assessment, understand neuroplasticity and how early intervention helps reorganise the motor cortex following injury. I visited Sweden to observe world class neuroprotective care and I use the Neonatal Neuro-protective Best Practice Guidelines in my daily practice. I have an up-to date knowledge of the evidence base e.g. the effect of neuroprotective care is lost by age 3 years and regular 'boosts' of this care is needed to optimise long term outcomes.

As someone who has led on Family Integrated practice in the UK over the past 10 years, I have recently been invited to join the newly-formed UK Fi Care Committee, to explore framework development. I work closely with Bliss and have led national teaching/webinars/study days. I was one of the clinical experts to develop the HEE e-learning package for OT's wishing to develop skills in neonatal care. I am one of the authors of the RCOT Career Development Framework for neonatal OT's. In addition to my clinical role, I have a Lead ODN role and collaborate with the other national ODN leads to implement recommendations of the NCCR, delivering workstreams that include workforce development, supporting clinical practice, education and governance. I have developed neonatal guidelines in England and Wales and more recently I participated in the Stakeholder group of the All Wales Maternity and Neonatal Assurance Assessment. My strengths are my communication skills and ability to influence others, even at a Government level.

Aishin Lok

Consultant Neonatologist, Bradford Royal Infirmary

I am a Consultant Neonatologist at Bradford Neonatal Unit and strongly believe that every NICU should be a 'Neuro NICU', where optimising brain health is embedded throughout the patient journey and families are recognised as essential partners in care. My work spans acute neuroprotection, developmental care and long-term neurodevelopmental follow-up. I introduced an intraventricular haemorrhage prevention bundle, which was subsequently incorporated into regional guidance, and regularly deliver multidisciplinary teaching on IVH prevention and cranial ultrasound. I established a full neonatal Allied Health Professional workforce in line with BAPM standards to embed developmental care into everyday practice. Together with families, I have implemented initiatives including optimising positioning, prescribing EiSMART developmental activities, promoting parents as partners in care and establishing baby massage classes. I also lead our two-year follow-up program for high-risk infants and use outcome data to drive service improvement.

As Family Engagement Lead at Bradford Neonatal Unit, I have extensive experience working collaboratively with families, parent representatives, MNVPs and multidisciplinary teams to co-produce services and improve neonatal care. I have established several platforms to ensure families' voices are heard, including digital feedback systems and a comprehensive Padlet resource to educate, support and empower parents throughout their neonatal

journey. These initiatives were commended during our CQC inspection, contributing to our unit achieving an Outstanding rating, and were recognised with a BLISS Silver Award. I have also led projects that bridge newborn brain care and family partnership, including implementing an IVH prevention bundle, establishing a neonatal AHP workforce in line with BAPM standards and using two-year outcome data to drive service improvement. This work was published in the NNAP report last year and presented at a NNAP national webinar.

Fadi Maghrabia

Consultant Neonatologist, Leeds Teaching Hospitals

Subspecialty & Tertiary Expertise: I developed advanced expertise in neonatal neurology through extensive clinical experience in tertiary neonatal units during training, supplemented by a dedicated pediatric neurology rotation during neonatal GRID training. I'm also a member of the BPNA (British Paediatric Neurology Association) and NBS (Newborn Brain Society). **National Leadership:** I co-chair the BPNA Fetal and Neonatal Neurology Special Interest Group, successfully uniting neonatologists, neurologists, and fetal medicine specialists on a national scale. **Educational Impact:** I'm a faculty member on the BPNA NeoNATE Neonatal Neurology Programme, and I led the comprehensive content update for the BPNA Neonatal Neurology Distance Learning Course. **Clinical Governance & Research:** Updated neonatal seizure guidelines at both departmental and network levels, and presented national data on cranial ultrasound practice in preterm newborns.

I co-chair the BPNA Fetal and Neonatal Neurology Special Interest Group, a voluntary multidisciplinary national group. In this role, I set structured agendas, maintain action logs, ensure accountability across workstreams, and co-lead the organisation of national educational days. I created the NeoMedAI neonatal educational podcast, demonstrating my ability to communicate complex clinical content accessibly to a wide professional audience, which directly maps to the communications officer role. I also have experience in developing and distributing professional newsletters during my role as the regional representative for International Medical Graduates. For the family engagement lead role, I currently lead the neonatal EDI (Equity, Diversity, and Inclusion) workgroup at my unit, collaborating closely with families and advocacy groups to mitigate health inequalities and deliver structured, inclusive, family-centred engagement.

Nusra Marikkar

Senior Clinical Fellow, Derriford hospital, Plymouth

I am a neonatal clinician with over 13 years of experience working in Level 3 NICUs across Sri Lanka, Oman, and the United Kingdom. I have worked in several tertiary neonatal units in Sri Lanka and in two of the largest hospitals in Oman, gaining extensive experience in the care of critically ill and preterm infants. Since May 2025, I have been working in the Level 3 NICU at Derriford Hospital, UK. I have completed MRCPCH and the Diploma in Child Health (DCH). I have also completed training in neonatal cranial ultrasound scanning and independently perform and interpret cranial ultrasound scans within the unit. I am committed to delivering high-quality neonatal care, continuous professional development, and improving outcomes for newborns and their families. I would be honoured to be part of BAPM and contribute my international experience, clinical skills, and enthusiasm to support excellence in neonatal care. I had completed a research in Khoula hospital, Oman in HIE, cooling babies. Largest retrospective study of 20years and published in journal children in 2025.

Aesha Mohammedi

Consultant Neonatologist, Royal Sussex County Hospital

As a consultant neonatologist for almost 6years with an interest in neurodevelopment, I have acquired wealth of experience in newborn brain. Being a co-lead for BANNFU educational workstream and keen in neonatal neurology, neuroprotection and development, I aspire to work collaboratively with the NBC group and promote evidence-based, consistent and equitable brain-orientated care for all neonates. Neonatal Neurology and Neuroprotection- I

strongly feel that reducing brain injury using evidence-based practice potentially reduces the risk of neurodevelopmental delay. My published MSc work in developing an IVH care bundle was not only adapted as a guideline by the Yorkshire and Humber ODN but also applied it via QI methodology and teaching to reduce IVH severity rates at Leeds. Currently leading on formulating a south-east IVH care bundle. Neurodevelopment: I am currently leading a KSS neurodevelopment follow-up MDT working group and have been successful in embedding monthly ODN MDT general movement assessment(GMA) meetings.

As a Sussex Neonatal lead and neurodevelopment follow-up lead at Brighton, I integrate and collaborate with diverse team of multi-professionals to promote shared learning objectives. Being a qualified PGCE educator, FICare advocate, MSc graduate with merit and silver accredited in QI training at the Improvement academy, I successfully embedded using GMA at workplace I am dedicated to improve patient outcomes, quality and standards of care, effectiveness, safety, patient(family) experience, timeliness and equity. Leading onto development of IVH care bundle frameworks at two ODN's and leading onto two patient-safety QI projects (to reduce unplanned extubations and medication errors, highlighted on risk register) helped me promote optimisation of newborn brain health for lifelong benefit. Chairing the emerging KSS Neurodevelopment follow-up working group, I oversee terms of reference, formulate strategies and workstreams. By working with NBC-SIG committee, I am committed to raise the profile of newborn brain care and deliver world-class clinical care.

Satomi Okano

Advanced Neonatal Nurse Practitioner, St Michael's Hospital, University Hospitals Bristol and Weston Foundation Trust

I am an Advanced Neonatal Nurse Practitioner (ANNP) with extensive experience in a tertiary neonatal unit and transport service, and a longstanding interest in neonatal neurology and brain protection. My involvement in the Bristol-based CoolXenon trial and CoolCuddle study gave me direct experience of supporting infants and families during therapeutic hypothermia and other neuroprotective care during periods of significant prognostic uncertainty. I am a member of the Nursing Task Force of the Newborn Brain Society and an ANNP lead for the preterm interest group within my unit. These roles have strengthened my interest in preterm brain protection, developmentally supportive care and collaborative working with maternity colleagues to promote optimal neurodevelopmental outcomes. I am also undertaking a systematic review of brain functional monitoring (NIRS/aEEG/EEG) during routine interventions in preterm neonates as part of a clinical research course, with the hope that this work will help inform and support neuroprotective care.

Through my involvement in research studies and service development work, I supported recruitment and family engagement across complex care pathways and developed a strong appreciation for the importance of clear communication, sensitivity and co-production with parents with lived experience. This work required careful explanation of complex information, responsive communication with families, and close liaison with clinical and research teams. In my current roles with local and international teams, I contribute to discussions, shared priorities and ongoing practice development across multidisciplinary groups. These roles require organisation, reliability and the ability to work collaboratively with diverse professional groups, while ensuring family perspectives remain important in this work. I value working with others to support improvements in care and would appreciate the opportunity to contribute to this work while learning from professionals and families with diverse expertise and experience.

Rebecca Ollerenshaw

Senior Neonatal Clinical Research Fellow, St Mary's Hospital ORC, Manchester University NHS Foundation Trust

As well as my clinical experience as a resident doctor caring for medical and surgical babies with brain injury, I am also gaining research and clinical delivery experience in this area. I am currently out of programme for research; employed as a senior neonatal research fellow where my area of study is brain-oriented care. I am conducting a

systematic review of neuroprotective bundles for IVH prevention, overseeing local running of the ACUMEN trial (Phase 1 IV Melatonin for babies with HIE), supporting education and recruitment to the COMET trial (Cooling in mild encephalopathy) and am developing a PhD proposal to explore neuroprotection bundles and dysglycaemia in HIE. As part of this I am abreast of the current literature in bundles of care for HIE and IVH. I am also working with the Northwest neonatal ODN cooling and neuroprotective trauma-informed FiCare special interest groups to improve brain-oriented care across the region.

I am a member of the Northwest neonatal ODN cooling special interest group and attend meetings, contributing to planning and implementation of ODN projects. I'm currently co-ordinating a regional HIE and cooling audit. I have gained buy-in and collaboration with clinicians and ANNPs at 22 units across the Northwest region. I am personally overseeing the data collection which is ongoing and is expected to be complete by the end of this quarter. I have developed a work programme and project plan, mapping out the data analysis, identification of variation in practice and pathway for QI development and implementation. I have always received excellent feedback on my communication skills. As part of my work for the group, I have needed to liaise and build rapport with data analysts, administrative project co-ordinators, parent representatives as well as clinical and nursing ODN leads to drive the project forwards.

Raga Mallika Pinnamaneni

Consultant Neonatologist, Addenbrookes hHospital

I am a Neonatal Consultant with special interest in brain-oriented neonatal care. During my paediatric training in Ireland, I developed a strong interest in newborn brain care, undertaking research using NIRS, acting as local PI for the ANSeR study (Seizure detection algorithm), and gaining expertise in EEG application and interpretation. I have also led research on neurodevelopmental outcomes in growth-restricted infants, utilising Bayley-III, ASQ-3 and CBCL assessments. Since 2019, I have been part of the neurocritical care team in Cambridge, maintaining a neurological database, reporting cranial ultrasound scans, and leading QI initiatives to improve IVH rates, neurological assessment, HIE diagnosis, and PHVD management. I am PI for the COMET study and regularly teach CFM interpretation locally and regionally, with faculty roles on national courses. I have completed NBAS and NBO training, promoting the Brazelton approach to enhance parent–infant interaction.

I have extensive experience in family engagement and co-production. As neonatal lead for the Rosie Maternity and Neonatal Voices Partnership (2021–2023), I worked closely with parent representatives to review NICU feedback, ensuring transparent communication, celebrating good practice, and driving improvement. I co-developed the SEED (Supporting, Empowering, Enhancing Development) programme to embed Family Integrated Care across the unit. This work was nationally recognised, shortlisted for two awards and winner of the BAPM Gopi Menon Award (2023), and has since evolved into the Rosie Family Integrated Care programme. As FiCare lead, I coordinate monthly multidisciplinary meetings with nursing and AHP teams (including BFI, psychology, SLT and OT), using parent feedback to guide priorities and service development. This has delivered multiple co-produced initiatives improving communication, engagement, and staff culture. These experiences have equipped me with the organisational, communication, and collaborative skills required to effectively represent and integrate family perspectives within a national multidisciplinary brain care programme.

Sarah Sparrow

Consultant Neonatologist, Royal Infirmary of Edinburgh

I am committed to promoting excellent neonatal brain care and have been involved with the Newborn Brain Care SIG from inception. I am the Neurology and Neurodevelopmental lead within Neonatology in our tertiary NICU. I aim to optimise our NICU into a Neuro-NICU setting. We promote an IVH prevention bundle of care, have a strong imaging protocol including CruSS and MRI. We promote subspeciality interest and have created a neuro neonatal fellowship. As part of a novel perinatal MDT group, I work to improve management and counselling for antenatally

diagnosed neurological conditions. I coordinate the neurodevelopmental follow up service, which has reached 93% NNAP compliance with two-year follow up. We aim for all infants to Bayley 4 assessment and Prechtl examination. Regarding research, I completed an MD into the Neuro-epigenetics of Preterm WM injury, with 13 publications. I am involved in PRENCOG, ACUMEN and COMET trials.

As a member of the Scottish Perinatal Network guideline committee, I have led the development of four national guidelines this year, including the 'Management of Post-Haemorrhagic Ventricular Dilatation'. This guideline involved communication and coordination with specialists from across Scotland. As part of the Scottish Cooling group, I aim to educate all members of the MDT on structured neurological examination and management of HIE by the organisation of in person education days. Within my current clinical role, I co-ordinate neurodevelopmental follow up. This involves MDT working alongside wide range of specialist AHPs. I am fortunate enough to work regularly with Hilary Cruikshank – chair for BANNFU and have learned a great deal from her experience with BAPM. Within my role in PRENCOG research, I lead the feedback of structural MRI reporting. This involves careful planning with research midwives alongside sensitive and careful communication families, in the context of incidental findings.

Sue Wyton

Advanced Neonatal Nurse Practitioner, Birmingham Women's Hospital, BWCH Trust

My experience in paediatric intensive care, tertiary paediatric neurology and my current role as an Advanced Neonatal Nurse Practitioner in a tertiary neonatal unit have given me a strong interest in brain-orientated neonatal care. I am always struck by how vulnerable, yet resilient, these babies are, and how the care and interventions we provide can influence their future neurodevelopment. I am committed to delivering neuroprotective care and supporting colleagues to consider the impact of everyday practices on the developing brain. I enjoy role modelling and teaching within the multidisciplinary team to promote a consistent approach to developmental and family-centred care. My previous neurology experience has also highlighted that the neonatal period is only the beginning of a family's journey. Speaking with families of older children has given me insight into the long-term challenges they may face and has strengthened my commitment to advocating for babies and their families from the very start.

As an ANNP with a specialist interest in neonatal neurology, I have led projects aimed at improving neurological care, including work around lumbar puncture practice which I have presented at international conferences. I have also presented our work at Trust level, sharing learning and encouraging others to implement similar improvements. These experiences have strengthened my communication, organisational and leadership skills. As an ANNP, I enjoy helping turn ideas into changes that make a real difference for babies, families and staff. To strengthen the focus on neurological care within our unit, I established and now lead 'NeuroNeo', a multidisciplinary neonatal neurology interest group involving nurses, doctors, allied health professionals, family integrated care nurses and the education team. I feel a strong responsibility to advocate for babies and families and ensure their needs remain central to this work. We are currently supporting implementation of the network Brain Protection Bundle and have seen how collaborative working can drive meaningful improvements in care.

END OF STATEMENTS