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

Role – Education & Training Lead

Instructions

BAPM has received the following application statements from members wishing to join the Committee in the role of EDUCATION & TRAINING LEAD.

Please read the statements and cast your vote using the online form by **11:59pm, Wednesday, 2nd December 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 confidentially.

Education & Training Lead (15 applications)

Dr Mohammed Bahari

Consultant in Neonates, Luton and Dunstable

I am a Consultant Neonatologist with interest in neonatal education and brain-orientated care. My clinical experience includes caring for infants with HIE, neurological complications of prematurity and other conditions associated with neurodevelopmental risk. I regularly interpret aEEG, perform cranial ultrasound and participate in cranial ultrasound review meetings. During my neonatal fellowship in Canada, I also gained experience of NIDCAP-based developmental care, which strengthened my interest in protecting the developing brain through individualised, developmentally supportive and family-centred neonatal care.

Teaching is an important part of my clinical role. I regularly teach resident doctors and neonatal nurses through bedside teaching, case discussions and structured sessions, including neonatal physiology and haemodynamics, ECG interpretation, ventilation, neonatal hypotension, resuscitation and the management of complex neonatal patients. I particularly enjoy translating complex concepts into practical approaches that can be applied at the bedside.

I also have experience of leadership and multidisciplinary working. I established the MINT (Multidisciplinary Integrated Neonatal Team) Review in my current unit, bringing together medical and nursing staff, AHPs and other services to improve coordinated, developmental and family-centred care for infants with complex or prolonged admissions.

As Education & Training Lead, I would like to help make newborn brain care practical and accessible across the multidisciplinary neonatal workforce, through case-based education, study days and webinars, and practical resources covering neurological assessment, aEEG, neuroimaging, encephalopathy and seizures, neuroprotection and developmental care.

Trisha Bellingham

Neonatal Intensive Care Sister & FINE Coordinator, University Hospitals Plymouth & FINE Neonatal UK Ltd

I am delighted to apply for the Clinical Practice Lead and Education & Training Lead positions within the BAPM Newborn Brain Care Group. With over 26 years of neonatal nursing experience, alongside extensive involvement in neurodevelopmental care, clinical leadership and multidisciplinary education, I am passionate about ensuring that evidence-based, brain-orientated care is embedded within everyday neonatal practice.

My clinical experience spans neonatal intensive care and special care settings at Derriford and Torbay, providing valuable insight into the different challenges, resources and learning needs across neonatal unit levels. I actively promote individualised, family-integrated care and the optimisation of the neonatal environment. I believe neurodevelopmental care should be recognised as a fundamental component of neonatal practice rather than an additional intervention, with brain protection incorporated into every aspect of an infant's care.

I have a strong commitment to translating evidence into practical, achievable improvements in clinical practice. Through clinical leadership, teaching and supporting colleagues, I encourage understanding of the rationale behind interventions and promote reflective, consistent care. I would welcome the opportunity to contribute to national clinical guidance, care bundles and initiatives that reduce variation in practice and promote equitable access to high-quality newborn brain care.

Education is a significant part of my professional role. For over four years, I have coordinated and delivered FINE Level 1 multidisciplinary education, including organising programmes, coordinating faculty, developing and

reviewing teaching materials, delivering lectures and workshops, and evaluating educational outcomes. I have developed educational resources for NHS organisations and international education providers, adapting content to different professional groups and learning needs.

Within my clinical roles, I deliver neurodevelopmental care teaching, facilitate simulation training and support students and colleagues undertaking specialist neonatal qualifications. I also deliver workshops for the Southwest Neonatal Network, including neonatal pain education. In 2026, I presented at the World Nursing Congress, sharing my experience of neonatal neurodevelopmental care in practice and education.

As an experienced mentor, practice supervisor and assessor, I recognise the importance of inclusive education and adapting approaches to individual learners, including neurodiverse colleagues. I particularly enjoy supporting others to develop their confidence and teaching skills.

If appointed, I would bring clinical insight, educational leadership, organisational skills and enthusiasm to the committee. I would be keen to support multidisciplinary study days, webinars, accessible educational resources and collaborative initiatives that translate emerging evidence into sustainable improvements in care. I would also welcome opportunities to work alongside medical and allied health colleagues to strengthen educational programmes and promote interest in newborn brain health across professional groups.

Above all, I share BAPM's vision of consistent, equitable and evidence-based newborn brain care, and would be committed to improving outcomes for infants and families across the United Kingdom.

Tamsyn Crane

Neonatal Practice Education Lead, Salisbury NHS Foundation Trust

I have been working as a neonatal nurse for 15 years. During this time I have had roles in a SCU, LNUs and NICUs, and have worked as Strategic education lead for the KSS ODN for 5 years. I have been working in education roles since 2015, and therefore have significant experience organising and delivering educational events and facilitating multidisciplinary training. Within my network role, I organised multiple regional conferences aimed at multidisciplinary neonatal staff, including a Neurology-focused simulation and skills day, which included sessions on HIE, cooling, CFM, seizures, and neuroprotective bundles.

I have been heavily involved in neurodevelopmentally appropriate care throughout my neonatal career. I have attended the Sensory Beginnings and Family and Infant Neurodevelopmental Education (FINE) training, worked as the Developmental Care link nurse in Portsmouth NICU and I am now the Family Integrated Care lead in Salisbury LNU. I was also the Preterm nurse lead in Darent Valley SCU, where I promoted brain protection through the use of the PREM 7 pathway. I believe brain protection is a key component in neonatal care and has a huge impact on lifelong outcomes for the whole family.

I would appreciate the opportunity to be part of the Newborn Brain Care SIG Executive Committee. As the Education and Staff wellbeing lead on the BAPM Executive Committee from 2022 until 2025, I bring valuable experience of a role within the EC of a national organisation, including communication, organisation and leadership skills and the ability to work collaboratively with a diverse team of professionals.

Dr Catherine Douch

Neonatal GRID ST7, Homerton University Hospital

I am an ST7 Neonatal Grid Trainee with 62 months of neonatal experience, including a 12-month Senior Education and Improvement Fellowship. I have developed particular interests in brain-oriented neonatal care, education, quality improvement and FICare. I was awarded a Merit in an MSc in Medical Education and have seven publications, including four as first author, alongside national and international presentations.

I have broad experience caring for extremely preterm infants with a focus on neurodevelopmental care and term infants with neonatal encephalopathy requiring therapeutic hypothermia. Alongside all neurological skills expected at my training level, I completed the Prechtl General Movements Assessment course and BPNA training, and am developing as a NeoNATE educator. I have contributed to neurology-focused publications and multiple programmes improving HIE care. Within NTS I identified barriers to cooling through staff feedback and Datix review and led development of CritiCool™ training videos for the MDT. I co-wrote RCOG neonatal e-learning on asphyxia neonatorum and delivered HIE education at a tertiary NICU during cooling implementation. During my fellowship, I led implementation of LifeStart™ to improve stabilisation and delayed cord clamping for infants <32 weeks. MDT education and simulation contributed to sustained improvement in DCC from 33% to 60%. This work was presented at BAPM.

Education, leadership and MDT working:
I am passionate about education and completed an MSc in Medical Education and GIC. As London and South East Grid Teaching Coordinator, I organise regional teaching, map sessions to the curriculum and use trainee feedback to shape the programme. I have led MDT simulation, including perinatal Ockenden, transport and the UCL Paediatric MSc simulation day. I have developed RCOG e-learning, educational videos and conference workshops for MDT audiences. My leadership experience includes securing funding for neonatal equipment, leading quality improvement projects and coordinating complex MDT projects that have lead to sustained and significant improvements in care. I currently contribute to NeoTRANSPORT-UK and the CHaL professional advisory group. I strongly believe effective neonatal care depends on collaboration across professional groups and organisations. I have worked closely with doctors, nurses, ANNPs, midwives, obstetricians, allied health professionals, engineers and procurement teams, developing practical solutions around shared clinical goals.

I believe families are partners in care and have undertaken Family and Infant Neurodevelopmental Care training. I have led parent-centred ward round initiatives, developed a parent experience video for NTS, a parent census and introduction of a fingerprint scanner funded by a bereaved family that was recognised at the 2025 Maternity and Neonatal Excellence Awards. My MSc research examined education in bereavement communication, and I have undertaken service evaluation exploring LGBTQ+ family experiences, contributing to changes in perinatal documentation.

Motivation:
Brain-oriented neonatal care brings together the aspects of neonatal practice I am most passionate about: MDT education, FICare and translating evidence into sustainable improvements. I would bring experience in organising educational programmes, developing accessible resources, simulation, curriculum-based teaching and service improvement. I am particularly attracted to the opportunity to contribute to the annual study day and then RCPCH curriculum, facilitate MDT newborn brain health education across units, promote trainee interest and share practical resources and examples of good practice. I would bring a commitment to ensuring that families are supported and meaningfully involved when their babies experience neurological injury or uncertainty.

Beverley Hicks

Neonatal Developmental Specialist, UCLH

I would like to be considered for the post of Education and Training Lead as I would bring both my clinical experience and my experience of organising and providing training on Infant and Family Centred Developmental Care (IFCDC) to healthcare professionals in the UK and in Europe to this role.

I began my career as a paediatric occupational therapist in Harare, Zimbabwe working in a neurorehabilitation setting and special school before moving to the UK where I worked with babies and children at the Royal Brompton Hospital; it was in this setting that I first saw the differences between babies born at term admitted for cardiac surgery and those who were preterm. I was extremely fortunate to start working with Dr Inga Warren at St Mary's Hospital in 2005 and started to learn about the difference individualised relationship-based developmental care made to the baby's developing brain and enabling the parent-infant relationship. Over the past 20 years I have certified in the Newborn Individualised Developmental Care and Assessment Program (NIDCAP) and the Assessment of Preterm Infant Behaviour (APIB). In 2026 I was certified as a NIDCAP Trainer and have two active trainees at present.

I am passionate about improving parental access and involvement in their child's care and spend a considerable amount of time working with the ARNIS association in Romania. I am involved in a grant working with two neonatal units to introduce a guideline for skin to skin and increase skin to skin contact between the infants and their parents. This feels like a big personal achievement as when we started FINE training in Romania in 2018 no parents were allowed to touch their baby in intensive care on any unit and now skin to skin is being promoted in most units.

I am a senior member of the Family and Infant Neurodevelopmental Education (FINE) faculty and the coordinator for the FINE 2 programme. Within my role as faculty, I provide face to face and virtual training to healthcare professionals (HCP) across the UK. I organise and run the FINE 2 groups, managing all the administration. Working with Monique Oude-Reimer, we adapted the practical day for the FINE 1 course for the European School of Neonatology Masters programme. We have run this day three times to trainee neonatologists across Europe.

I have had several leadership roles within my career, both paid and voluntary. I have managed an acute paediatric and neonatal Occupational Therapy (OT) team as well as a large community team with limited resources. I have been the Specialty Practice Lead for the Children, Young People and Families (CYPF) section of the Royal College of Occupational Therapists (RCOT) since November 2025. Within this role I am responsible for having a focused plan for all OTs working with babies, children and young people. Prior to taking over this role, I was co-chair for the Neonatal Forum, a subsection of the CYPF section and am still a member of the committee.

I was the RCOT representative on the BAPM working group for the Practice Guideline on the Management of Neonatal Pain and am the co-chair for the BAPM working party compiling the IFCDC Practice Guideline. Writing this framework gave an opportunity to engage with up to date research and with neonatal HCPs across England. It helped develop further my communication skills as well as the organisation and planning needed for such a comprehensive framework.

My roles have been varied but have one thing in common, the quest to improve neuroprotective care and facilitate close and facilitate closeness between infants and their parents. I am confident in my organisational skills as well as my ability to communication with professionals and parents. I would like to be able to bring my skills to this role and develop further the access to education and learning events around brain care.

Osheen Kuttikottayil Joy

ANNP, Nottingham University Trust

I am writing to express my interest in the Education & Training Lead and Research & Innovation Lead roles within the BAPM Newborn Brain Care Group. As an Advanced Neonatal Nurse Practitioner with a particular interest in research and neurodevelopment, I would welcome the opportunity to contribute to equitable, evidence-based newborn brain care.

I recently completed the NIHR Associate Principal Investigator Scheme through the COMET trial, investigating therapeutic hypothermia for babies with mild hypoxic-ischaemic encephalopathy (HIE), and continue to support its delivery. My involvement has included promoting trial awareness, facilitating staff training, obtaining parental consent, supporting research documentation and reviewing potentially missed eligible cases. Through regular discussions with the central trial team, I have helped explore recruitment challenges and ways to improve engagement. This experience would support contributions to multicentre research, dissemination and addressing practical barriers to research participation.

For my dissertation, I critically reviewed eight studies examining neurodevelopmental impairment in neonates with congenital gastrointestinal anomalies. I shared the findings at our Grand Round and through a poster at the BAPM Annual Conference. This strengthened my skills in evidence appraisal and communicating research, which I would bring to developing educational resources and sharing emerging evidence across the group.

My education experience includes working as a clinical educator preparing internationally educated nurses for OSCE examinations, teaching Qualified in Specialty neonatal nurses and supporting new doctors with practical skills, including central line insertion. These roles have developed my ability to adapt teaching to different learning needs and professional backgrounds. I would draw on this experience to support accessible multidisciplinary education, case-based learning and study events.

I am also contributing to a local audit of HIE management, with a view to developing a quality improvement project from its findings. During my MSc in Paediatric Nursing in India, I supported projects to increase kangaroo mother care and reduce delays in treating children with hypovolaemic shock. These experiences would help me contribute to identifying variation in practice and translating evidence into achievable improvements.

My earlier qualitative research into adolescents' psychosocial adjustment following permanent disability also shaped my appreciation of the lifelong impact of illness and the importance of family perspectives.

I would bring a nursing and advanced practice perspective, collaborative working skills and a commitment to connecting research, education and clinical improvement. I would be pleased to contribute actively to the committee's meetings and workstreams, while learning from colleagues to advance newborn brain health and long-term outcomes.

Dr Alaa Khalafalla

Paediatric Registrar, Hull Royal Infirmary

I am a paediatric registrar with two years of experience working in a tertiary neonatal unit and a strong commitment to improving outcomes for newborn infants through evidence-based clinical practice, quality improvement, education and multidisciplinary collaboration. I am keen to contribute to the work of the Newborn Brain Care Special Interest Group (SIG), supporting its aim of promoting high-quality, equitable and evidence-based brain-orientated care across neonatal services in the UK. I am particularly interested in the Clinical Practice Lead role, with a complementary interest in Education & Training.

Knowledge and experience of brain-orientated neonatal care

My experience in tertiary neonatal care has provided me with valuable exposure to the management of critically ill and extremely preterm infants, including the importance of recognising neurological risk, optimising clinical care and supporting long-term outcomes. My involvement in a study of infants born at 22 weeks' gestation has further strengthened my interest in the care of extremely preterm infants and the importance of evidence-based, developmentally appropriate care.

I have actively engaged in quality improvement at local, regional and national levels, including leading and presenting two QI projects at regional and national level. These experiences have developed my understanding of how variation in clinical practice can be identified, evaluated and addressed through structured improvement initiatives. I would welcome the opportunity to apply these skills to newborn brain care, including supporting the development and dissemination of standardised clinical protocols, promoting neuroprotective practices and identifying opportunities to improve the consistency and quality of neurological care across neonatal units.

I recognise the importance of a holistic approach to newborn brain health, incorporating neurological assessment, appropriate monitoring, developmental care, family involvement and follow-up beyond neonatal discharge. I am keen to deepen my expertise in neonatal neuroscience while contributing actively to the group's clinical practice priorities and collaborative projects.

Communication, organisation and leadership skills

I have demonstrated leadership through my involvement in quality improvement, having led and presented projects at both regional and national levels. These experiences have strengthened my ability to identify clinical problems, organise improvement activities, communicate findings and share learning with wider professional audiences. They have also reinforced the importance of translating evidence into practical changes that can improve patient care.

Alongside my clinical responsibilities, I contribute to teaching within my department and participate in medical student education. I am currently completing the requirements to become an instructor in the Newborn Life Support (NLS) course, reflecting my commitment to clinical education, professional development and the delivery of high-quality neonatal care. These activities have helped me develop my communication skills and my ability to explain clinical concepts to learners with different levels of experience.

I would bring an organised, proactive and collaborative approach to the SIG, with a commitment to attending committee meetings, contributing reliably to agreed workstreams and delivering projects within agreed timescales. I would also be keen to support the dissemination of good practice through educational activities, presentations and shared learning opportunities.

Collaborative working and multidisciplinary engagement

Working in a tertiary neonatal environment has highlighted the importance of effective collaboration between medical, nursing and allied health professionals, as well as clear communication with families. My participation in local and wider QI initiatives has provided experience of working towards shared objectives and engaging with colleagues.

Dr Jatinder Khipal

ST8 Neonatal GRID Trainee, Nottingham University Hospital, EMNODN

Knowledge and Experience of Brain-Orientated Neonatal Care:

I have developed a strong specialist interest in neonatal neurology and brain-orientated neonatal care through research, clinical practice and quality improvement. During my MD Paediatrics training in India, I completed a dissertation on acute encephalopathy in children using MRI-based characterisation of neurological injury patterns. This work was published in a peer-reviewed journal and presented at the European Society for Paediatric Neurology (ESPN) conference in Vienna. I subsequently completed a Neonatal Fellowship with the Indian Academy of Paediatrics, researching retinopathy of prematurity and associated risk factors.

Following my move to the UK, I undertook neonatal fellowship training at Princess Anne Hospital, Southampton, where I led a quality improvement project evaluating cranial ultrasound surveillance practices. I developed expertise in neonatal neuroimaging, cranial ultrasound, cFAM/aEEG interpretation and neuroprognostication, and co-designed a structured HIE documentation tool to improve documentation quality in complex neonatal encephalopathy cases.

I completed a year of advanced neonatal training in Oxford, formal cranial ultrasound training and the BAPM NEONATE course. As a current Neonatal Grid Trainee within the East Midlands Neonatal Network, I play an active role in neurodevelopmental ward rounds, follow-up clinics and prognostic counselling, integrating neurological examination findings, cFAM data and learning MRI interpretation from online course at newborn brain society. I am also a member of BAPM, BANFU and the BAPM Brain Care Special Interest Group, reflecting my commitment to advancing neonatal brain health and neurodevelopmental outcomes.

Excellent Communication, Organisation and Leadership Skills

I have demonstrated leadership through education, quality improvement and service development. I have delivered regional teaching on HIE, cFAM interpretation and cranial ultrasound across Southampton, Glasgow, Oxford, Leicester and Nottingham, improving confidence in neonatal neurological assessment.

To standardise practice, I developed teaching on serial neurological examinations and HINE assessments and created network-wide educational videos to support early identification of neurological impairment.

I have led audits, quality improvement projects and service evaluations, including evaluating neurodevelopmental outcomes of infants discharged home on oxygen versus those discharged without oxygen support. I have also led projects on neonatal encephalopathy documentation, cranial ultrasound surveillance and jaundice management, and authored local guidance on neonatal hypoglycaemia, with ongoing updates to neonatal hypotonia and encephalopathy guidelines.

As Deputy Lead for the SEQUIN programme, I coordinate multidisciplinary teams across the neonatal unit to implement BAPM standards, drive quality improvement and support sustainable service change.

Ability to Work Collaboratively with a Diverse Team of Professionals

I work effectively within multidisciplinary teams and have collaborated extensively with consultants, neonatal nurses, ANNPs, radiologists, physiotherapists, occupational therapists and speech and language therapists to optimise outcomes for infants at risk of neurological impairment.

My work in neurodevelopmental follow-up services and multidisciplinary ward rounds has strengthened my ability to coordinate holistic, family-centred care. Through regional teaching, quality improvement work and my SEQUIN

leadership role, I have successfully engaged diverse professional groups, built consensus and supported sustainable service improvements across neonatal networks.

Overall, I have intentionally developed expertise in neonatal neurology and neurodevelopment, combining clinical practice, research, education and leadership to improve brain-orientated neonatal care and long-term outcomes for infants and families.

Dr Serah Koshi

Neonatal Specialty Doctor, Grange University Hospital, Aneurin Bevan University Health Board

Over the past nine years working in a Level 3 NICU, I have developed a strong commitment to newborn brain health and improving neurodevelopmental outcomes through evidence-based, family-centred care. Caring for infants at risk of neurological injury has reinforced my belief that brain-orientated care should be embedded throughout the neonatal journey.

Education is one of the most rewarding aspects of my career. I hold a PGCert in Medical Education and regularly teach neonatal trainees, nurses, ANNPs and multidisciplinary teams through bedside teaching, simulation and regional educational programmes. As a simulation faculty lead and NLS Instructor Candidate, I am passionate about using simulation and human factors approaches to improve teamwork, communication and patient safety. I have also helped organise the Welsh Maternity and Neonatal Quality Improvement and Audit Day and chaired a conference session, supporting learning across the wider neonatal network.

My clinical and quality improvement work has focused heavily on newborn brain care, including neuroprotection, therapeutic hypothermia, developmental care and family-integrated care. I currently lead ATAIN within our unit and previously served as local lead for PeriPrem Cymru. More recently, I have become involved in Hammersmith Neonatal Neurological Examination (HNNE) training and implementation, further strengthening my interest in structured neurological assessment and early identification of infants at risk of adverse neurodevelopmental outcomes. I am also particularly interested in the potential of EiSMART to enhance developmental surveillance and improve longer-term outcomes for babies and families.

I am passionate about translating evidence into practice. I led the development of the Welsh Neonatal Network Hyperglycaemia Guideline, have contributed to several local guidelines, and have experience of national collaborative working through my involvement with the BAPM Metabolic Bone Disease Core Group. Presenting HIE and mortality reviews at Welsh Neonatal Network meetings has further strengthened my commitment to regional improvement, education and shared learning.

I believe my experience in tertiary neonatal care, educational leadership, simulation, quality improvement, guideline development and network collaboration would allow me to make a meaningful contribution as Education Lead for the BAPM Newborn Brain Care Group. I would be excited to support multidisciplinary education, foster trainee engagement, promote the sharing of best practice and help advance equitable, evidence-based newborn brain care across the UK. Above all, I am committed to ensuring every baby has the best possible opportunity for a healthy neurodevelopmental future.

Dr Eva Loucaides

Registrar (ST7) & Academic Clinical Lecturer, St George's University Hospital & City St George's University of London

I am an ST7 neonatal subspecialty trainee at St George's Hospital and Chadburn Clinical Lecturer at City St George's, University of London. I have designed and delivered education at undergraduate, regional and national level, and newborn brain health is central to my clinical and research work. I would like to bring both together to build the NBC's education programme.

DESIGNING AND RUNNING EDUCATION PROGRAMMES

- PAPERS: co-developed and taught this interactive regional course on evidence-based practice and critical appraisal; 93.5% rated it 5/5 and it is now a study-leave approved, oversubscribed full-day course.
- UCL iBSc module lead (Critical Appraisal): redesigned it as a flipped classroom, coordinated faculty and ran assessment.
- RCPCH TRN national conference (June 2026): co-led design and delivery of this full-day event for 60 resident doctors – plenaries, panels, abstract presentations and four skills workshops. I managed speakers and programme, and helped set up a live-recorded podcast series.
- RCPCH Research Essentials Day and Academic Trainees Day: planning, chairing and speaking over the last 3 years.
- RCPCH national conference 2026: co-led a workshop with Prof Nick Brown (Editor-in-Chief, ADC) on the research journey, from bedside question to publication.
- TREES: helped launch and co-run this national RCPCH TRN webinar series.
- Neonatal subspecialty application webinars: co-designed with a CSAC panel member (4.4K views).
- At a local neonatal unit I built a curriculum-aligned MDT teaching programme and ran the journal club (Certificate of Medical Excellence, 2023). I am an NLS instructor.

KNOWLEDGE AND EXPERIENCE OF BRAIN-ORIENTATED NEONATAL CARE

- All resident doctors, at every unit level, should be able to assess neurological and developmental status accurately, working with the MDT. I am leading a QI project on neurological examination and serial documentation in HIE.
- Trained in GMA (basic), Bayley-4 and Ei SMART; training in HNNE and HINE.
- Attended several CrUSS courses (including eurUS.brain, ESPR), updated local CrUSS guidelines and teach residents; led the OMWaNA IVH sub-study and a systematic review of CrUSS findings in sub-Saharan Africa.
- Contributed to London ODN developmental care guidance, joined developmental care ward rounds and led family-integrated care projects.
- My research on infection and neurodevelopment, systematic reviews on outcome after neonatal encephalopathy and after KMC, and work with the Baby Ubuntu early intervention programme give me a life-course view of brain health.

SUPPORTING FAMILIES

I have supported a NICU parent group, run multilingual parent surveys and PPI for the BiliNEST study, and worked with carers in Baby Ubuntu. As BAPM representative on the JLA UK Stillbirth Priority Setting Partnership, I worked with parents, charities and professionals.

COMMUNICATION, LEADERSHIP AND COLLABORATION

Founding REACH (300+ doctors, 28 hospitals) and co-chairing the RCPCH TRN means I regularly lead and communicate with large, diverse teams with different skills and views. I set shared goals, delegate clearly, keep volunteers motivated and plan for succession. I am committed and deliver what I take on.

WHAT I WOULD DO AS EDUCATION & TRAINING LEAD

- Design an annual MDT study day with hands-on sessions (neuro examination, CrUSS, developmental care)

and pre/post evaluation

- Develop blended and online resources for SCBU and LNU staff, not only tertiary units
- Map neurology content in the RCPCH curriculum and contribute to its review
- Build a shared library of teaching resources and case studies, and contribute to an NBC newsletter
- Co-produce family-facing resources with parents
- Work with the trainee rep to promote subspecialty interest.

Dr Fadi Maghrabia

Consultant Neonatologist, Leeds Teaching Hospitals

I am a Consultant Neonatologist with a particular interest in fetal and neonatal neurology and neurodevelopment. As Neonatal Neurology Lead, I have the privilege of working with babies and families during some of the most challenging moments they will face, while also supporting colleagues to deliver the best possible neurological care.

Two aspects of my work have become increasingly important to me over the years: education and the use of data to improve care. Although they are often considered separately, I see them as closely connected. Data help us understand where practice can be improved, while education helps us translate that learning into better outcomes for babies and their families.

Teaching has been one of the most rewarding parts of my career. I enjoy helping colleagues build confidence in areas that can often feel daunting, whether that is neurological assessment, recognising seizures, interpreting neuroimaging or communicating with families. Nationally, I am Co-Chair of the BPNA Fetal and Neonatal Neurology Special Interest Group, faculty on the BPNA NeoNATE programme and led the update of the BPNA Neonatal Neurology Distance Learning Course. I am also a Newborn Life Support Instructor and currently coordinate regional teaching for paediatric trainees. Locally, I contribute to the education of doctors, nurses and allied health professionals across our neonatal service.

I am particularly passionate about ensuring that newborn brain care is not seen as something that only happens in specialist neuroscience centres. Every neonatal clinician should feel confident recognising neurological concerns, supporting families and knowing when specialist input is needed. Good newborn brain care should be part of everyday neonatal practice, regardless of where a baby is born.

Alongside education, I have used data extensively to support quality improvement and service development. This has included leading reviews prompted by NNAP benchmarking data, including work relating to bronchopulmonary dysplasia and necrotising enterocolitis, as well as using audit and outcome data to evaluate changes in practice. Within neonatal neurology, I led a two-year review of cranial ultrasound screening in preterm infants, combining local outcome data with published evidence to refine screening criteria across two tertiary neonatal units.

What excites me most about these roles is the opportunity to bring people together around a shared goal of improving care. Whether through education, data, quality improvement or collaboration across organisations, I enjoy helping turn ideas into practical changes that make a real difference for babies and families. I would bring enthusiasm, reliability and a collaborative approach, together with a strong commitment to improving newborn brain care across all neonatal settings.

Dr Srinivas Nallagonda

Neonatal Consultant, Luton & Dunstable Hospital

I am a Consultant Neonatologist with over 15 years of experience in tertiary neonatal care. I am applying for the roles of Data Lead and/or Education & Training Lead within the BAPM Newborn Brain Care Special Interest Group (SIG).

My clinical experience covers complex neonatal neurology, including hypoxic-ischaemic encephalopathy (HIE), intraventricular haemorrhage (IVH) and neonatal seizures. I also have experience in outpatient neurodevelopmental follow-up for infants born from 22 weeks' gestation.

I offer a combination of clinical expertise, health data analytics and multidisciplinary education. I believe this combination would allow me to make a valuable contribution to the SIG and its work to improve brain care and long-term outcomes for newborn babies across the UK.

Data Leadership and Health Analytics
I hold an Executive MBA with a focus on Health Analytics. This has strengthened my ability to combine clinical knowledge with data analysis to support evidence-based practice. I have experience in BadgerNet, statistical methods and service evaluation. My data-led quality improvement (QI) projects have achieved regional recognition, including an East of England Highly Commended Award for work on thermoregulation. Other projects have delivered measurable improvements, including optimising neuroimaging pathways and reducing unnecessary HSV PCR testing during therapeutic hypothermia.

As Data Lead, I would aim to:
- Support the development and standardisation of key BAPM newborn brain care metrics within national databases.
- Improve data linkage between acute neonatal care and neurodevelopmental outcomes at two years.
- Develop regional benchmarking dashboards to identify variation, monitor performance and share best practice.
- Promote the use of data to support service evaluation and quality improvement across neonatal networks.

Education, Training and Workforce Development
I am a certified Newborn Life Support (NLS) Instructor, Educational Supervisor and Appraiser. I regularly deliver teaching and training to medical trainees, Advanced Neonatal Nurse Practitioners (ANNPs) and Allied Health Professionals. I have completed the BPNA Neonatal Neurology and Bayley Assessment courses. These have further developed my knowledge of neonatal neurology and neurodevelopmental assessment. I enjoy translating complex neuroscience into practical, accessible learning for multidisciplinary teams. I have also contributed to the development of regional clinical guidelines and pathways, including Nottingham's Neonatal Seizure Management pathway and the East of England Eat, Sleep, Console guidelines. This work has helped promote consistent, evidence-based practice across multidisciplinary teams.

As Education & Training Lead, I would aim to:
- Develop a standardised BAPM newborn brain care curriculum for healthcare professionals.
- Create accessible and interactive e-learning resources.
- Develop simulation-based training packages and practical learning toolkits.
- Support multidisciplinary education across neonatal units, taking account of different levels of experience and resources.
- Encourage collaboration and the sharing of good practice across neonatal networks.

Bringing Data and Education Together
I believe data and education are closely linked. Good data helps identify gaps and variations in clinical practice, while effective education helps address them and improve care. Whether appointed to either role, I would bring

my clinical experience, analytical skills and educational background to support the SIG's objectives. I am committed to promoting collaboration across specialties, supporting multidisciplinary teams and improving the quality of newborn brain care.

My ultimate aim is to help translate evidence into consistent clinical practice and improve neurological and developmental outcomes for newborn babies and their families across the UK.

Nazila Rahmani

Medical Student & Neonatal Nurse, NHS GGC and NHS Lothian

I am a medical student at the University of Edinburgh with 15 years of experience in neonatal nursing, and MSc of Advanced nursing science, alongside experience in clinical education, nursing leadership and MDT work. My career has been centred around caring for newborn infants and supporting their families, and I am particularly interested in neonatal brain health and the long-term impact of early-life care on neurodevelopmental outcomes. I am keen to bring my experience as an experienced neonatal nurse, alongside my developing perspective as a medical student, to contribute meaningfully to the Neonatal Brain Health Committee.

Through my neonatal nursing career, I have developed a strong understanding of brain-oriented neonatal care and the importance of recognising and minimising factors that can adversely affect the developing neonatal brain. This includes caring for critically ill and extremely premature infants, understanding the importance of physiological stability, pain and stress management, appropriate developmental care, nutrition, family involvement and early recognition of neurological concerns. Working closely with neonatologists, paediatricians, nurses, allied health professionals such as developmental care team, speech and language therapists as well as families has also given me an appreciation of the importance of a holistic approach to neurodevelopment rather than focusing solely on immediate clinical outcomes.

I have developed strong communication, organisation and leadership skills throughout my nursing and medical training. As a neonatal nurse, I have communicated with families during some of the most difficult and uncertain periods of their lives, requiring empathy, clarity and the ability to adapt communication to different levels of understanding and emotional needs. I have also undertaken clinical education and facilitation roles, including supporting and teaching student nurses and junior colleagues.

I would bring to the committee a combination of extensive frontline neonatal experience, a developing medical perspective and a genuine interest in improving outcomes for newborn infants and their families. I am particularly keen to contribute the perspective of someone who has witnessed neonatal care from the bedside, supported families through highly complex and uncertain situations, and is now developing a broader understanding of medicine and long-term patient outcomes. I would welcome the opportunity to contribute my experience, enthusiasm and commitment to the committee's work in advancing neonatal brain health.

Dr Sarah Sparrow

Consultant Neonatologist, NHS Lothian - Simpson Centre for Reproductive Health

I am a Consultant Neonatologist with 5 years of experience with a longstanding clinical, academic and educational interest in newborn brain care. I am the Neurology and Neurodevelopmental Lead within my tertiary NICU. I have been interested in joining the Newborn Brain Care SIG from its inception and am applying for the Education & Training Lead and Life Course Lead roles. My work is founded on the principle that brain-orientated care should extend across the infant’s journey, from antenatal counselling and neuroprotection through the neonatal admission to neurodevelopmental follow-up, childhood and family life.

Within my unit, I have worked to develop a Neuro-NICU approach, including an IVH prevention bundle, structured

neuroimaging pathways, enhanced neurological assessment and neuromonitoring. Along with other interested colleagues, we established a 'neonatal neurology fellowship' to promote sub-specialty interest and provide trainees with dedicated experience in newborn brain care. Through a multidisciplinary perinatal group, I work with fetal medicine, neurology and other specialists to improve management and counselling following antenatal diagnosis of neurological abnormalities.

Education is integral to my clinical role. As part of the Scottish Cooling Group, I have helped develop multidisciplinary education in structured neurological examination and management of neonatal encephalopathy. As Education & Training Lead, I would aim to develop accessible multidisciplinary education across all levels of neonatal care, alongside resources that translate evidence into everyday practice. I would welcome the opportunity to contribute to curriculum development, national study days and webinars, and to promote newborn brain care as a sub-specialty interest among trainees.

I coordinate our neurodevelopmental follow-up service, which has achieved 93% NNAP two-year follow-up compliance, with comprehensive Bayley-4 and Prechtl General Movements assessment for all infants <32 weeks or 1500g. This involves close collaboration with physiotherapy, occupational therapy, psychology and community services and supporting families through uncertainty around their child's development. As Life Course Lead, I would particularly like to strengthen continuity between neonatal services, families, community professionals and education, recognising that the consequences of newborn brain health extend far beyond neonatal discharge.

My academic work includes an MD investigating the neuro-epigenetics of preterm white matter injury. I recruited the original cohort of 70 preterm infants and 30 term controls that contributed to the 'Their world Edinburgh Birth Cohort', working with Professor James Boardman as my research supervisor and mentor. I have subsequently remained closely involved with this expanding longitudinal research programme and PRENCOG. This experience has shaped my understanding of newborn brain health as a life-course issue, encompassing not only neonatal outcomes but later cognition, development and education. I have 13 publications and am also involved in recruitment for ACUMEN and COMET.

I have national collaborative leadership experience through the Scottish Perinatal Network, leading development of four national guidelines, including Management of Post-Haemorrhagic Ventricular Dilatation. This has required organisation, consensus-building and collaboration across professional and geographical boundaries. I would bring this combination of clinical expertise, education, research and life-course neurodevelopment to the NBC, alongside experience of neonatal services and networks in Scotland. Broad representation across the UK will be important in ensuring the NBC develops resources and approaches that are relevant, equitable and implementable across differing healthcare systems and neonatal settings.

Dr Swapnil Thakkar

Specialty Doctor in Neonatal Medicine, NHS Grampian

I have nearly 10 years of experience in paediatrics and neonatology across international and UK settings, with a strong interest in education, simulation-based learning, and leadership. In my current role, I contribute as an education and simulation facilitator and have completed leadership training, simulation facilitation, neoNATE by BPNA. I have booked for the Generic Instructor Course (GIC), and the Newborn Life Support (NLS) instructor course.

I have experience collaborating with multidisciplinary teams across specialities, including obstetrics, infant feeding, infection prevention and control, medico-legal services, and charitable organisations, to deliver educational activities and quality improvement projects. I am keen to develop and promote brain-oriented neonatal education, particularly in hypoxic-ischaemic encephalopathy (HIE), preterm brain care, perinatal optimisation, neuroprotection, and the long-term neurodevelopmental outcomes of neonatal brain injury. I hope to bring my educational experience, collaborative approach, and enthusiasm for teaching to support the BAPM Brain SIG's educational initiatives and course development.

END OF STATEMENTS