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British Association for Parenteral and Enteral Nutrition

A multi-professional association and registered charity established in 1992. Its membership is drawn from doctors, dietitians, nutritionists, nurses, patients, pharmacists, and from the health policy, industry, public health and research sectors.

Principal Functions

- Enhance understanding and management of malnutrition.
- Establish a clinical governance framework to underpin the nutrition management of all patients.
- Enhance knowledge and skills in clinical nutrition through education and training.
- Communicate the benefits of clinical and cost-effective optimal nutritional care to all healthcare professionals, policy makers and the public.
- Fund a multi-professional research programme to enhance understanding of malnutrition and its treatment.

BAPEN is a Registered Charity No: 1023927.

Chairman's Report

DR MIKE STROUD,
CHAIR OF BAPEN AND TRUSTEES 2009



Although I officially became BAPEN chairman at our conference in autumn 2008, in reality it was a few months later, at the beginning of 2009, that I took over from Marinos Elia. My aim of course was to continue his work, but what shoes to try and fill! Over the previous few years Marinos, with particular help from Christine Russell, had truly galvanised BAPEN, embarking on a whole series of initiatives. Fortunately for me, much of this work was just coming to fruition as I took over the job and so during the first half of 2009 the following important reports were published for which I can claim no credit:

- *Combating Malnutrition: Recommendations for Action. M Elia and CA Russell on behalf of the Advisory Group on Malnutrition* – This summarised key nutritional issues and provided recommendations from the Advisory Group on Malnutrition, led by BAPEN, which could be utilised during re-organisation of the NHS.
- *Improving Nutritional Care and Treatment: Perspectives and Recommendations from Population Groups, Patients and Carers. M Elia and RM Smith on behalf of BAPEN and its collaborators* – This work involved 18 collaborating partners from the voluntary sector, identified problems related to nutritional care from the viewpoint of patients and carers and went on to make a series of recommendations for government, policy-makers, healthcare professionals and other stakeholders.
- *Screening for Malnutrition in Sheltered Housing. M Elia and CA Russell on behalf of the Group on Nutrition and Sheltered Housing* – This identified the enormous burden of malnutrition within the context of sheltered housing projects in the north and south of England and the report was coupled with a separate Good Practice Guide: addressing malnutrition in Sheltered Housing
- *The Nutrition Screening Week report for 2008. C Russell and M Elia on behalf of BAPEN with support from the BDA, RCN, NPSA, the Scottish and Welsh Governments, the Chief Nursing Officer of Northern Ireland and the Department of Health* – This was the second BAPEN Nutrition Screening Week report establishing the prevalence of malnutrition on admission to hospitals and mental health units, as well as the prevalence of nutritional risk amongst individuals admitted to care homes. Recommendations on how to improve nutritional care were also provided.

To make matters even easier for me, two of these influential publications were launched at formal events in the House of Commons and BAPEN, therefore, stayed firmly in the limelight with the Department of Health (DH) and the then Labour Government. An important element of my task as new chairman was to therefore ensure that we continued to be seen as the leading organisation dealing with issues of nutritional care for patients. Have we been able to do so? Well it may sound self-satisfied but I am pleased to report 'so far so good'.

BAPEN and the Quality Agenda

The main new BAPEN initiative for 2009, which now continues in 2010, was to ensure that nutritional care is incorporated into the heart of the 'quality agenda' for healthcare. The need for us to engage more closely with the raft of DH and Government quality-related initiatives that had appeared over the previous few years, was one we formally identified at our June 2009 Think Tank strategy meeting. Prior to that, I had been concerned that poor standards of nutritional care were often seen primarily as a dignity issue rather than one of real risk, and I wanted the 'Malnutrition Matters' message to sit right up beside super-bugs in public consciousness. Personally, I have no doubt that more patients are at risk of poor outcomes or even death from nutritional problems, than they ever are from MRSA and C.Difficile infections combined. Fortunately, the NHS view of quality puts safety at its midst, linked closely to clinical effectiveness, equal standards of healthcare and the patient experience. It was therefore obvious to me that when it came to quality, good nutritional care ticked all the boxes. Council, therefore, needed only to decide how we might best engage with all those NHS quality initiatives.

Suggestions from the Think Tank led to the formation of a small working group to explore all options at local, regional and national levels and, subsequently, we wrote directly to the Chief Medical Officer and every member of the National Quality Board, Care Quality Commission and Parliamentary Health Standards Committee. I like to think that those letters helped to highlight nutritional care and so played a significant role in ensuring that nutritional care received proper attention in the many Government and Department of Health initiatives that have appeared since.

Following on from these letters, we decided to develop 'toolkit' guidance to promote the incorporation of best nutritional care into all NHS and Social Care settings, and after a great deal of hard work by members of the quality group, particularly Ailsa Brotherton and Nicola Simmonds, the end of 2009 saw the first draft of the BAPEN Toolkit for Commissioners and Providers: 'Malnutrition Matters: Meeting Quality Standards in Nutritional Care. Since then, after discussion and revision following input from Council, members of BAPEN's Founder Groups and other partner organisations, the

final Toolkit was launched in May 2010, not only containing background information on malnutrition and its importance for UK health settings, but a summary of all national standards and detailed guidance on how organisations can implement the four key steps that ensure best nutritional care in all health and social settings:

1. Identify malnutrition through screening and assessment
2. Implement appropriate care pathways for all those identified as malnourished or at risk of malnourishment
3. Train all frontline staff in the importance of nutritional care
4. Ensure that management structures are in place to support best nutritional practice.

Now, as I write this 2009 report, the whole Toolkit is freely available to download from the BAPEN website and I hope that BAPEN members and others will find it useful in promoting better nutritional care in their own organisations.

BAPEN Annual Conference

As always, BAPEN held an annual meeting during 2009, using the Cardiff conference centre for the first time. Attendance levels were excellent thanks to a varied programme that catered for dietitians, nurses, doctors, pharmacists and others involved with nutritional care. BAPEN stands promoted our work to attract further membership and encourage participation in ongoing activities and from the outset, the meeting had a real buzz. Indeed, even before the main conference started, both BAPEN Medical and the paediatric gastroenterologists held their own, highly successful, single-day meetings. Nevertheless, until I saw people pouring into the opening plenary session of the main conference, I had been concerned. For some years, I had been hearing that some hospitals had restricted or stopped all study leave, and I was therefore afraid of a collapse in conference attendance. When it came to it, however, this did not happen and so I am clearly not alone in thinking that the annual BAPEN conference is worth coming to. I, therefore, want to take the opportunity to thank Pete Turner and all his Programme's Committee colleagues for the enormous amount of work that went in to making the 2009 meeting so successful.

Other BAPEN work

Details of the huge amount of work undertaken during 2009 by BAPEN founder groups, committees and special interest groups are given elsewhere in this document but I do want to highlight a few areas myself.

As always the Founder Groups were very active, often driven by the enthusiasm and commitment of their chairs. Every group held its own annual meeting during 2009 and in many cases, several other education and training days. The groups also provided representation on all BAPEN committees and in many cases representation on numerous other national committees important to the safe development of nutritional care.

Far from bowing out of driving BAPEN activities, both Marinos Elia and Christine Russell continued with the essential work of the Malnutrition Advisory Group, helped during the later part of 2009 by the appointment of Kirstine Farrer as the new BAPEN 'MUST' champion. There is no doubt that 'MUST' has continued to be one of BAPEN's greatest areas of success with worldwide sales and of enormous importance. 2009 also saw the development of an e-learning training module for using 'MUST' in hospitals, and there are plans to complete and launch a training module for community use in 2010. MAG members also continued to organise, run and report on the BAPEN Nutrition Screening Weeks and several participated in vital work related to the National Nutrition Action Plan.

BAPEN has always had the ambition to promote research into nutritional care and 2009 saw us take steps to revitalise our Research and Science Committee by appointing a new chairman, Dr John Maclaughlin. During 2009 he put together a completely new committee who re-examined their Terms of Reference, identifying the best ways to move forward within the resources available. I wish him and his new committee the very best in that endeavour.

2009 also saw a change in chairmanship for the BANS committee with Trevor Smith taking over from Barry Jones. The handover came at a difficult time for the future of BANS with threats related to the collection and storage of confidential patient data. I am, however, delighted that the hard work of all the

Committee members during the year, coupled with continued support from Barry, led to a very successful outcome. Barry of course deserves recognition for this and all of the tremendous amount of other work he put into BANS and BAPEN over many years and we all wish him well in his retirement.

And my personal thanks

I mention above only a few of the numerous individuals who through 2009, gave so much to BAPEN. All of our committee chairs and members inevitably had to work hard and so I want to extend my personal thanks to all of them for giving up so much time to help with activities and initiatives. I also want to thank Sovereign for their work running the office and their great job on conference logistics; Rhonda Smith for her work promoting and supporting BAPEN in many different way; and our Industry members without whose financial support (and not infrequent professional advice) we would struggle to survive.

I also want to express my gratitude to all members of BAPEN Council and Faculty. Prior to becoming Chair of BAPEN, I had sat for many years on Council and so had long understood the considerable work entailed in Council Membership. Furthermore, for many, much of this also comes on top of

their other commitments to the BAPEN Founder Groups, Committees, etc. whom they represent on Council. Similarly, all the Faculty members are busy people and yet they are prepared to give their time to provide experienced oversight of our activities, ensuring that BAPEN does not forget past lessons and benefits from their accumulated experience.

Finally, however, I must highlight the work of my fellow members on the BAPEN Executive. Until I became Chair, I really had little notion of the simply vast amount of extra work these individuals undertake. Andrea Cartwright and Rebecca White are both excellent Executive Officers, participating in almost all areas of BAPEN activities, whilst Simon Gabe as Treasurer has not only taken on the difficult job of supervising BAPEN accounts but has also restructured our support arrangements with Industry. Meanwhile, Tim Bowling works incredibly hard as BAPEN Secretary which I now realise is an exceedingly demanding and difficult role. Without his incredibly effective approach, our whole organisation would be much less effective. Many thanks to all four of them.

In conclusion

So, what should we do now? Well, 2010 has of course bought a change in Government but this does not alter the

issues surrounding malnutrition in healthcare. Malnourishment continues to be both a cause and consequence of illness and injury and we will, therefore, continue to engage with those who now hold the health portfolio, as well as all health and social care organisations, to convey the simple message that malnutrition matters.

I stated above, that I thought BAPEN was successful through 2009 and indeed I believe that we have actually continued to get stronger. For the best part of two decades, we banged the drum, trying to promote the message that good nutritional care is a cost-effective means of improving outcomes. Nevertheless, for much of that time it felt as if the message was lost in the complex jungle of the NHS. Recently, however, there have been real rumblings of change and as I write this in mid 2010, we have already seen the Chief Nurses making nutritional care one of their eight 'High Impact Actions', NICE identifying it as one of the most cost effective investments, and the Care Quality Commission insisting all organisations meet much higher standards of nutritional care than previously. I think it is, therefore, true to say that nutritional issues are nearer the top of the NHS, political and public agendas than ever before and BAPEN can be proud of its achievements.



Treasurer's Report

SIMON GABE, HON TREASURER 2009

I have been Treasurer for 1 year now, so how is it going? Well, we are still here while some banks and organisations are not. That is good. However, there has been a hit on the organisation... nothing too bad. This is all explained below.

The bottom line...

In 2009 we have had a small net loss of £20K. In 2008 we had a net profit of £72K. Compared to 2008 income has decreased by £80K, expenditure has increased by £12K. 2008 was a good year as we had the ESPEN award, income from 'MUST' as well as a higher individual membership income.

Here is the real bottom line. Our individual membership income has halved. This is the key threat to the organisation. We cannot depend on industry support in the way that we have been and still we are

immensely dependent upon them. Something has to be done about this as we have no membership income from people who join BAPEN from founder organisations other than BAPEN Medical. However, it is not just about individual membership, but also BAPEN needs to maximise its income from its products. This includes 'MUST' and other BAPEN publications.

Income

Total income for 2009 was £355K (172K excluding income from the annual

conference), which is £80K lower than the total income in 2009. The decrease was not from corporate support, which was maintained at £114K (£119 in 2008). It was as a result of a decrease in individual affiliate membership (£8K in 2009, £17K in 2008), courses & study day income (£9K in 2009, £13K in 2008), working party reports (£23K in 2009, £33K in 2008), awards (£0 in 2009, £23K in 2008), copyright (£3K in 2009, £17K in 2008) and other miscellaneous income.

	2009	2008	2007	2006
Total income	£355K	£435K	£371K	£332K
- Corporate support	£114K	£119K	£119K	£120K
- Individual membership	£8K	£17K	£5K	£10K
Total expenditure	£375K	£363K	£335K	£305K
- Annual conference	£173K	£185K	£145K	£145K
Net profit/deficit	-£20K	£72K	£36K	£28K

Annual Conference

The 2009 Annual Conference was held in Cardiff and attracted approximately 570 attendees. The net income was £183K, the net expenses were £173K, resulting in a net profit of £9K. This is a similar profit margin compared to 2008 (£6K net profit), despite lower delegate numbers (an issue for all conferences at the moment). However, as mentioned last year, this is the way the accounts have always been presented. If the industry funding for BAPEN is factored into the conference account (as most is for the conference) then the conference makes a considerable profit, which in turn fuels the charitable activities of BAPEN.

Other income

'MUST' has been providing an income stream over the past few years, especially last year. This has been decreasing considerably in 2009. There are possibilities of further income related to 'MUST', from educational material and copyright. This will need to be developed if we are to maintain an income from this and there is clearly a balance between getting 'MUST' widely used at minimal charge (or free) and gaining a profit from the development of this invaluable tool.

Expenditure

Total expenditure amounted to £375K, an increase of just 3% compared with 2008. The main cost was the BAPEN conference (£173K) representing 46% of the associations expenditure. The other cost drivers were the costs for a media coordinator (13%), promotion (10%), database management (6%), travel expenses (6%) and BAPEN office (5%).

In 2009 we went out to tender for the Conference and office contract. This was awarded to Sovereign, who made a very competitive offer. We plan to tender the In

Touch publication in 2010 in order to ensure that we are getting value for money.

Reserves

BAPEN has a reserve of £210k which is placed in a high interest deposit account. The annual turnover of the Charity is around £350k pa and this is managed through a current account. The reserves policy is primarily to provide security to the Charity in the event that expenditure significantly outstrips income. This would be most likely to relate to conference expenditure. For example, in 2012 we are planning to be part of the UK Digestive Disease Week (see below) and move our conference from November to June that year. While we expect to make a profit from that conference, this cannot be guaranteed and the reserves are designed to cover this type of eventuality. Furthermore, the reserves can be utilised at the discretion of BAPEN Council for projects that are deemed to be in the Charity's best interest.

Looking forward to 2010

BAPEN has a promising future ahead. However, these are challenging times financially and all charities are going to feel the pinch. We have to control our expenses and secure our income each year.

- We will continue to develop ways of increasing our revenue from the 'MUST' tool, not for the sake of profit, but to be able to reinvest in activities around nutritional screening and 'MUST' thereby maintaining BAPEN's position at the forefront of nutrition screening.
- BAPEN is taking a lead in developing an All Party Parliamentary Group (APPG) on Nutritional Care, which has to potential to put nutrition much more on the political agenda. There

has been considerable interest from other organisations and industry and as a result we will co-partner this group. This decreases the cost significantly to BAPEN, which will now be minimal.

- The cost of developing BAPEN's media profile has increased every year. We need to reassess the value of this and ensure it is keeping in line with the objectives of the charity.
 - In June 2012 there will be the first UK Digestive Disease Week (UK DDF). This will be held at the conference centre in Liverpool and BAPEN will be a partner organisation at this meeting. There will be representation from the gastroenterology and hepatology societies, paediatric gastroenterology, surgical societies and radiology society, amongst others. BAPEN will have to move its annual conference to be held at this meeting. This poses a risk to the organisation, but for BAPEN members the conference will be considerably cheaper. The conference is likely to make a considerable profit and consequently we feel that the risk is worth taking for the Association. In addition, our industry partners are interested in the UK DDF meeting due to the very large delegate numbers expected. However, for 2012 our income will not be from industry, but from the profit of the meeting. This will be similar to 2003, when BAPEN was held at the ESPEN meeting in Glasgow.
 - The costs for BANS should decrease significantly over the next 1-2 years. e-BANS has been fully implemented at the start of 2010 and, in addition, it looks promising that the HPN information for BANS will be funded via HIFNET (Home Parenteral Nutrition and Intestinal Failure Network).
- The information given in this report is consistent with the financial statements from the accounts prior to inspection. The 2009 accounts will be inspected by Hale & Company, 14 Crauford Rise, Maidenhead, Berkshire, SL6 7LX. Full copies of the accounts will be available on request from the BAPEN Office or directly on the Charity Commission website.



PROFESSOR DAVID SILK, CHAIR FACULTY

The Faculty would like to compliment BAPEN for another active and productive year. There was a launch of an impressive series of reports, which together outnumbered any in any other single year during BAPEN's history. These include reports on sheltered housing, the cost of disease-related malnutrition in the UK, as well as clinical and political initiatives in combating malnutrition report and patient/carer's perspectives on detection and management of malnutrition, which formed a separate report.

There was also the publication and launch of the second of four Nutrition Screening Week audits, which has been influential, having been used by the Department of Health and a number of organisations. These publications, their launch (two or three of which occurred in the House of Commons), and the associated media campaigns helped maintain interest in the profile of malnutrition amongst the professions, the Department of Health, and politicians during the period leading to the election.

As an advisory body, the Faculty had a

few suggestions to make to the BAPEN Executive Committee:

First, the Faculty had serious concerns regarding the proposals for BAPEN'S involvement in the 2012 Digestive Diseases Week meeting, with cost issues and loss of identity being the main issues. It was suggested that this important matter should be reviewed in 2010.

Second, Faculty noted the declining financial status during 2009 and suggested a close observation of the finances in 2010.

Third, Faculty has questioned whether there is truly a BAPEN representative in the Nutrition Society, and encouraged Council to have further discussions about this topic. It also encouraged re-establishing a BAPEN symposium during the annual meeting of the Nutrition Society.

The BAPEN Faculty were pleased to welcome at the end of the year the return of Professor Marinos Elia and the appointments of Mrs Christine Russell and Dr Barry Jones to be members of the Faculty.

Committee Group Reports

Education and Training Committee

RUTH NEWTON, CHAIR BAPEN EDUCATION AND TRAINING COMMITTEE



Chair and committee members:

Ruth Newton (Chair) • Ruth McKee • Rachel Broughton • Neil Wilson/Ann-Marie Numwa • Kirstine Farrer • Tim Sizer • Nicola Simmonds

We were involved in the following:

- Reviewing the 'MUST' training tools; in particular the Glasgow and Clyde and Norfolk and Norwich tools. These are both reaching the completion of the second phase of their interactive tools.
- Plan for regional study days for NST which are to be run in Cardiff, London and Manchester. These are to be co-ordinated by Winnie Magambo, Kirstine Farrer and Ruth Newton. These are planned to run in parallel with the regional reps programme. Speakers for Manchester and Wales have been identified.
- Review the list of best practice guidelines to be produced by BAPEN in conjunction with Rebecca White (Lead)
- Edit the modules written for Doctors.net by Nicola Turing
- Review documents proposed by Council.
- Contribute towards the commissioning documents which have been written by Ailsa and Nicola.
- Review the endorsement material with Rebecca White which will combine both educational and non-educational tools.
- Provide a symposium for the annual conference. This year it was 'Whose Fault is it Anyway' which was in the format of a coroner's court. It was well-received with three key speakers. The plan is to continue the rolling case format for next year's conference in Harrogate.
- To set up a BAPEN basics course to be run at the annual symposium to provide the basics of nutritional support for more junior members of staff to nurture future specialists in the clinical field.
- Conclude the format for future training events which may arise from the fall out of the NCEPOD report due mid 2010.
- Endorse educational study days are requested. This was granted for 4 study days last year across the UK and Ireland.
- Review competencies for professional groups and work towards producing BAPEN multi-professional standards

Communications and Liaison Committee

VERA TODOROVIC, CHAIR COMMUNICATIONS AND LIAISON COMMITTEE



Members of the Committee at end of 2009:

- Vera Todorovic (Chair) • Carole Glencorse • Lucy Thompson • Tracy Earley/Liz Evans
- Rick Wilson • Rhonda Smith

Key objectives for the year

- To focus on delivering internal and external communications together with the media/PR Officer of BAPEN
- To continue to promote the BAPEN Newsletter, electronic newsletter and Website as principal sources of communication

Key outputs for the year

- There have been regular Committee meetings during the year and a variety of activities have been undertaken.
- The newsletter In Touch has continued to develop over the year and Complete Media & Marketing has continued to develop and publish the Newsletters – In Touch. Access to the newsletter is a benefit of BAPEN membership and is now only accessible via the members section. The electronic version e-Touch continues to flourish and provides up to date news relating to BAPEN activities and is freely available to all via the website.
- Complete Media & Marketing have been successful in securing the contract for the newsletter

communications for a further 3 years (from May 2010–2013)

- Developing dedicated sections on the website for the Nutrition Screening Weeks and Annual Conferences.
- Developing the platform to access the BAPEN e-learning modules for doctors developed by Dr Nicola Simmonds. This is accessible from the home page of the BAPEN website.
- Continuing to develop the members section of the website and adding to the clinical resources in this section.
- Developing the BAPEN poster boards for the annual conference. The focus for 2009 was on e-learning and participants to the conference were invited to try the e-learning hospital 'MUST' module available on laptops on the BAPEN stand.

Objectives for 2010

- To continue to develop the members section of the website to make a substantial number of resources including clinical resources available solely for the use of members.

- To continue to develop the education and training section of the website as a gateway to resources available for the training of health and social care staff
- To continue to develop the newsletter including having available a digital electronic version of In Touch both for members and as a 'taster' for potential new BAPEN members.
- To continue to update the website and develop a system for electronic payments for publications and the annual conference.
- To address the use of video, web and pod casting technology for capturing and developing clinical topics of interest for inclusion on the website.
- To engage with Complete Media & Marketing on a membership campaign and drive to increase membership of BAPEN.

I would like to extend a personal thank you to all the members of the Committee, past and present who have worked so hard to make sure that our communication channels remain effective.

BAPEN Programmes Committee

PETE TURNER, CHAIR PROGRAMMES COMMITTEE



Chair and committee members: Pete Turner (Chair) • Gary Frost (Nutrition Society) • Jane Fletcher (NNNG) • Mike Stroud (BAPEN) • Nicola Simmonds (BAPEN Medical) • Tony Murphy (BPNG) • Jennie Mort (Sovereign) • Ruth Newton (Ed & Training) • Carolyn Wheatley (PINNT) • Rhonda Smith (BAPEN Marketing)

Key objectives for the year

1. Organise the BAPEN Annual Conference in at Cardiff International Centre October 2009
2. Ensure the conference is cost effective

3. Arrange post conference review in Complete Nutrition
4. Planning BAPEN 2010 conference

Key outputs for the year

A successful annual conference was held at

Cardiff International Centre in October 2009. There were 462 delegates plus 10 Exec and PINNT representatives. We had 70 exhibitors from 22 exhibiting companies and an additional 6 participants in the info zone.

The conference was evaluated well by both delegates and exhibitors. 90% of exhibitors said they met their objective by attending, 63% felt the conference sponsorship opportunities represented good value for money and 90% were happy with the quality of the delegates. 96% of delegates visited the exhibition, and 100% the posters. Overall the comments were very favourable. The Pennington Lecture, Symposium 7 'Downsize Me' and Symposium 9 'BAPEN's Got Talent – The Nutritional X Factor' were

rated as excellent by 64%, 67% and 69% of delegates respectively.

A 2000 word write up of the conference by the programmes committee was published in Complete Nutrition.

An outline of the 2010 conference was completed by the end of the year with the following topics:

- 'Options in Enteral Feeding: to PEG or not to PEG, is that the only question?'
- 'Micronutrients under the Microscope'
- 'Best practice in the preparation of

patients for bariatric surgery'

- 'Nutrition is the Cutting Edge in Surgery – Peri-operative Feeding'
- 'HIFNET and PN'
- 'From cutting edge research to clinical practice'
- 'Test your IQ: Improvement in Quality'
- 'HIFNET: Building a Seamless Parenteral Nutrition Service for Patients'
- 'Nutrition in IBD'
- 'How to Succeed in Research'
- 'Dragons' Den'



BANS

DR TREVOR SMITH, CHAIR BANS

Chair and members:

• Dr Trevor Smith (BANS Chair), Consultant Gastroenterologist, BAPEN Medical • Ann Micklewright, Dietitian (Hon Sec), Parenteral and Enteral Nutrition Group (PENG) of the British Dietetic Association • Dr Barry JM Jones, Consultant Gastroenterologist, BAPEN Medical • Dr Rebecca Stratton, Nutrition Society and also of Nutricia • Dr Mark Dalzell, Consultant Paediatric Gastroenterologist, BSPGHAN • Janet Baxter, Dietitian and Manager, Scottish Managed Clinical HPN Network, Scottish Representative BAPEN and ESPEN – HANS group • John Kennedy, Nutrition Nurse Specialist (Adult), National Nutrition Nurse Group (NNNG) • Carolyn Wheatley, HPN Patient, Chair of Patients on Intravenous and Nasogastric Nutrition Treatment (PINNT) • Carole Glencorse, Dietitian, Main Industry Group representative (Abbott) • Jamil Khair, NNNG (Paediatric), National Nutrition Nurse Group (NNNG) • Amanda Hirst, Paediatric dietitian, Paediatric Group, BDA • Sarah Zeraschi, Pharmacist, British Pharmacists Nutrition Group (BPNG) • Geoff Cooke, BANS Data analyst, Streets – Heaver Ltd • Prof. Marinos Elia, Consultant Physician & Professor of Clinical Nutrition and Metabolism, Nutrition Society. Founder of BANS, ex officio

Key objectives for the year

- To obtain Section 251 support from the National Information Governance Board for health and social care (NIGB), who have replaced the Patient Information Advisory Group (PIAG).
- To meet with NIGB and communicate the serious impact of the requirement for reporters to obtain consent on reporting rates to BANS. Also to negotiate an exit strategy from section 251 support and therefore secure the future of BANS.
- To process 2008 data and produce an annual report to be published on the BAPEN website.
- To obtain independent data from commercial companies without compromising patient confidentiality (Janet Baxter leading)
- To continue promoting and developing e-BANS.

- Promote reporter engagement at regional and national meetings, including BAPEN and PENG.
- Meet with Streets-Heaver to discuss the future development of BANS.

Key outputs for the year

- Provisional approval was given by NIGB for BANS' exit strategy from section 251 support – patient consent was no longer required providing some changes were made to the types of data collected (final approval was given in February 2010). BANS will no longer have to submit an annual application to NIGB for approval.
- BANS Annual Report was published on the BAPEN website. There was a significant reduction in reporting rates compared to previous years due to the difficulties encountered by reporters attempting to consent patients. This is likely to have an impact for several years to come as many patients receiving long

term home enteral tube feeding were not updated by reporters and have been removed from the database.

- BANS data (current and historic) were presented at a symposium on commissioning at BAPEN conference. A separate meeting for reporters was also well received and facilitated a very useful discussion on the future development of BANS.
- Members of the BANS Committee were invited speakers at the annual PENG conference – this provided another useful opportunity to meet and listen to comments from reporters as well as promoting BANS future strategy.
- A productive meeting was held with Streets-Heaver, who will provide senior technical and managerial support to BANS committee meetings. Agreement was also reached to review contractual arrangements on an annual basis.

ESPEN

DR JON SHAFFER, ESPEN REPRESENTATIVE



The main ESPEN activity this year has been the development of 'The Fight Against Malnutrition'. ESPEN and its partner the European Nutrition Health alliance (ENHA) have been very successful in the wider political arena of the European Union (EU).

A meeting in Prague, in June, was organised by the Czech EU presidency in order to develop new plans to fight malnutrition across Europe. This included health ministries from EU member states, medical experts, ESPEN and ENHA. They all agreed to sign a declaration which summarises the problems that we are facing in our daily practice and to propose a series of action points, which are being sent to the incoming Swedish EU presidency, to be implemented.

ESPEN was invited to participate in the European Parliament conference in the European Life Science Circle, held on 4th March. The title of the conference was 'Turning Europe into the Healthiest Society', and was hosted by Dr Chatzimarkakis, member of the European Parliament. Invited members of the European Parliament, representatives of the European Commission

and the EU member states, stakeholder organisations, including patients and health professional associations, and healthcare and life science industries attended the conference. ESPEN Chairman, Olle Ljungqvist, also representing the European Nutrition for Health Alliance, presented the topic 'Malnutrition in Europe; The forgotten health agenda'. The conference included sessions on health and diets, obesity and diabetes, the role of food industry to improve life styles. Other topics involved empowerment of the patient, the parliament's view on patients information, how the press can improve health information and to best use health resources.

ESPEN was nominated as one of the four finalists in the Best European Public Campaign alongside Greenpeace and other very strong organisations.

For those who couldn't attend the ESPEN Congress in Vienna, as a new initiative, the educational lectures given during conference could be accessed via the ESPEN website. This facility could only be freely available until the end of 2010, after which presentations will be accessible by members only. One more reason to become an ESPEN member

The ESPEN guidelines for the use of Parenteral Nutrition in Adult Patients were published in 2009. They have been presented during the ESPEN congress in Vienna and they have been published in Clinical Nutrition. For those who are not ESPEN members and cannot access Clinical Nutrition, the ESPEN guidelines can be viewed and downloaded for free from the ESPEN website, by clicking on the quick link 'Guidelines' on the left side of this webpage.

Malnutrition Action Group (MAG)

PROFESSOR MARINOS ELIA, CHAIR MALNUTRITION ACTION GROUP



Membership:

Marinos Elia (Chair) • Christine Russell • Rebecca Stratton • Kirstine Farrer • Vera Todorovic

Key activities during 2009

Publication of reports¹⁻⁵

- Combating Malnutrition: Recommendations for action¹ (led by MAG)
- Screening for Malnutrition in Sheltered Housing² (led by MAG)
- Calculating the Cost of Disease-related Malnutrition in the UK in 2007³
- Improving Nutritional Care and Treatment: Perspectives and recommendations from population groups, patients and carers⁴ (led by MAG)
- Good Practice Guide, Addressing Malnutrition⁵ (work leading to report

was undertaken by GNASH (Group on Nutrition and Sheltered Housing), which was led by MAG).

Media campaigns

These were linked to publication and launch of above reports. Some of these (e.g. the Combating Malnutrition report and Good Practice Guide (sheltered Housing) were launched in the House of Commons (and other reports made available there).

Launch of 'MUST' e-learning package

In collaboration with Glasgow and Clyde NHS Trust, arrangements were made to develop, promote and implement e-learning packages on nutritional screening

in hospital and community settings. The e-learning package for hospitals was launched at the BAPEN annual conference. Work on the community module was in progress in 2009, and it was aimed to finalise it, field test it and launch it in 2010.

Nutrition Action Plan Delivery Board

During 2009 the Nutrition Action Plan Implementation Board was actively concerned with implementing the five areas of the plan, one of which was nutritional screening. The sub-committee, chaired by Marinos Elia, involved work undertaken by MAG and NSW. The Delivery Board was particularly interested in

nutritional screening in sheltered housing, the strategic work outlined in the Combating malnutrition report, the Patient/Carer Perspective Report and the results of NSW. Most of the references in the Nutrition Action Plan Delivery Board End of Year Report, which was sent to ministers, were linked to MAG. The official government response included the following statement: "We also welcome the valuable work by BAPEN to develop a Malnutrition Universal Screening Tool ('MUST') for use in hospital and community settings".

Reviewing and approving 'MUST' frameworks and granting licences

- Review and approval of the 'MUST' framework for trusts
- Review and approval of the 'MUST' for guideline documents (e.g. Guidelines – Summarising clinical guidelines from primary care)
- Approval and granting of licence for the use of 'MUST' in materials designed for commercial purposes.

Work with DH (National Programme for IT)

Through a series of consultations, Christine Russell, Vera Todorovic and Marinos Elia advised the DH (Connecting for Health) on incorporation of 'MUST' in the National Programme for IT. A final version of the

template was established by the end of 2009. It was planned to launch the electronic 'MUST' system early in 2010 so that it could be accessed electronically by NHS workers throughout the country.

Addressing queries about malnutrition

Members of MAG have responded to a constant stream to queries, from the UK and abroad, about various aspects of malnutrition, especially nutritional screening using 'MUST'. Kirstine Farrer was welcomed into MAG to help with this aspect of its work.

National Patient Safety Agency: factsheet on nutritional screening

A series of fact sheets on malnutrition were produced by the National Patient Safety Agency (NPSA). The one on Nutritional Screening, involving use of the 'MUST' framework was drafted by Christine Russell and its availability for viewing on the NPSA website was promoted by MAG in 2009.

Presentation of results associated with MAG activities at meetings

Results of MAG initiatives were presented at national meetings (including at the BAPEN annual conference). The presentation at the BAPEN annual conference was expected to be written up for publication in the Proceeding of the Nutrition Society in 2010.

Research

Research on malnutrition, particularly on the 'MUST' framework was undertaken by groups (especially at Southampton) linked to MAG. An electronic 'MUST' had already been developed and used in hospital outpatient studies.

Income for BAPEN

An income stream for BAPEN has been established through development, promotion and selling of 'MUST' materials, and granting licences for commercial use of 'MUST'.

Liaison with Nutrition Screening Week Group

Very close liaison existed between MAG and NSW, which launched its report⁶ and undertook an audit with feedback to local centres using data collected in July 2008.

References: 1. Elia M, Russell CA. Combating malnutrition: recommendations for action. A report from the Advisory Group on Malnutrition, led by BAPEN. London; 2009. ISBN: 978 1 899467 36 5. 2. Elia M, Russell CA, on behalf of the Group on Nutrition and Sheltered Housing. Screening for malnutrition in sheltered housing. 2009. 3. Elia M, Stratton RJ. Calculating the cost of disease-related malnutrition in the UK in 2007. In: Combating malnutrition: recommendations for action. A report from the Advisory Group on Malnutrition led by BAPEN ed: M Elia, CA Russell. London: BAPEN; 2009. ISBN.: 978 899467 36 5. 4. Elia M, Smith R, on behalf of BAPEN and its collaborators. Improving nutritional care and treatment: perspectives and recommendations from population groups, patients and carers; 2009. ISBN: 978 1 899467 310. 5. Centre for Sheltered Housing Studies (CSHS). Good Practice Guide, Addressing Malnutrition. Issue No. 9; 2009. 6. Russell CA, Elia M. Nutrition screening survey in the UK in 2008. A report by BAPEN; 2009. ISBN: 978 1 899467 41 9.

Research and Science Committee

PROFESSOR JOHN MCLAUGHLIN, CHAIR RESEARCH AND SCIENCE COMMITTEE



- Chair and committee members at end of 2009: John McLaughlin (Chair) • Anne Holdoway (PENG) • Liz Williams (Scientist/Nutrition Society) • Simon Lal (Medical/IF) • David Lloyd (Medical, trainees) • Susan Hill (Medical- Paeds) • Christina Wong (BPNG) • Susan Green (NNNG) • Philip Calder (Scientist)**

Key objectives for the year

This new committee was formed and met for the first time in 2009. Immediate objectives were to form a fully functioning committee and establish Terms of Reference and operational strategy. The committee also immediately took on the role of scoring the Nutricia Award, and to score abstracts for conference in 2010.

Also, to identify research active members of BAPEN to form a network of expertise for future strategy.

Key outputs for the year

Terms of Reference were assembled for approval by BAPEN Council in November 2009:

Aims

- To support BAPEN Council in delivering the BAPEN vision and strategy 2005-2015 by contributing to activities which facilitate the achievement of the objectives, particularly:
 - Each member of the BAPEN Research and Science Committee to represent their professional group (The

Nutrition Society, NNNG, BAPEN Medical, PENG, BPNG) and communicate Committee's activities.

– To contribute to the activities of the Scientific Programme Committee of BAPEN in the selection of abstracts for the annual conference and to take conduct the judging of submissions for research funding awards associated with BAPEN (e.g. the Nutricia Fellowship).

– To develop a programme of education and identify opportunities to educate BAPEN members in research methods.

- To develop and maintain a page on the BAPEN website which aims to inform BAPEN members of current and recent research activity of members. The key goal is to enhance both quality and activity in research undertaken and in evaluation of practice by:
- Providing information on publications and research projects in which BAPEN members have been or are involved
- Providing and disseminating information to members on relevant sources of funding for research
 - To support Term (3) website developments might include resources or links concerning research governance, Good Clinical Practice, ethical issues and COSHH requirements.
- The committee will also consider ways in which to promote and enhance the

activities of new researchers and of the currently small group of scientific members of BAPEN who are not registered healthcare professionals.

- In addition, a census of research active members was attempted by email and met limited response. Therefore a questionnaire was distributed at annual conference to enhance the dataset.

Early days!

British Intestinal Failure Alliance (BIFA)

PROFESSOR JEREMY POWELL-TUCK, CHAIR BIFA

Chair and committee members at end of 2009:

Professor Jeremy Powell-Tuck (Chair) • Dr Janet Baker (Hon Sec) • Dr Jeremy Nightingale (Treasurer) • Dr Barry Jones • Dr Jon Shaffer • Dr Barney Hawthorne • Mr Keith Gardiner • Dr Alistair McKinlay • Dr Sue Protheroe • Ms Ruth McKee • Ms Lynn McCready



Key objectives for the year

Emphasise management of Type 2 IF and in particular encourage surgical engagement and membership: both adult and paediatric.

Key outputs for the year

Annual Meeting held at the Kensington Close Hotel, London, 10th November, was generously supported by Calea, Willow and BUPA 2009. The programme was as follows:

- Management of Paediatric Intestinal Failure and its Complications: Systematic review
Dr David Wilson, Consultant Paediatric Gastroenterologist, The Royal Hospital for Sick Children, Edinburgh
- Discussion: Comparisons between adult and paediatric metabolic and nutritional practice

Discussants: *Dr Sue Protheroe, Birmingham Children's Hospital, Professor Jeremy Powell-Tuck*

- Surgical Experience of Type 2 Intestinal Failure
Professor Gordon Carlson, Salford Royal Hospital, Manchester
- Surgical Management of Paediatric Intestinal Failure: The current situation
Professor Agostino Pierro (Great Ormond Street Hospital & Institute of Child Health, London)
- Patients Referred for Intestinal Transplantation
Two case discussions led by: *Dr Simon Gabe, (St Marks, Harrow) with transplant surgeons from the Oxford and Cambridge units.*

- Wound Care, Fistuloclysis and Stoma Care in Type 2 IF patients
Jackie Varden and Kirstine Farrer, Salford Royal Hospital, Manchester
- News and updates from the HPN/IF Networks
Dr Janet Baxter (Scottish HPN MCN), Mr Keith Gardiner (Belfast), Dr Barney Hawthorne (Cardiff), Dr Sue Beath (BSPGHAN) Andrew Bibby (National Commissioning Group)

The Groups name was changed from the UKHPNG to BIFA (British Intestinal Failure Alliance). Ruth McKee agreed to lead a surgical group within BIFA with the aim of increasing surgical engagement and membership.

Nutrition Screening Week (NSW) Group

CHRISTINE RUSSELL, CHAIR NSW GROUP

Chair and group members at end of 2009:

BAPEN: Christine Russell (Chair) • Prof. Marinos Elia (Chair MAG) • Claire Oldale (Project co-ordinator) Collaborating Organisations: Najia Qureshi (British Dietetic Association) • Lindsey Haynes (Royal College of Nursing) • Holag Mellet (Irish Nutrition and Dietetic Institute)



Key objectives for the year

- To complete and published the report from the Nutrition Screening Week Survey (NSW08) undertaken in July 2008
- To feedback individual results to all centres that participated in NSW08
- To liaise with the collaborating organisations and review the

documentation used in 2008 and make appropriate changes to the forms to be used in NSW10 scheduled to be held during 12th – 14th January 2010.

- To liaise with the chair of Irish Nutrition and Dietetic Institute (INDI) regarding their participation in NSW10
- To prepare all documentation required for NSW10 by October 2009 and work with Rhonda Smith, Media and Communications Manager for BAPEN to actively promote the event
- To keep the BAPEN Office informed of the time table of events for NSW10.
- To promote and disseminate the results of the 2007 and 2008 NSWs to BAPEN members, government and professional organisations and other stakeholders.

Key outputs for the year

The report of the Nutrition Screening Survey in the UK in 2008 was published

in May 2009¹ and individual results were sent to all participating centres. Data from the NSW08 were included in a presentation at the BAPEN conference in Cardiff and a paper based on the presentation was expected to be published in the Proceedings of the Nutrition Society in 2010.

Contact was established with Halog Mellett, Chair of INDI who arranged for NSW10 to be promoted via their organisation. Following liaison with the British Dietetic Association (BDA) and the Royal College of Nursing (RCN) minor changes were made to the documentation to be used in NSW10 and the event was advertised and promoted via the BAPEN website, In Touch, Dietetics Today, the websites of the BDA, RCN and INDI and industry. Once again NSW gained the support of the Departments of

Health in all 4 nations of the UK.

Impact of NSW

The results of the NSWs undertaken in 2007 and 2008 have already had a wide impact. They have been used by the Department of Health e.g. the website of National Patient Safety Agency and a range of organisations, such as BDA, RCN, BAPEN (and their publications), to promote their policies on nutritional care in different settings. Local trusts have also used the results as a means of promoting the use of screening, and industry have also used them. The screening surveys have identified some areas of nutritional care that need attention.

References:

1. Russell CA., Elia M. Nutrition Screening Survey in the UK in 2008. A report by BAPEN; 2009

Regional Representatives Committee

JEREMY NIGHTINGALE, CHAIR REGIONAL REPRESENTATIVES COMMITTEE



Chair and committee members at end of 2009: Dr Jeremy Nightingale, Consultant Gastroenterologist (Chair & North Thames) • Barbara Davidson, Senior Dietitian (Secretary & North East) • Janet Baxter (Scotland) • Dr Sharon Madigan, Community Dietitian (Northern Ireland) • Winnie Magambo, Nutrition Nurse (Wales) • Dr Simon Lal, Consultant Gastroenterologist (North West) • Melanie Baker, Senior Specialist Dietitian (Trent) • Alison Fairhurst (joint rep), Nutrition Support Dietitian and Sue Merrick (joint rep), Dietitian & Team Leader for Nutrition Support (West Midlands) • Marion O'Connor, Nutrition Support Dietitian (Thames Valley) • Judith McGovern (East Anglia) • Mr Rick Wilson, Director Dietetics & Nutrition (South Thames) • Dr Stephen Lewis, Consultant Gastroenterologist (South West) • Peter Austin, Senior Pharmacist (South) • Dr Paul Kitchen, Consultant Gastroenterologist (South East) • Carole Glencorse (Industry Rep)

Key objectives for the year

- Most regions to hold an annual meeting and promote BAPEN
- Each representative to start making a list of all NHS Trusts within their region and have a point of contact with each one.

Key outputs for the year

At least 7 of the 14 regions held meetings in 2009 and, in addition to teaching large numbers, they generated a significant income for BAPEN. Three regions that have not recently held a meeting are Thames Valley, South Thames and South East. South Thames is combining with North Thames in 2010. The first step in arranging a meeting is the establishment of a multidisciplinary

organising committee and collecting the names/contact details of those interested in nutritional support and the names of those with influence. Most regions have done this.

Despite difficulties the regional representatives continue to promote the use of 'MUST' at their meetings and in Trusts.

Any other comments

The representatives' Annual Meeting was held on Thursday 23rd April 2009. This meeting is supported by the BAPEN Chairman and Executive so is attended by almost all regional representatives. If they cannot attend they send a delegate (usually a member of their organising committee). Marinos Elia spoke about the Nutrition Screening Week and drew attention to the problems of malnutrition in

sheltered housing. He also spoke on the Nutrition Action Plan and showed how the profile of malnutrition and nutritional support is becoming high on the government's agenda. Sharon Madigan outlined the nutritional services in Northern Ireland. Trevor Smith spoke about BANS and the problems of consent/ secure data and E-BANS. Penny Neild spoke about nutrition support teams and has asked the Regional Reps to inform her which NHS Trusts have an NST. She also spoke about BAPEN plans to hold single days of teaching in well recognised centres supported by distance learning. Jeremy Nightingale chaired a session about 'mapping the regions'. From the list of all NHS Trusts in UK, we determined which Trusts are covered by which regional representative.

BAPEN Medical

DR EMMA GREIG, CHAIR BAPEN MEDICAL



Chair and group members at end of 2009:

Dr Emma Greig (Chair) • Dr Michael Colley (Hon Treasurer) • Dr Nicki Simmonds (Hon Secretary) • Dr Simon Lal • Miss Ruth McKee • Dr Jo Sayer • Dr David Lloyd (Trainee Representative) • Dr Tim Bowling (stood down Oct 2009) • New committee members (voted in Oct 2009): Dr Sheldon Cooper • Dr Clare Donnellan • Dr Jeremy Woodward

Key objectives for the year

- Hold third postgraduate teaching day immediately before main BAPEN conference
- Aim to build links with associated specialties by holding a mid-year scientific meeting based on renal disease and nutrition
- Support two scientific sessions at the main BAPEN conference
- Make e-learning modules on Nutrition accessible to a wider audience
- Continue to attract new members into BAPEN and BAPEN Medical
- Provide a variety of educational opportunities to improve knowledge of nutrition and nutritional support in all grades of medical staff.

Key outputs for the year

- Our third postgraduate teaching day was held on Monday 12th October and attracted 120 delegates. This day was based around the dysfunctional gut with a series of lectures and case discussions covering dysmotility, food intolerances, psychological issues, persistent vomiting and opiate dependency. The presentations aimed to provide a start-of-the-art approach to assessing, investigating and managing this complex group. Feedback scores were excellent which relates to the high quality of the speakers.
- We held two symposia as part of the main BAPEN meeting. The first of these centred around intravenous fluid management as an adjunct to the GIFTASUP (British Consensus

Guidelines on Intravenous Fluid Therapy for Adult Surgical Patients) guidelines which were published in 2008. This symposium encompassed a practical management guide for safe fluid prescription and showed how one hospital in Southampton had used audit to improve standards of prescribing in junior doctors. The second symposium tackled the increasing problem of overnutrition and obesity, covering endocrinology, the successes of bariatric surgery and a practical guide to managing nutritional support for complications of weight-loss surgery.

- Our mid-year meeting in 2009 was held in conjunction with renal physicians and covered a wide remit from nutritional requirements to managing sclerosing peritonitis. The day finished with lectures about nutrition and metabolic issues with kidney transplant then joint kidney and intestinal transplantation. Overall, feedback was very positive and we would hope to run a similar day in a few years.
- The e-learning modules produced by Dr Nicola Simmonds are now available on the BAPEN website. These are designed for Foundation Level doctors but would be of benefit to anyone with an interest in nutritional support as they cover 'Methods and monitoring for Nutritional support' and 'Ethical issues'. We would encourage you to recommend these to your junior doctors as a clear and concise introduction to nutrition.

Plans for 2010

- We are planning a fourth teaching day on 1st November 2010 in Harrogate prior to the main BAPEN conference. This will cover nutritional issues in association with cancer.
- Planning for our mid-year scientific meeting is underway, linking with paediatrics to cover areas of mutual interest (date to be confirmed).
- We will support two further symposia at the main BAPEN meeting: IBD and nutrition and peri-operative nutritional support.

Any other comments

- We have elected an additional two committee members and changed our constitution to allow for this. The workload for all committee members has increased as we are involved in an increasing number of educational initiatives and teaching days so we hope to make this more manageable for all concerned.
- We plan to strengthen our links with ESPEN Life Long Learning and run another teaching day in conjunction with them.
- Finally, we would like to thank the sponsors of our events this year; Abbott, Calea and B Braun (for our Teaching Day on 12th October 2009), and Abbott Nutrition and BUPA Healthcare at Home (for our Scientific Day on 18th June 2009). Without their support, we would be unable to run these meetings.

British Pharmaceutical Nutrition Group (BPNG)

JACKIE EASTWOOD, CHAIR BPNG



Chair and group members at end of 2009:

Jackie Eastwood (Chair), NHS London St Marks • Tim Sizer (Vice Chair), NHS QA West Midlands • Mike Allwood (Secretary Academia), Derby University • Richard Smith (Treasurer Industry), Runcorn • Ruth Newton (Education Officer), NHS Stoke • Allan Cosslett (Communications Officer Academia), Cardiff University • Rebecca White (Previous Chair), NHS Oxford • Lucy Thompson (Co-ordinating Officer), NHS London Kings • Peter Austin (Prof dev – Adults), NHS Southampton • Venetia Horn (Prof dev – Paeds), NHS London GOSH • Sarah Zeraschi (Co-ordinating Officer), NHS Basildon • Tony Murphy (Co-opted Member), NHS London UCL

The BPNG have been very active and have representation on all BAPEN Committees. The BPNG has also had representation in the following committees or organisations:

- NCEPOD audit for parenteral nutrition steering group
- Working party for advanced and specialist practice for pharmacists (part of the Waterloo group)
- UK Clinical Pharmacy Association Gastroenterology and Hepatology specialist group
- NHS Pharmaceutical Aseptic Services Group
- NHS Pharmaceutical Quality Assurance Committee

- NHS Technical Specialists Education and Training Group
- Royal Colleges Working Party on Nutrition
- HIFNET Development group

Key objectives for the year

- To continue to provide education and support for professionals working within parenteral nutrition
- To represent pharmacy in all nutrition initiatives nationwide
- To launch position statement on the appropriate use of multi-chamber bags
- To hold the Fundamentals in Parenteral Nutrition and advanced nutrition courses

- To be represented in the meetings between specialist pharmacist groups and the new professional body.

Key outputs for the year

- Fundamentals in Parenteral Nutrition course held at Regents College, London, in April. This is an annual event for all professionals new to parenteral nutrition
- Study day on the safe use of multi-chamber parenteral nutrition bags held in Derby, in June
- Held a symposium at the UKCPA Autumn Residential Symposium on enteral nutrition and administration of medication via enteral feeding tubes.

PINNT

CAROLYN WHEATLEY, CHAIR PINNT



We had a great annual meeting in Farnborough, well attended with lots of interaction, group discussion and support from members and industry.

A revised website was launched with a view to launching a brand new image in 2010. We were able to discuss a number of new projects for PINNT which will benefit members. We want to focus on the introduction of more local support networks which were piloted the previous year as many members feel some of the regional groups are just too far to travel to as well as being expensive for them. We are also being responsive to those who feel given their personal situations that a region is potentially too large to manage.

This possibly is in line with many views about travelling long distances for emergency and routine hospital care which formed the basis of the HIFNET work!

Work begun on a new members pack to provide a central resource for our literature, seems to have been warmly received. We are keeping up with travel changes as this has a huge impact on our members; we want to ensure they are fully prepared while travelling with artificial nutrition to avoid any unpleasant incidents at departure ports.

Our ties with international groups has been strengthened and we are shared more information over the past year than ever before and we are even sending copies of our newsletter to New Zealand.

New members of our governing team have made a huge difference to PINNT and we have a stronger team moving PINNT forward for the coming year. We have identified various new projects which all have a focus on positive outcomes for our members which is our ultimate objective.

National Nutrition Nurses Group (NNNG)

ANDREA CARTWRIGHT, CHAIR NNNG 2009



Chair and group members at end of 2009:

Andrea Cartwright (Chair), Basildon University Hospital • Jane Fletcher (Secretary), Queen Elizabeth Hospital, Birmingham • John Kennedy (Treasurer), Fresenius Kabi Ltd • Tracy Earley (Communications Officer), Royal Preston Hospital • Liz Evans (Oral Nutrition Officer), Stoke Mandeville Hospital • Winnie Magambo (Education and Conference Organiser), University Hospital of Wales, Cardiff • Anne Myers (Committee Member Officer), Hope Hospital, Salford • Angie Davidson (Co-opted Member – PN guidelines), Bristol Royal Infirmary

Key objectives for the year 2009

- Write up granuloma working party results and publish
- Buried bumper prevention poster – devise and publish
- Continued involvement with NPSA – Dysphagia Expert Reference Group
- Continued involvement with NHS Core e-learning Programme (dysphagia)
- Advanced skills study day
- Complete competency document for Nutrition Nurse Specialists

Key outputs for 2009

- We achieved most of the planned objectives for 2009. The granuloma work are still due to publish in 2010.
- Nutrition Nurse Competencies are in final draft, due for publication for the NNNG conference in June 2010.
- National profile including NNNG members on NCEPOD PN Audit Expert Reference Group and Royal College of Physicians Feeding Dilemmas Working Party.

Key objectives for 2010

- Complete and publish Nutrition Nurse

Specialist Competencies

- Publish Granuloma Working Party findings
- Issue some PN Good Practice Guidelines

Any other information

Liz Evans was voted in as new Chair from January 2010, taking the reins from Andrea Cartwright. Both Tracy Earley and Angie Davidson have completed their Terms of Office, so will be departing at the end of 2009. New appointments include Neil Wilson, Senior Lecturer from Manchester Metropolitan University as Communications Officer and Carolyn Best, Nutrition Nurse Specialist from Winchester.

PENG

VERA TODOROVIC, CHAIR PENG



PENG membership is approximately 400 members

PENG has had another active year and held it's annual clinical meeting in August 2009 in London. The main focus of the meeting was on education and the development for dietitians of a tiered approach to learning relating to clinical nutrition. This tiered approach links in with the development of the Masters level course which will form part of the PENG Clinical Update.

The PENG Clinical Update, a post graduate BDA validated course for dietitians working in nutrition support, successfully took place in Glasgow during June 2009 with approximately 80 delegates participating. Ailsa Kennedy, the current course leader, can be contacted at Ailsa@geoffholdgate.wanadoo.co.uk regarding the 2010 course which will again be held in Glasgow. This will be the final time it will be run as BDA validated course before progressing to Masters Level.

The Pocket Guide to Clinical Nutrition continues to be a popular text with dietitians and all student dietitians are encouraged to

purchase a copy prior to their clinical placements. PENG also plan to continue to develop the material within the clinical handbook to ensure that it remains an up to date, evidence based reference document. The group is also looking at the possibility of electronic versions of the handbook for palm tops and PCs.

PENlines, the PENG newsletter, continues to be sponsored by Nutricia Clinical Care, with 2 editions in 2009. Back copies can be found on the website www.peng.org.uk, which also contains details of membership and contact details for PENG Committee

Members. In forthcoming issues the benefits of being a full member of BAPEN as well as PENG will be stressed. PENG have reduced their annual membership fee by £5 so that dietitians can join both groups for £35 – the usual cost of individual BAPEN Membership. An electronic version of PENlines is being considered for 2010.

There have been some changes to the Committee during the year with Pete Turner stepping down as Chair of PENG to take on Chairmanship of the BAPEN Programmes Committee. Vera Todorovic has replaced Pete as Chair of PENG.

Clinical Nutrition and Whole Body Metabolism Theme of the Nutrition Society



PROFESSOR GARY FROST, LIAISON OFFICER FOR THE NUTRITION SOCIETY

1. Professor Bruce Griffin from the University of Surrey has been elected to head the Clinical Nutrition and Whole Body Metabolism Theme. Gary Frost continues in the role of liaising with BAPEN Education Committee, with support from Prof. Macdonald for BAPEN main Committee
2. The Nutrition Society session at BAPEN was joint with BAPEN medical last year was focused on issues around body composition, insulin sensitivity and inflammation. The session was very well received
3. As with all the Themes these will be under review at the Society to try and find ways of improving engagement of the membership
4. The Nutrition Society continues to explore ways to improve the engage clinical nutrition. The Nutrition Society summer meeting reflects this with whole body metabolism themed sessions.



External Communications

RHONDA SMITH, BAPEN MARKETING & COMMUNICATIONS MANAGER

During 2009 Rhonda Smith's work focused on supporting the development of the charity through partnership working, stakeholder management, political counsel, proactive and reactive media relations, plus membership of the charity's newly formed Quality Group and input into speakers for and VIP invitees to the Annual Conference in Cardiff.

2009 saw the publication of four key BAPEN reports, three managed directly by Rhonda Smith – Improving Nutritional Care: recommendations and perspectives from patient and population groups; Screening for Malnutrition in Sheltered Housing (with GNASH) and Nutrition Screening Week 2008 – and in partnership with an external agency, Combating Malnutrition. Q4 of 2009 saw plans established for BAPEN's Commissioning Toolkit subsequently published in May 2010. Rhonda also wrote and produced the BAPEN Conference Report, successfully produced by early December.

Rhonda attended regular Officers' meetings to Report progress against the agreed Work Plan, BAPEN Council meetings as an observer and contributor where appropriate and as requested, and was an active member of the Quality Group, Communications and Programmes Committees. Rhonda was a full member of BAPEN and BAPEN Medical in 2009.

Key achievements as part of the BAPEN team during 2009 were:

- Significant media coverage for the

Combating Malnutrition report

- Successful launch of the Improving Nutritional Care report
- Successful launch of the BAPEN/GNASH Report in the House of Commons hosted by Paul Burstow
- Development of the proposal for an All Party Parliamentary Group on Nutritional Care (subsequently approved by Executive and Council in 2010)
- Letter-writing campaign to key Parliamentarians and agencies concerning follow-up to the DH's Nutrition Action Plan and the Quality agenda
- Securing engagement with the Care Quality Commission for the Quality Group including keynote speaker for 2010 Conference.
- Liaison with the Welsh Office and securing keynote speaker for 2009 Conference in Cardiff
- On-going contact with and briefings for key Parliamentary figures such as Paul Burstow, Baroness Pitkeathley

and Baroness Greengross

- Successful launch of BAPEN's Nutrition Screening Week (NSW) 2008 Report
- Preparation for and promotion of NSW10 held in January to cover data for the winter season.

With three new reports published and plans laid for a Commissioning Toolkit in 2009, this was once again a busy, productive and effective year for BAPEN in terms of external relations, media attention, and further consolidation of the charity's position of authority in the field of nutritional care.



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