



**Association of
Paediatric Anaesthetists
of Great Britain and
Ireland**

**ANNUAL REPORT
AND
ACCOUNTS
2020**

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1. Current Council

Chair

Dr. Chris Gildersleve (CG) President

Officers

Dr. Mark Thomas (MT) Home Member, Honorary Treasurer, President Elect
Dr. Simon Courtman (SC) Home Member, Honorary Secretary
Dr. Karen Bartholomew (KB) Home Member, Treasurer Elect
Dr. Charles Stack (CS) Immediate Past President

Elected Members

Dr Janet Stansfield (JS) Home Member
Dr. Sumit Das (SD) Home Member, Website Lead
Dr. Colin Dryden (CD) Home Member, Chair Meetings Committee
Dr. Jonathan Smith (JS) Home Member, PICS Liaison
Dr. Christa Morrison (CM) Trainee Representative
Dr. Judith Nolan (JN) Home Member, Lead Peer Review

Co-opted Members

Dr. Nicola Disma (ND) Overseas member
Dr Phil Arnold (PA) Chair Scientific Committee
Dr Mary Lane (ML) Chair Education Committee
Dr. John Rutherford (JR) Linkman Lead , National Advisor, Scotland
Dr. Hannah Lonsdale (HLon) Newly Appointed Consultant post
Dr. James Farrant (JF) Social Media Lead
Dr. Danielle Franklin (DF) QI Lead
Dr. Brian Foster (BF) National Advisor, Northern Ireland
Dr. Hannah Lewis (HLew) PATRN representative
Ms Camilla Poulton (CP) Patients' Advisor
Dr Russell Perkins (RP) RCOA Representative
Dr Upma Misra (UM) AoA Representative
Dr. Sarah Mahoney (SM) PICS Representative
Dr Fidelma Kirby (FK) National Advisor, Ireland

2. President's report

I write this report in circumstances that most would not have envisaged, even a few short months ago. This month we would have been celebrating our 47th Annual Scientific Meeting in London, together with our friends and colleagues from ESPA. However, the arrival of COVID-19 has had a profound effect on our lives, the lives of all those who work within the healthcare sector and beyond and of course our friends and families. While work in PPE has been both grim and exhausting, I have been touched by the selfless dedication of colleagues in our paediatric anaesthesia teams and throughout the hospital, a picture I am sure is replicated the breadth of the UK and Ireland. I have witnessed care, compassion and team working that has been uplifting, and perhaps we will emerge from this in a better place, with an enhanced appreciation of all.

It would be overdramatic to suggest that life will never be the same again, but much of our working life and practice has been severely impacted by COVID-19 and for the medium term at least we must learn to work within its constraints. The APA has worked with partner organisations to ensure that our members are directed towards the comprehensive online information hubs and this liaison continues as we seek to provide guidance on best practice for children's services as we start to emerge from the worst of the crisis.

While the impact of COVID-19 on children has for the most part has been much less significant than on the adult population and paediatric critical care has not been overwhelmed we are aware of the small number of cases who have developed an extreme inflammatory Kawasaki-like complication of the disease. Nonetheless the impact on children's surgical services across the UK has been profound with only urgent and emergency cases coming to theatre. We recognise that as a consequence of the demand on anaesthetic services supporting their critical care colleagues that "routine" paediatric emergency throughput is placed under indirect strain, with the risk that non-COVID children might unwittingly become secondary victims of this pandemic. This has been felt most acutely in District General Hospitals and in Teaching units where adult and paediatric services are combined.

APA Council has developed a position statement which will help to guide hospitals through the current difficulties and to support units as they try to preserve the integrity of their paediatric services.

As time has passed and the demand on adult ICU in particular has eased, we can now look forwards to some normality returning and to a gradual resumption of paediatric surgery. In July we jointly published the "National Guidance on the Recovery of Elective Surgery in Children". This was the result of a huge collective effort by ourselves and numerous other organisations and specialist contributors including the RCoA, RCPCH, BAPS, RCS England and the Association of Perioperative Practice, supported by Professor Simon Kenny, the National Clinical Director for Children. This is available on the RCPCH website at:

<https://www.rcpch.ac.uk/resources/national-guidance-recovery-elective-surgery-children#summary-of-recommendations>

This guidance has now been endorsed by NICE and effectively NHSE as all rapid publication guidance has now been derogated to NICE.

Annual Scientific Meeting London 2020

The most obvious early impact of lockdown has been the postponement of our 2020 Annual Scientific Meeting (ASM) in London. Drs Dan Taylor and Yosha Prasad and the whole local organising committee, Colin Dryden our Meetings Secretary and Rebecca and Peter from conference organisers INDEX have worked tirelessly to bring this meeting to fruition and we were very much looking forward to celebrating our 47th Annual Meeting with our European colleagues from ESPA. It is somewhat ironic that despite our fears over the expense of a London meeting, projections at the time of postponement were for a healthy break-even result. Initially our venue, the Institution of Engineering and Technology, Savoy Place indicated that we would be held liable for the entirety of the venue hire. Thankfully this threat receded once government guidance on mass gatherings kicked in, however this does not mean that postponement comes at zero cost to the Association. Pretty much all of the organisational management of the meeting had taken place at the time the meeting was postponed, and we will need to pay INDEX for the work they have done. Some of the management fee we are obliged to pay will be offset next year as elements of the work will not have to be repeated, but there still remains a significant cost to the Association for a meeting that did not happen. Essentially this will be recognised as the financial impact of COVID-19 to our organisation. Full details of the financial outlay for London thus far and the need to safeguard future meetings are set out in the Honorary Treasurer's and Meetings Secretary reports.

Our intention is to defer the 2020 meeting in London until May 13-14th 2021 and we are provisionally holding these dates at Savoy Place for next year. I fervently hope that we are able to deliver a meeting in London in 2021 as planned. However I would sound a note of caution regarding 2021, as there are many variables over which we have no control; we cannot project the continued impact of COVID-19, that effect on government advice on social distancing, mass gatherings, the impact on our workplaces, the clinical demands therein and not least the potential advent of a vaccine. It may be that any meeting held in 2021 will be a meeting but not as we would traditionally recognise. Much of this will become clearer as time passes, indeed this has stimulated us all to look at innovative changes to our traditional meeting format to accommodate a more permanent adaption to our usual social gathering. We are committed to providing members the opportunity for CPD and interaction with fellow professionals as this drives the maintenance of standards and individual professional development so we are exploring opportunities to deliver some education on-line. We aim to start with our initial Virtual Meeting in September to allow those selected to deliver abstracts at the London Meeting to present their work, together with some CPD content from speakers from the London programme. Arrangements are at a formative stage and we will inform the membership as soon as we can of the date and content of our first "Virtual Meeting".

Finally, Council has taken the pragmatic decision to push each planned ASM one year on to accommodate a projected London Meeting in 2021, with Cardiff moving to 2022 and subsequent venues moving on accordingly.

Sheffield Annual Scientific Meeting 2019

It all seems rather a long time ago now but our 2019 ASM was hosted with panache, enthusiasm and exemplary efficiency by the Sheffield department. Our thanks go to all

members of the team who provided us with such a memorable 3 days in surprisingly sunny Yorkshire and in particular I wish to record my appreciation for the work of Judith Morgan, James Ellwood and Liz Shepherd in delivering such an excellent meeting. One of my personal highlights was the award of the first Roddie McNicol prize by his widow, Professor Anne Marie McNicol. I have formally written to her to thank her for coming to Sheffield to make this inaugural award.

This was the third meeting organised by our PCO INDEX, any decision to continue our relationship with INDEX and extend their contract is contingent on the delivery of a successful London meeting. Though with this deferred for a year we are obliged to extend in the first instance until this meeting is delivered. Council will continue to keep the contract with INDEX under review.

Council membership and election to APAGBI Council 2019-2020

There have been quite a number of comings and goings over 2019, with much of this concentrated around the 2019 AGM:

Professor Tom Englehardt has been appointed to the Chair at the Department of Anaesthesia at the Montreal Children's Hospital and moved to Canada in September. Many congratulations to Tom, and our best wishes for this exciting new chapter in his career. Our thanks go to Tom for his contribution to the work of SciCom, formerly as committee member and subsequently for his stewardship of the committee. He has brought innovation and pragmatism to the work of this committee at a time when scientific paediatric research is struggling, and he has helped position the SciCom such that it can best support the various strands that contribute to its broad brief. I am pleased to announce that we have appointed Dr Phil Arnold as the new SciCom Chair.

In addition, David Mason has stepped down from his role on SciCom. I have written to him to formally thank him for his huge contribution over many years, his wide experience and ruthless streak with survey management and abstract review amongst other things will be a challenge to replace.

We welcome Nicola Disma to the position of Overseas Representative and thank Walid Habre for his tireless work over the past three years. Karen Bartholomew has handed over the Meetings portfolio to Colin Dryden and we thank Karen for her huge contribution to the Meetings brief leading the delivery of successful meetings in Liverpool and Sheffield amidst the challenge of developing a working relationship with our new PCO.

Judith Nolan has succeeded Stephanie Bew covering Peer Review. Stephanie has been formally thanked for her work at this important phase of APA Peer Review and in helping to set up the new relationship between APA Peer Review and ACSA.

And finally, Dr Alistair Cranston has completed his term as Immediate Past Treasurer, our grateful thanks for a decade of service to the APA were expressed at the May Council meeting to which I add a personal note of appreciation from the same election vintage. Reassuringly he remains on our radar as APA Archivist, which given the August flood at Portland Place and the difficulties we face locating our physical archive, requires a fresh investment in time as we seek to locate and preserve our historical material.

Dr Mark Thomas will complete his 2-year term as Treasurer in May 2020. Since a second term will overlap his inaugural year as President, we have appointed Karen Bartholomew Honorary Treasurer, though her start will be somewhat deferred as we work through the current crisis.

Dr Jill McFadzean has stood down after many years' service as our Ethics advisor. We thank her for her service and wise counsel during her time in office. Dr Hugo Wellesley (GOSH) has been appointed as our new Ethics advisor.

Election to Council was held during the autumn term and we were delighted to receive a total of 6 outstanding nominations. I am pleased to announce that the successful nominees were Dr Sumit Das (Oxford) and Dr Janet Stansfield (Birmingham).

In memoriam

This year has seen the passing of two former APA Presidents and another of that golden generation of paediatric anaesthetists from Liverpool. We mourn their passing and at the same time celebrate their contribution to the APA and the specialty of paediatric anaesthesia.

Dr Bill Glover

We received news from Mike Sury of the passing of Bill Glover in early November 2019. Bill was one of the first full time dedicated paediatric anaesthetists in the UK and was an influential figure at GOSH and in the development of paediatric cardiac anaesthesia. He was a Past President of the APA. A cremation service was held on 23rd November 2019, Dr Mike Sury was able to attend and represent the APA.

Dr Tony Nightingale

Dr Roger Thornington informed us of the passing of Tony Nightingale in October 2019 and he was able to attend the celebration of his life, and represent the APA, in Chew Stoke on the 28th October 2019. Tony was a member of that "golden generation" of paediatric anaesthetists in Alder Hey and will be fondly remembered as an absolute gentleman by colleagues and friends alike from Liverpool and beyond.

Dr Gerald Black

It was my sad duty to inform APA members of the passing of Gerry Black in early July 2019. His funeral was held in his hometown of Holywood, Co. Down at which the APA was represented by Dr Declan Warde. Gerry was a founder member of the APA and President between 1985-1987.

Many of this founder generation are no longer with us which attaches even more importance to ensuring that we retain, preserve and copy electronically as much of the written material from that era as possible. We are concerned that much of the early physical material has been placed in storage or removed from the Association archive. We were alerted to this issue by Dr Declan Warde who was hoping to access some of our earlier records to support some historical research. This was followed by a "perfect storm" of a major water leak in late August at Portland Place, which closed the building for a considerable time. We are assured that any physical APA material both in the basement and the secretariat offices is secure. Nevertheless, Alistair Cranston has a considerable task ahead of him to locate and organise as much of our historical material as possible.

Honorary Members 2020

3 nominations were received and approved by Council:

Dr Alistair Cranston

Professor Walid Habre

Dr Isabeau Walker

As a result of the postponement of the 2020 Annual Scientific Meeting, the presentation of these awards will be deferred until 2021, though each will formally become Honorary Members of the Association from May 2020 as intended.

NHSE Reviews

The NHSE Service Reviews of Paediatric Surgery and Critical Care that have taken place over the past 3 years are complete and a final Stakeholder meeting took place on Wednesday 15th January 2020 in London. There remains a concern that the fate of the devolved nations with respect to a joined-up strategy with NHSE seems to have been neglected and it feels like “we” are being left behind. This is a topic that I will be pursuing with NHSE, Welsh Government and our colleagues in Scotland and N. Ireland. The roll-out of Operational Delivery Networks (ODNs) is taking place at varying speed around England, though much will have stalled during COVID-19.

A toolkit for ODN development is available online, and requires registration with an England NHS email address:

<https://future.nhs.uk/connect.ti>

Where nascent networks do exist the emergence from lockdown and the restart of paediatric surgical services will represent a significant challenge. We intend to share examples of best practice to guide regions as they resume routine surgery, accepting that geography and individual network service models will ultimately determine the speed at which this can occur.

In parallel with the completion of the NHSE Reviews we were asked for comments on the final draft and embargoed Paediatric Surgery GIRFT report in October 2019. The final report has yet to be published, and will appear here in due course:

<https://gettingitrightfirsttime.co.uk/surgical-specialty/paediatric-surgery/>

This will be an important influencer of the manner of ODN development and should be seen in parallel with the NHSE Reviews.

A noteworthy development in the wake of GIRFT has been the appointment of the Paediatric Surgery GIRFT report author, Professor Simon Kenny as the National Clinical Director for children and young people in England. Professor Kenny was an invited speaker for our postponed London ASM, and we hope that we will be able to renew that booking for 2021. Finally, I wish to highlight two related strands of activity for future planning and preparation for the changes in service delivery envisaged by NHSE:

1. RCoA Curriculum. The new curriculum is now planned to be rolled out in 2021 and we hope that our input with respect to paediatric training to future proof our paediatric workforce will be reflected in the final document.
2. SAFE UK. We are exploring the prospect of endorsing the SAFE UK course as one of the mechanisms to try and maintain skills and confidence and help upskill those whose paediatric practice has declined due to historical tertiary drift.

APA/DAS Paediatric Airway guidelines

Following discussions with Barry McGuire, DAS President, after the joint airway day at the Sheffield ASM, Council has resolved to formally update these guidelines. With emerging technology and a developing evidence base for the newer items of equipment we are now using this seems like an opportunity to update these guidelines.

Prior to COVID-19 there had been steady progress on the groundwork for this guideline review. We have confirmed the appointment of Dr Rob Walker (Manchester) as Chair for the review and we have appointed a Guideline Development Group. These are:

Dr Stephanie Bew (Leeds)

Dr Karen Bartholomew (Halifax)

Dr Richard Craig (Alder Hey)

Dr Arnie Choi (Oxford)

Dr Elena Fernandez (GOSH)

Dr Catherine Doherty (Manchester)

In addition, DAS has confirmed their nominations for the group:

Dr Alistair Baxter (Edinburgh) and

Dr Andy Higgs (DAS Council Member)

The intention was to hold the inaugural meeting of the group in March however this was deferred for the obvious reasons and the process is now on hold until some normality can return to our working lives. I hope that come September we can consider rebooting this review.

Scotland/SPAN/Training/Remote and rural sustainability

We received a letter from Dr Graham Wilson (Aberdeen) prior to the September Council outlining the challenges faced with service sustainability in Scotland and the allied issues surrounding training in paediatric anaesthesia for trainees in the Scottish schools and the need to train a workforce for Scotland. Dr John Rutherford (Dumfries) expanded on these issues at Council and I wrote back to Graham to offer support and suggestions for the short and medium term.

Dr Mark Thomas and I met with representatives from SPAN Council at the Edinburgh Linkman meeting including Zuzana Kusnirikova (SPAN Chair), Drs Ros Lawson, Grant Rodney, Graham Wilson, John Rutherford and Eddie Doyle (Associate Medical Director at Edinburgh Sick Kids and an advisor to the Scottish Government Health Minister). A strategy to formally take these concerns forward to NHS Education Scotland in the first instance was agreed and we have supported SPAN in this initiative.

PICS standards 2020

A review of the 2015 PICS standards has been in progress over the past year, led by Dr Peter-Marc Fortune, Immediate Past President of PICS. The APA is represented in this review by Drs John Rutherford, Simon Martin and myself. There has been really good progress with this review with standards re-drafted from the ground-up to reflect the projected framework for the delivery of paediatric critical care described in the NHSE reviews. The aspirational nature of the previous set of standards has been replaced by a more pragmatic and evidence-based approach where possible.

A planned final face-to-face meeting in May 2020 has been deferred until the pandemic passes and we hope to resume at some point over the summer. It had been hoped that the final draft of the new standards would be circulated to stakeholders for consultation in early summer with a view to publication timed for the PICS conference in October 2020. This timetable is now in abeyance.

HSIB case review

I attended a meeting with Healthcare Safety Investigation Branch (HSIB) in October. Also in attendance were Dr Russell Perkins and Professor William Harrop-Griffiths.

The meeting was essentially to allow HSIB to seek feedback on their summary observations and help frame some broad-based recommendations following their investigation into a critical incident during an MRI under general anaesthesia in a young person with autism and with undiagnosed cardiomyopathy.

A series of recommendations have been published at:

<https://www.hsib.org.uk/investigations-cases/undiagnosed-cardiomyopathy/>

We are working with the RCoA on the topics of consent for MRI, preoperative assessment and perioperative care to ensure wider benefits are realised in these areas of mutual interest after such a sad outcome in this case.

Inquiry into hyponatraemia-related deaths in N. Ireland

The report on the Inquiry into hyponatraemia-related deaths in N. Ireland was published in January 2018. Since the summer of 2019 we have received two approaches to provide expert testimony on the evidence presented to the Inquiry, initially from the General Medical Council (GMC) who are pursuing “fitness to practice” investigations, specifically with respect to the first of the 5 deaths, which occurred in 1985. And secondly, more recently, from the Police Service of Northern Ireland (PSNI) who are investigating whether a criminal prosecution should be brought in light of the report’s findings.

Involvement in either process represents a very delicate path for the APA to tread as an Association that must represent the interests of its members. In view of this we sought from the GMC clarification regarding their investigation. During this process we were informed that they had sourced an expert themselves and that our input was no longer required. The PSNI inquiry is of more recent vintage and remains open though correspondence has dried up peri-COVID.

Neurotoxicity statement

During the summer of 2019 we provided updated guidance on the use of general anaesthesia in young children based on work published since our previous statement.

<https://www.apagbi.org.uk/sites/default/files/paragraphs/files/Neurotoxicity%20guidance%20Final%20September%202019.pdf>

Evidence for the “GAS study” in particular has allowed us to be a little more reassuring than previously. However, this is of necessity a long-term outcome issue and we will continue to review evidence and update our guidance accordingly.

This guidance is jointly badged with the Royal College of Anaesthetists, the Association of Anaesthetists and the College of Anaesthesiologists of Ireland.
Intended discussion with ESPA regarding a jointly badged version is currently on hold.

Governance and the future of the AGM

During the summer and autumn of 2019, we made important progress formalising a range of governance policies. I am grateful to Dr Charles Stack for leading this work and policies on a range of topics including Commercial Sponsorship, Equality and Diversity, Comments and Complaints and Social Media amongst others are displayed here:

<https://www.apagbi.org.uk/index.php/about-us/council/governance/policies>

We intend to expand this portfolio over time to ensure that our organisation has a healthy governance structure to underpin its wide range of activities.

Another fundamental governance topic that has engaged Council debate during the year has been the need or otherwise to continue with an Annual General Meeting (AGM), stimulated in part by discussions generated at the Association of Anaesthetists Specialist Societies Meeting in November, as societies all seek ways to modernise the conduct of their activity. In summary we are able to conduct our business as both a Company Limited by Guarantee and as a Charity without recourse to an AGM, yet an AGM is intrinsic in our Articles of Association. Therefore, we would need to pass a motion through the AGM if we, as a membership organisation wish to change this.

In recent years the attendance at the AGM has declined to such an alarming degree that we have regularly had to seek obliging members from the trade exhibition, lunch and networking activity to become quorate. All the necessary material is displayed on the website for a number of weeks ahead of the AGM, giving members the opportunity to engage with or interrogate Council formally yet this has manifestly failed to happen and the AGM has been reduced to a short flurry of predominantly one way delivery from the podium with little in the way of discussion or engagement. Integral to the function of the AGM is the approval of the Association accounts, and we will need to ensure that the opportunity for members to interrogate these results and hold Council to account is ensured within any proposal to abolish the AGM.

This is an area where we need to seek the views of members before we consider change. So after the summer I will be writing to all members to set out proposals for this change of practice, and enshrined within the case for change will be the opportunity to engage with Council face-to-face throughout the AGM, a Council corner for discussions during the lunch break and an opening address from the President setting out the year's achievements and plans for the upcoming year.

If we receive supportive feedback on our proposals, we will set this out as a discussion item for the AGM in 2021 with a view to bringing forward a change in Articles in 2022. As ever we are open to feedback on this matter, supportive or otherwise before we embark on this change. However, I do feel that this is an important step to consider in the modernisation of the governance of our association.

SPANZA/APA 2019

This joint meeting took place in Brisbane, Queensland in mid-October and the APA was represented by Simon Courtman, Mark Thomas, Karen Bartholomew and me. We all

contributed to the excellent academic programme, both delivering lectures and chairing sessions, and a final coup with victory in the APA vs. SPANZA debate that closed the meeting. We have formally invited SPANZA to jointly host our ASM in Cardiff, originally planned for 2021, but now deferred until 2022, and we very much look forward to reciprocating their most generous hospitality and hopefully retention of our debating crown.

In an aside from the main academic programme we shared a lunchtime meeting with members of SPANZA Council and resolved to develop a more collaborative relationship in the years ahead. After all we share similar problems and challenges and we should share solutions and strategies for the mutual benefit of both organisations and our members. I hope that we can develop this relationship ahead of our joint meeting.

#FightFatigue

APAGBI are now formal backers of the **#FightFatigue** campaign:

<https://anaesthetists.org/Home/Wellbeing-support/Fatigue/Fight-Fatigue-resources/Campaign-backers>

After a sterling editorial effort by the multiple authors in early summer the “Consultant Fatigue paper”, initiated by a proposal from the APA, was published in Anaesthesia in September 2019:

<https://onlinelibrary.wiley.com/doi/full/10.1111/anae.14819>

The entire author group warrant a huge thank you for the collective work put into this project, but I will single out Emma Plunkett and Laura McClelland for driving the project through and getting the completed abstract over the line. This has been a major collective achievement and we hope that the “suggestions” as they have been phrased within the paper can form the basis of a more formal guidance document on the prevention and management of fatigue in the workplace for all medical staff.

50th anniversary meeting 2023 and Royal Patronage

2023 sees the 50th anniversary of the foundation of the APA. In partnership with our APA Archivist, representatives from the History of Anaesthesia Society Council and the AoA Heritage group I have initiated a number of ideas for this celebration, and at the heart of the meeting will be a recognition of our shared history and a projection of the future of paediatric anaesthesia.

With this landmark anniversary in mind Council has agreed to explore the possibility of Royal Patronage of our Association.

Chris Gildersleve
APAGBI President

3. Honorary Secretary's report

Membership of the Association remains relatively unchanged with total membership at:

Category	April 2019	April 2020
Full £90	596	717
Trainee £60	161	88
Affiliate £60	20	25
Overseas £90	41	41
Retired £0	86	93
Honorary £0	45	44
Outstanding	95	58
Total	1044	1008

Changes and Elections to Council

Council Changes

The full council is listed in section 1 of this report and most of the changes have been described in the president's report.

The next upcoming changes will be the completion of the trainee member of council, Christa Morrison, who completes her term in September 2020 and also Hannah Lonsdale, who completes her role as the "newly appointed consultant" in December 2020. An election process will be required for the trainee member this Autumn.

Consultations:

The APAGBI has been involved in many consultations over the last year:

- RCOA GPAS Perioperative Care Chapter
- BPAM Extreme Preterm Guidelines
- AoA Monitoring Standards
- NHSE Proton Beam Therapy Consultation
- Paediatric Epidural Guidelines, Faculty of Pain Medicine
- NICE Fluids review
- GIRFT Paediatric General Surgery Report - stakeholder
- RCOA Faculty of Pain Medicine - Pain Medicine Competencies
- AoA Perioperative management of patients with sickle cell disease
- HSIB Case Review – standards of care for MRI and preassessment standards for children
- SPAN Review of Training Provision
- AoA Assisted dying
- Survey of sedation/anaesthesia for paediatric cranial radiotherapy

- RCOA Parent Information
- BAPM Neonatal Airways - The BAPM review of airway guidelines in neonates prompted a combined response from RCOA, PICS and APAGBI expressing their concerns at the lack of capnography in their guidelines.
- Neonatal Resuscitation – Response to Coroner on a case of neonatal resuscitation in Obstetric theatres by an anaesthetist (RCOA, OAA and RCPCH)
- RCPCH/BAPS, RCS, APAGBI National Guidance on Restarting Children’s Surgery during COVID (NICE approved)

Paediatric Anxiety Management Course

This has been presented and approved at APAGBI and RCOA councils. Richard Martin has established a group of interested experts to help develop a course structure. The first part of the course involves the completion of a training manual and an online teaching resource. The hope is to develop a course which can be delivered locally by trained leaders.

CASAP – Children’s Acute Surgical Abdomen Programme

This NIAA managed national audit has been heavily supported by the APAGBI. CASAP will recruit 5000 children between 1 and 16 years of age having emergency abdominal surgery excluding urological and gynaecological procedures. The aim is to understand the quality of care given to these children, with the aim of improving future care and outcomes. It is a prospective cohort study and is adopted onto the National Institute for Health Research portfolio. It is likely that the target of recruiting 5,000 patients may be delayed due to COVID. The CASAP team are seeking to recruit as many centres as possible for this audit.

Information on registration for CASAP may be found here:

<https://www.niaa-hsrc.org.uk/CASAP-Home>

Paediatric Perioperative Care

The newly formed subcommittee for Paediatric Perioperative Care is working to support the develop of preassessment services for children and also share and promote good practice of perioperative care in children. The committee is hoping to establish representation within the newly formed Centre for Perioperative Care within the RCOA. As a consequence of a review of a case by HSIB, the APAGBI are working with the RCOA to develop national guidelines for preassessment in children which could become established within GPAS for Paediatric Anaesthesia.

Meetings with Other Organisations

1. AoA Specialist Societies Meetings

Officers from the APAGBI have attended these recent meetings. There have been presentations covering issues on the management of societies including finance, governance and legal issues. It has proved a very useful forum with opportunities to discuss cross organisational topics and establish useful contacts. The AoA shared their operational governance manual which has helped us shape our governance review.

2. RCOA President (Ravi Mahajan)

We have established regular meetings with the RCOA president which has been extremely productive in discussing issues specific to children and determining how the RCOA and APAGBI can support each other in addressing them.

GPAS and ACSA

The RCOA are currently recruiting authors to start work on the GPAS for Paediatric Anaesthesia 2022 version. The APAGBI has consistently provided a number of authors to support this important work which is used to devise the standards for ACSA.

Simon Courtman
Honorary Secretary

4. Honorary Treasurer's report

Please see the completed accounts approved by our Accountants Thomas Barrie for the year 2019. Regarding the modest increase in subs: AoA were informed and actioned this increase when the direct debits went out in the spring of 2020. Full members now pay 95 pounds per annum and trainee/other paying membership is set at 63 pounds. These figures were previously 90 and 60 respectively.

We await confirmation from the AoA of their contract review and subsequent financial terms. A meeting regarding this has been a challenge to arrange while they are undergoing repair work on Portland Place and the COVID 19 pandemic.

Balances in our various accounts are as follows:

HSBC	£215,323.47 (13/4/20) vs. £172,009.54 (23/12/19)
Santander 1 yr bond (reviewed annually: still awaiting 2020 total)	£76,426.92 (2/4/19) 0.5% pa
Principality Bond (reviewed annually) (Zero as transferred to HSBC on closing)	£27,272.58 (2/4/19)
Virgin Money Charity Account (reviewed annually)	£77,070.00 (30/11/19) 0.75% pa
CAF Portfolio (Defensive capital growth) (2020 total awaited)	£106,404.01 (5/7/19) 1-3% pa
	Total £475,224.40

The above figure compares with totals of :

£431,298.68 (Dec 2019)
(£495,874.43 at June 2019 ASM)

Please note that our main annual income from subscriptions was in the spring of 2020 and is reflected in the figures above.

Final surplus from Liverpool ASM (2018 ASM): this was forecast to be approx. £20,000 but £9,914.79 was the final sum paid to us by index on 4th July 2019.

We await the final figures and any surplus payable, from the 2019 Sheffield meeting although a spreadsheet from our PCO received Dec 2019, stated net current 'profits' (excess) as £6472.53

The Edinburgh linkman meeting was underwritten by ourselves and the Scottish Association made a modest excess.

Our holdings with CAF portfolio investment were increased by 50k when the Principality bond came up for renewal. This appears to have been a prudent decision since this fund has now grown from £101,998.54 (5/3/19) to its £106,404 as of a statement they sent me in August 2019. However, as with all stock market investments, these will have suffered from the global downturn as a result of COVID 19 and we await a final review figure for 2020. Most investments have fallen in value by the order of 20% but we have some diversity in our assets as set out above and this should mean that we can come through the current downturn intact.

Due to social distancing measures we have had to postpone the planned meeting with our portfolio manager due for May 2020 at the charities commission where I was hoping to be able to introduce him to our incoming Treasurer Karen Bartholomew who will take over from myself. We are trying to find a mutually convenient time when Karen is in London to avoid excess travel and this will now be later in the summer when I will also hand over to her as the new Treasurer. Current travel restrictions make it difficult to arrange meetings at present. At the September council meeting, we discussed moving some more of our investments (perhaps another 50k) to the CAF fund. However, it should be noted that in order to enjoy the preferential business account with HSBC, we need to keep a reasonably large balance with them.

Also, in light of the recent stock exchange turmoil it might be prudent to avoid any further stock investments at present. Until we see the effect of the new subscription total, and with our potential loss on the relatively expensive ASM in London this year it might be better to wait re any further CAF investment until the accounts for London are in. London has now had to be postponed until May 2021 due to COVID and we have lost a small amount as a result of this.

Congratulations must go to Colin Dryden, our meetings Sec and to Index, our PCO, who have managed to negotiate 2021 without losing our 2020 venue deposits. This might otherwise have cost the APA of the order of £40,000 in lost deposits.

The new science committees and airway guidelines groups seem to be heading down the e-meeting path predominantly so hopefully will not be too costly to run. As yet, I have not received any claims.

The improved website revamp continues to cost us more than 500 pounds per month but is felt to be key to the running and perception of the Association and to represent reasonable and competitive value. Council seem happy with the quality provided for this especially with the new youtube video links of our Jackson Rees lectures.

We continue to pay £12,000 per annum for Pediatric Anesthesia journal access for all members, again felt to be a worthwhile benefit to our members

Please see the completed accounts as a PDF at the end of this document from our accountants. These are also posted on our website.

Mark Thomas
Honorary Treasurer

5. Professional Standards Committee Report

The need or not for an AGM?

At a Association of Anaesthetists Governance meeting, it was suggested that an incorporated charity such as the APAGBI, does not need to legally hold an AGM. Currently our Articles clearly state the need for an AGM and this would have to be changed by a majority at an AGM for us to proceed.

What are the arguments for and against?

- The aim of the AGM is to report to the membership the activities of the APAGBI during the previous year, the financial status of the APA and to answer any questions that might arise.
- During the last few years with the arrival of electronic communication including the website, the reports for the Association are all available approximately a month in advance for reading by the members. This fulfils the need to disseminate information.
- There is a requirement in our articles for 5% of the membership to be present in order for the meeting to be quorate. This has been increasingly difficult to achieve and has involved often searching around for and persuading members to come.
- There have been few if any questions to the Council at the meetings over the last few years
- It takes up an hour of the meeting on the Thursday, which could be better used for educational purposes.

What would happen instead?

- Reports will be on the website as now well in advance. Questions will be able to be emailed to the Secretary, by members attending and not attending, before the start of the meeting. If major this could be addressed as below
- The President could give a short presentation at the start of the first plenary session outlining the major matters including a brief finance headline.
- The Officers will be available for questions during breaks between sessions
- If it was deemed necessary by the membership that further information or if the Officers needed to be held to account, an Extraordinary General Meeting could be called for by 5% of the membership to be held at the Annual Scientific Meeting.

When will this happen?

The timeline I envisage is:

- Spring 2021 this notification emailed to members. Feedback welcomed
- Spring 2021 Notification on the website of the impending discussion at London AGM May 2021
- May 2021 Proposal put at AGM and voted on
- Winter 2021-2 Revision of Articles
- Spring 2022 Cardiff AGM approval of change in Articles
- Spring 2023 Newcastle meeting new format commences

Please feel free to email responses to the secretary@apagbi.org.uk and Simon will collate and forward to me in order to amend this proposal if necessary

Governance

During this year, we have reviewed our governance position and have formulated a number of new policies which were approved at the January Council meeting and have been added to the website at:

<https://www.apagbi.org.uk/about-us/council/governance/policies>

These are:

APA Parental Policy

APA Equality and Diversity Policy

APA Commercial Sponsorship Policy

APA Social Media Policy

Comments and Complaints procedure for events

ACCEA

For 2020 all renewing applicants have been asked to apply and will be renewed for 1 year if they do so. There will be no new applications considered for 2020.

In the 2019 round, the APA supported all the applicants for bronze and silver. There was one successful new bronze award and a successful silver renewal.

C. Stack

Immediate Past President

6. Information for Parents and Children Report

Rees Bear – Reviewed and new version available on website [here](#). The content has been slightly updated and the characters revised to reflect the modern family.

Your Child's General Anaesthetic – this has been extensively reviewed and updated with new evidence by the APA leads and RCoA lead for patient information, and RCoA staff. It is now published and available [here](#).

Davy the Detective – it was agreed to retain this leaflet, but feedback from the focus groups indicated that the amount of text need to be reduced and the comics need be updated. We are hoping to start work on this over the next few months.

Brief guide for young people – the content of this needs to be reviewed lightly with more up to date evidence and practice (e.g. pregnancy testing) and then the look needs to be revamped and made better for online viewing by a younger audience. We have started the review and the draft will be circulated to APA Council for comment.

Video for children and young people – Following feedback received from the RCPCH focus groups, the RCoA has commissioned TakeOne, a company they have used before for a video on safeguarding children, to produce a video interview style, co-badged with the APA.

Although the questions and the actors had been sourced, this project has had to be suspended because of COVID, but the RCoA is in contact with TakeOne about next steps.

Karen Bartholomew

Russel Perkins

Hannah Lonsdale

7. Science Committee Report

International Research and data collection: Due to data protection laws it is proving very hard for us to find a way to contribute to international databases. This has confounded initial attempts to contribute to PAWS (COVID and anaesthesia study), though there may be other approaches to this study. Would be good to resolve this for sake of future collaboration and I have made some enquiries, which are still in the air. Any ideas welcome.

Publicity for PEARS (airway registry).

COVID research. A number of groups have established/proposed research related to peri-operative care of children during the COVID pandemic:

- CASCADE. Started by UK paediatric surgeons. Is monitoring changing practice in management of appendicitis during the epidemic. Led by Nigel Hall in Southampton. There is no anaesthetic involvement, though they are open to collaboration on other projects. The RCS has a number of studies in progress though this is the only one with an obvious paediatric angle. <https://www.rcseng.ac.uk/coronavirus/rcs-covid-research-group/>
- PAWS. An airway registry. Based at CHOP. Primary outcome is incidence of airway complications in patients with COVID but potential for other data collection.

<https://www.span.scot.nhs.uk/wp-content/uploads//PAWS-COVID-19-Research-Plan.pdf>

- PEdiatric Anesthesia COvid Collaborative (PEACOC) (previously called POPCORN). https://docs.google.com/forms/d/1l8DbUO31kunGoSrZV_X_F2YpVsS36uz6SkTWFYdISPM/viewform?edit_requested=true. Attempting to be an umbrella for COVID related anaesthetic studies. Not heard much recently.

Current Science Committee Membership

Amaki Sogbodjor	
Danielle Franklin	University Hospitals Plymouth NHS Trust
Hannah Gill	Bristol
Hannah Longsdale	John Hopkins, (@St Petersburg)
James Armstrong	Nottingham University Hospital NHS Trust
Jennie Craske	Alder Hey, Liverpool
John Rutherford	Dumfries & Galloway Royal Infirmary
Natasha Woodman	King's College Hospital NHS, Foundation Trust
Peter Brooks	Chelsea and Westminster Hospital
Philip Arnold	Alder Hey, Liverpool
Pratheeban Nambyiah	Great Ormond Street
Richard Newton	Brighton and Sussex University Hospital
Thomas Engelhardt	Montreal, Canada
Velupandian Guruswamy	Sidra Medicine, Qatar

8. Meetings Committee Report

This report takes an unusual format this year, borne out of the unusual circumstances prevailing in the early part of 2020. A programme that I felt was exciting and stimulating had been put together by Dan Taylor and his LOC. The website was working well, and a new app provider had been engaged. With registrations ahead of the equivalent point in the cycle compared to the previous two years, and the trade exhibition practically sold out, there were grounds for optimism that, far from being a “loss leader”, the London conference was going to generate a surplus.

In late March, IET (the conference venue) informed us that in the light of the unfolding pandemic, they were closing with immediate effect and cancelling all events for the foreseeable future. Despite the failure of this year's ASM to materialise, a significant administrative effort was required by Peter and Rebecca at our professional conference organiser, Index. Firstly, obviously, they were in an advanced stage of preparation having been negotiating with venues, handling enquiries, administering the abstracts, processing registrations and securing commercial support for the trade exhibition. Then when it became clear that the ASM couldn't proceed, they had to deal with the cancellation, contacting all speakers, refunding all delegates and trade exhibitors, all the while minimising costs and maintaining goodwill.

With no revenue from the ASM, but financial outgoings relating to unavoidable expenses and refunds, the APA client account administered by Index has required a top-up of funds to allow all commitments to be honoured. A proportion of the financial commitments is potentially transferrable to a future ASM or refundable, if our relationship with Index should be terminated. The fate of these funds will require negotiation between APA officers and Index.

The planned venue, IET at Savoy Place, were keen to offer a reschedule in the autumn, involving weekend days or Mondays to Wednesdays. Council discussed and decided that in the continuing uncertainty, there was little confidence that an autumn date was a viable alternative, and instructed Index Communications to pursue the equivalent dates in May 2021. By virtue of not blinking first, Index have secured a provisional booking for 13/14 May 2021.

There now remain several unanswered, and in some cases, as yet unanswerable questions:

Is there sufficient confidence in proceeding with May 2021, bearing in mind that first contact with speakers takes place at least 10 months ahead;

Options for the format of the ASM include physical, physical with reduced capacity to observe social distancing, virtual i.e. completely online, or hybrid i.e. physical for a restricted number and with an online attendance with a proportionate registration fee for online attendance;

The registrars' prize. The Science Committee under the chairmanship of Phil Arnold had reviewed all submitted abstracts, shortlisted 8 for oral presentation, and identified those that were suitable to be presented as posters. We now need to devise an appropriate process to decide the recipients of the prizes;

Future meetings. Clearly there is a knock-on effect of postponing London by one year, with hosting locations having already been identified for the next 5 ASMs. No financial commitments have been made beyond the 2020 meeting so there is not anticipated to be any financial consequence of postponing subsequent meetings.

London 2020 – 13-15 May - now provisionally rescheduled for 12-14 May 2021

Cardiff 2021 – 5-7 May - provisionally rescheduled for 2022, but venue availability yet to be explored

- Venue Cardiff City Hall - confirmed, contract close to signing.
- Scientific programme - first planning meeting took place 13 January 2020 in anticipation of 2021 date.
- Jackson Rees Lecturer had been confirmed for a 2021 meeting

Newcastle 2022 - now for review

- Venue The Sage, Gateshead
- possible dates
 - 18-20 May is definitely on hold for the APA
 - 11-13 May is our preferred date, but is already booked up. We have first refusal if the other client withdraws.

Edinburgh 2023 - now for review

- Early contact has been made with Alistair Baxter offering himself as LOC lead. No dates or venue have yet been established.

9. Trainee Representative's Report

Article Watch

The winter edition of the 'International Journal Watch' is due to be published with summaries from January to March 2020. We will continue to alternate in producing a joint quarterly summary of the latest paediatric headlines. We recruited two new members this year. We now have authors from Scotland and England.

<http://www.apagbi.org.uk/professionals/education-and-training/article-watch>

APAGBI Training Survey

We are still aiming to look at where paediatric anaesthetic training is happening nationally. This is to increase our understanding of where fellowships are offered, to whom and how these are funded. In turn this may provide a more robust understanding of training and opportunities. This survey is now ready and due to be distributed.

PATRN

I have been made a co-opted member of PATRN and attended their meeting at the APAGBI annual congress. We are working together to provide a cohesive link between the APA and PATRN.

Christa Morrison

10. Website and Social Media Report

The site is providing an excellent platform for the APA, with good engagement from other societies and regular contributions from members wishing to promote courses and Fellowships. Our traffic has increased each month over the last year, averaging 3000 visitors per month.

The most popular sections of the site include the guidelines and fellowship database. It is encouraging to see the PATRN pages moving up the rankings from last year.

The podcasts of interviews from speakers at past ASMs are continuing to prove popular. They can be accessed via iTunes, Spotify and online via the Buzzsprout website. Total number of plays currently 5,515. This year we also launched our YouTube channel, which hosts past Jackson-Rees Lectures. We will be adding new content to this channel over the next year.

APAGBI maintains a social media presence on Facebook and Twitter. We aim to use these social media channels in conjunction with the website to communicate to followers about APAGBI news and events, to highlight to followers' content we feel is interesting and educational.

The @APAGBI twitter following has grown to 1660, an increase of 600 over the past year. We accrue approximately 30 followers a month, and usually see a significant increase around the ASM which we have unfortunately not benefitted from this year. Facebook follower numbers have been mostly static for the past 2 years, with around 2500 followers.

Sumit Das & James Farrant

11. Patients' Interests Report

I enjoyed taking part in a Peer Review visit to York in June 2019. Unfortunately, a Peer Review visit scheduled for March 2020 had to be postponed due to the COVID-19 crisis. It remains to be seen whether a visit to another hospital scheduled for September 2020 will take place as planned.

In addition, I have continued to contribute comments focussed on patients and families to draft documents by email, and scored submissions for the 2019 Linkman awards and 2020 ACCEA Applications.

Camilla Polton
Patient Representative, APAGBI Council

12. Peer Review Report

Peer review had been on track for the past couple of years, with 3 completed reviews to date, but unfortunately, we just missed being able to undertake our first of 2 planned reviews this year because of the rules around Covid, so these visits will be re-arranged for a later date.

Interest has also been expressed by hospitals in the private sector, for both ACSA accreditation and Peer Review, and we hope to work with the College to provide a combined effort in this respect.

We believe there will be increasing numbers of requests from departments for Peer Review, especially as it is increasingly seen by departments as a valuable exercise to go through before both ACSA and CQC visits.

We would still very much like to recruit more reviewers in order to be able to increase the number of annual reviews performed. There is no obligation to commit to any particular number of visits per year and it requires only a one-day training programme in order to qualify as a reviewer.

Please contact me at the email below if interested in becoming part of the review team (whether occasional or regular), or if simply interested in observing.

Judith Nolan

13. Linkman report

The Scottish Paediatric Anaesthetic Network hosted an enjoyable joint SPAN/APA linkman meeting in Edinburgh on 4th November 2019. The meeting was well attended with quality presentations, and the opportunity to network over the poster presentations.

The APA linkman meeting for November 2020 in Belfast has had to be postponed due to the coronavirus pandemic. It is hoped to arrange a webinar or other on-line meeting in its place.

The Linkman list of colleagues had been used to help support a variety of questionnaires sent out on behalf of members over the past year.

The Royal College of Anaesthetists is reducing the age from 3 years to 1 year at which it is assumed that anaesthetists who have gained their CCT will be competent. The APA have been supportive of the use of the SAFE (Safe Anaesthesia From Education, UK) course and MEPA (Managing Emergencies in Paediatric Anaesthesia) for consultants looking to maintain or support their skills.

A special thanks go to Dr Nimmi Soundararajan who has been the APA linkman lead. I have now taken on the APA Linkman role and can be contacted at Linkman@apagbi.org.uk.

Dr John Rutherford, Dumfries & Galloway Royal Infirmary

14. Reports from Other Organisations

a. Report on Behalf of the Royal College of Anaesthetists

During the COVID-19 pandemic 2020 the Royal College of Anaesthetists have closed their offices in Churchill House, Central London but the functions of all departments have continued with staff working remotely from home. No staff have been furloughed, a few redeployed mostly to the Comms team. The current plan is to re-open Churchill House on the 1st September subject to adequate reorganisation of staff workstations to allow for “social distancing”.

Prior to lockdown a new CEO had started in January: Jono Bruun joined from the British Pharmacological Society.

There have been a number of developments during the pandemic that have affected work previously reported to the APA.

Each is described by directorate:

Education, Training and Examinations.

This directorate was heavily affected, as a lot of its work is face-to-face. All educational meetings have been postponed up until September and beyond with many being rescheduled for 2021. Some are being run on-line as webinars/seminars. Likewise all examinations have been postponed but the exams committee is exploring options for “remote proctoring” (on line with someone watching for cheating) of written and possibly oral examinations for the near future.

Training has been severely affected as well; under the direction of the GMC all rotations were suspended but they will recommence at the end of this month. Recruitment to CT posts has been conducted remotely and there should be a cohort of new starters in August, although there remains doubt about the conduct of the IAC.

The introduction of the new curriculum, which contained some significant changes for paediatric anaesthesia, has been postponed for 1 year.

Clinical Quality and Research.

Again much of this work is face-to-face. ACSA visits and Invited Reviews have been halted until alternative ways of conducting them can be worked out. Some research projects have also been halted such as CASAP and Little Journeys although they plan to restart soon. Much of this directorate’s work was refocused to producing a comprehensive library of documents to support anaesthesia and intensive care during the COVID 19 pandemic. This can be found at: <https://icmanaesthesiacovid-19.org/>

This resource has been hugely successful in producing contemporaneous, well-researched and accurate information. It has been accessed from almost every nation on the planet. The APA has contributed to a number of documents referencing the care of children.

Just prior to lockdown the HSIB published a report into the unfortunate death of a child under GA in an MRI scanner. I have had communication with the principle investigator, Andy Collon and both the APA and the RCOA will be contacted later in the year for acknowledgement of the report and a plan of action for its recommendations.

Communications and External Affairs.

This directorate has been extremely busy during the pandemic and has done an extraordinary job keeping the specialty in the public eye and pressing the image of the College. There have been too many high profile comms to list.

Finance and Resources.

Clearly the college has incurred expenses that were unpredicted at the turn of the year but it remains well resourced. The team are confident that the College will return to full function with little long term financial impact.

Russell Perkins

b. Report on Behalf of PICS

1. PICS COVID guidelines

PICS have published a number of COVID related guidelines which are linked to from a dedicated page on their website:

<https://picsociety.uk/covid19/>

This includes the paediatric airway guidelines that the APA gave advice on:

https://static1.squarespace.com/static/5e6613a1dc75b87df82b78e1/t/5e8b0a6406e7117ae541572a/1586170470089/Paediatric-Airway-Guidelines_01.04.20.pdf

<https://icmanaesthesiacovid-19.org/covid-19-paediatricairwaymanagement-principles>

2. PICS is transitioning to PCCS

PICS is in transition to Paediatric Critical Care Society with the PCCS site now live:

<https://pccsociety.uk>

3. PCCS app in development

PCCS is creating an app: PCCS Hub. Release date is to be confirmed

4. PICSTAR and PATRN

The PCCS trainees' research group (PICSSTAR) has been in communication with PATRN with the view of collaborating.

15. National reports

A. APAGBI Report from Scotland

This has been an eventful year! Staffing paediatric anaesthesia has been challenging with the impact of pension tax charges resulting in experienced staff reducing their sessions, the concerns over the structure of training to ensure we can prepare the next generation of designated paediatric anaesthetists and now everything disrupted by the pandemic of Covid-19.

The Scottish Paediatric Anaesthetic Network hosted an enjoyable joint SPAN/APA linkman meeting in Edinburgh on 4th November 2019. The meeting was well attended with quality presentations, and the opportunity to network over the poster presentations. A special thanks go to Dr Nimmi Soundararajan who has been the APA linkman lead, and this was her final meeting before handing over to the next APA linkman.

Sadly the spring 2020 SPAN meeting which was planned for Glasgow had to be cancelled due to the coronavirus outbreak. Similarly the MEPA-FC course at Forth Valley Royal Hospital and the SAFE(UK) course in Aberdeen had to be cancelled.

Congratulations are in order for Professor Tom Engelhardt who has taken up the head of paediatric anaesthesia in Montreal, Canada. His contributions to SPAN and the APA will be missed.

The new children's hospital in Edinburgh was due to have opened in July 2019. Unfortunately the hospital failed microbiology testing prior to its opening, and the ventilation and drainage has been found not to meet requirements. The move to the new hospital was cancelled days before the scheduled transition, and the old hospital remains in use. The NHS is paying £1.4 million per month for the new building, despite not being able to move in.

Enquiries as to whether it would be possible to have a Scottish equivalent process to the Certificate for Honorary Practice in England remain unfulfilled. Requests for consideration have made to local MSPs and within the Scottish National Services Division. Arranging refresher experience for DGH consultant anaesthetists remains a paperwork challenge.

There are differences in the ease of arranging tertiary training in paediatric anaesthesia for prospective Designated Paediatric Anaesthetists (especially for the District General Hospital environment) depending on the health board. Arranging suitable 6-month training blocks in paediatric anaesthesia is more difficult in Tayside and Grampian, and easier in Glasgow. This has been discussed with the Scottish Training Programme Directors, but the funding for trainees depends on NHS Education Scotland. NHS Education Scotland has been approached by SPAN to consider addressing this issue, and their reply is awaited. The Royal College of Anaesthetists Scottish board has also been informed of these discussions.

Dr John Rutherford, Dumfries & Galloway Royal Infirmary

B. APAGBI Report from Wales

COVID-19

The more densely populated south Wales corridor and parts of north-east Wales have been severely impacted by the pandemic with several of the Health Boards serving post-industrial valleys and south-east Wales reporting the highest death rates per 100,000 population in the UK.

Mercifully the adult ICU occupancy rates, which at one point were running at >300% capacity in one local hospital have now eased. The pandemic seems to be running a course several weeks behind London in particular, such that easing of lockdown arrangements and any restoration of adult and paediatric surgical services will, of necessity be some weeks behind areas in England.

Emergency tertiary paediatric surgical services have continued in the Children's Hospital for Wales throughout the pandemic, pretty much unaffected by the adult activity in the co-located University Hospital. Anecdotally we can report some late presentations for conditions such as appendicitis, though a more rigorous examination of caseload evidence would be required to formulate any meaningful conclusions.

Along with all Children's Hospitals we are working on local arrangements to restore surgical services in as safe a manner as possible for staff, children, young people and their parents and carers.

PAGW

The 2019 Annual Scientific Meeting (ASM) was held at the Coldra Court Hotel, Newport on Friday 8th November. This was a joint meeting, and the first, with the Welsh Paediatric Society (WPS). The meeting ran successfully, and we hope that this liaison with the WPS could be the start of a useful partnership.

PAGW has enjoyed joint meetings for the past 3 years and following discussion at the AGM it was felt that the 2020 meeting should concentrate on a purely paediatric anaesthesia agenda. With this in mind the intention is to plan a "back-to-the-roots" PAGW ASM in a mid-Wales location, most probably Llangammarch Wells. This is scheduled for the usual autumn term slot though planning for this is on hold until the consequences from COVID-19 play out. If the ASM does take place the 2020 meeting will see the first eponymous PLJ lecture, named after one of the founder members of the organisation, Dr Peter Lloyd Jones. In addition, we intend to more widely publicise the Dr Isabel Aguilera travel bursary (named after our much loved and departed former colleague in the Children's Hospital for Wales) over the course of 2020.

Dr Monica Chawathe (Bridgend) has taken over as President and Dr James Farrant (Swansea) has taken on the role of Honorary Secretary.

There has been no progress on the development of a new website.

Cardiff APA ASM May 2022

The impact of cancellation of the London ASM due to COVID-19 means that subsequent ASMs will be moved on by one year. This means that the Cardiff meeting will now be held in 2022. The dates will be confirmed with the venue in due course. This meeting is planned to be a joint meeting with SPANZA in a reciprocal arrangement following the 2019 SPANZA/APA meeting in Brisbane. Due to the change in date this will also need to be revisited.

The JR lecturer has been confirmed as Dr Richard Harris (Anaesthetist and cave-diver for the Thai cave rescue in 2018). I hope that we will be able to retain this stunning presentation for 2022.

Clearly initial thoughts that the 2022 Linkman meeting might be held in Cardiff are now in abeyance though this location will remain an option for a meeting in the future.

NHSE Reviews and the Celtic fringe

I have raised the prospect of the devolved nations being left behind as funded ODN development takes place in the England regions in my President's Annual report. This is a topic that I will need to pursue post-COVID.

Chris Gildersleve

REGISTERED COMPANY NUMBER: 05933974 (England and Wales)
REGISTERED CHARITY NUMBER: 1128113

REPORT OF THE TRUSTEES AND
UNAUDITED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2019
FOR
A P A G B I LIMITED

A P A G B I LIMITED

CONTENTS OF THE FINANCIAL STATEMENTS
for the Year Ended 31 DECEMBER 2019

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REPORT OF THE TRUSTEES
for the Year Ended 31 DECEMBER 2019

The trustees who are also directors of the charity for the purposes of the Companies Act 2006, present their report with the financial statements of the charity for the year ended 31 December 2019. The trustees have adopted the provisions of Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015).

OBJECTIVES AND ACTIVITIES

Objectives and aims

As per our governing document, the main purpose of the charity is to further the study of the science and practice of paediatric anaesthesia, and the proper teaching thereof, and towards this end:

Organise regular scientific meetings.

Promote original research in paediatric anaesthesia and encourage its presentation.

Provide expert advice to other professional bodies and interested parties on matters pertaining to paediatric anaesthesia.

Encourage national and international links with like-minded groups.

Collect and disseminate information regarding paediatric anaesthesia.

In shaping our objectives for the year and planning our activities, the trustees have considered the Charity Commission's guidance on public benefit.

Significant activities

During 2019 the Charity has held an Annual Scientific Meeting in Sheffield, to educate members and other interested anaesthetists in paediatric anaesthesia and to spread information about good practice. This was also the forum for presentation of new research.

During the year various sub committees have been working to improve educational material, develop guidelines for better patient care and to develop links with the National Institute for Academic Anaesthesia (NIAA), which will enable grants for research to be available more readily. The Charity has also been able to advise other bodies about paediatric anaesthesia.

Grantmaking

There were two research grants awarded during the year.

Volunteers

The Charity benefits greatly from the involvement and enthusiastic support of its many volunteers. In accordance with FRS 102 and the Charities SORP (FRS 102), the economic contribution of general volunteers is not recognised in the accounts.

ACHIEVEMENT AND PERFORMANCE

The Charity held a very successful and well attended scientific meeting. The Charity is developing new educational material for paediatric anaesthetists to improve the education of trainee doctors and for revalidation for consultants. There are a number of guidelines which have been presented and are being written up to promote evidence based best practice for members. There has been a number of times in which the opinion of the Charity has been sought for the NHS and other organisations.

**REPORT OF THE TRUSTEES
for the Year Ended 31 DECEMBER 2019**

FINANCIAL REVIEW

Financial position

The Charity's main source of income is membership subscriptions from its members which this year totalled £75,805 (2018 - £73,699) based on membership numbers of 1,050 (2018 - 1,048).

There are several payments that have been, or are about to be, paid that were expected such as two PATRN (trainee research) projects and a research grant award of £40,000 that we pay every two years. There has also been a general increase in the costs of venue hire and travel expenses (mainly rail) that impact upon the cost of running the Association.

We continue to subscribe to the Journal of Pediatric Anaesthesia as a membership benefit which costs £10,000 plus VAT per annum.

We plan to announce a modest increase of £5 per annum in the annual full member subscription and £3 in the reduced subscription rate from next year to help cover these increased costs. Our membership numbers have increased slightly and we have made some savings at this year's ASM in terms of audiovisual support that will hopefully help balance the books.

Reserves policy

It is the Trustees policy to operate at a surplus each year, wherever possible, and to use these reserves to make grants or donations as approved by the Council. At the year end the Charity held £434,012 in unrestricted funds.

FUTURE PLANS

The next annual scientific meeting will be held in London in 2020 although due to the COVID-19 pandemic we have had to postpone this. Depending on how our deposit is treated by the venues we have already booked, we are likely to suffer a financial loss due to this although we have the funds to withstand such a loss. This may in turn curtail our ability to make research grant awards in the time scale originally planned.

STRUCTURE, GOVERNANCE AND MANAGEMENT

Governing document

The charity is controlled by its governing document, a deed of trust, and constitutes a limited company, limited by guarantee, as defined by the Companies Act 2006.

Recruitment and appointment of new trustees

Elected Directors (Trustees) will be elected by postal ballot and be directors of APAGBI. All bar the Trainee Member shall be elected from the Full Members and Honorary Members of APAGBI. The Trainee Member will be elected from amongst the Trainees Members of APAGBI.

The Council will elect a President, a Secretary and a Treasurer, these will be known as "Special Office Holders". The President Elect, Immediate Past President, Immediate Past Secretary and Immediate Past Treasurer shall also be Special Office Holders. Special Office Holders shall also be Directors of APAGBI.

If an Elected Director is appointed a Special Office Holder, he shall cease to be an Elected Director, but remains a Director of the Company and an election for a replacement Elected Director will be held in accordance with Article 9.6 of the Articles of Association.

Organisational structure

The board of trustees together with co-opted members and a lay person form the council of the charity. The members of the council meet quarterly and have responsibility for all strategic decisions of the charity.

Induction and training of new trustees

The AAGBI ran a charity governance workshop in April 2019 of this year which all council members (trustees) were invited to. Three of us were able to attend and more will be encouraged to attend at this annual event from next year. The current president, the current secretary and the current treasurer attended this year.

REFERENCE AND ADMINISTRATIVE DETAILS

Registered Company number

05933974 (England and Wales)

REPORT OF THE TRUSTEES
for the Year Ended 31 DECEMBER 2019

Registered Charity number

1128113

Registered office

21 Portland Place
London
W1B 1PY

Trustees

Dr C Stack Immediate Past President
Dr C Gildersleve President
Dr A J Cranston Immediate Past Treasurer (resigned 6.6.19)
Dr C Dryden Home Member and meetings chair
Prof A Wolf Immediate Past President (resigned 7.6.19)
Dr M Thomas Treasurer and President Elect
Dr S Bew Home Member
Prof W Habre Overseas Member (resigned 20.1.19)
Dr K M Bartholomew Home Member
Dr P D Arnold Home Member (resigned 7.6.19)
Dr J H Smith Home Member
Dr J Nolan Home Member
Dr C Morrison Trainee Member (appointed 20.1.19)
Dr H Lonsdale Home Member (appointed 20.1.19)

Company Secretary

Dr S P Courtman

Independent Examiner

Thomas Barrie & Co LLP
Atlantic House
1a Cadogan Street
Glasgow
G2 6QE

Approved by order of the board of trustees on 24 March 2020 and signed on its behalf by:

Dr M Thomas - Trustee

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF
A P A G B I LIMITED

Independent examiner's report to the trustees of A P A G B I Limited ('the Company')

I report to the charity trustees on my examination of the accounts of the Company for the year ended 31 December 2019.

Responsibilities and basis of report

As the charity's trustees of the Company (and also its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of the Company are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your charity's accounts as carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5) (b) of the 2011 Act.

Independent examiner's statement

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe:

1. accounting records were not kept in respect of the Company as required by section 386 of the 2006 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a true and fair view which is not a matter considered as part of an independent examination; or
4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities (applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)).

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Martin Greig BA CA
Institute of Chartered Accountants of Scotland
Thomas Barrie & Co LLP
Atlantic House
1a Cadogan Street
Glasgow
G2 6QE

25 March 2020

A P A G B I LIMITED

STATEMENT OF FINANCIAL ACTIVITIES
(INCORPORATING AN INCOME AND EXPENDITURE ACCOUNT)
for the Year Ended 31 DECEMBER 2019

	Notes	2019 Unrestricted fund £	2018 Total funds £
INCOME AND ENDOWMENTS FROM			
Donations and legacies		199,744	209,520
Investment income	2	1,138	2,030
Total		200,882	211,550
 EXPENDITURE ON			
Raising funds	3	115,099	136,971
Charitable activities			
Research		42,158	27,386
Other		59,803	66,412
Total		217,060	230,769
Net gains/(losses) on investments		6,418	(342)
NET INCOME/(EXPENDITURE)		(9,760)	(19,561)
 RECONCILIATION OF FUNDS			
Total funds brought forward		443,772	463,333
 TOTAL FUNDS CARRIED FORWARD		434,012	443,772

The notes form part of these financial statements

BALANCE SHEET
31 DECEMBER 2019

	Notes	2019 Unrestricted fund £	2018 Total funds £
FIXED ASSETS			
Investments	5	107,966	101,548
CURRENT ASSETS			
Debtors	6	14,399	13,321
Cash at bank		325,274	356,017
		<hr/>	<hr/>
		339,673	369,338
CREDITORS			
Amounts falling due within one year	7	(13,627)	(27,114)
		<hr/>	<hr/>
NET CURRENT ASSETS		326,046	342,224
		<hr/>	<hr/>
TOTAL ASSETS LESS CURRENT LIABILITIES		434,012	443,772
		<hr/>	<hr/>
NET ASSETS		434,012	443,772
		<hr/>	<hr/>
FUNDS	8		
Unrestricted funds		434,012	443,772
		<hr/>	<hr/>
TOTAL FUNDS		434,012	443,772
		<hr/>	<hr/>

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 December 2019.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 December 2019 in accordance with Section 476 of the Companies Act 2006.

The trustees acknowledge their responsibilities for

- (a) ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006 and
- (b) preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

These financial statements have been prepared in accordance with the provisions applicable to charitable companies subject to the small companies regime.

The financial statements were approved by the Board of Trustees on 24 March 2020 and were signed on its behalf by:

M Thomas - Trustee

NOTES TO THE FINANCIAL STATEMENTS
for the Year Ended 31 DECEMBER 2019

1. ACCOUNTING POLICIES

Basis of preparing the financial statements

The financial statements of the charitable company, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) 'Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Companies Act 2006. The financial statements have been prepared under the historical cost convention, with the exception of investments which are included at market value, as modified by the revaluation of certain assets.

The presentation currency of the financial statements is Pounds Sterling (£).

The charitable company has taken advantage of the following disclosure exemptions in preparing these financial statements, as permitted by FRS 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland':

- the requirements of Section 7 Statement of Cash Flows.

Critical accounting judgements and key sources of estimation uncertainty

In preparing these financial statements, the trustees are required to make judgements, estimates and assumptions that affect the application of the Charity's accounting policies and the reported amounts of assets, liabilities, income and expenses. Actual results may differ from these estimates. Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to estimates are recognised prospectively.

There are no significant judgements or estimates used in the preparation of these accounts.

Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the item(s) of income have been met, it is probable that the income will be received, and the amount can be measured reliably.

Subscriptions

Income from subscriptions are recognised in the period to which they relate.

Delegate Income

Delegate income in relation to the attendance at the Annual Scientific Meeting is recognised in the period in which the meeting is held.

Expenditure

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Grants

Grants offered subject to conditions which have not been met at the year end date are noted as a commitment but not accrued as expenditure.

Taxation

The charity is exempt from corporation tax on its charitable activities.

Fund accounting

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

NOTES TO THE FINANCIAL STATEMENTS - continued
for the Year Ended 31 DECEMBER 2019

1. ACCOUNTING POLICIES - continued

Fund accounting

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Financial instruments

The charity has financial assets and financial liabilities of a kind that qualify as basic financial instruments.

Debtors

Short term debtors are measured at transaction price, less any impairment.

Cash and cash equivalents

Cash and cash equivalents comprise cash balances, including bank overdrafts that are payable on demand and form an integral part of the company's cash management.

Creditors

Short term trade creditors are measured at the transaction price. Other financial liabilities, are measured initially at fair value, net of transaction costs, and are measured subsequently at amortised cost using the effective interest method.

Provisions

Provisions are determined by discounting the expected future cash flows at a pre-tax rate that reflects current market assessments of the time value of money and the risks specific to the liability. The unwinding of the discount is recognised as finance cost.

2. INVESTMENT INCOME

	2019	2018
	£	£
Other fixed asset invest - FII	290	161
Deposit account interest	848	1,869
	<u>1,138</u>	<u>2,030</u>

3. RAISING FUNDS

Investment management costs

	2019	2018
	£	£
Portfolio management	290	39
	<u>290</u>	<u>39</u>

4. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2019 nor for the year ended 31 December 2018.

Trustees' expenses

	2019	2018
	£	£
Trustees' expenses	10,834	16,408
	<u>10,834</u>	<u>16,408</u>

During the year, 12 trustees received reimbursement of expenses for travel and accommodation costs.

In addition, the Charity received £960 in membership subscriptions from its Trustees.

A P A G B I LIMITED

NOTES TO THE FINANCIAL STATEMENTS - continued
for the Year Ended 31 DECEMBER 2019

5. FIXED ASSET INVESTMENTS

	Unlisted investments £
MARKET VALUE	
At 1 January 2019	101,548
Revaluations	6,418
	<hr/>
At 31 December 2019	107,966
	<hr/>
NET BOOK VALUE	
At 31 December 2019	107,966
	<hr/>
At 31 December 2018	101,548
	<hr/>

There were no investment assets outside the UK.

6. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2019	2018
	£	£
Other debtors	14,399	13,321
	<hr/>	<hr/>

7. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2019	2018
	£	£
Grants payable	8,000	24,000
Accrued expenses	5,627	3,114
	<hr/>	<hr/>
	13,627	27,114
	<hr/>	<hr/>

8. MOVEMENT IN FUNDS

	At 1.1.19	Net movement in funds	At 31.12.19
	£	£	£
Unrestricted funds			
General fund	443,772	(9,760)	434,012
	<hr/>	<hr/>	<hr/>
TOTAL FUNDS	443,772	(9,760)	434,012
	<hr/>	<hr/>	<hr/>

Net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	200,882	(217,060)	6,418	(9,760)
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL FUNDS	200,882	(217,060)	6,418	(9,760)
	<hr/>	<hr/>	<hr/>	<hr/>

A P A G B I LIMITED

NOTES TO THE FINANCIAL STATEMENTS - continued
for the Year Ended 31 DECEMBER 2019

8. MOVEMENT IN FUNDS - continued

Comparatives for movement in funds

	At 1.1.18 £	Net movement in funds £	At 31.12.18 £
Unrestricted funds			
General fund	463,333	(19,561)	443,772
TOTAL FUNDS	<u>463,333</u>	<u>(19,561)</u>	<u>443,772</u>

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	211,550	(230,769)	(342)	(19,561)
TOTAL FUNDS	<u>211,550</u>	<u>(230,769)</u>	<u>(342)</u>	<u>(19,561)</u>

A current year 12 months and prior year 12 months combined position is as follows:

	At 1.1.18 £	Net movement in funds £	At 31.12.19 £
Unrestricted funds			
General fund	463,333	(29,321)	434,012
TOTAL FUNDS	<u>463,333</u>	<u>(29,321)</u>	<u>434,012</u>

A current year 12 months and prior year 12 months combined net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	412,432	(447,829)	6,076	(29,321)
TOTAL FUNDS	<u>412,432</u>	<u>(447,829)</u>	<u>6,076</u>	<u>(29,321)</u>

A P A G B I LIMITED

NOTES TO THE FINANCIAL STATEMENTS - continued
for the Year Ended 31 DECEMBER 2019

9. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 31 December 2019.