

# Annual Review

For the period to  
30 September 2024

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## Published by the Obstetric Anaesthetists' Association (OAA)

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# About the OAA

The Obstetric Anaesthetists' Association (OAA) is a specialist membership organisation that provides an authoritative voice on safety in maternity services through leadership, education, information and guidance.

## Our core activities



### Educating

We hold a number of meetings and courses throughout the year for anaesthetists and other health professionals. OAA members enjoy discounted rates and are granted online access to lectures, podcasts and reports.



### Patient information

We run and fund a public information website [LabourPains.org](https://labourpains.org) on obstetric anaesthetic practice, including looking at the pain relief options for labour. Our information is freely available in over 30 languages.



### Best practice

We share guidance on best practice and conduct surveys with our members to better understand how obstetric anaesthesia is delivered.



### Grant giving

We provide grants to members to encourage research into practice and care that will inform and improve future practice.



### Benchmarking

We support our members to measure and compare the quality of care provided in their hospitals so it can be better understood how care can be improved locally and nationally.



### Global expertise

We provide a voice for obstetric anaesthetists by representing our speciality nationally and internationally, engaging with other healthcare organisations and governmental agencies.



# Welcome from our President



It gives me great pleasure to welcome you to the 2023–2024 Annual Review of the Obstetric Anaesthetists' Association. Looking back over the past year, I feel immense pride and gratitude for all that the OAA has achieved, and for the unwavering commitment and energy of our members, committee volunteers and supporters who make our work possible.

Throughout the past year, we built on the OAA's proud tradition of leadership, education and advocacy in obstetric anaesthesia. Whether through our educational events, updated clinical guidance, research funding, or the trusted patient information we provide through LabourPains, we remained steadfast in our mission: to support anaesthetists and improve care for women, birthing people, and their babies. That mission feels more vital than ever.

Our subcommittees continued to deliver impressive and wide-ranging work. A highlight was the launch of the Obs QRH app – a major investment for the OAA that reflects our commitment to supporting our members in delivering safe, high-quality care. This practical tool quickly proved a valuable resource for anaesthetists and the wider maternity care team. It has the potential to improve clinical practice across obstetric anaesthesia and beyond. Alongside this, we published new guidance on intrathecal catheter management and made major updates to the LabourPains website to improve accessibility and public engagement. We also awarded over £90,000 in research and quality improvement grants to support innovation.

The Annual Scientific Meeting, held in Birmingham in May, was once again a highlight. With over 580 delegates and speakers from 15 countries, it was a celebration of learning, connection, and clinical excellence. It was also a chance to reflect on our shared challenges and priorities, including safety, sustainability, equity and innovation in obstetric anaesthesia. Thank you to everyone who made it such a vibrant and inspiring event.

The OAA remains actively involved in national discussions around the quality and safety of maternity care. We continue to advocate for stronger recognition of obstetric anaesthetists' roles within the wider system. Through our collaborations with NHS England, the Professional Records Standards Body, and other national partners, we are ensuring that obstetric anaesthesia is accurately represented in maternity data and decision-making. A key part of this effort is our leadership on the Obstetric Anaesthetic Standard (OAS) project, which aims to define and standardise the essential information that should be documented about obstetric anaesthetic care. This work is crucial – not only for clinical communication and safety, but also to ensure our profession's impact is fully acknowledged across maternity care.

**“The strength of the OAA lies in its connections between professionals, organisations, and, most importantly, the people who give care and those who receive it.”**

Of course, none of this happens in isolation. The strength of the OAA lies in its connections between professionals, organisations, and, most importantly, the people who give care

and those who receive it. That's why our public-facing work through **LabourPains.org** remains so important. Clear, accessible, and compassionate information empowers parents to make informed choices and feel supported at every stage of childbirth.

At the heart of the OAA is you, our membership – a community of clinicians, educators, researchers and advocates who share a common purpose and passion. Your contributions, whether through teaching, surveys, research, or simply showing up and engaging, are what keep the OAA thriving. Thank you for your ongoing support. Your energy and commitment drive us forward. Keep connecting, contributing, and sharing your ideas. Support us so we can support you, and together, we'll keep raising the standard of obstetric anaesthesia care for our patients and each other.

Looking ahead, I'm excited about the future. The OAA is becoming more digital, more diverse, and more outward-looking, while staying true to its values. We aim high but remain grounded in evidence, safety and inclusion.

I sincerely thank the Executive Committee and our Subcommittees. Their dedication and teamwork shape a wide-reaching programme that reflects our specialty's changing needs. From grants and guidelines to digital innovation and public communications, their achievements this year have been outstanding. I'm also deeply grateful to Dr Jim Bamber, our Honorary Treasurer, and Dr Sarah Armstrong, our Honorary Secretary. The OAA is fortunate to benefit from their expertise, good humour and unwavering commitment.

To every member of our community, thank you. Your curiosity, care and continued support mean the world. It's an honour to serve as your President, and I look forward to the journey ahead.

With warmest wishes,

**Nuala Lucas**

President, Obstetric Anaesthetists' Association

## Trustees and Executive Committee members

at 30 September 2024

**President** Dr N Lucas

**Honorary Secretary** Dr S Armstrong

**Honorary Treasurer** Dr J Bamber

### Trustees

Dr M Broom  
Professor S Devroe (appointed 10 May 2024)  
Dr G Crossingham  
Dr C Grove  
Professor R Kearns (appointed 10 May 2024)  
Dr N Kennedy (appointed 10 May 2024)  
Dr C Kenyon  
Dr K MacLennan  
Dr Y Metodiev  
Dr C Phillips (appointed 10 May 2024)  
Dr R Sodhi  
Dr Sundaram  
Dr N Tageldin

### Committee members (non-voting)

#### International Members representative

Professor M Van de Velde

#### Royal College of Anaesthetists (RCOA) representative

Dr F Laat

#### Education Subcommittee co-opted member

Dr Damien Hughes

#### Research and Grants Subcommittee co-opted member

Dr Robin Russell

### Bankers

#### National Westminster Bank plc

149 Church Street, Barnes, London SW13 9HS

#### Scottish Widows

15 Dalkeith Road, Edinburgh EH16 5BU

### Auditors

#### Moore (South) LLP

Priory House, Pilgrims Court,  
Sydenham Road, Guildford, Surrey GU1 3RX

### Investment Managers

#### Charles Stanley & Co. Limited

55 Bishopgate, London EC2N 3AS



# Obstetric Anaesthesia Annual Scientific Meeting 2024



With its blend of science, practical learning and a vibrant community, the Annual Scientific Meeting proved, once again, to be a cornerstone event for members.

The ASM was a highly engaging and invigorating two-day event that brought together clinicians, researchers and thought leaders in obstetric anaesthesia. Held between 9-10 May 2024, the programme offered a rich mix of scientific insight, practical updates and meaningful networking opportunities.

The event opened with a welcome from Dr Nuala Lucas, setting the stage for a packed agenda. The first session focused on recent advances in labour analgesia and anaesthesia for operative delivery, with compelling talks from Dr James O'Carroll and Dr Seema Quasim. The morning continued with a powerful session addressing real-world challenges on the labour ward. Talks on sustainability in obstetric practice by Dr Cliff Shelton and Dr Rebecca Knagg, and a presentation by Dr James Geoghegan on navigating clinical adversity, sparked lively discussion.

The day also featured the Felicity Reynolds Free Papers, showcasing innovative research from rising voices in the field. A highlight was the session on new OAA guidance, including Dr Sarah Griffiths' talk on managing inadvertent dural puncture and a thought-provoking presentation by Dr May Pian-Smith on fostering trust and teamwork. Dr Lucas returned to share key messages from NAP7, emphasising safety and quality in obstetric anaesthesia. The day concluded with the first round of ePoster presentations and a well-attended networking reception.

“First time I've attended a conference with ePosters. Great initiative that works really well.”

“Interesting, diverse and relevant presentations with helpful points for application into day-to-day clinical practice.”

Day two opened with more ePosters and another round of the Felicity Reynolds Free Papers, reinforcing the strong academic calibre of the meeting. Dr Ed Mullins and Dr Ed Miles delivered insightful sessions on maternity data and improving care for planned caesarean deliveries. The Bruce Scott Lecture, delivered by Dr Tony Kelly, was a standout, focusing on improving the management of maternal deterioration – a crucial issue in patient safety.

“Fascinating and informative presentation on UK maternity data.”

The afternoon featured a lively debate on whether ultrasound should become standard for all neuraxial blocks, with Dr Neel Desai and Dr Rosie Hogg presenting opposing views. The final sessions included highlights from poster presentations, prize giving and closing remarks from Dr Lucas, bringing the meeting to an inspiring close.

Members can catch up on all the lectures and presentations on the OAA website [oaa-anaes.ac.uk](http://oaa-anaes.ac.uk)

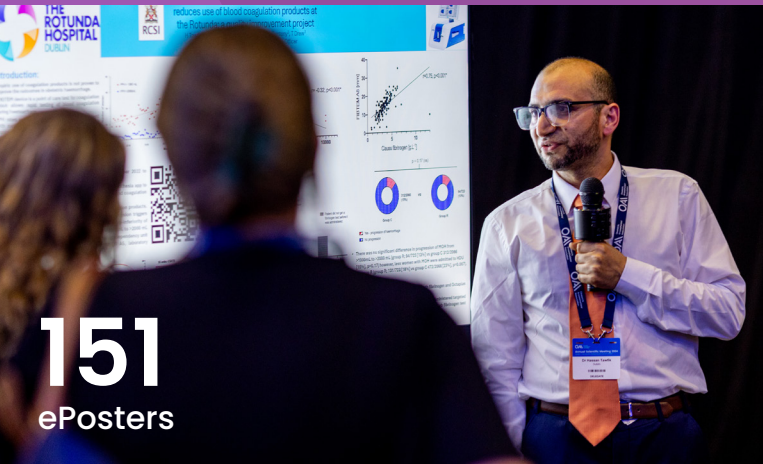
## ASM 2024 in numbers



**584**  
delegates  
and speakers  
from 15 countries



**11**  
exhibition  
stands



**151**  
ePosters



**10**  
Felicity Reynolds Prize presentations



# Updates from our Subcommittees

## 2023/24

The OAA provides leadership in the quality improvement of obstetric anaesthetic care through its subcommittees: Research and Grants, LabourPains, Education, Guidelines, Quality and Outcomes, Surveys, and Communications.

### Research and Grants Subcommittee

The OAA continues to promote research and education through funding grants and bursaries. The OAA also funds numerous education and travel bursaries, including bursaries for medical student elective studies.

#### OAA Grant Awards 2023–2024

There were two rounds of peer-reviewed grant applications in 2023–2024.

In September 2023, we received one Large Research Grant application, one Small Research Grant application, five Quality Improvement & Innovation (QI&I) Grant applications, and two Travel Bursary applications. Following peer review, one Small Research Grant was awarded, along with two QI&I Grants.

In April 2024, we received applications for three Large Research Grants, two Small Research Grants, four QI&I Grants, and one Travel Bursary



**282%**

increase in the value of grants awarded.

for the OAA Annual Scientific Meeting (ASM). After review, one Small Research Grant was awarded, along with two QI&I Grants, and one Travel Bursary for the OAA ASM. The OAA also transferred funds to the Global Anaesthesia Development Partnerships / Zambia Anaesthesia Development Partnership.



**Overall, the OAA awarded £90,699.24 in grants, up from £23,730 in 2022–2023.**

Award Date	Grant Type	Name of Person/Hospital	Amount
04/09/2023	International	Global Anaesthesia Development Partnerships/ZADP	£15,000.00
15/12/2023	Small Grant	Placental Transfer of Sugammadex Dr Blesser, Leuven	£5,000.00
15/12/2023	Quality Improvement	Ethnic Disparities in Obs Anaesthesia Dr Hinton, Oxford	£19,942.15
15/12/2023	Quality Improvement	Wechsler IQ after prenatal GA Dr Devroe, Leuven	£8,843.09
24/03/2024	Travel Bursary	ASM Bursary Dr Dhar	£1,000.00
10/06/2024	Quality Improvement	Fetal Rabbit Anaesthesia Neurotoxicity Dr Brenders, Leuven	£19,908.00
10/06/2024	Quality Improvement	Assessment of Virtual Reality Training Dr Fukuta, Bristol	£16,190.00
24/06/2024	Small Grant	PRIOOC Dr Desai, London	£4,786.00
TOTAL			£90,699.24





>  
**2024 focus:**  
 Improving clarity,  
 accessibility and  
 reach of resources.

## LabourPains Subcommittee

The LabourPains Subcommittee leads on communications with the general public – a vital part of the OAA’s mission to deliver public benefit through trusted, accessible resources. The LabourPains website, [labourpains.org](https://labourpains.org), is a key platform for providing clear, reliable information to parents about anaesthesia and pain relief during childbirth.

In 2024, the LabourPains Subcommittee focused on improving the clarity, accessibility, and reach of its public-facing resources. All existing text materials are being reviewed and refined for readability and consistency, with support from a professional copy editor. Once complete, these resources will be translated into multiple languages and published on the LabourPains website.

To support better communication across platforms, the OAA also contracted a social media consultant and commissioned new photography and illustrations designed to reflect inclusivity and connect more effectively with the public, members, and the wider healthcare community.

The LabourPains social media accounts, including Instagram, are regularly updated and website analytics are used to monitor engagement and reach. A redesign of the LabourPains website is also underway, with a web design team tasked with making translated content easier to access and navigate for both professionals and the public.

## Education Subcommittee

The Education Subcommittee continued to support the OAA’s mission to deliver high-quality education and training for obstetric anaesthetists and allied professionals. This included a packed programme of events, new resources and collaborative projects.

A highlight was the publication of the [Obstetric Anaesthetists’ Quick Reference Handbook \(Obs QRH\)](#), a practical collection of action cards for clinical emergencies. Led by Dr Kirsty MacLennan, this project received wide recognition and was shortlisted for a 2024 HSJ Award. To ensure accessibility, the OAA commissioned an app version of the handbook for iOS and Android.

The OAA’s flagship events also remained popular. The Annual Scientific Meeting 2024 was held at the ICC in Birmingham, attracting 584 delegates and speakers for two days of lectures, panel discussions, and poster presentations ([see pages 6–7](#)).

>  
**New app**  
**Quick Reference**  
**Handbook**  
**launched.**



The 2023 Three-Day Course welcomed 330 delegates and featured 27 speakers, continuing to provide valuable education and networking opportunities.

Joint educational meetings with other professional bodies also remained a core part of the calendar. A one-day meeting with the British Society of Haematologists in October 2023 brought together 119 delegates and 14 expert speakers.

To make learning more accessible, the OAA improved how members access event recordings by launching a new digital platform. Recordings from the past five years are now hosted on a streamlined Vimeo platform and available to all members.

Despite increasing competition in the educational event space, the OAA remains focused on delivering high-quality content and maintaining strong delegate engagement.





## Guidelines Subcommittee

The Guidelines Subcommittee continued to strengthen the OAA's role in shaping national clinical standards. In 2024, it focused on developing good practice guidance in areas not yet covered by existing national or international guidelines. The first of these – on [the management of intrathecal catheters](#) – was published in *Anaesthesia* in September 2024 and has already been cited in the literature. Work is also underway on a guideline covering the use of remifentanyl for labour analgesia.

Additionally, OAA Executive Committee members contributed to the obstetric anaesthesia chapter in the *Guidelines for the Provision of Anaesthetic Services*, and provided expert contributions to the development of other national and international guidelines.

>  
**New guidance on best practice**  
on areas not covered by existing guidelines.

## Quality and Outcomes Subcommittee

The Quality and Outcomes Subcommittee (QOSC) continues to represent obstetric anaesthesia in national conversations around maternity safety. As part of NHS England's Maternity and Neonatal Outcomes Group (set up in response to the [Reading the Signals](#) report), the QOSC has advocated for better recognition of obstetric anaesthesia within national safety measures. They've highlighted gaps in routine data collection and pushed to include anaesthesia care indices in a future national measurement tool. This message has been reinforced through published letters, formal submissions to the Royal College of Anaesthetists, and ongoing engagement with key stakeholders.

With backing from the OAA Executive Committee, the QOSC also secured funding to work with the Professional Records Standards Body on developing a national anaesthesia dataset for maternity care. This will build on the legacy of the National Obstetric Anaesthetic Database (NOAD) and previous OAA research into key quality indicators.

>  
**New survey system**  
Creating a better process for all users.

## Survey Subcommittee

The Survey Subcommittee continues to support high-quality research by coordinating peer-reviewed surveys on topics relevant to obstetric anaesthesia. These surveys provide valuable insights to help improve clinical practice.

In 2024, the OAA launched a new and improved [survey platform](#), built using SurveyMonkey and replacing the older system which had limited functionality. Since its launch, 15 surveys have been submitted, and eight approved for circulation to the membership. The new system has made the process smoother for both submitters and reviewers, strengthening the OAA's role in supporting member-led research.

The OAA also continued to fund the open-access publication of its guidelines to support the wider dissemination of important clinical resources. This included the publication of [Intrathecal catheter placement after inadvertent dural puncture in the obstetric population: management for labour and operative delivery](#), published in *Anaesthesia* in September 2024.

## Communications Subcommittee

The Communications Subcommittee continued to enhance the OAA's engagement with its members, the wider healthcare community and the public. In 2024, the OAA invested in professional support by contracting a copy editor and social media consultant to improve the clarity and reach of its communications across its main website and social media channels. New photographs and illustrations were commissioned to reflect a more inclusive and accessible approach to the OAA's communications. Website analytics are regularly reviewed to better understand audience engagement.

## OAA outreach in 2023-2024

The OAA continued to strengthen its outreach efforts by reconnecting with regional obstetric anaesthesia societies through the revitalised Regional Societies Liaison Group (RSLG). The group is now active again after a pause during the pandemic, helping to build stronger links and share best practices across the UK.

The OAA also remains involved in several national public health initiatives, with representation on steering committees such as the UK Obstetric Surveillance System, *Each Baby Counts* and MBRRACE-UK. The organisation continues to be a trusted voice for its members, the public, and professional and governmental bodies.



# Report of the Executive Committee



The Executive Committee who are the Directors of the Charitable Company (and Trustees under the Charities Act 2011) present a summarised report along with a financial review of the Charity for the period ended 30 September 2024. The full Trustees' Report and Financial Statements can be viewed on the [OAA website](#).

## Governing document

The Obstetric Anaesthetists' Association (OAA) was formerly an unincorporated association formed under a constitution adopted on 26 March 1976, as amended on 23 April 1999, and registered as a Charity under number 272190.

On 18 August 2005, a company limited by guarantee was incorporated and granted charitable status on 20 September 2005 (Registered number 1111382). On 1 October 2005 the assets and activities were transferred from the unincorporated association to the new company.

The Memorandum and Articles of the OAA were updated in June 2009 to take account of the Companies Act 2006.

## Aims and objectives

To promote the highest standard of management and care for women and people who have given birth, and their babies, through practice, education and training in obstetric anaesthesia or research in obstetric anaesthesia.

## Trustees and co-opted Executive Committee members

At the AGM on 10 May 2024, Professor Sarah Devroe, Professor Rachel Kearns, Dr Natasha Kennedy, Dr Caroline Phillips and Dr Noah Tageldin were elected as Trustees. On 10 May 2024, Dr Rachel Collis, Dr Sarah Griffiths, Dr Damien Hughes and Dr Anna Wilkinson stepped down at the end of their terms.

Professor M van de Velde was co-opted to the Executive Committee as International Members Representative, and Dr F Plaat continues as the Royal College of Anaesthetists (RCOA) representative. Dr Damien Hughes and Dr Robin Russell were also co-opted to support the Education and Research & Grants Subcommittees.

## Membership

The OAA currently has five classes of members:

### 1. Ordinary Members

Medical practitioners practising in the UK or overseas.

### 2. Associate Members

Individuals who are not medical practitioners but are interested in the objectives of the OAA and are admitted by the Executive Committee at its discretion.

### 3. Honorary Members

Individuals elected by ordinary members at the AGM having first been nominated by a resolution of the Executive Committee.

### 4. Retired Members

Ordinary members may become retired members.

### 5. Foreign Associate Members

Medical practitioners practising in a reduced-fee country as designated by the OAA.

All members can attend and speak at general meetings, but only ordinary members can vote.

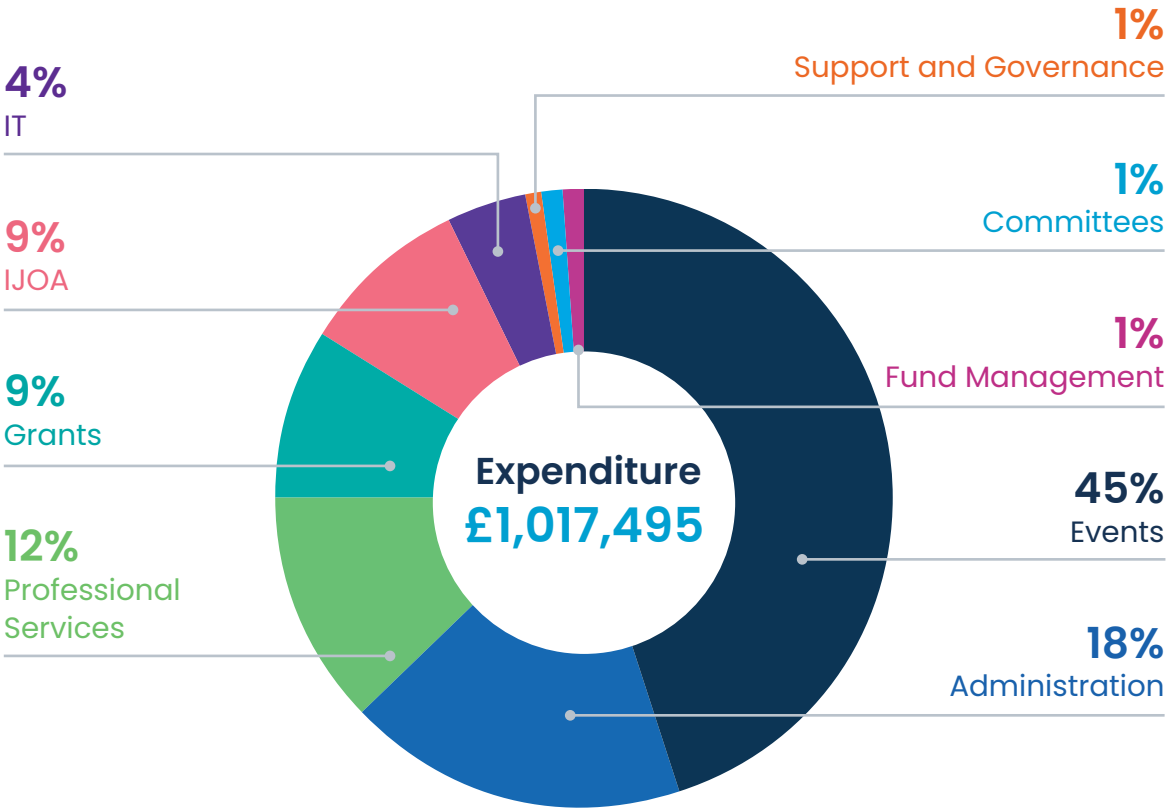
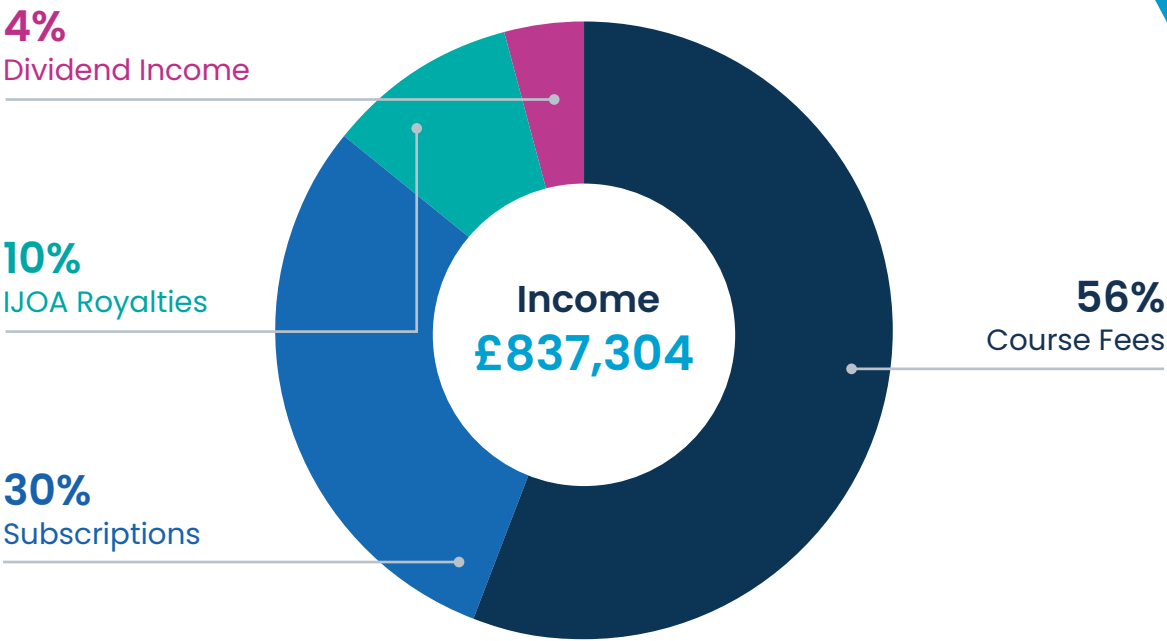






# Financial review

Opposite is a summary of our expenditure and income financial review for 2023/2024. These graphics show the percentage breakdown of our total income and expenditure.



These summarised financial statements may not contain sufficient information to gain a complete understanding of the financial affairs of the OAA. The full statutory Trustees' Report submitted to the Charities Commission and Companies House with financial statements and auditors' report are available on our [website](#).



## Investment policy

The OAA's investment policy is for its portfolio of investments to be managed on a 'medium-low' risk basis for long-term growth without investing in companies whose prime area of business is tobacco, gambling or armaments. For the year ended 30 September 2024, the investment portfolio had a net portfolio return of 11.55% compared to a loss of 9.76% in the previous 12 months. The OAA investment portfolio managed by Charles Stanley has an MSCI ESG (environmental, social and governance) rating of AA.

There are no restrictions on the OAA's power to invest. The Executive Committee is responsible for investing any amounts surplus to the organisation's immediate requirements as they deem fit. Investment brokers Charles Stanley actively manage these investments.

## Reserves policy

The OAA keeps a healthy level of unrestricted funds, some of which are set aside to support research and other grant initiatives. Currently, our potential liability for grant awards is around £211,500 a year, though actual spending depends on the number and quality of applications, which varies from year to year. We regularly review our grant policy to make sure funds are used where they'll have the biggest impact on patient care and to ensure our spending remains sustainable.

We also keep enough in reserves to cover our current commitments in case of unexpected changes in income, and to invest in future projects that align with our goal of improving obstetric anaesthesia care. Recent economic

challenges, from the aftermath of the pandemic to the war in Ukraine and ongoing inflation, have shown the importance of this cautious approach, especially as our investments are subject to global market fluctuations. Rising costs for events and the pressure of the cost-of-living crisis on members also make future income harder to predict. Since our income mostly comes from membership fees and surplus from educational events, our reserves give us financial stability and peace of mind.

Since 2017-18, we've used these unrestricted funds to cover grants and admin costs, and to invest in modernising our digital platforms. That transformation project wrapped up in February 2024, and its costs now appear as annual amortisation in our accounts. With the project complete, we're now reviewing our cash flow to make sure we're making the most of the money we hold.

To support maternal care globally, we've also funded education for obstetric anaesthetists in other countries and backed quality improvement projects in collaboration with national bodies like the National Perinatal Epidemiology Unit and the Professional Records Standards Body.

Our reserves for 2023/2024 were £1.4 million which is slightly less than our reserves policy to hold £1.5 and £1.9 million – intended to cover projected spending in research and other projects for next 3–5 years. This policy is to mitigate the risk to OAA activities by decreased future income from courses and membership or unexpected expenditure. We keep this policy under regular review.

## Risk management

The Executive Committee regularly reviews organisational risks and systems, with guidance and support from the Secretariat, provided by the Association of Anaesthetists. The rollout of new membership and event management systems also helps ensure strong compliance with General Data Protection Regulation (GDPR).



## Future plans

The Executive Committee is committed to ensuring the OAA continues to thrive by delivering high-quality courses and maintaining strong membership engagement. This approach underpins our mission to support the highest standards of care for mothers, birthing people, and their babies through excellence in practice, education, training and research in obstetric anaesthesia.

Looking ahead, the OAA is focused on developing existing and new resources to drive improvements in the quality and impact of obstetric anaesthetic care, in the UK and beyond. We'll also continue to work closely with partners to push for better recording of obstetric anaesthesia in national maternity datasets. This will help us turn ambition into action and further our goals for meaningful, lasting change.



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