

BRITISH BURN ASSOCIATION

NEWSLETTER: December 2017



Registered Charity No. 260167



MESSAGE FROM THE CHAIR

The twelve months since I wrote the last 'Message from the Chair' seem to have passed very quickly, but have brought their share of new triumphs, challenges and opportunities.

The 2017 Annual Scientific Conference was definitely a triumph. Jorge Leon-Villapalos and the Chelsea & Westminster team hosted an outstanding meeting on the theme of 'New Burn Technologies for Better Burn Care'. I thought the program had something new and interesting for everyone, with a range of excellent key speakers. This year's AB Wallace Lecture by Dr Sarah Smailes ('Wake up, Breathe and Move') was a highlight, capturing her long experience in respiratory therapy in burns critical care. Thank you to Sarah and to all speakers and presenters. Thank you also to Jorge and the Local Organising Committee who worked hard with the conference organisers (Conventus) to produce a very successful meeting.

The process of revising the National Burn Care Standards (NBCS) is both a challenge and an opportunity. The challenge is to produce a set of pragmatic Professional Standards setting out the essentials of modern burn care and highlighting the requirements of optimal treatment. Unlike previous versions of the NBCS these will be 'owned' by the BBA as the body most able to represent the burn care community in the UK. This major piece of work is being coordinated by Peter Saggars of NHS England, with clinical input from a working group of BBA members from all professional groups, selected by the boards of the four regional Operational Delivery Networks (ODNs). As current BBA Chair, I agreed to chair the Review Group.

The process presents a valuable opportunity for the BBA to provide a meaningful steer to the direction of UK burn care in coming years. I would encourage members not directly involved but who wish to voice their views, to contact their ODN representatives who are listed at the end of this letter. It promises to be hard work, but it is hoped that a final draft will be ready for discussion at the BBA Annual Conference in Swansea in April 2018.

Work on an updated and more flexible BBA website is progressing well. The new format looks fresher and promises to be more responsive than the last. Much of the content will be updated with additional, new material and resources where appropriate. There will also be a 'Members Area' for content not open to the public. Access will require you to confirm your registration as a BBA member. Launch of the new site is expected soon. Members wishing to contribute new content or volunteering to revise existing content should contact Nechama Lewis as soon as possible.

In the coming year, the Executive Committee will also need to address a significant change to the BBA's legal structure, from our current status as an unincorporated association to a charitable incorporated organisation (CIO). The reasons for this are complex (and rather dull if you're not a lawyer) but in essence, it will provide Trustees with better legal protection from liability and enable the Association to enter into contracts and agreements in its own right. While this change will have little or no effect on the ethos and running of the Association, it may well require constitutional changes requiring your approval. Once we have a clearer idea of what is required, I (or my successor) will contact you with the details.

As well as tackling these important new projects, the Executive Committee, Subcommittees and Special Interest Groups (SIGs) have continued their work in pushing forward the various projects that form the core purpose of the BBA. This year's Burn Awareness Day, Chemical Burns Education Day and Self-Harm Study Day are just a few examples of the excellent work members are doing. Thank you to all concerned.

EXECUTIVE COMMITTEE

Chair: Peter Drew

Deputy Chair: Clare McGrory

Secretary & Treasurer:

Darren Lewis

Committee Members

Victoria Dudman

Jane Leaver

Jorge Leon-Villapalos

Kayvan Shokrollahi

Kristina Stiles

Yvonne Wilson

BBA SUBCOMMITTEES

Prevention Subcommittee

Chair: Ken Dunn

Education Subcommittee

Chair: Jorge Leon-Villapalos

EMSB National Organiser

Nadeem Khwaja

Research Subcommittee

Chair: Yvonne Wilson

Communications Subcommittee

Chair: Kayvan Shokrollahi

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My term of office as Chair ends at the 2018 Annual Conference in Swansea, when both the Deputy Chair, Clare McGrory and I will be leaving the Executive Committee after eight years. Thank you to Clare for all her diligence and hard work, especially on the BBA's governance structure. I am happy to announce that Darren Lewis will be taking over as Chair, supported by Jane Leaver as Deputy Chair and Yvonne Wilson as Honorary Secretary / Treasurer. I know that the BBA will continue to thrive under their care and under the watchful eye of our fabulous manager Nechama Lewis, without who the BBA simply could not function.

Nadolig llawen a blwyddyn newydd dda (Merry Christmas and a Happy New Year)

Burn Standards Review Group Representatives

Name	Position	Network/Organisation	Service / Organisation
Peter Drew (BSRG Chair)	Consultant Burns Surgeon	BBA	Swansea
Ken Dunn	Consultant Burns Surgeon	IBID	Manchester
Cath Spoors / Peter Berry	Burns ITU / Anaesthetics	LSEBN	St Andrews Broomfield Hospital
David Barnes	Consultant Burns Surgeon	LSEBN	St Andrews Broomfield Hospital
Krissie Stiles	Network Lead Nurse	LSEBN	Queen Victoria Hospital
Lisa Williams	Clinical Psychologist	LSEBN	Chelsea & Westminster Hospital
Pete Saggars	LSEBN Network Manager	LSEBN	Chelsea & Westminster Hospital
Rachel Wiltshire	Network Lead Therapist	LSEBN	St Andrews Broomfield Hospital
Bruce Emerson	Consultant Anaesthetist	LSEBN	Chelmsford
Steven Cook	Midlands ODN Oversight Manager	MBODN	Queen Elizabeth Hospital Birmingham
Naïem Moïemen	Consultant Burns Surgeon	MBODN	Queen Elizabeth Hospital Birmingham
Tony Fletcher	Consultant Anaesthetist	MBODN	Nottingham University Hospital
Emily Tig Bridge	Senior Dietician	MBODN	Nottingham University Hospital
Claire Thomas	Midlands Nursing Representative	MBODN	Birmingham Children's Hospital
Elizabeth Chipp	Medical Representative	MBODN	Queen Elizabeth Hospital Birmingham
Laura Shepherd	Clinical Psychologist	MBODN	Nottingham
To be confirmed	AHP Physio / OT tbc	MBODN	To be confirmed
Jacky Edwards	Senior Burns Nurse	NBCN	Manchester
Jamie Yarwood	Consultant Intensivist	NBCN	Mid Yorks Wakefield
Jayne Andrew	Network Manager	NBCN	Sheffield Northern General Hospital
Kayvan Shokrollahi	Consultant Burns Surgeon	NBCN	Liverpool Whiston
Louise Johnson	Senior Physiotherapist	NBCN	Newcastle
Sarah Gaskell	Senior Psychologist	NBCN	Manchester
Bridie Grant	Clinical Psychologist	NBCN	Newcastle
Catrin Pugh	Patient Representative	NBCN	Liverpool
Amy Johnson	Senior Burns Nurse	SWUK	Salisbury
Janine Evans	Senior Occupational Therapist	SWUK	Swansea
Joanne Bowes	Consultant Anaesthetist	SWUK	Swansea
Jon Pleat	Consultant Burns Surgeon	SWUK	Bristol
Sharon Standon	Network Manager	SWUK	Bristol
Helen Watkins	Clinical Psychologist	SWUK	Swansea
Amber Young	Paediatric Anaesthetist	SWUK	Bristol
Chris Moran	Consultant Trauma Surgeon	Trauma CRG	Nottingham University Hospital
Kat Young	Programme of Care Lead	Trauma CRG	NHS England (South)
Peter Dziewulski	Consultant Burns Surgeon	Trauma CRG	St Andrews Broomfield Hospital

BBA Grants

Four different grants are available to BBA Members. These are ***The BBA Travel Grant, The Margaret Miller Travel Grant (for Nurses), the BBA Research Grant and a Grant for Research into Methods of Preventing Burn Injuries in the Home***. The terms of the BBA Travel Grant, the Margaret Miller Travel Grant, and the BBA Research Grant are that applicants need to have been a BBA Member for at least 12 months to be eligible to apply. Grants will not normally exceed £1,000 and further details and application forms for each grant can be found within the 'Education' section of the website, under 'Grants'. Details on the Grant for Research into Methods of Preventing Burn Injuries in the Home will be released to the Membership in the next few months.

Education Subcommittee

It is my pleasure to update the British Burn Association community through this newsletter on the activities of the Education Subcommittee.

Many distinguished colleagues from a multidisciplinary background elected to represent your burns educational needs met recently to discuss the lines of action of the Subcommittee.

I am honoured to welcome and introduce my colleagues Krissie Stiles, Nicole Lee, Sarah Bache, Stephen Benbow, Federica D'Asta and Karl Walsh as your educational team that I am delighted to chair.

The clinical background of this group ensures the representation of all burn colleagues in our efforts to expand and support Burns education.

The title for next year's Laing Essay, "Challenges of Burn Care Outside the Burns Unit" aims to ask your written thoughts regarding the way to best manage the burns patient outside a standard burns environment... at home, as an outpatient, after discharge... Please put pen to paper and contribute to expand the views of your colleagues.

Stephen Benbow will be organising what promises to be an extremely exciting Education Day with the following theme: "Pre-Hospital Management of Burns: Best Evidence and Controversies". Please save the date for February 22nd and 23rd 2018.

Simulation in Burn care is one of the big challenges tasked to the Subcommittee, and we wish to push this initiative with the experience of the group. Federica D'Asta has a vast experience in this field and we shall complement this with the job already in place in some burns services in the UK. We aim for this to become the backbone of a potential advanced burns course that takes acute management of the burn patient to a higher level complementary to that already provided by EMSB. Nicole Lee and her vast experience in teaching and training will pilot our initial efforts.

Sarah Bache and Karl Walsh will keep the trainees and students interested in burn care informed and connected with our activities.

Krissie Stiles has been extremely active in establishing consensus in some of the most controversial issues in burn care. Expect a consensus paper on the use of hydrogels in burn care and a collaboration with colleagues from Moorfields Eye Hospital to expand recommendations into the BBA first aid statement regarding how to best treat chemical burn eye damage.

We would like to hear ultimately from you to take burns education forward.

Please feel free to contact us with any initiatives you feel should be taken forward.

Jorge Leon-Villapalos, Education Subcommittee Chair

Laing Essay

Laing Essay Prize 2017:

'New Technologies in Burn Care: A Clinical Psychologist's Perspective of Opportunities for Advancing Psychosocial Care': Congratulations to winner Jennifer Heath, Centre of Appearance Research, UWE Bristol.

Laing Essay Prize 2018 now open to all involved in Burn Care:

The Essay, titled 'Challenges of Burn Care Outside the Burns Unit' should be of a maximum 5,000 words and in the style used by *Burns Journal*. An abstract of up to 150 words should also be provided with your Essay. Three referees, appointed by the BBA, will judge and award the winner £500. The prize-winning Essay will be eligible for publication in *Burns* at the discretion of the Editor.

Closing date for applications: 5pm on 31st January 2018.

The winner will be announced at the BBA Annual Conference, April 2018. For further information, email: info@britishburnassociation.org

Annual Conference London 2017: Prizes

The BBA had the pleasure of awarding six prizes this year in London. The Oral Presentation First Prize was generously supported by Scars, Burns and Healing Journal and awarded to David Wales, Kent Fire & Rescue Service for his presentation entitled "Human Behaviour in Dwelling Fires – the Public Experience". Joint winners were announced for the Oral Presentation Second Prize and these were Robert Dinsdale, Scar Free Foundation Birmingham Centre for Burns Research for his presentation entitled "Dysregulation of Neutrophil Extracellular Traps (NETs) following Thermal Injury" and Jennifer Heath, Centre for Appearance Research UWE Bristol for her presentation entitled "Developing Support Services for Parents of Burn-Injured Children; Novel Ideas Based on Parents' Experiences and Opinions about Peer Support".

This year the posters were divided into three categories. The best Burn Care Poster Prize was awarded to Gemma Walley and Tracey Foster, Pinderfields General Hospital for their poster entitled "Not All Dressing Changes have to be Traumatic"; the best Prevention Poster Prize was awarded to Janine Evans, Morriston Hospital for her poster entitled "Multi-Disciplinary Management of Lower Limb Burns: A Prudent Approach for Better Care"; and the best Research Poster Prize was awarded to David Rea for his poster entitled "Views and Experiences of Gypsy and Traveller Mothers on Burn and Scald Prevention".

Three runner ups were named – Edmund Farrar, Queen Elizabeth Hospital Birmingham for his poster entitled "A Retrospective Study Determining the Necessity of Portable Heating Devices During Transit between Theatre and ITU for Burns Surgery in Order to Prevent Hypothermia"; Kwang Chear Lee, University Hospitals Birmingham for his poster entitled "Propranolol Use in Adult Burn Patients and its Effects on Scarring: A One Year Audit"; and Leila Touil, Mersey Regional Burn Service for her poster entitled "The Psychiatric Burden of Burns in a Regional Centre: Cause for Concern".

The Burns Game:

Educational Board Game to Improve Core Burn Care Knowledge



The Burns Game was developed by **Focus Games Ltd.** in partnership with the **British Burn Association** and **Birmingham City University**. The purpose of the game is to bring key information about acute burns management in an engaging and interactive format. The game matches the core burn care competencies and knowledge requirements, which can be used for initial staff induction and follow up team training updates. The content covers the initial approach to management of burns of various aetiologies, severe and minor burn injuries, as well as the requirements for referral and transfer to a specialist burn service. The Burns Game is reflective of the advances in burns first aid, burn shock, inhalation injury and burn fluid resuscitation in line with EMSB and ATLS principles, and is attentive to the key elements of burn assessment and wound management.

The Burns Game delivers awareness, knowledge and practical burn care skills through face-to-face, reflective discussions, stimulated by questions and scenarios presented in the game. These conversations allow participants to explore and discuss new ways of working amongst their peers and to share their knowledge and experience to learn from each other.

'The Burns Game is an exciting and innovative way of broadening the knowledge base of anyone working with burn-injured patients. Everyone, from fire service personnel and first-aiders through to specialist hospital staff will find it challenging. The BBA is proud to have helped develop the game and hope players everywhere find it both educational and entertaining.' **Peter Drew, Chairman of British Burn Association.**

The game is simple to play and manage. It is a competitive, discussion based game for between 4-12 players and games usually last between 45 and 60 minutes. It can be played with or without a facilitator. It can be used for informal workplace learning, or as part of more structured training programmes, everything you need is in the box! The game allows the players to be selective about the learnt content and be adapted to suit the training needs of the burns team.

'As a Burns and Plastic Surgeon, I am all too familiar with the misery that burn injuries cause families throughout the country every year. Birmingham City University has used its expertise in medical education to develop this game together with the British Burn Association and Focus Games Ltd in order to improve the initial management of burn injury, which can greatly improve the final cosmetic and functional result for the individual patient.' **Professor SLA Jeffery, Consultant Burns and Plastic Surgeon, The Birmingham Burns Centre.**

More information: www.burnsgame.com == Twitter: [@BurnsGame](https://twitter.com/BurnsGame)
== Price: £60 (exc. VAT, P&P).

<http://journals.sagepub.com/doi/pdf/10.1177/2059513117690012>

Whittam AM and Chow W. An educational board game for learning and

teaching burn care: A preliminary evaluation. *Scars, Burns & Healing*, Volume 3, 2017. DOI: 10.1177/2059513117690012



Emergency Management of Severe Burns (EMSB)

The EMSB course continues to be in high demand in the UK. The work of the lead centres hosting courses (Nottingham, Birmingham, London, Chelmsford, East Grinstead, Swansea, Manchester, Newcastle, Bristol and Military) continues. There remains no active faculty in Ireland or Scotland; candidates from Ireland are welcomed onto other UK courses.

The course attracts a large number of applicants from burn services. The demand for pre-deployment courses for the Military has led to strengthening of the military faculty and an increased number of military courses (mainly at Strensall). We are now advertising courses on the College of Emergency Medicine website and are targeting other relevant websites to increase the number of candidates from emergency and pre-hospital backgrounds.

Candidates Courses held in 2016/17

We are running on average 10 courses per year. Recent candidate courses have been run:

DATE	LOCATION	CANDIDATES	COMMENTS
6/9/16	Military course, Strensall	20 candidates	19 passes
24/9/16	Bristol	23 candidates	18 passes
15/10/16	Chelmsford	25 candidates	23 passes
1/11/16	Military course, Strensall	19 candidates	19 passes
11/11/16	Liverpool	24 candidates	12 passes
2/2/17	Military course, Strensall	22 candidates	21 passes
10/2/17	Manchester	24 candidates	18 passes
3/3/17	INSTRUCTOR COURSE - Birmingham	12 candidates	
4/3/17	Birmingham	22 candidates	22 passes
18/3/17	East Grinstead	19 candidates	18 passes
25/5/17	Newcastle	19 candidates	18 passes
15/6/17	Military, Strensall, Yorks	19 candidates	18 passes
7/7/17	Nottingham	16 candidates	14 passes
8/7/17	Chelmsford, London	16 candidates	15 passes
24/7/17	COORDINATOR COURSE - Manchester	15 candidates	

249 candidates participated in the 13 courses with 33 candidates failing at least 1 element of the course. This was a slightly lower pass rate than that of previous years (87% vs 90%).

From these courses recommendations to join the faculty were offered to:

15 candidates for instructor training

37 as coordinators with instructor potential

17 as coordinators

Instructors Courses

We are continuing to run once yearly instructors courses (maximum 12 places).

3/3/17–12 candidates (all passed)

Coordinator courses

There has been a coordinator course on 24/7/17

A course is being planned for 2018.

The coordinator manual has been updated to provide guidance for coordinators as well as continuing to look at various options for improving the make-up on courses and teaching coordinators this essential skill.

Course Updates

We have updated the manual to fit in with the UK/BBA guidelines on a number of areas. In terms of addressing some of the difficulties we have encountered using Dropbox to disseminate course materials (mainly them being deleted by mistake), we are hoping to have an 'EMSB faculty' section on the new BBA website which will be accessible to EMSB faculty only.

The UK Senate continues to receive suggestions/ questions around the future of the course development including revalidation for EMSB and pre-course e-learning / MCQ in advance of the course. We are aware that ANZBA is making good progress with this and look forward to receiving an update.

UK EMSB Senate

The Senate that oversees the running of EMSB in the UK on behalf of the BBA has met in March and November 2017. This is our opportunity to review course feedback, update contents and faculty lists, budget issues and to plan future courses. We remain committed to delivering a high quality course that is accessible.

Dates of 2018 Candidate Courses:

1-2 March – Strensall (Military)	3 March – Birmingham	8 March – East Grinstead, London
Date TBA – Manchester	16 June – Chelmsford, London	29 June – Nottingham
15 September – Bristol	28 September – Chelsea & Westminster, London	8 November – Liverpool
12 November – Newcastle	29-30 November – Strensall (Military)	

Nadeem Khwaja, National Organiser EMSB UK

Annual Conference 2018: Preparing for Disaster

A warm welcome to Wales.

On behalf of the organising committee at the Welsh Centre for Burns I would like to invite you to the **51st scientific meeting of the BBA on 11th to 13th April 2018**. The theme for the 2018 meeting will be "Preparing for Disaster" which I'm sure you agree is a hot topic at the moment.

We have an exciting programme planned with both UK based and international speakers confirmed who will be presenting their experience of disaster planning and management in relation to burn injuries.

The meeting will be held in The Great Hall at the New Swansea Bay University Campus. The drinks reception will be held in the Great Hall bar and restaurant. The annual Gala Dinner will take place in the Waterfront Museum.

I look forward to seeing you all in the spring.

Croeso cynnes i Gymru.

Ar ran y pwyllgor trefnu yng Nghanolfan Llosgiadau Cymru hoffwn eich gwahodd i 51fed cyfarfod gwyddonol Cymdeithas Llosgiadau Prydain. "Paratoi am Drychineb" fydd thema'r cyfarfod yn 2018, sydd yn bwnc llosg amlwg ar hyn o bryd.

Mae gennym raglen gyffrous ar y gweill, gyda siaradwyr rhyngwladol nodedig, yn ogystal â rhai o'r DU, yn cyflwyno eu profiad o gynllunio am drychineb a gofalu am losgiadau.

Cynhelir y cyfarfod yn Neuadd Fawr campws newydd Prifysgol Abertawe yn y Bae. Cynhelir y dderbynfa ddiod ym mar a bwyty'r Neuadd Fawr. Gweinir y Ginio Fawreddog flynyddol yn Amgueddfa Genedlaethol y Glannau.

Edrychaf ymlaen at eich gweld yn y Gwanwyn.

Sarah Hemington-Gorse

Welsh Centre for Burns and Plastic Surgery on behalf of the Local Organising Committee

BBA Annual Conference: Sponsorship of Overseas Delegates

The BBA is offering sponsorship for up to two Overseas Delegates from low income countries* to attend the BBA Annual Conference at the Swansea University Bay Campus, Swansea on 11 – 13 April 2018.

Sponsorship comprises the cost of the conference registration fee and does not include travel and accommodation costs. Overseas Delegates must be supported by two existing BBA members and must not currently be working in Europe, North America or other high income countries*.

To apply, please submit a written application to the BBA office by **Monday 29th January 2018**. The application should include:

- Your reasons for wishing to attend the BBA Conference
- A description of how attendance would benefit work in your home country
- The name and contact details of two supporting BBA members.

The Executive Committee will consider applications and grant sponsorship at their discretion.

* Low and high income countries are categorised using International Monetary Fund rankings, in a similar way to that used by the ISBI.

Low income countries

Afghanistan, Algeria, Angola, Bangladesh, Benin, Bhutan, Bolivia, Botswana, Brazil, Bulgaria, Burundi, Cameroon, Central African Republic, Chad, Czech Republic, Chile, Columbia, Congo, Costa Rica, Cuba, Dominican Republic, Ecuador, Egypt, El Salvador, Ethiopia, Gabon, Ghana, Guatemala, Guinea, Guyana, Haiti, Honduras, Hungary, India, Indonesia, Ivory Coast, Jamaica, Jordan, Kampuchea, Kenya, Laos, Latvia, Lebanon, Lesotho, Liberia, Libya, Macedonia, Madagascar, Malawi, Malaysia, Mali, Mauritania, Mauritius, Mexico, Mongolia, Morocco, Mozambique, Namibia, Nepal, New Guinea, Nicaragua, Niger, Nigeria, Pakistan, Palestine, Panama, Paraguay, People's Republic of China, Peru, Philippines, Poland, Romania, Rwanda, Senegal, Sierra Leone, Slovak Republic, Somalia, South Africa, Sri Lanka, Sudan, Syria, Tanzania, Thailand, Togo, Tunisia, Turkey, Uganda, Uruguay, all former USSR countries, Venezuela, Vietnam, Yemen, Yugoslavia, Zambia, Zaire, Zimbabwe.

High income countries

Argentina, Australia, Austria, Bahamas, Bahrain, Belgium, Canada, Cyprus, Denmark, Fiji, Finland, France, Germany, Greece, Hong Kong, Iceland, Iran, Iraq, Ireland, Israel, Italy, Japan, Korea, Kuwait, Liechtenstein, Luxembourg, Malta, Monaco, Netherlands, New Zealand, Norway, Oman, Portugal, Puerto Rico, Qatar, Saudi Arabia, Singapore, Spain, Sweden, Switzerland, Taiwan, Tobago, Trinidad, United Arab Emirates, all UK countries, United States

Overseas Delegate Report 2017

Burn Care in Bangladesh

Dr Masuma Sarker, Plastic Surgeon, Bangladesh

Burns and electrical injuries continue to be the major public health problems in low and middle-income countries (LMIC) where more than 95% of all the burn deaths occur (1). Bangladesh Health and Injury Survey (BHIS) estimated that more than 365000 people are injured fatally and non-fatally by burn and electrical injuries every year in Bangladesh, among them over 5600 people died every year (2). Thermal cause was found as the major cause of burns constituting about two thirds of the total burns, followed by electrical injury which constituted about one third of the total burn injuries (2). Bangladesh is one of the highest incident countries of electrical burn injuries. Most of the burn injuries occur in rural areas and children of less than 5 years are the most vulnerable group.

In Bangladesh, difficulties of burn care management started from the grass route level. High incidence of burn injuries is due to low literacy of the population and a lack of safety measures. There are very few preventive measures and awareness programs available in Bangladesh. At the same time, rapid urbanisation without following the building or industrial safety code increases the electrical as well as the thermal burn injuries. Majority of burns occurred in rural Bangladesh; however, there is severe scarcity of burn care facility at primary level. According to the BHIS, only about 36% of burn injured patients received treatment from a hospital/clinic or from a registered physician. The rest of the patients either remained untreated or take treatment from non-qualified medical personnel, let alone from a burn specialist.

As a plastic surgeon, the challenge of burn management is many fold. There was only one specialised Burn care centre, a 50 bed Burns Unit in Bangladesh until 2013. Currently there are 13 Burns units in the country; with a total 430 beds and only 85 qualified plastic/burn surgeons in the whole country for the 160 million population. Even those patients who make it to the hospital, providing standard treatment is very daunting. Scarcity of qualified nurses and allied health workers make the situation worse. There are also severely limited resources in terms of modern dressing materials, skin substitutes, post burn scar management facilities and rehabilitation. Inadequate ICU or HDU beds and long waiting periods for theatre only complicate the situation. With all these odds and limitations, we are trying our best to provide standard care and are always thriving for improvement of the care.

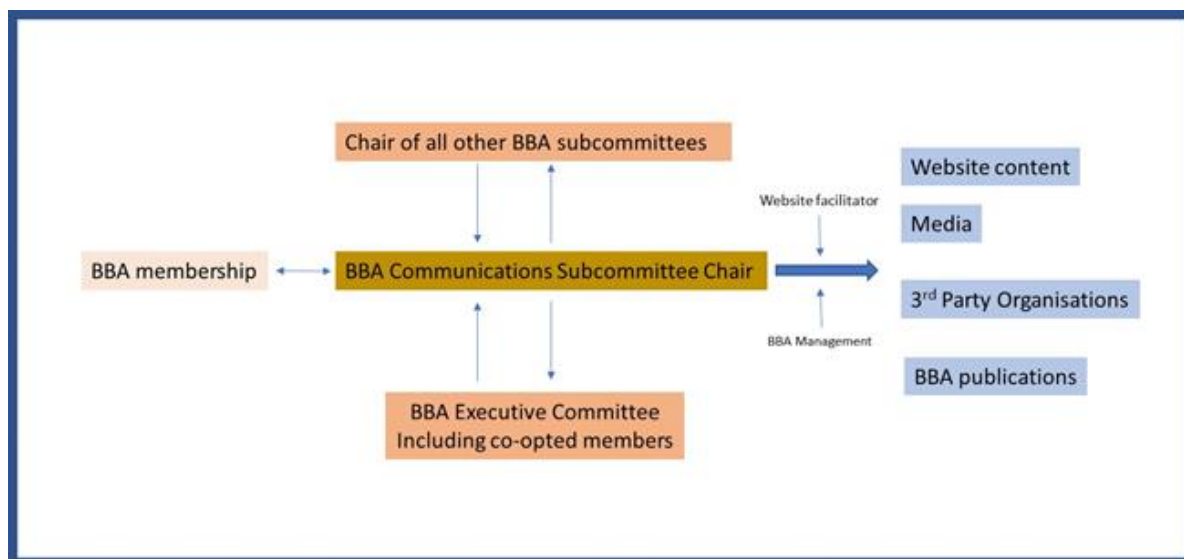
I would like to thank the British Burn Association for sponsoring me to attend the BBA conference 2017 in London. I would also like to express my gratitude to Mr Andrew Williams (Consultant Plastic Surgeon, Chelsea and Westminster NHS Foundation Trust) for giving me the reference. The conference was an eye opener for me. I found it very resourceful, where I met many iconic persons related to Burn management from around the world. I came to know the recent advances of burn management. At the same time, I felt that, as most of the burden of burns occurring in LMIC's, we need to develop our own technologies which will be low in cost but still effective and standard. There is also the need for more research work and paper presentations in this type of international conferences from the LMIC's, so there will be a bilateral exchange of knowledge and the world will know more about the actual picture of burn injuries and will plan to address this major public health problem more accurately. Attending this conference encouraged me to focus on future research on developing appropriate technologies for low resource countries.

References:

1. World Health Organization. The global burden of disease: 2004 update. Geneva: World Health Organization; 2008. Available at <http://www.who.int/mediacentre/factsheets/fs365/en/>. Accessed 2 Apr 2010.
2. Mashreky SR, Rahman A, Chowdhury S M, Khan TF, Svanstrom L, Rahman F. Non-fatal burn is a major cause of illness: findings from the largest community-based national survey in Bangladesh. Injury Prevention 2009;15:397-402.

Communications Subcommittee

The BBA communications subcommittee is a new feature that works as a 'virtual' subcommittee engaging with the membership, the other subcommittees and the Executive and interfaces with the outside world via the website, the media and other relevant channels. This allows it to be nimble-afoot and responsive but also accountable to the BBA Executive as a whole:



With the assistance of Nicole Taub, the revamped website has come on leaps and bounds and is shaping up gradually to its final form.

It has been a busy year and the organisation has worked hard on messaging, including the recently published acid attack guidance, and information on public awareness in the run up to bonfire night.

It is early days and more work to do, but there is good progress and something that should bring further value in the communications age.

Kayvan Shokrollahi, Communications Subcommittee Chair

Prevention Subcommittee

The Prevention Sub-committee has met twice; once in August 2016 and again in May at the Annual Meeting. The latter meeting was called to bring together some of the plans for the forthcoming National Burn Awareness Day on 18 October 2017, where there was a Safe Tea presentation by Verity Bennett from Bristol relating to their local research pilot utilising the Flying Start team in Cardiff. A number of tasks from previous meetings have been completed, some remain outstanding but good overall progress has been made this year.

For the National Burn Awareness Day 2017 there was successful linkage in with a wider range of supporters in preparation for the day including the UK Fire Brigades via the Chief Fire Officers Association, key charities involved in burn injury prevention such as CBT and RoSPA with other interested companies participating such as the Electrical Safety Council and the Bathroom Manufacturers Association. A "How to do it" booklet was produced for burn services based on the experiences of Nottingham to assist with preparation for the day.

The BBA's Twitter page was utilised to raise awareness of the problems of burn injury. At the same time the prevention page of the BBA website was updated with a series of infographics for the NBAD, Halloween and Bonfire Night. Burn Services were supplied with information about burn injury problems in their catchment population and we provided national data to supporting organisations. The 2017 advertising posters were created for us by the CBT for all burn services to use.

It is anticipated that the momentum created by these events will continue with the support of the Executive Committee and the new Chair of the Prevention Subcommittee, Victoria Dudman, Broomfield Hospital, Chelmsford who will take over at the 2018 Annual General Meeting. In the meantime, efforts will continue to keep the profile of burn injury prevention as high as we can both inside the NHS and out.

The next National Burn Awareness Day is planned for Wednesday 17 October 2018.

Ken Dunn, Prevention Subcommittee Chair

Research Subcommittee

The BBA Research Subcommittee held two meetings in 2017, along with members of the Research SIG.

Following elections amongst the membership this year the Subcommittee gained five new members with wide representation both geographically and of the multi-disciplinary team. They have brought enthusiasm and new ideas to the Subcommittee, which has been very welcome.

The Subcommittee has undertaken to complete current work streams and also to co-ordinate research which will allow engagement from the wider burn community, in particular Burns Units that have not to date been involved in multicentre studies. The links with the Reconstructive Surgery Trials Network (RSTN) will be further developed to help with this aim.

The Research SIG now has 128 members and is a very active group. With the imminent launch of the new BBA website it has been agreed that minutes of meetings will be made available for all members to read.

The next meeting of the SIG will be held at the Annual Meeting in Swansea, 11-13 April 2018. If you would like to join the SIG before that date please enquire via Nechama Lewis.

Looking forward to seeing many of you in Swansea next year!

Yvonne Wilson, Research Subcommittee Chair

BBA Section of the Society of Academic & Research Surgery

The BBA Section of the SARS meeting, held on 19th January 2017 at the Royal College of Surgeons in Ireland, Dublin was a great success. Professor Sir John Temple was the Honorary Guest Speaker and the selection of the best papers was conducted by Peter Dziewulski, Peter Butler, Mamta Shah and Yvonne Wilson.

The Prizes were awarded to:

GIBSON PRIZE: K Smith, S Jivan, S Southern, Pinderfields Hospital

Does the Use of a Known Object in a Static Image Improve the Accuracy of Burn Size Estimation?

GIBSON PRIZE RUNNER UP: K C Lee, J Dretzke, L Grover, A Logan, N Moiemmen

A Systematic Review of Objective Burn Scar Measurements

JACKSON PRIZE: L D Cato (1,2), C M Wearn (1,2,3), J Bishop (2), P Harrison (1,2), N Moiemmen (1)

1) The Scar Free Foundation, Birmingham Centre for Burns Research, Birmingham UK, (2) Institute of Inflammation and Ageing, University of Birmingham, UK, (3) Queen Elizabeth Hospital Birmingham, University Hospitals Birmingham NHS Foundation Trust

Is Thrombocytopenia a Marker for Sepsis and Mortality in Severe Burns?

JACKSON PRIZE RUNNER UP: T E Pidgeon, Y Al Omran, R Farwana, K Phan, B Al-Dulaimy, A Radhakrishnan

Interventions for Patients with Craniosynostosis: A Systematic Review

Naiem Moiemmen, BBA / SARS Lead

Nurses Special Interest Group

The BBA recognises that nurses make up a large and important part of those that care for burn patients. Therefore there is a separate Nurses special interest group to have a voice, share best practice and promote key issues to nursing. However currently the group does not have a chair to facilitate and lead the group. If there is anyone who is interested on taking on this role please contact either Jane Leaver or Nechama Lewis.

At the BBA conference in London this year there was meeting of the Nurses SIG. It was suggested that due to the difficulty of getting together for meetings we could try putting together a nursing specific newsletter to share what is going on in different units, experiences with new dressings request for information and other articles of interest. Jane Leaver jane.leaver@bcu.ac.uk and Katherine Elworthy Katherine.Elworthy@chelwest.nhs.uk volunteered to collate these articles and put together a newsletter. So please send them or Nechama Lewis a piece about what you are doing in your services, information about research projects, new dressings, prevention activities, areas that you want more discussion about, education activities and anything else that you would like to share with other nurses.

Burns Therapists' Interest Group

The Burn Therapy Interest Group ran a successful study day in October on Management of Neck Burns. We had some excellent teaching from our own therapists Sarah Smailes, Menna Davis, Janine Evans and Kate Whiting. Teaching topics included critical care and tracheostomy management, mobilisation of the neck, scar management techniques and demonstrations of different methods of fabricating neck splints and collars. New equipment and techniques such as microneedling, suction massage and the use of oscillators were demonstrated.

Throughout the day the theory was brought to life with case studies and clinical examples. In depth discussion of complex patients and challenges was interesting and informative.



All participants reported high level of satisfaction with the training day, giving good or excellent scores for the organisation, content and value for money. It is hoped to organise another therapy day on a different topic in 2018.

Rachel Wiltshire, BTIG Chair

Psychosocial Special Interest Group

The Psychosocial SIG continues to meet twice a year for a day, and for a smaller meeting at the annual BBA Conference, providing a national forum for professionals providing psychosocial care to patients with burn injuries. In addition to this, members of the SIG also ran a second successful self-harm study day in Nottingham, receiving very positive feedback from delegates with a range of professional backgrounds.

This year it was noted, during the BBA conference in May, that psychosocial topics were much more visible than they have been previously, with lectures presented by Polly Brooks (Chairman of Dan's Fund for Burns), Dr Alexandra Clarke (Clinical Psychologist at Royal Free Hospital), and Dr Laura Shepherd (Consultant Clinical Psychologist at Nottingham University Hospitals NHS Trust), chaired by Dr Lisa Williams (Principal Clinical Psychologist at Chelsea and Westminster Hospital). Two of the BBA conferences prizes (an oral presentation prize and the James Laing Essay Prize) were awarded to myself, and I was also lucky enough to travel to Barcelona to present at the European Burns Association Conference.

The SIG continues to raise awareness of the psychosocial issues encountered within burn care. One way we are actively doing this is through the publication of a collection of research articles in a Psychosocial Special Edition of the journal *Scars, Burns and Healing*. The journal has provided us with this exciting opportunity and members of the SIG are writing a series of papers, using a range of methodologies, around the theme of health professionals' and patients' experiences, views, and support needs.

Following on from the theme of this year's BBA Conference, 'New Technologies for Better Burn Care', members of the SIG now have access to a OneDrive. The OneDrive has provided a central location for storing shared information and resources, such as meeting agendas and minutes, research articles, clinical and therapeutic aids. Through face-to-face meetings, the SIG also provides access to ongoing peer support and networking opportunities, enabling members to share guidance and best practice, and increase awareness of psychosocial issues. If you work in burns and have an interest in psychosocial issues, we would happily welcome you in to the SIG.

Jennifer Heath, Psychosocial Special Interest Group Chair

Pre-Hospital Special Interest Group

Following a number of high profile corrosive substance assaults in the London area, the British Burn Association convened an Education Day on the Management of Chemical Injuries on 20 September 2017. There was strong representation from all stakeholders affiliated to the care of 'acid attack' victims and the speakers presented their experiences with chemical injuries in the context of an evolving healthcare need within the UK. Corrosive substance assaults are an emotive topic and a number of issues were discussed. From an inpatient perspective, the scope of the physical impact ranges from inconsequential droplet abrasions to devastating life-changing injuries including blindness. However, regardless of the size of the injury, the psychological burden is often considerable because many victims will never be able to identify the perpetrator in order to rationalise why they were attacked and have any chance of meaningful justice. Despite similar trends in the mechanism of injury, no single treatment pathway has emerged as suitable for each and every victim.

The use of Diphoterine in a pre-hospital environment remains a controversial topic. It is clear that Diphoterine has a role within high-risk industrial environments where immediate intervention can limit the impact of exposure significantly. It is also clear that, in principle, Diphoterine could be equally effective in high risk environments, such as large public events or demonstrations, where the increased population density puts more people at risk if a corrosive substance was discharged. In the same context, there is an argument that pubs, nightclubs and other similar venues have a duty of care to their patrons and should consider keeping Diphoterine on site for the immediate treatment of corrosive substance assaults on their premises. But, is it necessary for Diphoterine to be carried by every first responder crew in case they are called to attend such an assault? There is a considerable cost implication if this is instituted as a nationwide strategy and yet most of the product would go out of date without ever being used. Therefore, if not every crew, who should be supplied? And, if the public rely on a first responder crew to bring Diphoterine to the scene, will they still decontaminate with water in the meantime? The immediate availability of clean water in the vicinity of most corrosive substance assaults cannot be underestimated when seconds can be the difference between salvaged sight and blindness.

A severe corrosive substance assault can maim and change the life of the victim forever. The treatment cost to the NHS, in terms of acute surgical management, scar therapy and psychological

support, can be significant. The longer term loss to the economy may be even more significant for a small number. The evidence base for Diphoterine continues to evolve and clearly supports its use in high risk occupational and industrial environments. But, without more robust evidence, it is difficult to wholly advocate its arbitrary use in pre-hospital care in times of economic austerity. However, until such evidence emerges, targeted distribution in environments with increased risk, both civil and industrial, will hopefully mitigate the severity of any future assaults.



Krissie Stiles, Pre-Hospital SIG Chair

Niall Martin, Consultant Burn Surgeon, St Andrew's Burn Service Chelmsford

Burn Clubs & Camp SIG

The Burn Clubs and Camp SIG continues to meet three times a year to share experiences and good practice on issues such as supporting children and families, recruitment of volunteers, safeguarding and fundraising.

There are currently 14 clubs linked to hospitals across the UK and one national based Burn Camps Charity, which all provide support through a mixture of residential camps, family weekends, days out and structured workshops. The clubs also provide a limited amount of support to help facilitate a National Young Adult support weekend.

In the last year across the UK over 500 children/families have been supported by clubs and this has only been possible through the good will and hard work of staff, fundraisers and commitment of volunteers giving around 25,000 hours of their time.

Clubs vary from being independent charities to being governed under the umbrella of hospital charities; however it appears that regardless of the size of the club and how many events they facilitate each year, they all generally have a waiting list for events or are oversubscribed.

Club activities have included trips to the Pantomime, Seaside, Zoo, Farm, Theme Park, Activity Centres, Sailing, Climbing, Swimming, Bike Rides, Christmas Party, Halloween Party, Workshops and Support Groups for parents, children and siblings. This year's National Burn Camp also included guests from Russia and South Korea who enjoyed trips to the World Athletics Championships and Theatre as part of their 10 days in England and the Manchester Camp continued their exchange programme and had two young people from Colorado attend their camp.

Some comments from the children and families from clubs over the year have been:

- the greatest gift I can give my child will be to forgive myself
- was nice to hear other people's stories, to know you are not alone
- helpful to know I am not the only one and others are coping and dealing with similar situations
- reassures the children that it's ok and they can be themselves
- surprised how easy it was to talk and quite cathartic
- learnt about myself, shared experiences, learned about coping

It was fantastic at the BBA annual meeting this year to have the impact burns clubs have highlighted by Neil Brierley, and for the recognition of Tracey Foster's hard work by her receiving a British Empire Medal. Dr Jennifer Heath's presentation on developing support services for parents of Burn Injured Children was also recognised and clubs can be key in encouraging children and families to take part in research studies to help identify and evidence the support that is both beneficial and needed.

Across the country clubs are planning to continue this support in 2018, and we would like to thank all our volunteers, fundraisers, staff, and all those that have made the support in 2017 possible. We would like to add a special thanks to The Children's Burns Trust, Firefighters Charity, Dan's Fund, Katie Piper Foundation and the Burns Camps Charity who have all continued to help clubs support their members and families in 2017.

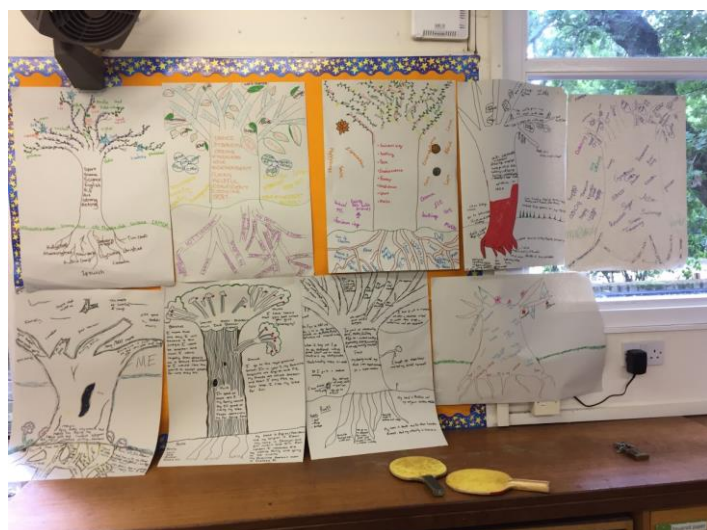
Martin Palmer, Burn Camp SIG Chair

Children's Burns Club

Tree of Life Therapeutic Workshop

The Children's Burns Club introduced a workshop into their summer camp programme for the first time in 2017. We had reviewed our family weekends and mini camps both of which have therapeutic sessions as part of their programme and actually identified that the session or workshop generally brings the group closer together and helps improve peer support. We also trialled a workshop at last year's Young Adult Camp. 21 of the 24 attendees took part and the overwhelming feedback was that they were very glad they were able to take part in the workshop and this year all attendees took part and again the feedback was positive.

We decided to use a tree of life approach for our workshop programme this year. The Tree of Life is a hopeful and inspiring approach to working with children, young people and adults who have experienced hard times. This methodology was co-developed through a partnership between Ncazelo Ncube (REPSSI – non-profit organisation in southern Africa) and David Denborough (Dulwich Centre Foundation – Australian charitable organisation) to assist colleagues who work with children affected by trauma in southern Africa. This approach has proved so successful and popular that it is now being used with children, young people, and adults in a wide range of countries across Africa, and also in Australia, Brazil, Canada, Russia, Nepal, the USA and elsewhere.



This approach enables people to speak about their lives in ways that make them stronger. It involves people drawing their own 'tree of life' in which they get to speak of their 'roots' (where they come from), their skills and knowledges (trunk), their hopes and dreams (branches), as well as the special people in their lives (leaves). The participants then join their trees into a 'forest of life' and, in groups, discuss some of the 'storms' that affect their lives and ways that they respond to these storms, protect themselves, and each other. The Tree of Life enables people to speak about their lives in ways that are not re-traumatising, but instead strengthens their relationships with their own history, their culture, and significant people in their lives.

All the 34 children who attended the camp took part in a 2 ½ hour workshop, split into four age related groups. The workshops were facilitated by two clinical psychologists and supported by one of four burns survivors who were volunteering at the camp and attached to a group for the week; they were also able to share their experiences. During the training session before the children and young people arrived the volunteers also completed a tree of life workshop to enable them to join the forest of life and understand what the children were participating in.

Feedback from the workshops included:

- 10 said it was Excellent, 17 good and 7 OK.
- 21 said it had given them ideas about building confidence or coping with challenges, 7 were unsure if it had helped them, 6 said it hadn't given them ideas (although some of these had offered good ideas for peers)
- 24 said they would like to do another workshop, 6 were unsure, 4 were not interested
- 22 said the best thing about the workshop was being able to talk about how we cope, our experiences, people being open and learning more about each other

For more information regarding this workshop please contact Dr Katherine Nutt on 01245 515988 or Katherine.nutt@meht.nhs.uk

Dr Katherine Nutt, Dr Kate Davenport and Martin Palmer, Children's Burns Club

The Scar Free Foundation

On 22nd November 2017, The Chancellor of the Exchequer, Philip Hammond confirmed a £3 million commitment to The Scar Free Foundation to establish The Scar Free Foundation Centre for Conflict Wound Research.



Brendan Eley, Chief Executive of the Scar Free Foundation writes: 'This is a big milestone towards our goal of achieving scar free healing within a generation. Life-long scarring causes significant problems for wounded military personnel and the civilian survivors of terrorist attacks. We are thrilled that the Chancellor has acknowledged the scale of the problem, and has made a major commitment to our Scar Free Strategy.'

The Government's funding will be directed to the first ever specialist research centre to minimise the impact of scarring among Armed Forces personnel and civilians wounded in terrorist and other attacks. The Centre will be based at Birmingham's Queen Elizabeth Hospital and will lead a national programme of clinical, psychological, and scientific research. Further information can be found here - <http://scarfree.org.uk/news/2017/government-funds-centre-for-conflict-wound-research>.

The Centre's research will have an immediate benefit to both military personnel and to the general public. It is of special and urgent relevance within the context of increased civilian terrorist and acid attacks.'

The Scar Free Foundation Student Electives in association with the British Burn Association

Scar Free Foundation Student Electives fund medical, paramedic, nursing and psychology students to broaden their perception and experience of research during a 6-8 week supervised period. The research areas are scarring, wound healing and disfigurement in the discipline of burn medicine and care. The award value is £1,200.

To find out more please visit: <http://scarfree.org.uk/research/funding> or contact Charlotte Coates at charlotte@scarfree.org.uk

The deadline for applications is **5pm on 2nd March 2018.**

Secretary/Treasurer Update

Membership Fees 2018:

I am pleased to confirm that there will be no increase to membership fees for 2018 and fees will remain as follows:

Doctors and Consultant Nurses/AHPs	£75pa
All other staff	£50pa
Students studying for primary degrees and retired members	£30pa

Please note that online access to Burns Journal is included in the Membership fee for 2018. Members have access to current issues of the Burns Journal as well as four years' back issues.

Income Tax Relief in Respect of Annual Membership Fees:

The British Burn Association has been approved by the Commissioners for HM Revenue and Customs under Section 344 of the Income Tax (Earnings and Pensions) Act 2003 with effect from 6th April 2014. The Association's name will therefore appear in the list of approved bodies.

Discussion Forums:

Please note that a discussion forum is available within the members' only area of the BBA website for members to share ideas and discuss current issues. Please log into the Members' area with your Username and Password and click on 'Members Forum'. Click on the Forum Name to which you wish to add a comment / question and click on 'Create New Topic' to start a conversation or click on 'Post Reply' to respond to a posting.

Chelating Agents in the Management of Chemical Injuries:

Two leading burns surgeons give their personal view on the role of chelating agents in the management of chemical injury

By Keith Allison, Consultant Plastic, Reconstructive & Aesthetic Surgeon, James Cook University Hospital, Middlesbrough

I believe that there is now a strong argument for supporting the use of the chemical chelating agents Diphoterine® and Hexafluorine® for patients who have sustained corrosive chemical injuries. The main place for use of these agents is in pre-hospital care although there is evidence emerging that in-hospital use also benefits patient's care compared to existing protocols.

The most recently endorsed guideline regarding the management of "acid attack" is a backwards step and doesn't mention current technology. It's not that irrigation and dilution with water is wrong; this process must be as fast as possible, but the use of iso-osmotic solutions such as saline that don't create "a wash-in" effect or hyperosmotic chemical chelators, which produce faster neutralisation of the corrosive and allow less tissue injury and faster / better pain relief.

Industry is already using Diphoterine and Hexafluorine and they have been in existence for approximately 30 years. It has struck me that the medical world (plastic surgery and emergency department) is behind the curve in its knowledge and acceptance that these agents have their place.

As a plastic surgeon in Middlesbrough, a major trauma centre and burns facility, I am an enthusiast for our local ability and need to look after non-resuscitation sized burns patients in order to look after our population but also for the training of our current and future plastic surgeons. Teesside is the second biggest producer of petrochemicals and pharmacy in the UK and so members of the BBA won't be surprised to hear that the potential for chemical injury locally is large. I have no pecuniary interest in Diphoterine / Hexafluorine.

Within the medical community there are two main areas of mistrust; clinical evidence and cost. The evidence is present and increasing¹, the cost of sight loss is greater. This was highlighted at the recent BBA Pre-Hospital SIG day in Birmingham. This meeting was convincing, well attended and a great representation of our specialty. This evidence for Diphoterine and Hexafluorine in animal and in human subjects and may not be from randomised controlled trials but nevertheless the use of these products and results in the pre-hospital and hospital based settings are compelling.

It's time for the BBA to produce documentation that informs about Diphoterine / Hexafluorine as emergency management as well as "Report, Rinse and Remove". Interestingly the EMSB manual mentions the usefulness of these compounds, so knowingly or not, the BBA is already endorsing their use.

1. Is it time for a change in the approach to chemical burns? The role of Diphoterine® in the management of cutaneous and ocular chemical injuries. CJ Lewis, A. Al-Mousawi, A, Jha, K.P. Allison. JPRAS (2017) 70,563-567

By Baljit Dheansa, Consultant Plastic Surgeon, Lead for Burns & Honorary Senior Lecturer, Queen Victoria Hospital, East Grinstead

The burns community is slowly beginning to gather good quality evidence on various aspects of our care and first aid is an area where a significant impact on final outcome can be made within minutes by anyone. As burns clinicians we strive to do the best for our patients and that involves giving them the best possible treatments but also advising others on the best approach to take. Recent acid attacks have highlighted the need for effective first aid for chemical burns and an increased interest in agents like Diphoterine.

Many have promoted the widespread use of Diphoterine on the basis that it is safe and seems to be effective. Sadly this is not a good enough reason to implement change when we have only just started using good quality evidence to produce guidelines for chemical injuries. I am glad we have stopped the unnecessary practice of irrigation of chemical injuries until the pH is normal as it often meant that patients were unnecessarily subjected to "first aid" for hours when the evidence pointed to 15 minutes being all that was needed. More importantly time to first aid is even more important. Recent published guidance affirms the need for rapid irrigation with water because it is evidence based. We have not got to the point where we can confidently say that about Diphoterine.

Much of the evidence relating to Diphoterine is of poor quality, significantly biased, or relates to safety. Making assumptions and incorporating it into national guidance based on this data is totally inappropriate as we have the means to get better evidence. Detailed analysis of well-constructed trials, animal studies and laboratory based data must be conducted before we recommend a treatment when compared to current best practice. As with any commercial product there may be conflicts of interest so it is essential that we conduct trials with independent funding if possible. This is now routine for drugs and we need to have the same standards for any product used in burns.

I am a keen advocate of advancing our care for burns through innovation and have seen many changes implemented through a rigorous process of evaluation, research and then clinical review after implementation. If we are to continue providing excellent care in these austere times we need to make sure that we do not waste resource on treatments that are no better than current ones and that their cost justifies the investment.

Please note that the views expressed do not necessarily represent those of the BBA

CHARITY CORNER

Burn Charities do invaluable work in supporting patients. Catch up on the work of 2 UK Charities

Dan's Fund for Burns



Dan's Fund for Burns (DFFB) was established 15 years ago to support adult burn survivors within the UK. The aim of DFFB is to help alleviate some of the distress and financial hardship suffered by burn survivors, their families and friends. One of the most successful and immediate methods is financial aid for transportation costs, emergency funding, such as clothing, household items, and other essential needs. This assistance is facilitated quickly and without requirement for time consuming form filling or means testing as often encountered when applying for benefits, insurance claims etc.

2017 marks the launch of a new and exciting resource for British Adult Burn Survivors - the Adult Burn Support UK website that puts together a single, easy to navigate portal to the most helpful resources and information from first aid to the latest reconstructive surgery; how to access aftercare help and support as well as personal stories from burn-injured adults all with a UK focus but also linking to international sites and resources.

Our founder, Polly Brooks publically presented the concept at this year's BBA Annual Conference in London and we are extremely proud to have brought this project to fruition and to be able to share it with the burns community. The Website has been created with the kind assistance of many Burn Survivors and clinicians and we look forward to feedback from all areas of the UK burns community. We hope that this is



just the beginning. We want the site to grow and develop with the needs of Burn Survivors and we are considering ways to connect survivors to each other in safe and supportive ways. Please visit us and help spread the word and most importantly share our web address!

<http://adultburnsupportuk.org>



The Katie Piper Foundation

It has been an action-packed, if not rather stressful, year at The Katie Piper Foundation - but so worth it! As well as running our existing services, we have been working towards a comprehensive residential rehabilitation centre for burns and scars in the north of England, and this year saw the first two patients transition through the pilot of the service to help further shape and mould it to

be as patient-focussed as possible prior to any future full service launch. This pilot was a great success and achieved significant outcomes for the patients.

Residential off-site burns rehabilitation has been an unfulfilled aspect of burn care standards for almost a decade, and as a charity our vision has been to help fill this gap. The loud and clear message from our beneficiaries supports this vision and this has, therefore, remained our primary focus.

Katie has remained actively involved in achieving the charity's vision, and continues to flourish in her own personal life with baby number two expected very soon.

WOULD YOU LIKE TO CONTRIBUTE TO THE NEWSLETTER?

If you have a 'hot topic' to address or developments in your centre which you would like to share with colleagues via the BBA Newsletter, please email Nechama Lewis at the BBA Office:
info@britishburnassociation.org

The Executive Committee and Staff of the BBA wish Members a very happy festive season and all the best for the new year.





BRITISH BURN ASSOCIATION

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