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| --- | --- |
| Working Group Topic: |  |
| Chair(s): |  |

**Expected Outputs (please tick more than 1 if appropriate)**

|  |  |
| --- | --- |
| Framework for Practice |  |
| Toolkit |  |
| Parent Leaflet |  |
| Teaching Slides |  |
| Other (please specify): |  |

**Summary**

Please provide a brief summary of the topic. This should include why a BMFMS working group has been formed on this topic and the areas the outputs will address.

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**Working Group Invitations**

Are there any other professional bodies that should be represented on this group? In each case please state if we should request the group to co-author the outputs, endorse the outputs and/or send an official representative to group meetings. (Please tick all that apply.)

|  |  |  |  |
| --- | --- | --- | --- |
| Professional Group | Co-Author | Endorse | Official Rep |
|  |  |  |  |
|  |  |  |  |
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Please note the name of any specific individuals you wish to invite:

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Please note all other roles that should be included on the group. We suggest that the total group should comprise 10-15 members. It is BMFMS policy to include at least 1 trainee on every group.

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| --- | --- |
| **Role** | **Number Needed** |
| Obstetric Consultant |  |
| Maternal medicine consultant |  |
| Fetal medicine consultant |  |
| Trainee | (Min 1) |
| Specialist Nurse |  |
| Midwife |  |
| Specialist midwife |  |
| Neonatal Consultant |  |
| Dietitian |  |
| Occupational Therapist |  |
| Physiotherapist |  |
| Psychologist |  |
| Pharmacist |  |
| Network Manager / Director |  |
| Parent\* |  |
| Other (Please specify) |  |

**\*Parental involvement**

Please specify if parent members of the group should be invited to all meetings or if they should be asked to review the document before consultation:

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**Notes on working group recruitment**

If there are any other notes you would like to make on working group recruitment then please add these here.

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**Timelines**

Please include estimated dates. (Additional meetings can be added if needed.)

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| --- | --- |
| **Stage** | **Month / Year** |
| First meeting of working group (review of scope and outputs) |  |
| Second meeting of working group (agree content and job allocations) |  |
| First draft written |  |
| Third meeting of working group (review first draft) |  |
| Draft ready for consultation |  |
| Consultation period (1 month) |  |
| Review period (1 month) |  |
| Final document ready for publication |  |