BEST BEGINNINGS (A COMPANY LIMITED BY GUARANTEE) TRUSTEES' REPORT AND ACCOUNTS FOR THE YEAR ENDED 31 JULY 2014



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BEST BEGINNINGS (A COMPANY LIMITED BY GUARANTEE) LEGAL AND ADMINISTRATIVE INFORMATION

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1. Introduction

The trustees of Best Beginnings, who are also directors of the charity for the purposes of the Companies Act 2006, submit their Annual Report and Financial Statements for the accounting year ended 31 July 2014. The trustees confirm that the Annual Report and Financial Statements of the charity have been prepared in accordance with the accounting policies set out in Note 1 to the Financial Statements and comply with the charity's constitution, applicable law and the requirements of the Statement of Recommended Practice: Accounting and Reporting by Charities issued in 2005.

Public benefit

The trustees confirm that they have complied with their duty under the Charities Act 2011 to have due regard to the Charity Commission's general guidance on public benefit.

Best Beginnings - a catalyst for change

Not all children in the UK have an equal start in life. A large gap exists between the health, wellbeing and development of children born into well-off and less well-off families. For example, a baby born in Wolverhampton is 5.9 times more likely to die before the age of one than a baby born in Bath.

Right across the UK, regional, ethnic and socio-economic factors all combine to make child health and wellbeing a lottery. At Best Beginnings we strive to reduce these unacceptable inequalities across the UK by taking an early intervention approach to helping families of all backgrounds access the information they need to give their children the best start in life.

Every year in the UK tens of thousands of babies don't get the start they need in life simply because of the family circumstances they are born into. Deprivation in its various forms is associated with late antenatal booking, premature birth, low birth weight, neonatal illnesses, developmental disorders and deaths in infancy. The health inequalities that exist in infancy continue into adulthood, with those children from lower socio-economic backgrounds being less likely to arrive at school ready to learn, less likely to leave school with qualifications and more likely to suffer from obesity, cancer and heart disease in later life.

Best Beginnings is a national charity dedicated to improving the health and wellbeing of babies in the UK by tackling child health inequalities. We focus on the crucial time period from preconception and a child's third birthday, where the evidence shows the foundations for a healthy and happy life are laid. We aim to improve health and social outcomes for all children, but particularly those from more disadvantaged backgrounds.

Best Beginnings works collaboratively to create and deliver accessible resources to educate and empower parents, equipping them with the knowledge and confidence to maximise their child's early physical, emotional and cognitive development. Our resources and associated change programmes are designed to enhance appointments with professionals and peer supporters and to support workforce development.

We create resources for all parents, ensuring that they are accessible to, and particularly engaging and relevant for, families most affected by health inequalities and least likely to self-educate. This is known to be an effective way of reducing stigma, increasing uptake amongst the most disadvantaged groups and improving impact. We aim to help families break cycles of disadvantage, create equality and bring about lasting attitudinal and behavioural change that will give every baby in the UK a chance of a healthier start in life.

Best Beginnings works with parents, voluntary sector organisations, healthcare professionals, Royal Colleges and other professional bodies, academics and the four UK governments to ensure our resources deliver both to the evidence base and to the needs of families and professionals, maximising our reach and impact to make a real difference.

We are innovative in our approach, using new media, arts and technology to engage traditionally "hard-to-reach" audiences and aim to be a catalyst for change. We have a strong track-record of sensitively filming parents on their journey into parenthood focusing on what they are doing to enhance their child's development and sharing this with a much wider audience. Through evaluation of our projects we've demonstrated how using film to show people what is possible can positively influence behaviour change. We've also learnt that parents value this approach much more than the more traditional route of being told what to do.

Our resources and associated change programmes are designed to amplify and augment existing provision by professionals and third sector organisations. We are committed to this "as well as" not an "instead of" approach as we believe this to be the most effective way of delivering lasting change for future generations.

Aims of the charity

Best Beginnings works to give every baby in the UK the best start in life, focusing from preconception to the third birthday. Evidence of the importance of a child's early years in determining health and social outcomes is overwhelming. Our broad aims are to:

- i. Support parents to maximise their child's health and wellbeing by creating a range of innovative, engaging and empowering resources. We work with parents and experts to ensure our evidence-based resources help families make positive and informed choices about the health and wellbeing of their child. In line with our mission to reduce child health inequalities, we ensure our resources and programmes are particularly engaging for the families who are most in need of support.
- ii. Enable healthcare and other professionals to better support families through effective use of our resources and associated best practice change programmes. We work collaboratively to ensure healthcare professionals are aware of our parent resources and that they introduce them to parents in ways that will maximise their impact. We have developed a structured "embedding programme" for local areas as a

commissionable service. The embedding programme involves co-creation of, then dissemination of a plan to integrate our resources into local care pathways. In addition, where appropriate, we develop associated change programmes to enhance staff confidence and skills and further increase the impact of our interventions.

iii. Influence national and local policy and raise public awareness of the importance of the early years for health and wellbeing. We encourage policymakers to prioritise resourcing the early years. We do this in a number of ways including our active involvement in the 1001 Critical Days cross party manifesto and the Early Intervention Foundation. We commission research to inform and evaluate our interventions and to inform the policy arena.

In 2013-14 we pursued these aims through four interlinked programmes:

- 1. Small Wonders Change Programme
- 2. Transition to Parenthood Programme
- 3. Better Breastfeeding Programme
- 4. Future Parents Programme

Objects of the charity

Best Beginnings is governed by a Memorandum & Articles of Association dated 5th July 2006 and amended 23rd January 2007. The objects of Best Beginnings are:

- to promote the physical and psychological health of mothers and infants through the provision of support, education and practical advice:
- to promote equal access to health services for families with babies so that people who have difficulty accessing these services are enabled to do so; and,
- to advance the education of the public, including professionals who have contact with young people and families, about health issues affecting mothers and children, including breastfeeding.

2. Small Wonders Change Programme

Background

Best Beginnings' Small Wonders Change Programme (SWCP) aims to place parents at the cornerstone of their premature or sick baby's care in ways that are known to improve maternal and child health outcomes. While premature and sick babies usually receive outstanding medical care, non-clinical issues and how these can impact on families and their babies are easily overlooked. For example, parents whose babies are transferred to a neonatal unit (NNU) often feel fear and devastation instead of the joyous excitement that usually accompanies the birth of a healthy, well-grown baby. Formula milk feeding and parents' physical separation from their babies remain commonplace in many neonatal units across the UK. This is despite a robust evidence base that clearly demonstrates how breastmilk can reduce serious infections and lower rates of necrotizing enterocolitis (a life-threatening condition where portions of the baby's bowel undergo 'necrosis' – tissue death). Similarly, whilst research clearly shows that skin-to-skin contact can improve cognitive skills in later life and enhance parental-infant attachment, interaction and wellbeing, opportunities to facilitate skin-to-skin contact within the NNU can often be neglected, overlooked or ignored. The Small Wonders DVD, which is endorsed by many professional bodies and charities, is also designed to support professional development, not only on the practical aspects of, for example, expressing and transition to the breast, but also by supporting staff to get "into the parents' shoes" and gain deeper insight into parents' experiences.

Key activities and achievements from August 2013 to July 2014

Our approach

At the very centre of the SWCP is the Small Wonders DVD, comprising 12 films that follow fourteen families on their journeys from pre-birth, during the initial weeks and months of their baby's admission to the NNU, through to the transition home and one year on. The films use a 'flyon-the-wall' style and feature 'expert' interviews and 'show how' moments. Underpinned by a robust evidence base, the Small Wonders DVD aims to inform, support and reassure parents and help prepare them for what lies ahead. Empowering parents to be at the centre of their baby's care is a guiding principle of Small Wonders and so many of the films feature parents demonstrating how to perform key aspects of baby care.

A highlight for the SWCP in this financial year included a Department of Health site visit to the Leeds General Infirmary Neonatal Unit. The Citizen Insight Team met with some of the Best Beginnings team and the multi-disciplinary group of Small Wonders Champions: Consultant Neonatologist Dr Liz McKechnie, Senior Midwife Cathy Dewhurst and Neonatal Nurse Susie Harms to gather an insight into the voluntary sector and understand how Best Beginnings projects work in practice. Dr McKechnie explained how watching Small Wonders had given her a "light-bulb" moment committing her to drive change towards family-centred care in Leeds and how since then she has worked with colleagues to use the Small Wonders DVD as an integral part of their strategy to achieve this change.

Small Wonders DVD

Thanks to further Department of Health funding in 2013-14, Best Beginnings was able to produce an additional 100,000 copies of *Small Wonders*, so that each neonatal unit in England can receive a year's free supply of DVDs. Thanks to this wonderful opportunity to reprint the DVD and supporting guide book of Small Wonders, Best Beginnings reviewed the cover and guidebook, including inviting the 23 endorsing organisations to confirm their continued wish to endorse the DVD. The team also engaged new organisations interested in endorsing the DVD. Following this

process, the Small Wonders is now endorsed by 32 organisations including Start4life, Royal College of Speech and Language Therapists and the NSPCC

Small Wonders Days 2014

Thanks to further grant from the Department of Health, Best Beginnings was able to appoint a Small Wonders National Facilitator and run a series of national Small Wonders Days in 2014. These events provided opportunities for Champions to share learning and innovative practice, celebrate their successes and achievements, network, and work together in developing resources to help overcome barriers. The Small Wonders Days took place in London, Bristol and Manchester to cater for delegates based in the north and south of England. The role of the speakers who contributed to these events was to give delegates the opportunity to see the many innovative approaches being taken to effectively embed the Small Wonders DVD into neonatal and maternity services in ways designed to improve family-centred care and outcomes for babies.

In the UK there are several organisations that are working to drive change towards more family-centred care and to support an increase in breast-milk feeding, transition to breastfeeding and kangaroo care. Initiatives include the UNICEF BFI Neonatal Standards and the Bliss Family Accreditation Scheme. The effective embedding of the *Small Wonders* DVD into hospitals in the UK is entirely complementary to and enhancing of these important initiatives. As part of Best Beginnings' commitment to collaboration, we invited UNICEF BFI and Bliss to speak at all four of our Small Wonders Days.

Only the first of these four events took place within this financial year. The first Small Wonders Day took place in Coin Street in London on 4th June 2014. The event was attended by 48 multi-disciplinary delegates, 37 of whom completed evaluation forms. An important aspect of the Day was to inform and equip delegates with the knowledge and understanding to use Small Wonders in their own hospitals. Of the 37 evaluation forms completed, 100% of delegates said that the day had provided them with the knowledge and confidence to effectively embed Small Wonders in their own units. Comments received from the multi-disciplinary delegates who completed the forms included:

"Very motivating day that has given me more ideas to use in practice to embed DVD and improve family centred cared! Thank you!"

"Thank you for a very inspiring day. Full of informative discussion and resources. Networking with your team and audience extremely useful and beneficial".

"Fantastic charity. Very helpful/friendly people who are very willing to support me to embed skin-to-skin care at my hospital. The day has been very useful as I now have lots of ideas about how to go about improving care on our unit. The DVD and resources are invaluable. Thank you."

"I can now see that there is so much to do! This day has given me many ideas and to hear ideas from other trusts/units is encouraging and helpful".

"This Champion Day has really helped in advising me to embed "Small Wonders". I have decided on a full 'launch' and I have gained valuable tips on how to ensure its success".

Jo Bradshaw, Visual graphic artist, attended this event (and subsequently the Bristol day). She recorded the day's presentations and discussions on a series of 'eye-catching' scribed graphics boards. We received a lot of very positive verbal feedback from delegates' on Jo's contribution to these two events, with many delegates taking the opportunity to look through the gallery of graphics' boards during refreshment and lunch breaks, and also taking many photographs of them. We didn't include a feedback section on the evaluation forms about the visual scribing. However, spontaneous written comments included:

"Also loved the illustrations; visual pictures very good"

An integral aspect and highlight at each of the four events was for delegates to hear the parents' voice. Sinem Shacolas, Parent and Small Wonders film contributor, spoke at the first London day about the parents' perspective and her own experiences of giving birth to premature twins, including the loss of one of them. Of the 35 evaluation forms completed, 100% of delegates rated Sinem's presentation as "excellent". Comments included:

"What an amazing lady sharing this with us to improve care for others"

"Very insightful and informative; parental input always vital"

"Very touching; a very good picture of how it is for the mother"

"Always so brilliant and motivating to hear a parent"

"Incredible and very moving; beyond excellent!!! Thank you @"

Of the 34 completed evaluations received, 91% of delegates rated the overall day as 'excellent' and 9% as 'very good'.

Small Wonders Champions

The SWCP continues to be supported by a dedicated and expanding network of volunteers: 'Small Wonders Champions'. This network comprises nearly 500 multidisciplinary health professionals (predominantly neonatal nurses and midwives). During the Small Wonders Days we introduced the idea of 'Small Wonders Change Teams'. This shift from 'Champions' to 'Teams' recognises the reality that hospitals that are effectively using Small Wonders tend to have engaged multi-disciplinary colleagues including neonatal, obstetric and midwifery (and ideally also

health visiting) and have co-created plans to embed *Small Wonders* into care pathways, pre-birth (where appropriate) through to discharge planning and the first months at home. The Best Beginnings team and a number of speakers flagged that *Small Wonders* is not a standalone initiative, but rather has been created as an evidence-based tool that complements local care provision and helps drive change towards more family-centred care.

Small Wonders Scotland

By July 2014, plans were well underway for a pan-Scotland roll-out of Small Wonders to ensure the project is adequately resourced and supported by key individuals in each Managed Clinical Networks A Small Wonders Scotland event is planned for early 2015. A mapping exercise will outline the practical ways in which the Small Wonders DVD can be effectively embedded across Scotland to support delivery of Neonatal Care in Scotland: A Quality Framework and associated programmes of work, including the Scottish Patient Safety Programme.

Given the breadth of ongoing work in Scotland, it is important to use all available resources effectively and avoid unnecessary duplication and waste. This mapping exercise will aim to demonstrate the synergy between Small Wonders and the dimensions within the Scottish Quality Framework and existing workstreams. It will show that Small Wonders does not present additional work; but instead can effectively support the provision of evidence-based, family-centred care within established neonatal care pathways.

Small Wonders Northern Ireland

Best Beginnings is currently working with the Public Health Agency to further develop plans to embed Small Wonders across Northern Ireland and support parents of sick and premature babies to be at the centre of their baby's care.

In 2014, Best Beginnings was delighted to welcome the Royal Jubilee Maternity Hospital to the Small Wonders family. After substantive planning and engagement by their lead Small Wonders Champion and Breastfeeding Coordinator, a Small Wonders planning form was submitted, followed by a delivery of 320 DVDs for staff embedding and finally a one-year supply of Small Wonders for parents in the unit.

Multi-disciplinary professionals have been engaged in the roll-out of Small Wonders in this neonatal unit, with midwives playing an important role. Small Wonders is now gifted to high-risk mothers on the antenatal ward prior to delivery as well as parents in the NNU.

A local launch of Small Wonders in the Royal Jubilee, Belfast is planned for late 2014.

As Small Wonders is now rolled out across all 7 neonatal units in Northern Ireland discussions have taken place to hold a pan-Northern Ireland celebration of *Small Wonders*. Best Beginnings will be looking to support all of the units in Northern Ireland to embed the DVD into their neonatal and, as appropriate, maternity services and work with the Public Health Agency to develop a way forward for Small Wonders in Northern Ireland.

Small Wonders at conferences

During this financial year, presentations about Small Wonders were given on both national and international platforms. In September 2013, Julie Watson, a research neonatal nurse and midwife (now lecturing at Sheffield Hallam University) presented audit data at the first Public Health England Annual Conference indicating the evidence of impact which Small Wonders had, as an integral part of a change programme across 18 neonatal units in the Yorkshire and Humber region. The audit findings, captured over a 35-week period during which Small Wonders was embedded and during which film-clips from the DVD were used as part of staff training, showed a 10% increase in breastmilk on discharge and a 20% increase in the proportion of babies receiving skin-to-skin care across the region. This evidence shows how Small Wonders can act as a catalyst for change and was integral to the sustainable and culture change in Y&H neonatal units. This study is being written up by Julie Watson and Professor W McGuire at University of York and Hull York Medical School for publication.

In addition, as part of Alison Baum's (Best Beginnings' CEO & Founder) lecture tour of Australia and New Zealand (Feb-March 2013), Small Wonders was presented to "Challenge the Thinking" of delegates. These presentations in Melbourne, Sydney, Brisbane and Wellington included background on the research and development of Small Wonders as well as clips from the DVD.

In May 2014, Best Beginnings was delighted to take part in Gold Lactation Online Conference and present on Small Wonders. This online conference serves over 2000 healthcare professionals from nearly 70 countries.

Small Wonders Parent Champion Programme

During the last financial year, Best Beginnings made a decision to pilot the Parent Champion Programme in Blackpool. This project had been developed and delivered in Liverpool, thanks to funding from the Department of Health.

The ten-week course is designed to equip the Small Wonders Parent Champions (parents who had previously had premature or sick babies) with the confidence, knowledge and skills to use their own experiences, together with the Small Wonders DVD, to:

- · help parents on the neonatal unit to cope with the stress, anxiety and altered parenting roles that accompany their baby's condition;
- help them manage their expectations and enable them to be at the heart of their baby's care by promoting breastfeeding, skin-to-skin and positive touch.

As part of Best Beginnings' commitment to collaboration, a decision was made for the Blackpool pilot of our Parent Champion Programme to be in collaboration with Breastfeeding Network (BfN). This decision was made due to their established system of supervision for all BfN peer supporters, from which our Parent Champions would benefit on an ongoing basis.

The Parent Champion course commenced in October 2013 enlisting parent champions to support parents on the neonatal unit. This training continued throughout the financial year. In July 2014, five parent champions were awaiting confirmation from Blackpool Hospital to commence peer support from to parents on the neonatal unit.

The evaluation of Small Wonders at Guys and St Thomas's (GST) and Liverpool Women's Hospital Trust

Previously, Best Beginnings had commissioned an independent evaluation of Small Wonders. During this financial year a decision was made in collaboration with the Principal Investigators at the evaluation sites and the academic evaluators that the evaluation should be disaggregated into three discrete studies. Each study compares data collected from a cohort before Small Wonders was launched and compares it to a cohort since Small Wonders has been embedded into practice in the hospitals.

The first study looks at the impact of embedding Small Wonders on baby outcomes, including whether there is any difference in the rate of breastfeeding at discharge; the number of days of admission when breastmilk was used; and a range of the other clinical outcomes. Study 1 is being lead by Dr Bill Yoxall at Liverpool Women's Hospital.

The second study looks at the impact of embedding Small Wonders on staff knowledge and confidence, using the Neonatal Unit Clinical Assessment Tool (NUCAT) which Best Beginnings co-developed with Coventry University. Study 2 is being led by Prof Beth Grunfeld from Coventry University.

The third study looks at the impact of embedding Small Wonders (and in Liverpool also the parent champions) on parent experiences of neonatal unit care. The pre-post survey design will give insights into whether the Small Wonders change programme has resulted in increased parental wellbeing and their confidence in caring for their infant, as well as any improvements in infant feeding experiences and skin-to-skin practices. Study 3 is being led by Dr. Nicola Crossland from UCLAN.

The studies have been running through this financial year and will be reported on in the 2014-2015 Annual Report.

Financial support

The trustees of Best Beginnings would like to thank the Department of Health for their financial support of the Small Wonders project during this financial year.

3. Transition to Parenthood Programme

In this section:

- Baby Buddy, the new app for parents and parents-to-be
- Baby Express
- Maternal Mental Health Film Project (MMHFP)
- National Teenage Pregnancy Midwifery Network

Baby Buddy, the new app for parents and parents-to-be

Best Beginnings is committed to supporting mothers and fathers in their transition to parenthood in ways that will maximise their baby's physical and emotional development. Best Beginnings has developed Baby Buddy, a phone app that provides practical information and support in a free, accessible format to mothers and mothers-to-be in the UK.

Background

Over 800,000 babies are born each year in the UK and a quarter of their mothers are under 25. Their children are more at risk than children of older mothers of premature birth, poor nutrition and developmental delays, all of which can affect their life chances. Teenage mothers are less likely to attend antenatal appointments, and health professionals highlight the need for free, easily-accessible phone apps to support their engagement.

In 2013, 80% of 16-24 year olds in the C2DE socio-economic group owned a smartphone, and this percentage is rising. C2DE refers to people on lower incomes.

Other pregnancy apps available are generally commercial products targeted at the older middle-class market and can therefore fail to engage younger, disadvantaged mothers. In 2010 Best Beginnings conceived the idea of developing apps to appeal to a broader demographic, to actively engage young families from tougher backgrounds and to act as an accessible public health intervention as a strategic way of supporting mothers and mothers-to-be through the physical, social and emotional transition to parenthood. We saw the potential of using apps to play a pivotal role in enabling us to deliver to our mission of reducing inequalities in child health. The idea was (and still is) to use technology to:

- Increase the knowledge and confidence of mothers-to-be and new mothers about pregnancy and parenthood
- Strengthen the relationship between young mothers and their babies, whilst enhancing their social support
- Improve young mothers' access to and engagement with health services
- Have a positive impact on mothers' health behaviour

Our original aim was to produce a Bump Buddy app for pregnancy and a Baby Buddy app for the postnatal period. Thanks to funding we had received from a number of funders including the Tedworth Charitable Trust and the Guys and St Thomas' Charity, last financial year we had worked with parents, midwives, doctors, health visitors, breastfeeding specialists, speech and language therapists, psychologists and teenage pregnancy specialists and had developed a prototype Bump Buddy app. We also had content for both apps and this content had been endorsed

by a number of Royal Colleges and professional bodies. It was written in the style of a chatty friend, covering all the important issues in a way that is particularly relevant to young first time mums and accessible for those with a reading age of about 11.

By the year end we were looking for funding to take both the Bump Buddy and Baby Buddy apps to launch, to create films to go into the apps, to market them across the UK and to commission an independent evaluation of them.

Key activities and achievements from August 2013 to July 2014

In December 2013, Best Beginnings was awarded £866,022 by the Big Lottery Fund to create the new app over two years. In the same month, following a robust commissioning process we had undertaken earlier in the year which involved applicants responding to a 65 page specification document we had produced, the app development company Despark was appointed. Despark convinced us of the merits of combining Bump Buddy and Baby Buddy into one app that covers pregnancy to the child is six months old.

By March 2014 two new project staff, the Apps Project Manager and the Apps Digital Lead, were in post to run the multi-faceted Baby Buddy app project. Below we outline the key achievements for the financial year 2013-14.

Baby Buddy build

In June the team carried out a period of 'beta testing' of the app. Over 200 people downloaded the app and tested it for us. We had some great and positive initial feedback from the testers, as well as lots of extremely helpful emails from people reporting little bugs as they discovered them. This was the key purpose of the beta testing and led to some immediate changes and updates to the app, as well as the chance to fix bugs before the app was soft-launched on the Google and Android app stores in July 2014 with the following features fully functioning:

- Bump Buddy/Baby Buddy an avatar (virtual character) that the user can create or customise who guides them through the app
- Today's information personalised pregnancy and parenting information and prompts for reflection and action from the user's Buddy, in the voice of a chatty, knowledgeable friend.
- You can do it! This feature allows the user to set themselves goals or adopt preset goals like 'taking time for me,' 'talk to my baby', taking more exercise or adopting a healthier diet.
- What does it mean? This feature gives the user access to a glossary of terms. At the end of this reporting year, this feature focused more on terms about physical health. (Since the year end and thanks to input from parents and from professionals, including psychiatrist and psychologists, this feature now describes words related to mental health as well.)
- Ask me Baby Buddy has a growing database of questions that parents ask with quality-assured answers. Users can search for information quickly themselves at any time of day or night. The app covers mental and physical health and also practical things like maternity rights and housing options.
- Videos The videos can be found via the in-app video library as well as in 'Daily information,' answers to 'Ask me' questions and in descriptions to glossary terms.
- Remember to ask This feature allows the user to add questions about their pregnancy or baby as they occur to them, rather than being 'put on the spot' during appointments. Information found in the app, e.g. in 'Ask me,' can automatically be added to this list and parents can also create their own questions.
- Appointments Typically, the younger a mother is the more likely she is to miss an appointment. This feature puts appointments directly into the diary on their smartphone.
- Tell us what you think This feature is capturing detailed feedback from users of Baby Buddy through pop-up in-app questionnaires that ask about usability, likeability and also impact of the app on what parents know and how they feel about themselves and their baby. These insights along with app usage data analysed by types of user (e.g. age, ethnicity and locality) will inform future developments of Baby Buddy.

Since the year end, the following three features have been added into the Baby Buddy app and there have been more than 16,000 downloads:

- Bump Book and Baby Book This feature encourages users to record their thoughts and feelings, and photos to support self-reflection and as a record of their transition to parenthood and their baby's first months. Users can choose to share individual entries via social media and email if they choose.
- Bump Booth and Baby Booth This feature allows the user to take a weekly photo of themselves during pregnancy (or of their baby) and to create a video of their growing bump (or growing baby). Users can share their videos if they choose to increase their support network. This feature has been designed to help with bonding of mother and baby.
- Bump Around and Baby Around This feature has the potential to reduce isolation and build social capital by enabling the user to easily find local services and groups and give their feedback on them (see below).

Market research and stakeholder engagement

An in-depth process of stakeholder engagement, including a significant amount of market research with young parents has underpinned this project (like all of Best Beginnings' projects). During this financial year we commissioned a series of 10 focus groups, eight in depth interviews and three telephone calls with parents and parents to be, as well as health and social care professionals. These took place across the UK, including London (Haringey, Islington, Lambeth, Southwark and Streatham), Birkenhead, Oldham and Sutton. Groups were made up of separate groups of mums and mums-to-be and dads and dads-to-be of all ages, but with a particular focus on young parents. This informed the development of the look and the feel of Baby Buddy and our approach to content creation. In addition, the stakeholder process has involved meetings, email correspondence and telephone conversations with a diverse group of individuals who represent a wide variety of different organisations and perspectives. Building on stakeholder meetings that had happened in the previous financial year, we held a stakeholder meeting in June at which

the team was able to share the new look and feel of Baby Buddy ahead of the beta testing and launch. Stakeholders remained (and remain) supportive and involved with the process of the development of Baby Buddy.

Endorsement of Baby Buddy

Baby Buddy is currently endorsed by the following organisations: the Royal College of Paediatrics and Child Health, the Royal College of Obstetricians and Gynaecologists, the Royal College of Midwives, the Community Practitioners and Health Visitors Association, the Institute of Health Visiting and the Royal College of Speech and Language Therapists. Endorsement of the app means that all of these organisations have approved all of the content in the app – both written and film – and will continue to be part of the sign-off process for the app content. Representatives from each of these organisations make up the Editorial Board, which has been developed since the end of the financial year, to ensure that all new content continues to reach the very highest standards. Subsequent to the year end, in November 2014, the Department of Health and the UK Faculty of Public Health also became endorsing organisations of Baby Buddy.

In-app film project

A substantial proportion of the funding from the Big Lottery Fund was awarded for the creation of an extensive video library in the app, to be made up of short films drawn from existing Best Beginnings material, but also the creation of over 120 new original short film clips. Invitations to tender were sent out in April 2014, and in May 2014 Heirloom Media were chosen to carry out the work after a formal tendering process. Initial work on reworking content from the Best Beginnings From Bump to Breastfeeding and Small Wonders DVDs took place, and by the end of the year these films along with MRI scan images (kindly contributed by Mary Rutherford then at Imperial Trust now at the Guys and St Thomas' Foundation Trust) were added to the app. By the end of the financial year, a clear plan was in place of the new films that needed to be created, as well as the building of a network of contributors for the films from mums and mums-to-be to healthcare professionals.

Evaluation

In July 2014, and also thanks to funding from the Big Lottery Fund, an invitation to tender for the full academic evaluation of Baby Buddy was issued. Subsequent to the year end, in September 2014, an academic consortium was appointed to evaluate Baby Buddy in three areas across the UK and also undertake in-depth analysis of data collected from within the Baby Buddy app. The consortium is made up of Dr Toity Deave from the University of the West of England (Lead); Professor Jane Coad, Coventry University, Dr Raghu Lingham, Newcastle University, Professor Sally Kendall, University of Hertfordshire and Professor Crispin Day, King's College London.

Marketing and communication

In June 2014, also thanks to the Big Lottery Fund, PR and Social Media agency TaylorKerek were appointed on a six month contract to engage as many parents and parents-to-be, healthcare professionals and members of the general public with Baby Buddy as possible. This was in part to encourage people to become beta testers of the app in June, but also to ensure that there was a network of champions to download the app once it went live in July 2014. TaylorKerek built on their success throughout the autumn, after the end of the financial year, to ensure download figures were high at and beyond the Baby Buddy launch in November.

Baby Buddy Launch

Work began on the official launch of Baby Buddy in June 2014, when the Royal College of Obstetricians and Gynaecologists was booked for the launch night to take place on Wednesday 19 November 2014. Further preparation undertaken during this financial year included inviting a number of key speakers to attend the event, the compiling of an initial guest list, and the design of the invitation to be used for the event.

Future planning

During this financial year we planned the future development of Baby Buddy. This includes extending the content to the child's third birthday, enhancing the maternal mental health content and functionality of the app, creating a version of Baby Buddy specifically for dads and translate Baby Buddy into a number of other languages.

Summary

It has been an incredibly exciting year for the Baby Buddy project – beginning with the creation of a prototype of the app that helped secure the large grant from the Big Lottery Fund. It has been an incredibly busy time for the App Development Team and much has been achieved in the year. The team are looking forward to another highly productive year.

Thanks

The trustees of Best Beginnings would like to thank Big Lottery for their financial support of the mobile apps project in this financial year.

Baby Express

The Baby Express magazine has been a key element of our Transition to Parenthood Programme in 2013-14. In 2013, Best Beginnings was offered the opportunity to take on two magazines, Baby Express and Toddler Express. Baby Express is a month-by-month magazine designed to guide and support new parents in enjoying their baby's first year. Toddler Express covers the period from 13 months until the second birthday. Each issue provides age-appropriate information on the physical, social and emotional development of the baby as well as providing a non-judgemental source of support for parents. The magazines are offered as a locally commissioned resource as an adjunct to local services, with each issue bespokable for that area. Typically, issues 1 and 2 are handed to new mothers by the health visitor, and subsequent issues are sent directly to the family home.

The magazines originate from the US and the original content was adapted and updated for use in the UK and published by The Children's Foundation in 2000. A randomised controlled trial carried out on Baby Express in northeast England showed that the magazine helped parents to

understand their infant better and feel less hassled. Following publication of a right up of this The Healthy Child Programme cites Baby Express as being an evidence-based intervention for new parents at home.

Plans to refresh and develop Baby Express commenced in December with the support of the Greater Manchester Public Service Reform Team. Unfortunately, Toddler Express remains nascent due to a current lack of funding.

The original series of Baby Express magazines followed an 8-page, monotone style framework with occasional photographs. Best Beginnings embarked on a structured programme of updating Baby Express using the charity's tried and tested method of co-creation, putting in place an allocated budget and named project lead.

The project, including details of the content, designs, photography, embedding and distribution was co-produced with the commissioners, the expert stakeholder group, front-line workers and parents. To ensure the success of the updated resource, a content writer, graphic designer and photographer were commissioned to ensure the words, layout and photographs were appropriate and easy for parents to understand. A multi-disciplinary stakeholder group of over 50 experts was set up to ensure that the updated content was in line with evidence (or best practice where no evidence was available).

A decision was made for the updated Baby Express to be an image-led resource, utilising photographs to capture the reader's attention, support the text, model good behaviour as well as ensuring a good ethnic mix and spread of age-groups.

On the completion of Issue 1, parent consultation was carried out. The updated magazine was compared to the earlier version to ensure it was fit for purpose and suitable for new mums and dads. Concurrent to the updating of Baby Express a formative pilot of the magazine was rolled out in Greater Manchester. This involved embedding the resources into the health-visiting care pathway across the pilot sites starting on April 1st 2014. Issues 1 and 2 were intended to be gifted to mothers by health visitors, with following issues posted by a local children's centre once a month.

In 2013-14 Best Beginnings, in collaboration with the Greater Manchester team, have scoped and updated the format, style and content of Baby Express. The content of issues 1-9 has been drafted, shared with stakeholders and rewritten. The magazine has been endorsed by the Royal College of Midwives, Royal College of Paediatrics & Child Health, Royal College of Speech and Language Therapists, Community Practitioners and Health Visitors Association, Institute of Health Visitors, Public Health England and other key organisations. The first five issues (10,000 copies) have been distributed across four pilot wards in Greater Manchester. Updating and redesigning Baby Express will be completed by April 2015.

Best Beginnings is delighted that the Greater Manchester team have been awarded funding from the Economic and Social Research Council to carry out a randomised controlled trial to investigate whether Baby Express improves outcomes for babies.

Baby Express is now available for commissioners under license for use in their area, and to customise the front and back pages signposting to local services. This is an opportunity to make the magazine a local product and highlight integrated services such as early years, child health services and community provision both in the NHS and local authority.

Building on our experience in updating Baby Express we are committed to securing funding to do the same with Toddler Express in the next year if funding is forthcoming.

Maternal Mental Health Film Project (MMHFP)

In November 2013 Best Beginnings was awarded funding from the Galvani Foundation to develop a resource to promote maternal mental health. We are now working with Heirloom Media, White Boat TV and the Maternal Mental Health Alliance to create a series of engaging evidence-based films designed to support parents, families and professionals to reduce maternal mental health problems and improve the support available to those that need it.

Perinatal mental health problems can have a devastating impact on women, their babies, fathers and their families. Up to 10% of women will suffer from mental health issues that can occur during pregnancy and in the year after birth. Our films will aid the early identification of a woman's condition, help her make prompt and informed choices about treatment and prevent many of the negative effects that perinatal mental illness can have on families. Forty shorter films will go into the Baby Buddy app. These shorter films, along with six longer films and a short drama, will also go on to a DVD, which will be used in training and development.

Purpose and aims

The MMHFP will ensure:

- Parents receive timely evidence-based information on perinatal mental health (including across the full spectrum of mild, moderate and severe illness) which raises awareness of how pregnancy and parenthood can impact on parents' emotional, psychological and physical health and wellbeing in the immediate and longer term.
- Parents have a much greater awareness and understanding of their own mental health needs and feel comfortable discussing these with their healthcare professionals.
- Parents understand how perinatal mental health illness can affect their relationship with their baby and his or her social and emotional development in the longer term.
- Parents are placed at the centre of holistic care provision and know how they can access the help and support they need, including across the full spectrum of mild, moderate and severe perinatal mental illness.

- Health professionals have access to evidence-based resources that facilitate informed choice and help to open up and guide discussions with mothers, their partners and families.
- Service managers, trainers and health professionals have access to educational resources that support the PREP continuing professional
 development (CPD) standard and know how to access (and advocate for) specialist perinatal mental health support and services across the
 full spectrum of mild, moderate and severe illness.
- Commissioners of maternity and mental health services are aware of evidence-based best practice in care and service provision across the full spectrum of mild, moderate and severe perinatal mental illness and commission services accordingly.

Key activities and achievements from August 2013 to July 2014

The early project development work in 2013 was undertaken by the Best Beginnings Professional Lead and in February 2014 a Project Lead was recruited to coordinate film production. The first part of 2014 saw a major stakeholder engagement process. This involved parents, perinatal mental health experts and health and social care workers. The engagement process ensures that the films address the needs of parents and are evidence-based and reflect good practice. The process saw the establishment of an Advisory Group to steer the project and provide expert advice, and a broader Stakeholder Group to provide input on the content and tone of the films. The first meeting of the Advisory Group took place in May and in June over forty people attended a 'Stakeholder Day' at the Coin Street Centre on the South Bank.

We also commissioned some research with mothers who had experienced mental health problems during pregnancy or after the birth of their child. We spoke to women who had received a clinical diagnosis for their mental health problems and to women who had mental health problems but did not receive a clinical diagnosis. The research provided valuable insights into the needs of parents and the participants were enthusiastic about the idea of the films and thought they could decrease the stigma associated with mental illness.

In July we heard that we had been successful in our bid to the Burdett Trust. This extra funding allows us to plan ahead for the next year when we will be focusing on the embedding of the films. It also funds a film drama, which will be made by the production company White Boat TV. Drama is a new medium for Best Beginnings that will bring an exciting new dimension to our work.

Looking ahead

The next few months will be spent filming and editing the footage. We will continue to involve our stakeholders, asking them to provide feedback on the treatments for the films and on the 'rough cuts' as they appear. The focus for next year will be the embedding of the films; we are already talking to our colleagues in midwifery and nursing organisations about how we can work together to make positive changes for parents with poor mental health.

National Teenage Pregnancy Midwifery Network

Best Beginnings hosts the National Teenage Pregnancy Midwifery Network, an informal multidisciplinary network that collects and shares good practice, research, policy and resources on maternity care for young parents-to-be and young parents. The network has grown this year by over 30%, from 650 members to over 850 members, around 500 of whom are practising midwives (the others are health visitors, family nurse practitioners, academics, student midwives and voluntary and statutory sector professionals working with young parents). Members of the network receive a e-newsletter three times a year, which this year included a themed issue on teenage pregnancy and diet. Members who are specialist teenage pregnancy midwives have been involved in developing and beta-testing the Baby Buddy phone app and other resources for young parents. The year ahead will see improvements to the network's webpage to make it easier to access teenage pregnancy resources.

4. Better Breastfeeding Programme

The purpose of the Better Breastfeeding Programme is to promote and support breastfeeding to enable parents to make a fully informed choice and be effectively supported in their choice. At the heart of the programme is the From Bump to Breastfeeding DVD, which is given to parents by professionals antenatally and postnatally and used to support healthcare professional training.

Breastfeeding provides a natural safety net against the worst effects that child poverty has on health and for this reason the WHO recommends that all babies are breastfed exclusively for six months and alongside other food and drink for at least the first two years. Despite this recommendation less than 2% of UK mothers exclusively breastfeed to six months.

The WHO advises that infants who are not breastfed, for whatever reason, should receive special attention from the health and social welfare system since they constitute a risk group. The health benefits of breastfeeding to mother and child are huge. Research shows that breastfeeding is extremely important for child health and wellbeing:

- Babies who are not breastfed are more likely to develop a range of short-, medium- and long-term health problems including early
 respiratory infections, gastrointestinal illness, type 2 diabetes, higher blood pressure and raised cholesterol.
- Children who are breastfed for four months or longer have a significantly lower chance of having socio-emotional difficulties at five years compared to those who had never been breastfed.
- Mothers who do not breastfeed will have an increased risk of breast cancer and gallbladder disease.
- There remain huge inequalities in infant nutrition, with families from lower socio-economic groups being significantly less likely to start and continue breastfeeding.

In Autumn 2008, Best Beginnings launched the UK's first (and only) national DVD on breastfeeding, From Bump to Breastfeeding. This 'fly-on-the-wall' style documentary follows several families including young parents and those from lower socio-economic groups, putting accurate, practical breastfeeding information straight into the hands of parents who otherwise might never become or continue as breastfeeding families. Our DVD shows parents how to start breastfeeding and provides practical information on how to continue.

An independent evaluation carried out by Bournemouth University across 14 trusts in the UK found:

- Overall 71% of women who received the DVD watched it. The figure was even higher (88%) amongst women who left school with no qualifications.
- Of the women who watched the DVD before their baby was born, 99% said they found it useful and 84% felt that the DVD covered all they wanted to know.
- Watching the DVD was associated with higher breastfeeding rates: 75% of women who had watched the DVD were still breastfeeding
 at 6 weeks compared to 66% of the women who did not watch the DVD.

Over 1.6 million free copies of From Bump to Breastfeeding were distributed by the four UK governments between November 2008 and November 2010. In November 2010, the English Government then decided to pass the task of distributing the DVD over to Best Beginnings. The DVD is now sold by Best Beginnings in England but continues to be given out free in Scotland, Northern Ireland and Wales.

Key activities and achievements from August 2013 to July 2014

From August 2013 to the end of July 2014, Best Beginnings distributed 166,178 copies of the From Bump to Breastfeeding DVD to healthcare organisations, children's centres and individuals in the UK. Just over 500 copies were distributed to individuals outside the UK, most of which went to Australia. Since the DVD was launched in 2008, over 2.1 million copies have been distributed.

Best Beginnings' staff have been to several conferences throughout the financial year at which they have promoted the DVD and the best ways to distribute it to families. The DVD is used to educate student midwives and doctors in best-practice breastfeeding and continues to be an integral part of the UNICEF BFI training programmes.

Following on from the successful production and dissemination of a bespoke version of From Bump to Breastfeeding in Brent & Harrow locality in 2011 and the Yorkshire and Humber Health Innovation and Education Cluster (HIEC) and Maternity Forum in 2012, University College London Hospital asked Best Beginnings to produce a bespoke version of the DVD as part of their investment in breastfeeding support services. As per the pioneering DVD in Brent & Harrow, a logo was added to the front cover of the DVD and details of UCLH's local maternity services were put on the back cover. Midwives and health visitors now give out these DVDs to families and fulfil two goals: ensuring that local people have details of their support services, their views are sought and that expectant families receive a copy of From Bump to Breastfeeding, as recommended in best practice guidance outlined in the Department of Health, UNICEF and Start4Life breastfeeding care pathways.

"I'm proud that, together with Brent, we were the first area in the UK to get the bespoke version of the From Bump to Breastfeeding DVD. My colleagues and I are in no doubt that the effective embedding of the DVD (including it going to all women antenatally and being used in staff training) has supported us in achieving Baby Friendly Status and that using the DVD has been a significant contributing factor to our very high breastfeeding rates; over 50% exclusive breastfeeding at 6-8 weeks and one of the lowest drop-off rates in the country."

Alison Spiro, Infant Feeding Lead & Health Visitor for Harrow Community Services and Northwick Park Hospital

The DVD content is accessible to people from all socio-economic backgrounds. From Bump to Breastfeeding is still available to view for free on the Best Beginnings and NHS Choices websites.

In October 2013, Best Beginnings applied to the Department of Health Innovation, Excellence and Strategic Development Fund, for funding to carry out a breastfeeding impact study in the North of England. Since the end of the financial year, we have found out we were successful with this funding application to evaluate the impact of our embedding programmes on service delivery and local breastfeeding rates in the North of England. The study will commence in the current financial year and will be reported on in the 2014-2015 Annual Report.

5. Future Parents Programme

The purpose of this programme is to educate young people to increase knowledge, change attitudes and build confidence of the parents of tomorrow. There is good evidence that this life-course approach will support national change. However, due to funding and capacity issues no activity has happened with this programme during this year.

6. Additional activity to tackle child health inequalities

Conferences & events

Members of the Best Beginnings team attended 55 conferences and events from August 2013 to July 2014. The extensive public output included keynote speaker presentations, chairing workshops and national events, poster presentations, exhibition stands at national and international conferences and giving an online international talk aired in 60 different countries. CEO Alison Baum was delighted to join a conference tour of Australia and New Zealand as a keynote speaker at five conferences.

Key Conferences at which Best Beginnings had speaking or chairing roles

- Public Health England Conference, Warwick University September 2013, presentation by Julie Watson, Professional lead
- Launch of the British Association for Child and Adolescent Public Health, RCPCH London October 2013, presentation by Alison Baum
- Charity Finance Group, Birmingham November 2013, presentation by Alison Baum
- A Better Start pre-assessment event, Leeds February 2014, presentation by Alison Baum
- Perinatal Mental Health A Public Health Priority, RSPH London February 2014, presentation by Alison Baum
- Media Trust Conference, Channel 4 Headquarters London March 2014, Alison Baum participated in a panel debate
- RCPCH Health Inequalities Workshop, London April 2014, Alison Baum co-facilitated a session with Chris Cuthbert from NSPCC
- GOLD Online Lactation Conference April 2014, presentation by Tina Pollard
- NHS England & Patient Experience Network Conference, Blackburn May 2014, presentation by Alison Baum
- International Day of the Midwife Conference, London May 2014, presentation by Alison Baum
- Primary Care & Public Health Conference, Birmingham May 2014, presentation by Alison Baum

An international network

Best Beginnings CEO, Alison Baum lecture tour of Australia and New Zealand

In February of this year, thanks to funding from the Australian Breastfeeding Association and the New Zealand Lactation Consultants Association, Alison was delighted to take part in a two-week international lecture tour.

During these two weeks, Alison visited Sydney, Canberra, Melbourne, Brisbane and Auckland giving eight talks on the innovative resources and work of Best Beginnings. To really make the most of this fantastic opportunity and promote the work of Best Beginnings in an international context, Alison also arranged to hold meetings with key people from government, charity and academic backgrounds. In total, she had 10 meetings including a meeting at the Department of Health in Canberra and also with the Victoria State Departments of Health and Education in Melbourne.

Best Beginnings exhibition at the World Association of Infant Mental Health (WAIMH) Congress

This financial year was a momentous occasion for the UK, as the Association for Infant Mental Health UK hosted the 5 day WAIMH Congress in Edinburgh. The Best Beginnings team was delighted to be involved in this event by exhibiting at the entire event and networking with leading experts in infant mental health from across the globe.

7. Building for the future

Several successful funding bids saw Best Beginnings expand considerably in 2014 with the addition of a Small Wonders National Facilitator, Maternal Mental Health Project Lead, Apps Project Manager, Apps Digital Lead, Apps Research Lead and Director of Development responsible for income generation including the sales and embedding of our resources. Best Beginnings also employed an Administrator to support the increased back-office work of the growing organisation.

Best Beginnings is fortunate enough to have the support of fantastic volunteers who help us with all aspects of our work from filmmaking to fundraising. The trustees would particularly like to thank Lisa Edwards, Georgina McCrossen, Lucy Hinchliffe and Liana Wool for their excellent work

The trustees would like to thank Sheffield Haworth for providing meeting rooms throughout 2013-14 as well as CODE Advisors for providing a weekly hotdesk facility. The trustees would like to thank Heirloom Media for pro-bono filming and production support, Alex Rhodes for pro-bono market research and Sara Shipman for pro-bono fundraising support.

Sales & commissioning

In March 2013, the Philip King Charitable Trust generously awarded Best Beginnings a grant of £30,000 per year for three years towards the salary of a Business and Development Manager. This grant enabled us to leverage a further £15,000 a year for two years towards this post from the Tedworth Charitable Trust in March 2014.

The role is undertaken by Helen Hunter, who was employed in January 2014 and has extensive experience creating and maintaining effective relationships between the third sector and health and social care commissioners. Helen's job title has since changed to Director of Development.

The Director of Development is responsible for overseeing Best Beginnings' income generation, primarily by developing the charity's commissioning programme – securing contracts from local areas across the UK to embed Best Beginnings' package of resources (From Bump to Breastfeeding DVD, Small Wonders DVD, Baby Buddy phone app, Baby Express Magazine) into local health services. This work will generate much-needed unrestricted income for Best Beginnings, whilst also increasing the reach and impact of our work to support parents to give their children the best start in life.

Commissioning programme

We have good evidence from work we have done with the From Bump to Breastfeeding and Small Wonders DVDs that when effective embedding and support is carried out, the potential of our resources is amplified and overall impact is maximised. Best Beginnings' programme of commissioned work includes piloting and embedding our resources (which we can be spoke for each locality) initially in the following locations:

- Great Manchester Baby Express pilot
- Guy's and St Thomas' Trust Baby Buddy embedding
- Blackpool Local Authority Baby Buddy embedding

In the 2013-14 financial year, we secured a further six commissions totalling £80,000 from six local areas.

Since the start of 2014, Best Beginnings has been working with local authorities involved in The Big lottery Fund's 'A Better Start' programme – investment of £30-50 million in 3-5 local areas for programmes to improve outcomes for young children in three key areas of development: social and emotional development, communication and language development, and nutrition. Following a robust selection process the Big Lottery Fund chose five areas to receive their funding. Best Beginnings has been included in their delivery plans.

In the coming financial year, we plan to extend the range of resources we can offer to local areas and organisations. For example, we would like to develop a version of Baby Buddy specifically for dads, add further content to take Baby Buddy up to a child's third birthday, and translate Baby Buddy into a number of other languages.

Impact

Best Beginnings is increasing its reach and impact across the UK. By empowering health professionals to understand and value our resources, and use them in their everyday work as a means to improve communication and messaging to parents (many of whom are traditionally harder to engage), we are helping to give children in the UK the best start in life.

Future plans

In the coming year, our development team will be working to:

- Further develop the embedding process based on our experiences and feedback.
- Further develop both the commissioning and fundraising pipelines.
- Focus on market access analysis, marketing and PR, and targeted campaigns to ensure there is a steady stream of leads to convert into realistic opportunities.

We would like to thank the Philip King Charitable Trust and The Tedworth Charitable Trust for their generous ongoing support, and all that this grant has enabled us to achieve for the benefit of families across the UK.

8. Raising funds

This year has been Best Beginnings' most crucial year since we started in 2006. The 47% increase in income since 2012/13 highlights that this is a very important moment in our development. Our success in raising funds for the new Baby Buddy App and Maternal Mental Health Project is something we are very proud of. It means that our ability, as a collaborative and innovative organisation, to drive change and reduce child health and well being inequalities is increasing significantly. We are really proud to be working with so many supportive and generous organisations and individuals who are helping Best Beginnings to make such an impact now and in the future.

Key activities and achievements from August 2013 to July 2014

Funding from statutory organisations and trusts and foundations has continued to provide us with our main income stream this year. It is simply amazing the commitment that these organisations are giving to helping us deliver our aims and goals. Many have helped us and we are extremely grateful to all our supporters, we must make special mention here to funding of:

£150,000 from the Department of Health to run another year of our Small Wonders Change Programme as well as to re-master our From Bump to Breastfeeding DVD.

£866,022 from The Big Lottery Fund England to fund a pilot of the much anticipated Baby Buddy app for parents and parents-to-be.

£100,000 from The Galvani Foundation to start our new Maternal Mental Health Film Project which helped us to secure the remaining £250,000 for this project from the Burdett Trust.

Being chosen as the Official Charity of the Opening Night of the Statoil Master Tennis on 4th December 2013 at the Royal Albert Hall topped off the wonderful news about these grants. It was a star-studded evening and Alison had the dream opportunity to speak 'on-court' to the whole audience alongside one of our Small Wonders parents Sinem Shakolas. With thanks to all of our guests and the support of IMG we raised £40,000 on the evening.

This summer, Best Beginnings was again selected as one of two charities benefitting from the Goodwood Regency Ball and Magnolia Cup Ladies Race. We will receive £95,000 from this event with huge thanks to the Earl and Countess of March and Kinrara and everyone who attended.

We also wanted to thank amazing Kate Wells for running the London Marathon for us this year and our British 10K running team for striding across central London on an early Sunday morning in July. They are all totally inspiring.

Looking ahead

Thanks to extremely generous pro-bono support from Raising IT, we aim to launch a new Best Beginnings website before the end of the next financial year which will enable us to communicate better with everyone who makes a virtual visit to us. The new website will be more user-friendly and will reflect the growing number of people who need our resources and information in a digital format.

We'll be offering more ways to support Best Beginnings with a donation. It will be easier to set up a regular monthly donation, there will be more chances for people to do something sporty and fun to raise money for us as well as clear and simple ways for companies and philanthropists to get involved with our work to help give all children in the UK the best start in life.

The challenge

Best Beginnings has quickly built a strong reputation for the quality of the resources it produces and for the impact of its work, all of which has been independently verified. We have achieved this success despite the many challenges faced by the sector, the relative small cohort of staff and volunteers that help us to drive our work forward and the fact that we are still not sufficiently known and visible to the wider public, despite enjoying a high profile with practitioners and commissioners in this space.

For a charity such as Best Beginnings to further flourish and grow it is vital for us to continue to attract funding. Our most urgent need is to gain unrestricted funding to cover the costs of future research and development and the funding shortfall which will persist until the contribution to core costs received on commissioned contracts meets or exceeds the costs of our overheads; a position, on current projections, which we hope to reach in 2018.

To help us in this quest we working to ensure that our communications now reflect and highlight the need and importance of unrestricted income and we are making additional investments in to our fundraising capability to develop major gift and individual donor programmes. We are also seeking to develop a more entrepreneurial approach to the generation of unrestricted income and ensuring that all those who come into contact with Best Beginnings are potentially recruited to help us in this endeavour.

Summary

All in all it has been an incredibly busy year for Best Beginnings and we are thankful for every single donation that we have received. We look forward to welcoming new people to the family, and building a long lasting relationship with our supporters over the coming years.

9. Financial review

Despite the unfavourable financial climate, Best Beginnings' total incoming resources showed substantial growth with a 47% increase on the previous year to £1,060,191. The growth is principally due to the generous support of our funders and contributors, as well as the continued hard work undertaken by our staff.

Total resource expenditure for the year was £845,161.

A total of £768,995 (91% of expenditure) was spent on charitable activity for the public benefit, 7% of expenditure was spent on fundraising, with the remaining 2% being spent on governance.

After the year-end, we drew down £50,000 of our £150,000 CAF loan facility in order to manage cash flow, following delays in converting proposed commissioned services and sales into confirmed contracts. At time of filing the accounts, we have a healthier reserves position and a healthy pipeline for both unrestricted fundraising and commissioned services.

Reserves policy

During the 2013-14 financial year, the Reserves Policy of the charity was to run with a minimum of 6 months running costs (£234,000) in the bank to ensure continuity of services in the event of a loss or delay of funding, and to maintain the ability to meet unforeseen costs. As of July 31st 2014, there was £193,804 in unrestricted reserves, representing five months running costs, and £213,228 in restricted reserves, resulting in overall reserves of £407,032. Best Beginnings has no investments or other substantial assets at the time of this report.

Subsequent to the Year End, in January 2015, the trustees decided that this figure is a high reserve in the current economic climate and amended the Reserves Policy to the charity running with a minimum of 4 months running costs. At the time of filing these accounts, the Reserves Policy target is £200,000.

Relevant organisations

Bank: The Co-operative Bank, PO Box 250, Delf House, Southway, Skelmersdale, WN8 6WT Bank: CAF (Charities Aid Foundation), 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4TA Accountant: HW Fisher, Acre House, 11-15 William Road, London, NW1 3ER

Trustees

The trustees who served during the year were: Obi Amadi David Boyd

Morag Campbell
Rachel Ellison
Francesca Entwistle (resigned 23/10/13)
Janet Fyle
Andrew Harris (Treasurer)
Eileen Hayes
Alan Maryon-Davis (Chair)
Angus Morrison
Andrew Moss (resigned 6/12/13)
Sharon Walker

None of the trustees have any beneficial interest in the company. All are directors of the company and guarantee to contribute £1 in the event of a winding up. Trustees are elected by the existing Board of Trustees. A Trustee Policy is in the process of being created, stating the induction and training to be received by new trustees, the process of selecting new trustees and the continuation policy for existing trustees.

Risk management

The trustees consider risk as part of their quarterly meetings and are confident that systems are in place to mitigate the impact of key risks.

Organisational structure

CEO Alison Baum and her senior management team of Finance & Office Manager Lee Hall, Director of Development Helen Hunter, and Head of Fundraising Danielle Taylor manage the day-to-day running of the charity. Strategy and major decisions are decided by the Board of Trustees.

Charity details

Best Beginnings is a company limited by guarantee, company number 5866886, and a registered charity, number 1120054. Best Beginnings' principal address and registered office is 12 Vale Royal, London, N7 9AP.

Disclosure of information to auditors

Each of the directors has confirmed that there is no information of which they are aware which is relevant to the audit, but of which the auditor is unaware. They have further confirmed that they have taken appropriate steps to identify such relevant information and to establish that the auditors are aware of such information.

Auditors

In accordance with section 485 of the Companies Act 2006, a resolution proposing that H.W. Fisher & Company be re-appointed as auditors of the company will be put to the Annual General Meeting.

On behalf of the Board of Trustees

Professor Alan Maryon-Davis

Chair of Trustees

Date 17/04/15

BEST BEGINNINGS (A COMPANY LIMITED BY GUARANTEE) STATEMENT OF TRUSTEES' RESPONSIBILITIES

The trustees, who are also the directors of Best Beginnings for the purpose of company law, are responsible for preparing the Trustees' Report and the accounts in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the trustees to prepare accounts for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that year.

In preparing these accounts, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent; and
- prepare the accounts on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the accounts comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

BEST BEGINNINGS (A COMPANY LIMITED BY GUARANTEE) INDEPENDENT AUDITORS' REPORT

TO THE MEMBERS OF BEST BEGINNINGS

We have audited the accounts of Best Beginnings for the year ended 31 July 2014 set out on pages 17 to 25. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and its members as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditors

As explained more fully in the Trustees' Responsibilities Statement on page 15, the trustees, who are also the directors of the charitable company for the purposes of company law, are responsible for the preparation of the accounts and for being satisfied that they give a true and fair view.

Our responsibility is to audit and express an opinion on the accounts in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

Scope of the audit of the accounts

An audit involves obtaining evidence about the amounts and disclosures in the accounts sufficient to give reasonable assurance that the accounts are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the accounts. In addition, we read all the financial and non-financial information in the Trustees' Report to identify material inconsistencies with the audited accounts and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Opinion on accounts

In our opinion the accounts:

- give a true and fair view of the state of the charitable company's affairs as at 31 July 2014, and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the Companies Act 2006.

Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the Trustees' Report for the financial year for which the accounts are prepared is consistent with the accounts.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the accounts are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Andrew Rich (Senior Statutory Auditor) for and on behalf of H W Fisher & Company

Chartered Accountants

Statutory Auditor

Acre House 11-15 William Road London

NW1 3ER 23/4/15

BEST BEGINNINGS (A COMPANY LIMITED BY GUARANTEE) STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 JULY 2014

| · | | Unrestricted funds | Restricted funds | Total 2014 | Total 2013 |
|---|-------|--------------------|------------------|------------|---------------|
| To a serior and a serior of Control of Control | Notes | £ | £ | £ | £ |
| Incoming resources from generated funds | | | | | |
| Voluntary income | 2 | 169,571 | 389,233 | 558,804 | 369,485 |
| Activities for generating funds Investment income | • | 60,603 | - | 60,603 | 4,300 |
| Investment income | 3 | | | 772 | 282 |
| | | 230,946 | 389,233 | 620,179 | 374,067 |
| Incoming resources from charitable activities | 4 | 194,659 | 245,853 | 440,512 | 345,243 |
| Total incoming resources | | 425,605 | 635,086 | 1,060,691 | 719,310 |
| Resources expended | 5 | | | | |
| Costs of generating funds | | | | | |
| Costs of generating voluntary income and activities for | | | | | |
| generating funds | | 58,756 | | 58,756 | 49,927 |
| Charitable activities | | | | | |
| Campaigning, awareness and other charitable activity | | 214,085 | 554,910 | 768,995 | 571,674 |
| Governance costs | | 17,410 | - | 17,410 | 18,127 |
| Total resources expended | | 290,251 | 554,910 | 845,161 | 639,728 |
| Net income for the year and | | | | | |
| Net movement in funds | | 135,354 | 80,176 | 215,530 | 79,582 |
| Fund balances at 1 August 2013 | | 58,450 | 133,052 | 191,502 | 111,920 |
| Fund balances at 31 July 2014 | | 193,804 | 213,228 | 407,032 | 191,502 |

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

BEST BEGINNINGS (A COMPANY LIMITED BY GUARANTEE) BALANCE SHEET

AS AT 31 JULY 2014

| : · | | 2014 | | 2013 | į |
|---|-------|----------|---------------|----------|---------|
| | Notes | £ | £ | £ | £ |
| Fixed assets | | | • | | |
| Tangible assets | 8 | | 1,997 | | 603 |
| Current assets | | | | | |
| Debtors | 9 | 148,705 | | 61,115 | |
| Cash at bank and in hand | | 276,962 | | 143,427 | |
| | | 425,667 | _ | 204,542 | |
| Creditors: amounts falling due within one | | | | | |
| year | 10 | (20,632) | _ | (13,643) | |
| Net current assets | | _ | 405,035 | _ | 190,899 |
| Total assets less current liabilities | | _ | 407,032 | = | 191,502 |
| | | | | | |
| Income funds | | | | | |
| Restricted funds | 12 | | 213,228 | | 133,052 |
| Unrestricted funds | | | 193,804 | | 58,450 |
| | | _ | | _ | |
| | | | 407,032 | | 191,502 |
| | | . = | · | = | |

The accounts were approved by the Board on $\frac{26}{03}/15$

Professor Alan Maryon-Davis

Chair of Trustees

FOR THE YEAR ENDED 31 JULY 2014

1 Accounting policies

1.1 Basis of preparation

The accounts have been prepared under the historical cost convention.

The accounts have been prepared in accordance with applicable accounting standards, the Statement of Recommended Practice, "Accounting and Reporting by Charities", issued in March 2005 and the Companies Act 2006.

1.2 Incoming resources

Donations, legacies and other forms of voluntary income are recognised as incoming resources when receivable, except insofar as they are incapable of financial measurement. Donated services are valued and brought in as income and the appropriate expenditure at the price that Best Beginnings estimates it would pay in the open market for an equivalent service.

Grants, including grants for the purchase of fixed assets, are recognised in full in the Statement of Financial Activities in the year in which they are receivable.

1.3 Resources expended

Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

- Costs of generating funds are those costs incurred in attracting voluntary income, and those incurred in trading activities that raise funds
- Costs of charitable activities comprise all expenditure identified as wholly or mainly attributable to achieving the objectives of the charity. These costs include staff costs, wholly or mainly attributable support costs and an apportionment of general overheads.
- Governance costs include those incurred in the governance of the charity and its assets and are primarily associated with constitutional and statutory requirements.

1.4 Tangible fixed assets and depreciation

Tangible fixed assets are stated at cost less depreciation. Depreciation is provided at a rate calculated to write off the cost less estimated residual value of each asset over its expected useful life, as follows:

Fixtures, fittings & equipment

33% Straight Line

1.5 Leasing and hire purchase commitments

Rentals payable under operating leases are charged against income on a straight line basis over the period of the lease.

1.6 Pensions

The charity operates a defined contributions pension scheme. Contributions are charged in the accounts as they become payable in accordance with the rules of the scheme.

1.7 Taxation

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

1.8 Accumulated funds

Restricted funds are subject to specific conditions by donors as to how they may be used. The purposes and uses of the restricted funds are set out in the notes to the accounts.

FOR THE YEAR ENDED 31 JULY 2014

| Voluntary income | | | | |
|---------------------|---|------------|---------|---------|
| • | Unrestricted | Restricted | Total | Total |
| | funds | funds | 2014 | 2013 |
| | £ | £ | £ | £ |
| Donations and gifts | 169,571 ==================================== | 389,233 | 558,804 | 369,485 |
| Donations and gifts | | | | |
| Unrestricted funds: | | | | |
| Donations | | | 158,501 | 17,700 |
| Grants | | | 1,500 | 142,090 |
| Donated services | | | 9,570 | 124,540 |
| | | = | 169,571 | 284,330 |
| Restricted funds: | | | | |
| Donations | | | - | 44,395 |
| Grants | | | 389,233 | 40,000 |
| Donated services | | | | 760 |
| | | | 389,233 | 85,155 |

Unrestricted donations includes £93,710 raised at the 2014 Goodwood Regency Ball and £51,247 rasied at the 2013 Goodwood Regency Ball.

Restricted grants is comprised of £30,000 (2013: £30,000) from Philip King Charitable Trust, £15,000 from The Tedworth Charitable Trust (2013: £nil), £100,000 from The Galvani Foundation (2013, £nil) and £244,233 from the Big Lottery Fund.

Unrestricted donated services consists of £1,240 (2013: £5,250) from Heirloom Media and £8,330 (2013: £15,270) in other gifts.

3 Investment income

| | 2014 £ | 2013 £ |
|---------------------|-----------|-----------|
| Interest receivable | 772 | 282 |

FOR THE YEAR ENDED 31 JULY 2014

| Incoming res | ources from charitable activities | | | | , |
|----------------|--|--|---|---------|---------|
| | Unres | tricted | Restricted | Total | Total |
| | | funds | funds | 2014 | 2013 |
| | | £ | £ | £ | £ |
| Grants for cha | ritable activity, sales of educational material and | | | | |
| related income | | 94,659 ==================================== | 245,853 ———————————————————————————————————— | 440,512 | 345,243 |
| Included withi | n income relating to campaigning and awareness are the follo | owing gra | nts | | |
| Grants receiva | ble | | | 2,000 | 112,138 |
| Statutory fund | ing | | | 243,853 | 183,212 |
| | | | _ | 245,853 | 295,350 |
| | | | = | | |

Statutory Funding comprises £194,195 (2013: £46,647) from The Department of Health, £4,658 (2013: £122,142) from the Social Investment Business, £40,000 (2013: £1ii) from the Blackpool Council and £5,000 (2013: £14,423) from the Public Health Agency.

5 Total resources expended

| | Staff | Depreciation | Other | Total | Total |
|--|-----------------|--------------|---------|---------|---------|
| | costs | | costs | 2014 | 2013 |
| | £ | £ | £ | £ | £ |
| Costs of generating funds | | | | | |
| Costs of generating voluntary income and activities for generating funds | 47 ,1 69 | - | 11,587 | 58,756 | 49,927 |
| Charitable activities | | | | | |
| Other charitable activities | | | | | |
| Activities undertaken directly | 299,848 | 1,601 | 467,546 | 768,995 | 571,674 |
| Governance costs | 6,234 | - | 11,176 | 17,410 | 18,127 |
| | 353,251 | 1,601 | 490,309 | 845,161 | 639,728 |
| | | | | | |

Included within other costs of campaigning and awareness are mobile app production of £84,061 (2013: £34,869), Evaluation costs of £23,770 (2013: £27,081), filming and photography costs of £11,961 (2013: £10,697) and legal costs of £5,536 (2013: £80,000).

In addition to auditors' remuneration, other governance costs includes legal costs of £40 (2013: £2,764), trustee meeting costs £1,854 (2013: £452) and governance support costs £1,619 (2013: £1,781).

Auditors' remuneration

| Fees payable to the auditor for the audit of the charity's annual accounts | 6,500 | 7,500 |
|--|-------|-------|
| | | |

FOR THE YEAR ENDED 31 JULY 2014

6 Trustees

None of the trustees (or any persons connected with them) received any remuneration during the year, but 2 were reimbursed a total of £1,854 relating to the cost of attending trustee meetings and other meetings representing the charity.

7 Employees

The average number of employees during the year was ten (2013: six). There were no employees earning over £60,000 per annum.

| Employment costs | 2014 | 2013 |
|-----------------------|---------|---------|
| | £ | £ |
| Wages and salaries | 320,268 | 202,568 |
| Social security costs | 32,453 | 21,363 |
| Other pension costs | 530 | - |
| | 353,251 | 223,931 |
| | | |

Fixtures,

8 Tangible fixed assets

| | fittings & equipment |
|--------------------------------|----------------------|
| | £ |
| Cost | |
| At 1 August 2013 | 12,875 |
| Additions | 2,995 |
| At 31 July 2014 | 15,870 |
| Depreciation | |
| At 1 August 2013 | 12,272 |
| Charge for the year | 1,601 |
| At 31 July 2014 | 13,873 |
| Net book value at 31 July 2014 | 1,997 |
| Net book value at 31 July 2013 | 603 |

All tangible fixed assets were used for charitable purposes.

FOR THE YEAR ENDED 31 JULY 2014

| 9 | Debtors | 2014 | 2013 |
|----|---|---------|--------|
| • | | £ | £ |
| | Trade debtors | 45,074 | 9,826 |
| | Other debtors | 9,921 | 1,289 |
| | Prepayments and accrued income | 93,710 | 50,000 |
| | | 148,705 | 61,115 |
| 10 | Creditors: amounts falling due within one year | 2014 | 2013 |
| | | £ | £ |
| | Taxes and social security costs | 13,132 | 143 |
| | Other creditors | - | 6,000 |
| | Accruals and deferred income | 7,500 | 7,500 |
| | | 20,632 | 13,643 |
| | • | | |
| 44 | | | |
| 11 | Pension and other post-retirement benefit commitments Defined contribution | | |
| | Defined contribution | | |
| | | 2014 | 2013 |
| | | £ | £ |
| | Contributions payable by the company for the year | 530 | - |

FOR THE YEAR ENDED 31 JULY 2014

12 Restricted funds

The income funds of the charity include restricted funds comprising the following unexpended balances of donations and grants held on trust for specific purposes:

| ance at |
|----------|
| ıly 2014 |
| £ |
| 32,129 |
| 33,161 |
| 27,201 |
| 39,247 |
| 25,780 |
| - |
| 55,710 |
| 213,228 |
| |

The Small Wonders project is a DVD and change programmes to place parents at the heart of their baby's care. Department of Health gave us a grant to produce enough Small Wonders DVDs to give to every family that has a sick or premature baby in England, and also to employ a facilitator to run this project.

The Mobile Apps project is the creation of a free downloadable mobile app for new parents with helpful advice from experts to support new parents in the emotional and physical transition to parenthood. The project includes the evaluation, marketing and product launch of the app, and is primarily funded by Big Lottery Fund.

The Business Development Fund goes towards the salary of an individual dedicated to increasing revenue from sale of the charity's goods and services.

ICRF is a grant from the Cabinet Office's Investment Contract & Readiness Fund to improve Best Beginnings' business effectiveness.

The Perinatal Mental Health Films project will create films to help those who suffer with emotional and mental health problems when they are pregnant and after childbirth.

Please see the Trustees' Report for more information on these projects.

13 Analysis of net assets between funds

| | Unrestricted Restricted funds funds | | Total |
|---|-------------------------------------|---------|----------|
| | £ | £ | £ |
| Fund balances at 31 July 2014 are represented by: | | | |
| Tangible fixed assets | 1,997 | - | 1,997 |
| Current assets | 212,439 | 213,228 | 425,667 |
| Creditors: amounts falling due within one year | (20,632) | | (20,632) |
| | 193,804 | 213,228 | 407,032 |
| | | | |

FOR THE YEAR ENDED 31 JULY 2014

14 Commitments under operating leases

At 31 July 2014 the company had annual commitments under non-cancellable operating leases as follows:

| | Land and b | Land and buildings | |
|----------------------------|------------|--------------------|--|
| | 2014 | 2013 | |
| | £ | £ | |
| Expiry date: | | • | |
| Between two and five years | 16,000 | 16,000 | |
| | | | |