

BASHH



BASHH

(A Company Limited by Guarantee)

Report and Financial Statements

Year ended: 31 July 2016

Charity no: 1148196

Company no: 07863350

British Association for Sexual Health and HIV

Established 2003 through the merger of MSSVD (est.1922) and AGUM (est.1992)

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Legal and Administrative

Trustees and Directors:

President	Dr Elizabeth Carlin	
Vice President	Prof. Jonathan Ross	
General secretary	Dr Elizabeth Foley	
Treasurer	Dr Rajul Patel	
Conference and Communications Secretary	Dr Daniel Richardson	
Chair - Education committee	Dr Jackie Sherrard	
Chair - Clinical Governance Committee	Dr Alan Tang	
Fellow to the board	Dr Benjamin Goorney	
Fellow to the board	Dr John McSorley	
Fellow to the board	Dr Margaret Kingston	
Fellow to the board	Dr Jillian Pritchard	
Fellow to the board	Dr Liat Sarner	
Doctors in Training Rep	Dr Anna Hartley	
Health Adviser rep – board	Mr Jonathan Roberts	
Nurse Rep. – Board	Mrs Kate Day	
SAS Rep – board	Dr Karl Hollows	
Lay trustee	Mr Neil Jenkinson	
Immediate past President	Dr Janette Clarke	
	Dr Nneka Nwokolo	(resigned 08 Jan 2016)
	Dr Janet Wilson	(resigned 08 Jan 2016)
	Dr Leena Sathia	(resigned 08 Jan 2016)
	Ms Ceri Evans	(resigned 08 Jan 2016)
	Dr John Lee	(resigned 08 Jan 2016)

Registered Office:

Chester House, 68 Chestergate
Macclesfield, Cheshire SK11 6DY

Auditors:

Farringdon & Co Ltd
176 Franciscan Road, London SW17 8HH

Bankers:

Lloyds TSB
PO Box 1000 Andover BX1 1LT

Solicitors

Gibson & Co. Solicitors
77-87 West Road, Newcastle upon Tyne NE15 6PR

Investment Managers:

St James' Place Wealth Management PLC
St James' Place House
1 Tetbury Road, Cirencester GL7 1FP

Sarasin & Partners LLP
Juxon House 100 St Paul's Churchyard,
London EC4M 8BU

BRITISH ASSOCIATION FOR SEXUAL HEALTH AND HIV

Report of the Trustees for the year ended 31 July 2016

The trustees, who are also directors of the charity for the purposes of the Companies Act, submit their annual report and the audited financial statements for the year ended 31 July 2016. The trustees have adopted the provisions of the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" and the Financial Reporting Standard for Smaller Entities (effective January 2015) in preparing the annual report and financial statements of the charity.

Introduction

We are pleased to submit the BASHH annual report for the year ended July 2016, which details the Association's many activities and achievements that continue within a responsive organisational framework.

The implementation of the Health and Social Care Act has continued to exert a major impact on sexual health, reproductive health and HIV services in England with tendering of services, the risk of fragmentation and tight financial constraints posing significant challenges for providers and commissioners alike. In Northern Ireland, Wales and Scotland there are also real challenges with funding and staffing issues. Added to this has been the public vote in June 2016 for the United Kingdom to leave the European Union and the future effect of this on health services is unclear.

BASHH has collaborated with a range of national representative bodies, professional and third sector organisations to raise the importance across the country of good sexual health and to maintain high quality services despite the difficult economic climate. BASHH has highlighted these points in their responses to important public consultations and has alerted central government, commissioners and provider organisations where we have identified plans that would put patients and services at risk. We have successfully championed, in partnership, the retention of the quadrivalent human papilloma virus (HPV) vaccine for the girls' vaccination programme and have highlighted the need for HIV pre-exposure prophylaxis to be provided for high risk individuals. BASHH members across England are also participating in an on-going pilot project assessing the acceptability and feasibility of a national vaccination programme for men who have sex with men (MSM).

The process used by BASHH to produce the UK national guidelines has been re-accredited by NICE. Our Clinical Standards Unit has produced Standards for the Management of Sexually Transmitted Infections (STIs) in Outreach Services, which promote good practice. The study evaluating the feasibility of a national STI-HIV audit programme as part of the Health Quality Improvement Programme has been completed by BASHH, the British HIV Association and MEDFASH and we hope that a national audit will be commissioned. Our media team has worked tirelessly to engage with the public to provide accurate information as well as to promote good sexual health. Importantly, they have consistently raised the issue of inappropriate antibiotic prescribing to treat STIs by online providers, which risks antimicrobial resistance developing, and we have welcomed the guidance from the Department of Health on good antibiotic stewardship. Other communication developments have been the re-design of the BASHH website to make it easier to navigate with an enhanced public area and the production of a new social media strategy, which will be implemented over the coming year.

Our educational portfolio continues to expand and our training modules, educational and scientific meetings are of high quality with excellent feedback. We held a very successful annual conference in

Oxford and many other excellent educational events across the UK throughout the year. We also supported a meeting in Sitges with the International Union against Sexually Transmitted Infection (IUSTI) where we delivered a course from our STI Foundation portfolio that was very well received.

In summary, BASHH continues to be a successful and vibrant organisation promoting excellence in sexual health and HIV care, delivering high quality education, seeking to influence national decision makers for the improvement of public health and also most importantly working for the benefit of the public. We acknowledge and thank all of the Members, Officers and Trustees for their time, commitment and enthusiasm without which the work of the Association would not be possible.

Structure, Governance and Management

Statement of Trustees Responsibilities

The Charities Act requires the Board of Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity at the end of the financial year and of the surplus or deficit of the charity. In preparing those financial statements the Board is required to:-

Select suitable accounting policies and then apply them consistently;

- make judgments and estimates that are reasonable and prudent;

- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business;

- state whether applicable accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements.

The trustees are also responsible for maintaining adequate accounting records which disclose with reasonable accuracy at any time the financial position of the charity and which are sufficient to show and explain the charity's transactions and enable them to ensure that the financial statements comply with regulations made under the Charities Act. In addition they are responsible for safeguarding the assets of the charity and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees are also responsible for the contents of the trustees' report, and the responsibility of the auditor in relation to the trustees' report is limited to examining the report and ensuring that, on the face of the report, there are no inconsistencies with the figures disclosed in the financial statements

Organisational Structure

BASHH became a charitable company limited by guarantee on 1 August 2012.

A governing Board of at least 12 elected trustees governs the Association, the immediate past President and a lay trustee appointed by the elected trustees. The trustees are also directors of the charitable company. Currently there are 18 trustees. The voting membership of the Board consists of: -

The President who is the Chairperson of the Board

Six Board Officers - Vice President, General Secretary, Honorary Treasurer, Conference and Communication

Secretary, Chair of the Education Committee, Chair of the Clinical Governance Committee

The immediate past President of BASHH

Six Fellows of BASHH

One Specialty and Associate Specialist Member of BASHH

One Doctor in training Member of BASHH

One Nurse Member of BASHH

One Health Adviser Member of BASHH

One Lay trustee

A number of non-voting representatives are co-opted to the Board to provide additional support. These include the Chair of the Media group, Chair of the Public Panel, BASHH Webmaster, Revalidation Representative for BASHH. Other BASHH members/fellows may be co-opted as necessary.

The Clinical Governance Committee, which reports to the Board, deals with all aspects of clinical governance and standards as well as providing a major communication channel to and from BASHH members. It consists of Branch chairs who represent the members in regions across England, Scotland, Wales and Northern Ireland, as well as health adviser, nurse and doctors in training representatives. Also reporting to the Clinical Governance Committee are a number of BASHH Groups such as the National Audit group, Clinical Effectiveness Group, Clinical Standards unit and the Integrated Information Group.

The Education Committee, which reports to the Board, leads on the educational and training activities for BASHH. It consists of the Chairs of a range of Special Interest Groups (SIGs) and also includes the leads for the STI Foundation Group and Mentoring Group as well as key training course leads.

In addition, the association has a number of other groups and representatives that report directly to the governing Board such as the Revalidation representative, the Web Team and the Public Panel.

Governing document

The governing document for BASHH is the Memorandum and Articles of the Association, which was signed on the 30 September 2011 by the first trustees of the incorporated organisation. Since then further resolutions have been agreed on 9 January 2015 and on 13 March 2015. It provides details of the objects; powers; benefits to members and trustees; membership and trustee arrangements; general meeting conditions; notices, resolutions and voting provisions; the requirement for records and accounts; and the particulars of indemnity, limited liability, guarantee and dissolution of the Association.

Recruitment and Appointment of the BASHH Board

The BASHH Board is recruited from the BASHH members and fellows of BASHH, except for the immediate past President who is automatically a member of the Board and the lay trustee. The lay trustee is recruited and appointed from outside the Association by the elected trustees, using an external advertisement

process followed by informal interview of selected individuals. For all the other Board positions BASHH members are individually informed about the posts that are available and nominations are sought.

Appointments and elected positions are for a term of office of two years and those appointed/elected may stand for a second two-year term, except for the President who may not serve a consecutive second term.

The election process allows voting prior to the Annual General Meeting for contested posts - candidates for Trustee positions and members of the Clinical Governance Committee. This was conducted by the Electoral Reform Service (ERS) using a secure online voting website, as well as paper voting where necessary.

Trustee Appointment, Induction and Training

Individuals who have been elected to trustee posts are required to make a declaration of interests and an undertaking of commitment as a trustee to BASHH. They are required to submit a trustee declaration form to the Charity Commission and complete the process for appointment as a BASHH director by successful submission of an AP01 form to Companies House.

All trustees receive the Memorandum and Articles of Association and the association uses the extensive information on the Charity Commission website to support the induction and training of trustees. In particular, all trustees are directed to read the Charity Commission guidance - the essential trustee: what you need to know (CC3).

Risk Management

BASHH uses a Risk Management Plan as a tool to identify potential risks which the charity may encounter. The plan identifies the source of potential risks, assesses each against criteria of seriousness and likely frequency, and makes recommendations on mitigating the risk including the identification of responsible individual(s). The plan is reviewed annually by the BASHH Finance and Governance Committee before being taken to the Board for further amendments and approval.

Risk is further reduced by:

- requiring funding proposals submitted to the BASHH Board to include an assessment of risk
- the use of guidance notes to assist BASHH members who run educational events on the charity's behalf e.g. draft contract template, advice on obtaining sponsorship
- automated collection of educational event fees via the BASHH website
- annual external financial audit
- separation of powers via a Scheme of Delegation which is reviewed annually by the Trustees

Support Services

A variety of support services are in place to support the work of the association and its administration. Since 1 February 2013 central support services (secretariat, membership and financial) have been provided by Kingston Smith Association Management (KSAM) who are the largest association management company in the UK. This has allowed BASHH to streamline support services to facilitate a more comprehensive and

integrated administrative structure including administrative support of the BASHH Annual Conference, the SAS annual conference and elements of the Sexually Transmitted Foundation (STIF) course.

Membership Review

The membership services have been administered by KSAM since 1 February 2013. Membership recruitment remains strong and there have been new applications for membership into both medical and the non-medical categories, reflecting our multidisciplinary ethos, as well as a number of resignations by retirement, deaths and a number of members suspending their membership whilst on maternity leave. The total number of members on 31 July 2016 was 917, and compared with 966 members in July 2015.

Over this year BASHH has worked to ensure that the membership categories are simplified, that members are categorised according to their membership correctly and that membership details are kept up dated. New members can join using an on line application form and only require one member to support their application rather than by a fellow and a second member or fellow. Membership cards have been issued to all members which allows electronic registration at BASHH events and allows automatic CPD registration at CPD approved events. Most members prefer to be communicated electronically although a small proportion still have communication sent by post.

Financial review

BASHH had a stable financial year. Increasingly our investment portfolio contributed to an overall positive financial balance. The sharp rise in value that stocks have generally had since June has contributed significantly to the maintenance of BASHH's reserves. During the last year the association has invested in the production of new outreach standards and continues to support our education and conference program through funding both administration and course development. A detailed review of aged debt has taken place and a significant loss of income is noted to be through BASHH's web portal for course registration where registrants can register for meetings but abort the payment process part way through. This results in considerable work from our secretariat in chasing registration debt. Much of this is for small sums and the costs involved in recovering the amounts is disproportionate to the eventual amounts recovered. A new payment system has been introduced such that this will no longer be an issue. In addition, BASHH is also looking to remove the option for invoice based registration for its courses.

Principle funding sources

Income for the charity comes from three principle sources - membership subscriptions, educational meetings and investment income. In view of the charity's stable financial position, the annual membership fee was not increased in 2016. Our annual scientific conference was held in Oxford and was financially successful. The surplus generated by the meeting was somewhat smaller than in recent years (despite record sponsorship and maximum delegate capacity) reflecting the high costs of the venues for the meeting. Other educational meetings were run throughout the year led by the association's special interest groups and these were generally cost neutral or generated a surplus. Over the last 2 years the association has invested in the STIF portfolio to develop a wider range of training products. The coming years should see a return on this investment as all STIF activities move into surplus.

Reserves policy

The Trustees reviewed the reserves policy and renewed their intention to maintain the level of reserves at an amount sufficient for the Association to function for at least two years in the event that it does not

receive any further income. This will mitigate the financial risk associated with running large conferences and ensure that BASHH's existing contractual obligations can be met. The Association also wishes to have sufficient reserves available to respond rapidly when required to commission new sexual health guidelines or standards documents, or respond to external consultations.

The investment policy was reviewed by the Trustees with agreement that sufficient funds to allow the association to function for at least one year will be retained in accounts which permit access within a maximum of three months. The balance of reserves is invested after taking professional financial advice and adopting a low to medium risk approach. Investments are currently held in funds split equally between Saracens Investment Managers and St. James Management. A decision was made to not alter the current balance of stocks and cash on deposit making up the Association's reserves.

Financial plans for future periods

BASHH plans to continue providing high quality education and training as well as leadership for those delivering sexual health and HIV services. BASHH's output includes national service specifications and the production of high quality independent guidelines across the range of the specialty - both of which require regular review and updating. BASHH remains well placed financially to continue to provide these resources.

Objectives, Activities and Performance

Mission Statement

BASHH Aims:

- To be the lead professional representative body for those practising sexual health including the management of STIs and HIV in the UK
- To innovate and deliver excellent tailored education and training to health care professionals, trainers and trainees in the UK
- To determine, monitor and maintain standards of governance in the provision of sexual health and HIV care
- To advance public health in relation to STIs, HIV and other sexual health problems
- To champion and promote good sexual health and provide education to the public

Education Committee

The Education Committee is responsible for facilitating the delivery of the BASHH's vision, values and service priorities through education, training and development, taking into account the changing context of healthcare and educational developments, and specifically the demands related to provision of high quality integrated sexual health care across a wide geographical area and range of healthcare settings.

The Special interest groups (SIGs)

The SIGs are responsible for leading on development of educational materials, meetings and training needs analysis within their specialist areas. In the last year the SIGs have provided a range of courses including the microscopy course, SAS and Doctor in training meetings, genital dermatology course, surgical techniques in GUM course, the Diplomas in GUM and HIV revision courses and a number of regional STI Foundation courses. The number of GUM nurses and Health Advisors undertaking STIF Competencies are

increasing and a pilot integrated course with additional contraceptive competencies for GUM nurses working in integrated sexual health has been successfully completed.

Additionally the SIGs contribute to education and training by generating publications and research and reviewing and responding to documents on behalf of BASHH, and developing guidelines and recommendations in collaboration with other BASHH groups and external organisations. These achievements are detailed in individual reports available on the BASHH website.

BASHH scientific meetings

The EC has the responsibility of providing 4 scientific meetings annually, which are free to delegates, including invited lectures from BASHH Honorary Life Members and Professorial lecturers. In the last 12 months two meetings were held in London, and a pilot of running a scientific meeting out of London took place in Manchester in June 2016. Despite an excellent programme and good location, unfortunately attendance was poor. The Board agreed to support members attending the joint BASHH IUSTI Meeting in Sitges in place of a 4th UK meeting. This was very successful with over 90 UK delegates.

Six SIGs (Bacterial, Public Health, HIV, MSM, HSV and Adolescent Sexual Health) put together meetings in 2015-16. These were well attended with excellent evaluation. Recent innovations include barcoded membership cards which enable easier logging of attendance at events for CPD purposes. Podcasts/webcasts of the OGM lectures has continued to facilitate access for those unable to attend in person.

Other meetings

The EC oversees Annual Spring Conference and the 2016 in Oxford attracting more than 600 delegates, and excellent evaluation. BASHH co-hosted a meeting with IUSTI Europe in Sitges in September 2015 which had 90 BASHH delegates and included BASHH delivering a STIF course to Spanish clinicians.

The annual Joint BASHH /FSRH meeting in January and HIV Masterclass held in Manchester in March were again very successful. Other meetings include the Doctors in training meeting, and the SAS Conference.

STI & HIV course

Ngozi Dufty has taken over running the course in 2016 and is undertaking a review of all aspects of the course including structure and content. This runs with Modules 1 & 2 in the Spring and modules 3 & 4 in the Autumn. This appears to be successful with increased delegate numbers and good feedback. At present the reduction in frequency of running the modules does not appear to disadvantage delegates wishing to sit the DipGUM but this will be kept under review.

Further EC plans

The role, membership and terms of reference of the EC has been reviewed to ensure it remains fit for purpose with the strategic aims of coordinating the delivery of education within BASHH and supporting clinicians in maintaining knowledge and expertise to deliver high quality services. Next year's BASHH spring meeting will be held in Belfast and preparations are well underway. Following the successful pilot of STIF integrated this will be fully rolled out in the next year. A review of the contents of the e-learning resource: eHIV-STI is underway to ensure that it remains up-to-date.

Clinical Governance Committee

The objectives of the committee are to:

- Implement strategies and policies of BASHH as approved by the Governing Board
- Set and monitor standards and specifications
- Identify areas of best clinical practice and promote them for adoption where appropriate whilst recognizing local differences
- Identify regional and individual clinic difficulties
- Explore solutions to issues and suggest action plans
- Co-ordinate a peer review system as required or in response to a member's request

Significant activities

First meeting outside London held in Manchester June 2016

New Quality Improvement and Transformation subgroup formed

Spotlight discussions were held on maintaining quality after tendering of services; utility, hazards and good practice for use of social media to disseminate health messages

Terms of Reference of Committee were reviewed and approved

Roles of the Committee Chair were discussed and agreed

Performance/Outputs in the year 2015/16

Agreement with the Royal College of Physicians on a process for approving Regional Specialty Advisers and appointing to in-year vacancies

Guidance on the Retention and Disposal of Clinical Records were updated and approved by the Board

Future plans

To review functions and geographical coverage of branches in relation to effectiveness of meetings, clinical networks, safety and intelligence reporting, and effective representation of local members

With increasing pressure on service staffing and budgets, to enhance support for representatives to function in branches and subcommittees, and for those with essential reports to attend meetings

To improve the ease for chairs to provide information on branch activities, main service centres, regular activities, special features and clinical networks including HIV services

Conference and Communication Activity

Conference and Communication Activity: The Education Committee and Conference secretary continues work on the BASHH strategy for education: providing high quality educational events, conferences, joint meetings and support co-badging conference events for BASHH members making education and science available to BASHH members.

15th January 2016 Joint meeting of BASHH and the Faculty of Sexual and Reproductive Health: This one day joint meeting at the Royal Society of Medicine was fully booked. It attracted clinicians from sexual health and primary care backgrounds. The programme and sponsorship was organised by the joint BASHH-FSRH conference committee: Dr Daniel Richardson, Ms Ceri Evans, Dr Marion Everett and Ms Diana

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Halfnight. Registration was managed by BASHH and the Exhibition was managed by FSRH. The feedback was excellent.

BASHH Annual Conference, Oxford: Daniel Richardson, conference secretary, Jackie Sherrard, local host and the KSAM conference team lead by Candi Bond Gunning and Christine Rouseau.

Details can be found at: <https://www.bashh.org/events/annual-conference/annual-conference-2016/>

The Conference was held at the Examinations School in Central Oxford. There were 602 delegates.

The conference was sponsored by the following companies:

SH:24 CIC
Dunelm Pharmaceuticals Ltd
Axsys Technology Limited
Viiv Healthcare
Bristol Myers Squibb
Sekisui
BD Diagnostics
Janssen-Cilag Ltd
Sage
Wren Laboratories Ltd - OptiBac Probiotics
UCB Pharma
Cepheid UK Ltd
Gilead Sciences
Armadillo Group
Sanofi Pasteur MSD
UCL
Hologic Ltd
VIIV Healthcare UK Ltd
Atlas Genetics Ltd
Inform Health Ltd
Kora Healthcare
Health Education England
6pm plc/6pm Blithe
Public Health England
MSD LTD
SpeedX Pty Ltd

The Conference also received 2 educational grants from Viiv-healthcare to run an HIV symposium and support scholarships for nurses, undergraduates, health advisers and doctors in training.

There were 40 oral presentations, 6 undergraduate presentations, 6 clinical case reports, 4 nurse/health advisor oral presentations and 247 poster presentations.

The Welcome reception was held in the examinations school. The speakers' Dinner was held at Merton College and the Gala dinner was held at Oxford Town Hall. The feedback was excellent.

Financially the conference made a large surplus to support other BASHH educational events throughout the calendar year.

Prizes:

Undergraduate Prizes

UG1 Digital Ano-Rectal Examination (DARE) as anal cancer screening in HIV positive Men who have Sex with Men (HMSM) - is it acceptable to patients? Tamara Lewis¹, Selvavelu Samraj², Raj Patel^{1,2}, Sangeetha Sundaram²¹*School of Medicine, University of Southampton, Southampton, UK*, ²*Dept. of Sexual Health, Solent NHS Trust, Royal South Hants Hospital, Southampton, UK*

UG5 SH:24 - User perspectives on an online sexual health service.

Harriet Pittaway¹, Sharmani Barnard¹, Emma Wilson², Paula Baraitser¹¹*King's Centre for Global Health, King's College London, London, UK*, ²*Department of Population Health, Faculty of Epidemiology and Population Health, London School of Hygiene and Tropical Medicine, London, UK*

Poster Prizes

1. P38 HIV home/self-testing: a pilot project and service evaluation

William Gibson, Rachel Challenor, Zoe Warwick. *Genitourinary Medicine Department, Derriford Hospital, Plymouth, UK*

2. P73 If HIV-PrEP is made available in England, what are the resource implications for GUM clinic service providers? Koh Jun Ong, Nigel Field, Holly Mitchell, Sarika Desai, O Noel Gill

Public Health England, London, UK

3. P121 Prospective comparison of charcoal swabs versus near-patient direct culture plate inoculation for the culture of gonorrhoea in high-risk patients.

Annabelle Harrison², Hannah Cheney-Lowe², John McSorley¹, Siobhan Murphy¹, Gary Brook¹¹*Central Middlesex Hospital, London, UK*, ²*Imperial College Medical School, London, UK*

4. P176 Are sexually transmitted infections associated with child sexual exploitation in under 16 year olds attending Genitourinary Medicine clinics in the UK? Chris Ward¹, Gwenda Hughes², Holly Mitchell², Karen Rogstad³¹*Central Manchester University Hospitals NHS Foundation Trust, Manchester, UK*, ²*Public Health England, London, UK*, ³*Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield, UK*

5. P226 Reattendance, retesting and test positivity among patients initially treated for chlamydia or gonorrhoea in a large inner city clinic. Sarah Bradley, John Saunders, Eva Jungmann. *Mortimer Market Centre, CNWL, London, UK*

6. P247 Title: Can text messages increase safer sex behaviours in young people: intervention development and pilot randomised controlled trial. Caroline Free¹, Ona McCarthy¹, Paula Baraitser³, Rebecca French¹, Kaye Wellings¹, Karen Devries¹, Sujit Rathod¹, Susan Michie², Graham Hart², Julia Bailey²¹*LSHTM, London, UK*, ²*UCL, London, UK*, ³*Kings College Hospital, London, UK*

Clinical Cases Prizes

1. CC6 Warnings are not enough - A case series of ritonavir induced Cushing's Syndrome and adrenocortical failure. Isabel Reicher¹, Daniel Richardson^{1,2}, Deborah Williams¹ ¹Brighton & Sussex Medical School, Brighton, UK ²Brighton & Sussex University NHS hospitals Trust, Brighton, UK.

2. CC4 Ocular syphilis on the rise: a case series
Clare Wood¹, Jane Wells², Nick Jones², Ashish Sukthankar¹ ¹Manchester Royal Infirmary, Manchester, UK, ²Manchester Royal Eye Hospital, Manchester, UK.

Oral Prizes

1. O021 A Question of Stability Hemanti Patel¹, Gabriel Schembri², Binta Sultan³, Catherine Ison⁴ ¹Public Health England, London; ²Manchester Centre for Sexual Health, Central Manchester University Hospitals NHS Foundation trust, Manchester; ³Mortimer Market Centre, London; ⁴Bacterial Special Interest Group.

2. O032 Implementing a test and treat pathway for *Mycoplasma genitalium* in men with urethritis attending a GUM clinic. John Reynolds-Wright, Fabienne Verrall, Mohammed Hassan-Ibrahim, Suneeta Soni. Brighton and Sussex University Hospitals NHS Trust, Brighton, UK

IUSTI 2016, Budapest September 2016

BASHH co-Badged the 2016 IUSTI conference in Budapest. There were 40 BASHH members in attendance.

The letter from the Board continues to provide key and relevant information for BASHH members following the Board meetings of the trustees.

BASHH column in *Sexually Transmitted Infections* journal edited by Daniel Richardson continues to provide news and topical debate around BASHH activities.

Future events: the BASHH annual conference 2017 will be a joint meeting with the Irish association: Society for the study of sexually transmitted infections of Ireland (SSSTDI) in Belfast 18-20th June. The local host is Say Quah.

Public, media and website activities

The BASHH public panel aims to achieve proactive public and patient involvement (PPI) in the activities and strategies of BASHH. The membership of the panel continues to be a diverse group comprising clinical and lay members alongside representatives from third sector organisations that provide sexual health care and advice.

In 2016, the public panel has played an active role in the production of NICE-accredited clinical guidance produced by the clinical effectiveness group (CEG). This has included redesigning the PPI process for guideline writing and including lay members in guideline writing groups. The panel has also contributed meaningfully to both the full and outreach BASHH service specification documents.

In our post-2012 commissioning environment, the need for active PPI has never been greater, and the BASHH approach attempts to adapt and reflect on the growing emphasis in this area.

Looking to the future the BASHH public panel will be exploring ways to facilitate PPI in sexual health research; how best to engage young people with the panel and new ways of interacting with patients and the public in an increasingly electronic world.

The Media Group has been particularly active in making the case for the use of quadrivalent human papilloma virus (HPV) vaccine for the girls' vaccination programme with a successful outcome. It has also worked in partnership to highlight the need for the provision of pre-exposure prophylaxis against HIV in high-risk individuals and has helped to define how medication should be used and what groups should be targeted. In addition, the case for vaccination against human papilloma virus in men who have sex with men was successfully made resulting in a pilot rollout to assess the acceptability and feasibility of a national vaccination programme. The prescribing of incorrect antibiotics to treat STIs via online providers, with an associated increased risk of antimicrobial resistance developing, has been highlighted with subsequent clear guidance being issued by the Department of Health.

During this year BASHH has developed a new website to improve the ease of access for BASHH members to educational content on the BASHH website, to improve and update public areas of the website and to increase engagement of the website by the BASHH branches. The website includes integrated guidelines and printable patient information leaflets. The future plans for website development integration of online conferencing into the website to assist BASHH groups holding business meetings.

Public Benefit

The Association has fully complied with its duty to have due regard to public benefit as demonstrated throughout this report. The Association's work, across all sectors of the community, in advancing public health, in championing and promoting good sexual health and high quality standards of care, as well as providing education to the public and health care professionals, all benefit the public.

BASHH's main activities focus on delivering first class educational programmes, developing up to date guidance and patient resources, and in seeking to support and influence decision makers in local and national government to ensure that high quality, confidential sexual health services are available for the public.

The Association's courses, national and local, have been highly successful over the past year and much of the educational programme has been free to both members and non-members. BASHH supports the publication of two international journals (STI and Int J STD & AIDS) and subsidised journals are provided to some membership categories. This benefits professional education and hence the care of the public. The BASHH guidelines sit on the public facing side of the BASHH website and are accredited by NICE. Statistics show that the guideline section is the most visited area of the website. Our Standards for the Management of STIs are widely endorsed and are used by commissioners in service specifications and to measure performance. The Association also provides support to local and national government through expert advice, representation and briefing papers to promote good sexual health for the entire health community.

Plans for the Future

During the next year BASHH will continue its routine business and will deliver on its charitable objectives. In addition, the Association will focus on the following areas:

BASHH will support members across the United Kingdom, offering assistance with representation for all four nations to their national governments and key policy and decision makers. We will continue to respond to relevant public consultations across all four nations providing clear and reasoned submissions.

BASHH will work closely with the Royal College of Physicians, the Association of Directors of Public Health, the Faculty of Public Health and other key stakeholders, including third sector organisations, to maximise opportunities to improve clinical practice, service delivery, workforce development, training and recruitment across the mixed commissioning landscape in England.

BASHH will continue to press for gender-neutral HPV vaccination, for pre-exposure prophylaxis for HIV for high risk individuals, and for appropriate antibiotic stewardship to reduce the risk of antimicrobial resistance.

BASHH will continue to extend its educational activities nationally, regionally and in conjunction with European colleagues to support clinicians to deliver high quality services. STIF integrated will be rolled out following its successful pilot, a new STIF pilot focusing on HIV training for nurses will be launched and the elearning resource: eHIV-STI will be updated to reflect best practice.

BASHH will launch its new social media strategy and will monitor engagement and outputs using standard monitoring measures. It will explore how best to engage young people with its public panel and will look at new ways of interacting with patients and the public.

Statement of disclosure of information to auditors

We, the trustees of the Charity who held office at the date of approval of these Financial Statements, as set out above, each confirm so far as we are aware, that:

- there is no relevant audit information of which the charitable company's auditors are unaware; and
- we have taken all the steps that we ought to have taken as trustees in order to make ourselves aware of any relevant audit information and to establish that the company's auditors are aware of that information.

Auditors

A resolution proposing that Farringdon & Co be re-appointed as auditors of the charity will be put to the Annual General Meeting.

This report was approved by the Board on XX XXXXXXXX XXXX:

.....
Dr E. Carlin
Trustee

.....
Dr E. Foley
Trustee

Report of the auditors

Independent Auditor's Report to the trustees of British Association of Sexual Health & HIV (BASHH)

We have audited the financial statements of BASHH for the year ended 31 July 2016 which comprise the Statement of Financial Activities, the Balance Sheet and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and the Financial Reporting Standard for Smaller Entities (effective January 2015) (United Kingdom Generally Accepted Accounting Practice applicable to Smaller Entities).

This report is made solely to the charitable company's trustees, as a body, in accordance with regulations made under section 154 of the Charities Act 2011. Our audit work has been undertaken so that we might state to the charitable company's trustees those matters we are required to state to them in an auditor's 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 the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditor

As explained more fully in the Trustees' Responsibilities Statement set out on page 4, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

The trustees have elected for the financial statements to be audited in accordance with the Charities Act 2011 rather than the Companies Act 2006. Accordingly we have been appointed as auditor under section 145 of the Charities Act 2011 and report in accordance with regulations made under section 154 of that Act.

Our responsibility is to audit and express an opinion on the financial statements 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 (APB's) Ethical Standards for Auditors.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements 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 financial statements. In addition, we read all the financial and non-financial information in the Trustees' Annual Report to identify material inconsistencies with the audited financial statements. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Opinion on financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 July 2016, 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 (applicable to smaller entities); and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Charities Act 2011 requires us to report to you if, in our opinion:

- the information given in the Report of the Trustees is inconsistent in any material respect with the financial statements; or
- the charitable company has not kept adequate accounting records; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

Jailesh Jashbhai Patel

Statutory Auditor

For and on behalf of Farrington & Co Ltd
Chartered Certified Accountants and Statutory Auditor
176 Franciscan Road
London SW17 8HH

Date XX^{xx} XXXXXXXX XXXX

Farrington & Co is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006.

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Statement of Financial Activities

(including income and expenditure account) for the year ended 31 July 2016

	Notes	Unrestricted Funds £	Restricted Funds £	Endowment Funds £	Total 2016 £	Total 2015 £
Income & Endowments from:						
Charitable activities						
Membership Subscriptions		184,276	-	-	184,276	198,312
Educational meetings and courses	9	587,706	-	-	587,706	558,381
Investment income	2	21,278	-	-	21,278	20,925
Total income and endowments		793,260	-	-	793,260	777,618
Expenditure on:						
Charitable Activities	3	798,140	-	-	798,140	726,353
Governance costs	4	27,528	-	-	27,528	31,329
Total expenditure		825,668	-	-	825,668	757,682
Net income /(expenditure)		(32,408)	-	-	(32,408)	19,936
Transfers between funds		-	-	-	-	-
Other recognised gains/(losses):						
Net gains on investments	6	44,388	-	-	44,388	38,845
Net movement in funds		11,980	-	-	11,980	58,781
Reconciliation of funds:						
Fund balances brought forward at 1 August 2015		1,727,544	4,150	10,000	1,741,694	1,682,913
Fund balances carried forward at 31 July 2016	10	1,739,524	4,150	10,000	1,753,674	1,741,694

The statement of financial activities includes all gains and losses recognised during the year.

The notes on pages 20 to 26 form part of the financial statements.

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Balance Sheet

	NOTES	As at 31.07.16 £	As at 31.07.15 £
FIXED ASSETS			
Tangible Assets		-	-
Investments	6	1,101,623	1,039,625
TOTAL FIXED ASSETS		1,101,623	1,039,625
CURRENT ASSETS			
Stock		-	3,266
Debtors	7	83,602	104,404
Bank balances		808,070	708,511
		891,672	816,181
CURRENT LIABILITIES			
Creditors - Amounts falling due within one year	8	(239,621)	(114,112)
NET CURRENT ASSETS		652,051	702,069
TOTAL NET ASSETS		1,753,674	1,741,694
FUNDS			
Endowment (Capital) Funds	10	10,000	10,000
Restricted Income Funds	10	4,150	4,150
Unrestricted Funds	10	1,739,524	1,727,544
TOTAL CHARITY FUNDS	10	1,753,674	1,741,694

These accounts have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime and in accordance with the Financial Reporting Standard for Smaller Entities (effective January 2015).

For the year ending 31 July 2016 the company was entitled to exemption from audit under section 477 of the Companies Act 2006 relating to small companies but as this company is a charity, it is subject to audit under the Charities Act 2011.

Directors' responsibilities:

- The members have not required the company to obtain an audit of its accounts for the year in question in accordance with section 476;
- The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts.

The financial statements were approved and authorised for issue by the trustees on XX^{xx} XXXXXXXXXXX XXXX and signed on their behalf by:

.....
Dr Rajul Patel
Trustee

Notes forming part of the financial statements

For the year ended 31 July 2016

1. Accounting policies

a) Basis of preparation

The financial statements have been prepared under the historical cost convention, with the exception of investments which are included at market value. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP), "Accounting and Reporting by Charities" and the Financial Reporting Standard for Smaller Entities (effective January 2015) and the Charities Act 2011.

b) Company status

The charity is a company limited by guarantee. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity.

c) Funds

General funds are unrestricted funds which are available for use at the discretion of the trustees in furtherance of the general objectives of the charity and which have not been designated for other purposes.

Designated funds comprise unrestricted funds that have been set aside by the trustees for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statements. Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for particular purposes. The cost of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for particular purposes. The cost of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

Endowment funds represent those assets which must be held permanently by the charity, principally investments. Income arising on the endowment funds can be used in accordance with the objects of the charity and is included as either restricted or unrestricted income funds. Any capital gains or losses arising on the investments form part of the fund. Investment management charges and legal advice relating to the fund are charged against the fund.

d) Incoming recognition

All incoming resources are included in the Statement of Financial Activities (SoFA) when the charity is legally entitled to the income after any performance conditions have been met, the amount can be measured reliably and it is probable that the income will be received.

• Grants, Donations and Legacies

Income from donations, legacies and grants, including capital grants, is included in incoming resources when these are receivable, except as follows:

- When donors specify that donations and grants given to the charity must be used in future accounting periods, the income is deferred until those periods.

- When donors impose conditions which have to be fulfilled before the charity becomes entitled to use such income; the income is deferred and not included in incoming resources until the preconditions for uses have been met.

Donations, legacies and grants for the general purpose of the Association are included as unrestricted funds. Unrestricted funds comprise those funds which the trustees are free to use for any purpose in furtherance of the charitable objects. Any amount received for activities restricted by the wishes of the donor are taken to "restricted funds" where these wishes are legally binding on the Trustees.

- **Subscription Fees**

Subscriptions are payable in advance for the Association's Membership Year. Subscriptions for the Membership year ended 31 July 2016, which were not received at the time of preparation of these accounts, are considered to be uncollectable and accordingly no credit is taken into the accounts.

- **Educational Meetings**

Income from educational meetings and courses is included in incoming resources in the period in which the relevant activity has taken place and consists of course registration fees from participants and sponsorship income from pharmaceutical companies. Where sponsorship income received is related to a specific meeting or conference then this income has been accounted for as income arising from those specific activities.

e) Expenditure recognition

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

All expenditure is included on an accrual basis. Resources expended are included in the SOFA inclusive of any VAT which cannot be recovered and the majority of costs are directly attributable to specific activities.

f) Irrecoverable VAT

Irrecoverable VAT is charged against the category of resources expended for which it was incurred.

g) Investments

Investments are stated at market value at the balance sheet date. The SOFA includes the net gains and losses arising on revaluations and disposals throughout the year.

h) Stock

Stock consists of purchased educational material for resale. Stocks are valued at the lower of cost and net realisable value.

i) Website development costs

Where a website is expected to provide economic benefit through the provision of educational information to beneficiaries of the charity, expenditure on the functionality of the website is capitalised and treated as a tangible fixed asset.

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j) Foreign currencies

Transactions in foreign currencies are recorded at the rate ruling at the date of the transaction. Monetary assets and liabilities are retranslated at the rate of exchange ruling at the balance sheet date. All differences are taken to the SOFA.

k) Governance costs

Governance costs comprise all costs involving the public accountability of charity and its compliance with regulation and good practice. These costs include costs related to the statutory audit and legal fees.

l) Corporation tax

The charity is an exempt charity within the meaning of schedule 3 of the Charities Act 2011 and is considered to pass the tests set out in Paragraph 1 Schedule 6 Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes.

m) Going concern

The financial statements have been prepared on a going concern basis as the trustees believe that no material uncertainties exist. The trustees have considered the level of funds held and the expected level of income and expenditure for 12 months from authorising these financial statements. The budgeted income and expenditure is sufficient with the level of reserves for the charity to be able to continue as a going concern.

2. Investment Income

	2016	2015
	£	£
Interest receivable	3,668	4,113
Dividends receivable from investments and unit trusts	17,610	16,812
	<u>21,278</u>	<u>20,925</u>

3. Cost of activities to further the charity's objectives

	2016	2015
	£	£
Cost of Educational Meetings (note 9)	584,853	519,708
Cost of Educational Journals	61,284	62,780
Secretariat fees (See note below)	115,683	105,975
Committee meeting and travel costs	14,490	14,477
Printing, Postage & Stationary	2,614	1,909
General administration and sundry costs	19,216	21,504
	<u>798,140</u>	<u>726,353</u>

There were no direct staff costs incurred by the charity during the year and the charity does not undertake activities to raise funds. The administrative and support services to the charity in connection with its charitable

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activities stated above are provided under contract by Kingston Smith Association Management who is an independent party. The charge for the year including irrecoverable VAT is as above.

4. Governance Costs

	2016	2015
	£	£
Trustees travel and subsistence (note 5)	17,369	16,163
Professional fees and insurance	2,159	7,166
Fees payable to the charity auditors :		
For Audit	8,000	8,000
For other services	-	-
	<u>27,528</u>	<u>31,329</u>

5. Trustees remuneration

The trustees neither received nor waived any emoluments during the year (2015: £ Nil)

Out of pocket expenses were reimbursed to trustees as follows:

	2016	2015	2016	2015
	No of	No of	£	£
	Trustees	Trustees		
Travel and subsistence	18	16	17,369	16,163
Other	-	-	-	-
	<u>18</u>	<u>16</u>	<u>17,369</u>	<u>16,163</u>

6. Fixed Asset Investments

	2016	2015
	£	£
Cost or market value as at 01 August 2015	1,039,625	983,968
Additions	17,610	16,812
Disposal proceeds	-	-
Net investment gains	44,388	38,845
Market value as at 31 July 2016	<u>1,101,623</u>	<u>1,039,625</u>

Fixed asset investments consist of listed UK Unit Trusts managed by Sarasin and Partners LLP and St James Place and are held for their investment returns. Additions of £17,610 (2015: £16,812) represent additional units acquired during the year.

The Investments managed by St James Place had a year end market value of £536,305 (2015: £498,851) and consists of accumulation units held in their Global Equity, Equity Income, International Equity and International

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Corporate Bond unit trusts. The Investments managed by Sarasin and Partners LLP had a year end market value of £565,317 (2015: £540,774) and consists of income units held in their Alpha CIF for endowment funds.

7. Debtors

	2016	2015
	£	£
Trade debtors	29,980	84,444
VAT Recoverable	12,253	-
Prepayments	41,369	19,960
	83,602	104,404

8. Creditors : amount falling due within one year

	2016	2015
	£	£
Trade creditors	178,568	47,875
VAT payable	-	4,267
Accruals and course fees received in advance	61,053	61,970
	239,621	114,112

9. Summary of Income & Expenditure arising from Educational Meetings & Courses.

	Income	Expenditure	Result	Income	Expenditure	Result
	2016	2016	2016	2015	2015	2015
	£	£	£	£	£	£
Note : Deficits appear in parentheses ()						
Special Interest Groups						
Colposcopy SIG/Genital Dermatology SIG	30,283	17,535	12,748	19,840	13,418	6,422
HIV SIG	-	900	(900)	-	-	-
Herpes Simplex SIG	-	-	-	-	-	-
British Co-Operative Clinical Group	-	-	-	-	628	(628)
HPV SIG	4,016	2,761	1,255	10,000	8,146	1,854
Bacterial	12,140	18,570	(6,430)	16,353	9,539	6,814
Sexual Dysfunction Group	17,158	14,116	3,042	(128)	1,715	(1,843)
Adolescent Special Interest Group	-	547	(547)	8,143	5,796	2,347
Clinical Effectiveness Group	-	3,838	(3,838)	-	2,601	(2,601)
SAS Group	34,288	31,287	3,001	35,265	25,801	9,464
National Audit Group	-	16,232	(16,232)	-	2,122	(2,122)
Doctors in Training	2,680	854	1,826	2,083	3,101	(1,018)
Web Team	-	58	(58)	-	52	(52)
Media External Communications Group	-	52,018	(52,018)	-	42,553	(42,553)
Nurses / Health Advisors	-	-	-	-	-	-
BASHH IT Group	-	-	-	-	-	-
HIV Medicine	22,117	16,864	5,253	21,462	22,625	(1,163)
Mentoring Committee	1,425	1,334	91	-	-	-
Clinical Standards Unit	-	12,236	(12,236)	-	1,034	(1,034)
Pharmacy Group	-	-	-	-	-	-
Public Panel	(555)	1,287	(1,842)	-	2,856	(2,856)
Public Health Group	-	-	-	-	-	-
MSM SIG	11,197	7,870	3,327	-	1,345	(1,345)
Special Interest Groups: Sub-Total	134,749	198,307	(63,558)	113,018	143,332	(30,314)

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Other Educational Meetings/Courses						
Educational Meetings	3,000	12,559	(9,559)	5,500	27,086	(21,586)
Joint Meetings (See note below)	29,854	20,921	8,933	35,129	15,626	19,503
BASHH Course in STI & HIV	49,495	38,880	10,615	44,841	47,108	(2,267)
STIF Course	61,970	45,175	16,795	61,482	65,572	(4,090)
STIF Competency	25,732	29,296	(3,564)	33,185	17,288	15,897
Spring Meeting	257,668	220,394	37,274	237,191	177,041	60,150
Other Edu. Meetings/Courses: Sub-Total	427,719	367,225	60,494	417,328	349,721	67,607
Regional Branches						
East Anglia	-	-	-	-	-	-
Ireland	-	-	-	-	-	-
Mersey	-	-	-	-	66	(66)
Thames North East	-	-	-	-	-	-
Thames North West	-	-	-	-	-	-
Thames South East	-	-	-	-	-	-
Thames South West	-	-	-	-	-	-
North West	-	173	(173)	-	-	-
Northern	-	-	-	-	-	-
Oxford	250	369	(119)	425	476	(51)
Scotland	3,800	3,506	294	5,310	4,428	882
South West	8,523	4,980	3,543	5,670	4,828	842
Trent	-	-	-	3,583	2,250	1,333
Wales	2,925	5,260	(2,335)	6,262	8,517	(2,255)
Wessex	5,100	2,926	2,174	2,090	1,914	176
West Midlands	-	263	(263)	1,902	300	1,602
Yorkshire	4,640	1,844	2,796	2,793	3,876	(1,083)
Regional Branches: Sub-Total	25,238	19,321	5,917	28,035	26,655	1,380
TOTALS	587,706	584,853	2,853	558,381	519,708	38,673

During the year BASHH held a joint meeting with FSRH. The income and cost stated in these accounts relate only to the share of BASHH.

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10. Statement of funds

	At 01-Aug-15 £	Income £	Expenditure £	Investment gains £	Transfers £	At 31-Jul-16 £
Endowment funds						
Robert S Morton Lecture fund	10,000	-	-	-	-	10,000
Total Endowment fund	10,000	-	-	-	-	10,000
General reserve	1,727,544	793,260	825,668	44,388	-	1,739,524
Total unrestricted fund	1,727,544	793,260	825,668	44,388	-	1,739,524
Restricted funds :						
The Robert S Morton Lecture Fund	3,139	-	-	-	-	3,139
Cathy Harman Memorial Appeal	1,011	-	-	-	-	1,011
Total restricted funds	4,150	-	-	-	-	4,150
Total funds	1,741,694	793,260	825,668	44,388	-	1,753,674

The R.S. Morton Lecture Fund represents an endowment from the estate of the late Dr. RS Morton. The fund is to be used by the Trustees of BASHH for the establishment of an annual lecture to be named "The Robert S Morton MSSVD Annual Lecture". The capital amount can be invested at the discretion of the trustees, with the income from this investment forming a restricted fund to be used for provision of the lecture. The Cathy Harman Memorial Fund represents donations received in memoriam.

Funds	Fixed Asset £	Investments £	Net Current Assets £	Long Term Liabilities £	Fund Balances £
Endowment funds	-	-	10,000	-	10,000
Restricted funds	-	-	4,150	-	4,150
Unrestricted funds	-	1,101,623	637,901	-	1,739,524
	-	1,101,623	652,051	-	1,753,674

11. Members' Limited Liability

The company is limited by guarantee and has no share capital. Every member promises, if the Charity is dissolved while he or it (in the case of a member which is a corporate body) remains a member or within 12 months afterwards, to contribute up to £1 towards the cost of dissolution and the liabilities incurred by the Charity while the contributor was a member.