

BASHH



BASHH

(A Company Limited by Guarantee)

Report and Financial Statements

Year ended: 31 July 2014

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 Janette Clarke
Vice President	Dr Elizabeth Carlin
General secretary	Dr Elizabeth Foley
Treasurer	Prof. Jonathan Ross
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 Sris Allan
Fellow to the board	Dr Alan Mc Owan
Fellow to the board	Dr Nneka Nwokolo
Fellow to the board	Dr Cecilia Priestley
Fellow to the board	Dr Jillian Pritchard
Fellow to the board	Dr Liat Sarnar
Doctors in Training Rep	Dr Emily Lord
Health Adviser rep – board	Ms Ceri Evans
Nurse Rep. – Board	Mr Colin Roberts
SAS Rep – board	Dr John Lee
Lay trustee	Mr David Robert-Jones
Immediate past President	Dr Janet Wilson
	Dr J Dhar (resigned 14 March 2014)
	Dr R Nandwani (resigned 14 March 2014)
	Dr R Patel (resigned 14 March 2014)
	Dr K Radcliffe (resigned 14 March 2014)
	Dr Ann Sullivan (resigned 14 March 2014)
	Dr John White (resigned 14 March 2014)

Registered Office: Chester House, 68 Chestergate
Macclesfield, Cheshire SK11 6DY

Auditors: Farrington & 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 2014

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 2014. The trustees have adopted the provisions of the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" issued in 2005 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 2014 which details the Association's organisational practice and highlights its activities and achievements.

This first year of implementation of the Health and Social Care Act and, changes in commissioning for sexual health, reproductive health and HIV services in England, with funding and staffing issues in sexual health in Northern Ireland and in Wales and the potential impact of Scottish devolution on healthcare in Scotland, has been a busy time for BASHH. Whilst the impact of commissioning activity and implementation of new contracts is yet to be fully realised across England, we are acutely aware of the threats to good service standards by structural changes of this magnitude.

BASHH has an active engagement process with lead clinicians and continues to assess their opinions of service issues through regular surveys. The national Patient survey on confidentiality in sexual health clinics led by BASHH last year was published in July 2014. It gave clear support for maintaining additional confidentiality arrangements in sexual health services.

Concerns about the potential impact of the fragmentation of services following tendering and its effect on patient safety and the quality of care have led to BASHH discussing specific local issues with Public Health England and the Department of Health. A group of clinicians experienced in tendering/commissioning has been identified by BASHH and they are available for consultation by both commissioners and clinicians. We hope that this proves beneficial to all concerned.

BASHH is developing working relations with national representative bodies in public health and local government and we hope to take forward joint educational events to enhance our understanding of this new working environment. We have enhanced our collaborative work with the Royal College of Physicians in areas of mutual interest, with joint representation to parliamentarians planned for Autumn 2014.

An updated version of the BASHH/MEDFASH Standards for the Management of Sexually Transmitted Infections was launched in January 2014. The Standards had been fully reviewed and updated to reflect best practice and the new working structures. It offers a framework for commissioning to best practice standards. This important work was led by our Clinical Standards Unit who continue to work to ensure that standards for good practice are clearly delineated.

We have had continuing input into a number of important documents produced by Public Health England for the Department of Health around whole-system commissioning and commissioning screening and diagnostic services for gonorrhoea. A topic proposal to the Healthcare Quality Improvement Partnership

for a one year feasibility study of a national HIV-STI audit programme from BASHH, in conjunction with BHIVA, was tendered in June 2014.

A statutory Code of Practice, which would include guidance on confidentiality in sexual health, had been anticipated as a suitable replacement to the Sexually Transmitted Diseases Directions. However, it became apparent in July 2014 that sexual health guidance will not be included in the Code of Practice. BASHH is working with sister professional organisations and patient advocacy groups to secure an alternative to the Directions with the Department of Health that still provides a binding and equally strong requirement to protect sexual health data.

Our training modules continue to expand and develop. We had a very successful joint Spring meeting in April 2014 with BHIVA along with many other high quality educational events across the UK and throughout the year.

In summary, BASHH continues to thrive and is a vibrant and active organisation due largely to the efforts of many of its members who give freely and generously of their time and expertise for the benefit of the organisation and the public.

Structure, Governance and Management

Statement of Trustees Responsibilities

The Charities Acts require 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 judgements and estimates which 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 and

- 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.

The Association is governed by a governing Board of at least 12 elected trustees, 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 19 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 Advisor 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 advisor, 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 Development 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 at the AGM on 14 March 2014. It provides details of the objects; powers; benefits to members and trustee; 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 for contested posts has been conducted by the Electoral Reform Service (ERS) for several years using a secure online voting website, as well as paper voting where necessary. This year the association used the Electoral Reform Service to identify preferred candidates for Trustee positions and members of the Clinical Governance Committee. The names of the preferred candidates were put forward to the membership for election at the Annual General Meeting on 14 March 2014.

Special resolutions to amend the Memorandum and Articles of the Association were put to and accepted by the membership at the Annual General Meeting in March 2014 to clarify and revise the election process. For the 2014 the election will revert to the online and paper voting process conducted by the Electoral Reform Service ahead of the Annual General Meeting.

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 Company 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

The Finance and Governance Committee of BASHH has a regular programme of reviewing the Association's operations across a range of areas that carry risk and in ensuring that BASHH has appropriate risk management strategies in place. Over the past year a project to develop a risk evaluation and reporting system has been undertaken, which includes details of the actions that will be taken to mitigate against any risks the organisation faces. It is anticipated that the new system will become fully operational over the next year.

The committee has separately reviewed the risk profile of its investments and has regular meetings with its professional financial advisors to discuss the Association's risk positions across the range of its investments and banking activities.

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 Spring Meeting, 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. The membership continues to flourish and there have been new applications for membership into both medical and non-medical categories, reflecting our multidisciplinary ethos, as well as a number of resignations and deaths. The total number of members on 31 July 2014 was 995, compared with 1167 in July 2013. This reduction in numbers is partly due to changes in the Association's banking arrangements. Following the transfer of the financial support to KSAM it was necessary to set up new direct debit mandates for the membership subscription due on 1 August 2013. As a result of this some members failed to renew their membership, however attempts are being made to encourage those with lapsed memberships to re-join.

Over the coming year BASHH will work to ensure that the membership categories are simplified, that members are categorised according to their membership correctly and that membership details are kept up to date. This will allow better and more targeted communication with BASHH members especially when sub groups need to be notified of opportunities and events. Most members prefer to be communicated with electronically although a small proportion still have communication sent by post.

Financial review

BASHH has had a stable financial year. The full year effect of reducing costs following the appointment of a new secretariat were realised and the performance of our investment portfolio also contributed to a positive financial balance. The effect of changing the charity's bank account resulted in a short-term reduction in cash flow, associated with updating direct debit mandates for the Association's membership, but this effect was smaller than anticipated due to the perseverance of the General Secretary and secretariat in encouraging new direct debit forms to be completed.

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 membership fee was not increased. A joint annual conference with the British HIV Association was held in Liverpool in 2014 and despite the subsequent income being shared between the two charities, the meeting was financially successful. A number of 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.

Reserves policy

The Trustees reviewed the reserves policy and renewed its 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 standard documents, or respond to external consultations.

Investment policy

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 deposit 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 Sarasin's Investment Managers and St. James Place Management.

Plans for future periods

BASHH plans to continue providing a lead for those delivering sexual health and HIV services, and to promote high quality education and training in this area. During a time of rapid change in sexual health commissioning and the proposed use of different service models, the association has sufficient funds to develop independent high quality guidelines on the management of sexually transmitted infections and the delivery of appropriate clinical services. The annual conference in 2015 will be held in Glasgow and planning for this meeting is at an advanced stage.

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 analyses within their specialist areas. In the last year the SIGs have provided a range of courses including the microscopy course, genital dermatology course, surgical techniques in GUM course, ABC of Sexual Dysfunction course, the Diplomas in GUM and HIV revision courses and a number of regional STI Foundation courses. A project is now underway to produce an e-knowledge assessment linked to the course. The numbers of GUM nurses and Health Advisors undertaking STIF Competencies are increasing. 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.

http://www.bashh.org/BASHH/About_BASHH/Annual_Reviews/BASHH/About_BASHH/Annual_Review.aspx

Ordinary General Meetings (OGM)

The EC has the responsibility of providing 4 OGMs annually, which are free to delegates, including invited lectures from BASHH Honorary Life Members and Professorial lectures. Six SIGs (Adolescent, Public Health, HIV, Bacterial, Herpes and MSM) put together OGMs in 2013-14. These were well attended with excellent evaluation. Recent innovations include the electronic collection of evaluation, and once feedback is submitted online then the attendance certificate can be downloaded / printed. Podcasts/webcasts of the OGM lectures has continued to facilitate access for those unable to attend in person.

Other meetings

The EC oversees the Annual Spring Conference and the 2014 Conference in Liverpool was held jointly with BHIVA in April attracting 1149 delegates, and excellent evaluation. The annual Joint BASHH /FSRH meeting in January 2014 was again very successful. Other meetings include the first New Diagnostics into Practice meeting held in Oxford in December 2013, the Doctors in Training meeting, the SAS Conference, and a joint meeting with the RCP and British Thoracic Society on the Practical Management of Tuberculosis – diagnosis, inpatient and outpatient care in January 2014. The HIV Masterclass held in Manchester in March 2014 was again very successful and it has been agreed that in future the HIV Focus meeting will be discontinued to allow resources to be focused on the Masterclass.

STI & HIV course

Following declining attendances and a review, the course ran once in 2013-14. Modules 1 & 2 ran in the Spring and modules 3 & 4 in the Autumn. This appears to have been successful with increased delegate numbers and good feedback. There is some concern that the changes to the course may make it more difficult for trainees to take the Dip GUM at the end of ST3 as it will be difficult for them to attend both parts of the course in that time frame. This will be under review, as will the course structure and content.

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 Glasgow and preparations are well underway. There are plans to look at scanning delegates badges for CPD logging purposes.

Clinical Governance Committee

Objectives

The Clinical Governance Committee is responsible for implementing strategies and policies of BASHH as approved by the Governing Board, setting and monitoring standards and specifications and identifying areas of best clinical practice and promoting them for adoption where appropriate whilst recognising local differences. These objectives are delivered through 4 meetings a year when issues from the Board are discussed and regional reports submitted for each meetings which contribute to intelligence on tendering, financial constraints and manpower. When the need arises, the Committee may also identify regional and individual clinic difficulties, explore solutions to issues and suggest action plans, which may include coordinating peer review visits.

Main activities in 2013-2014

Significant activities of the Committee this year included discussions were held during committee meetings focusing on development of branches and commissioning of services, as well as Chairs organizing a rich array of educational meetings in several branches. We discussed with issues arising out of commissioning

including transfer of case notes, job plan provision for supporting professional activities under private providers. Branch Chairs also assumed new roles as Regional Specialty Advisers for Service to the Royal College of Physicians.

Future plans

The Committee and Regional Branches will be viewing its Terms of Reference Enhance function and the benefit and reach of branches for members at the grassroots, particularly those with fewer than 2 meetings a year.

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 members.

23rd January 2014 Joint meeting of BASHH and the Faculty of Sexual and Reproductive Health (FSRH):

This one day joint meeting at the Royal Society of Medicine was again oversubscribed. It attracted clinicians from sexual health and primary care backgrounds bridging the integration agenda through education. The programme and sponsorship was organized by the joint BASHH-FSRH conference committee: Dr Daniel Richardson, Mr Colin Roberts, Dr Marion Everett and Ms Diana Halfnight. The feedback was excellent.

BASHH BTS RCP: Practical management of tuberculosis: Diagnosis, inpatient and outpatient care. 21st January 2014.

This joint conference at the Royal College of Physicians (RCP) jointly run by BASHH and the British Thoracic Society (BTS) was managed and organised by Dr Elizabeth Foley and was a successful meeting.

BASHH-BHIVA Joint Spring Conference 2014: 1-4 April 2014:

Daniel Richardson, Elizabeth Foley and Jonathan Ross were the core BASHH group on the organising committee with BHIVA. The conference was managed and organized by Mediscript. Details can be found at: <http://www.bhiva.org/annualconference2014.aspx> The Conference held at the Liverpool Arena and convention centre. There were over 1100 delegates. The conference attracted 9 major sponsors from the pharmaceutical industry: Abbvie, BD, Boehringer Ingelheim, Bristol Myers Squibb, Cepheid, Gilead sciences, MSD, Janssen & ViiV. The surplus was shared equally between BASHH and BHIVA.

Keynote speakers: included Professor Jonathan Weber: 21st century prevention: vaccines for sexually transmitted infections, hepatitis and HIV; Drs John White & Laura Waters: Translating recent research into clinical practice; Dr James Coutts Cardiovascular disease: risk assessment, risk reduction; Professor Anna Maria Geretti Management of sustained low level viraemia; Professor Brian Gazzard Enteric infections in men who have sex with men; Professor Christina Marra Syphilis: immunology and HIV; Drs Eileen Nixon & Vanessa Apea Strategies for retaining people living with HIV in care; Dr Alan McOwan HIV testing new technologies and new strategies for those at higher risk; Dr Ann Sullivan Partner notification for HIV: maximising positive outcomes.

Prizes:

Best oral presentation: Dr Michael Brady, Terrence Higgins Trust O21: 'Home HIV sampling linked to national HIV testing campaigns: a novel approach to improve HIV diagnosis'

Best poster presentation: Dr Rageshri Dhairyawan, Barking, Havering and Redbridge NHS Trust P8: 'Choral singing and psychological and physical wellbeing: findings from evaluation of the UK community choir of people living with HIV - Joyful Noise'

Best SpR Clinico-Pathological Case Presentation Dr Jake Bayley, King's College Hospital NHS Foundation Trust, London 'The Clone Wars'

The BHIVA / BASHH Maggie Godley Memorial Prize: Dr John McSorley, North West London Hospitals NHS Trust. O34: 'Feasibility and acceptability of a quadrivalent human papillomavirus vaccination programme (HPV4) for young men who have sex with men (MSM) within a comprehensive sexually transmitted infection (STI) testing and sexual health engagement strategy: Results from the first year'

BHIVA/ BASHH Best Case Presentation (Pregnancy, breastfeeding and HIV): Dr Subathira Dakshina, Barts Health NHS Trust, London 'Third Trimester Conundrum'

BHIVA / BASHH Abstract Presentation from an undergraduate Mr Robert Carney, Royal Free London NHS Foundation Trust O22: 'A hepatitis C virus core antigen assay is a cost-effective, sensitive and specific test in the detection of acute hepatitis C infection in HIV-infected subjects'

Future: BASHH conference events

IUSTI Europe conference. Co-badged by BASHH 18th-20th September 2014

Joint BASHH-RCP conference, 8th December 2014

Joint BASHH-FSRH conference 30th January 2015

BASHH conference, Glasgow 1-3 June 2015

Communications: 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 STI edited by Daniel Richardson continues to provide news and topical debate around BASHH activities.

Public, Media and Website activities

The Public Panel is drawn from a wide range of the public with a variety of genders, sexualities, ages and different life experiences. It continues to be consulted across a range of the Association's activities, providing lay opinion to BASHH's Clinical effectiveness Group on guidelines, leaflets and other electronic resources. Active discussion of scope and content of BASHH website pages and publications generates innovative suggestions for future work. It is anticipated that their work over the forthcoming year will include a review of BASHH mobile apps and engagement with the HQUIP feasibility study.

BASHH has also supported the work of Testing Faith, a project by a London HIV charity (NAZ Project London), which works within black and ethnic minority communities. Testing Faith aims to educate and to engage faith leaders in HIV/AIDS awareness. BASHH provided educational advice and expert input to pilot studies run in several London Boroughs. It is planned to roll this out into other regions over the next year.

The Media Group, led by Mr Peter Greenhouse, has focused on the Association's Campaigns to improve the health of MSMs such as promoting the extension of HPV vaccination to this group and STI testing recommendations for MSM. The group has also been active in media engagements and has provided a rapid response to all media enquiries coming into the Association's media office at Munro and Foster. The profile of the Association across the media is high and BASHH has an active presence on social media.

Over the past year the BASHH website has been further refreshed and updated, including the public area. BASHH also continues to maintain a public profile and forum via Health Unlocked at www.healthunlocked.com/BASHH. Online payment and registration for BASHH educational events has been extended to more educational events and this will continue over the next year.

Public Benefit

The Association has fully complied with its duty to have due regard to public benefit as demonstrated throughout this report. In particular, the Association's work 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.

Most of BASHH's activities centre around delivering educational programmes, developing up to date guidance and patient resources and in seeking to support and influence sexual health commissioning and the delivery of NHS services for the benefit of the public.

The Association's courses are highly successful and much of its educational programme is free to access and is open to members and non-members. Subsidised journals are provided to some membership categories and the Association supports the publication of two international journals (STI and Int J STD & AIDS) which benefits training and education internationally.

The BASHH guidelines sit on the public facing side of the BASHH website and are accredited by NICE. Our Standards for the Management of STIs are widely endorsed and are used by commissioners to specify and measure services. The Association provides support to parliamentarians through expert briefing papers and representation to the DH to promote good sexual health for the entire health community.

Plans for the Future

During the next year BASHH will continue its normal business but will focus on the following areas;

BASHH will continue to press for gender neutrality in HPV vaccination, developing a statement for presentation to the Joint Committee on Vaccination and Immunisation (JCVI) and supporting opportunistic HPV vaccination for young MSM.

BASHH will continue to collect data from lead clinicians in England in order to evaluate the effect of commissioning arrangements on sexual health services and the quality of care.

BASHH will develop and expand its STIF portfolio, including new educational material and executive management support for the programme will be strengthened. We will continue to improve access to our educational meetings through regional meetings and webcasting of OGM presentations.

BASHH, with BHIVA, will develop the feasibility project for a national STI/HIV audit programme for the Healthcare Quality Improvement Partnership.

BASHH will strengthen and build relationships with related charities and organisations and with our associated Royal College to provide support in areas of shared interest.

We will also foster working relationships with local government, public health and representative bodies at national level to promote better mutual understanding.

BASHH will continue to support members across all the United Kingdom, offering assistance with representation for all four nations to their national governments and key policy makers. BASHH will collect members' opinion on the Association's activities and will use this to develop future strategic work priorities for the next two years.

Statement of disclosure of information to auditors

We, the directors of the company 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 company's auditors are unaware;
and
- we have taken all the steps that we ought to have taken as directors 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 _____:

.....
Dr J. Clarke
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 2014 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 Financial Reporting Standard for Smaller Entities (effective April 2008) (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, 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 144 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 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 (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

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

BASHH ANNUAL REPORT
YEAR ENDED 31st JULY 2014

Statement of Financial Activities

(including income and expenditure account) for the year ended 31 July 2014

	Notes	Unrestricted Funds £	Restricted Funds £	Endowment Funds £	Total 2014 £	Total 2013 £
<u>Incoming Resources</u>						
Investment Income	2	19,130	-	-	19,130	16,541
Activities in furtherance of the charity's objects:						
Membership Subscriptions		199,427	-	-	199,427	232,998
Educational meetings and courses	10	697,852	-	-	697,852	616,413
Grant and similar income	11	-	59,200	-	59,200	-
Other incoming resources	3	-	-	-	-	1,266,849
Total incoming resources		916,409	59,200	-	975,609	2,132,801
<u>Resources expended</u>						
Cost of activities to further the charity's objects	4	799,598	59,200	-	858,798	683,918
Governance costs	5	27,655	-	-	27,655	27,494
Total resources expended		827,253	59,200	-	886,453	711,412
Net incoming resources / (resources expended) for the year. Net income for the year.		89,156	-	-	89,156	1,421,389
Realised gains on investment assets		-	-	-	-	-
Net incoming resources / (resources expended) including realised gains on investments		89,156	-	-	89,156	1,421,389
Unrealised gains on investment assets	7	28,645	-	-	28,645	143,723
Net movement in funds		117,801	-	-	117,801	1,565,112
Fund balances brought forward at 1 August 2013		1,550,962	4,150	10,000	1,565,112	-
Fund balances carried forward at 31 July 2014	11	1,668,763	4,150	10,000	1,682,913	1,565,112

There are no gains and losses other than those included above. All activities relate to charitable activities.

The notes on pages 19 to 25 form part of the financial statements.

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Balance Sheet

	NOTES	As at 31.07.14 £	As at 31.07.13 £
FIXED ASSETS			
Tangible Assets		-	-
Investments	7	983,968	939,135
TOTAL FIXED ASSETS		983,968	939,135
CURRENT ASSETS			
Stock		3,944	5,436
Debtors	8	182,051	81,846
Bank balances		630,113	687,185
		816,108	774,467
Creditors - Amounts falling due within one year	9	- 117,163	- 148,490
NET CURRENT ASSETS		698,945	625,977
TOTAL NET ASSETS		1,682,913	1,565,112
FUNDS			
Endowment (Capital) Funds	11	10,000	10,000
Restricted Income Funds	11	4,150	4,150
Unrestricted Funds	11	1,668,763	1,550,962
TOTAL FUNDS	11	1,682,913	1,565,112

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 April 2008).

The financial statements were approved and authorised for issue by the trustees on _____ and signed on their behalf by:

.....
Prof. Jonathan Ross
Trustee

Notes forming part of the financial statements

for the year ended 31 July 2014

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" published in 2005 and the Financial Reporting Standard for Smaller Entities (effective April 2008) 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) Fund accounting

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.

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 resources

All incoming resources are included in the SOFA when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy. For legacies, entitlement is the earlier of the charity being notified of an impending distribution or the legacy being 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 2014, 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) Resources expended

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. Items donated for resale or distribution are not included in the financial statements until they are sold or distributed.

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.

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.

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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

No taxation has been provided in the financial statements because as a registered charity, it applies all income to its charitable objectives and is exempt in accordance with Section 505 of the Income and Corporation Taxes Act 1988.

2 Investment Income

	2014	2013
	£	£
Interest receivable	2,941	1,131
Dividends receivable from investments and unit trusts	16,189	15,410
	<u>19,130</u>	<u>16,541</u>

3 Other Incoming Resources

BASHH previously operated as an unincorporated charity (Reg No 1099301). On 1 August 2012 the assets and undertaking together with all liabilities obligations and functions of this unincorporated charity were transferred through a deed to a newly incorporated company and registered charity. Other incoming resources within the comparative figures represent the value of these net assets that were received by BASHH on 1 August 2012 and these amounted in total to £1,266,849. This amount included £10,000 of endowment funds, £4,140 of restricted income funds and the balance of £1,252,709 being unrestricted funds.

4 Cost of activities to further the charity's objectives

	2014	2013
	£	£
Cost of Educational Meetings (note 10)	591,151	438,308
Restricted funds expenditure (note 11)	59,200	149
Cost of Educational Journals	63,447	95,228
Secretariat fees (See note below)	104,543	115,470
Committee meeting and travel costs	9,697	9,038
Printing, Postage & Stationary	7,117	2,287
General administration and sundry costs	23,643	23,438
	<u>858,798</u>	<u>683,918</u>

There were no direct staff costs incurred by the charity during the year. However the administrative and support services to the charity in connection with its charitable activities were provided under contract by the Royal Society of Medicine and thereafter by Kingston Smith Association Management who are both independent parties. The charge for year including irrecoverable VAT is as above.

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5 Governance Costs

	2014	2013
	£	£
Trustees travel and subsistence (note 6)	13,319	16,334
Professional fees and insurance	6,336	1,414
Fees payable to the charity auditors :		
For Audit	8,000	7,580
For other services	-	2,166
	27,655	27,494

6 Trustees remuneration

The trustees neither received nor waived any emoluments during the year (2013: £ Nil)

Out of pocket expenses were reimbursed to trustees as follow

	2014	2013	2014	2013
	Number	Number	£	£
Travel and subsistence	19	15	13,319	16,334
Other	-	-	-	-
	19	15	13,319	16,334

7 Fixed Asset Investments

	2014	2013
	£	£
Cost or market value as at 01 August 2013	939,135	
Additions	16,188	795,412
Disposal proceeds	-	-
Net investment gains	28,645	143,723
Market value as at 31 July 2014	983,968	939,135

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 £16,188 represent additional units acquired during the year. The previous year's additions of £795,412 represents £15,411 of units acquired in that year and a transfer at market value of £780,001 from the previously unincorporated BASHH (See Note 3)

The Investments managed by St James Place had a year end market value of £490,319 (2013: £467,723) and consists of accumulation units held in their Equity Income, Ethical and International Corporate Bond unit trusts.

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The Investments managed by Sarasin and Partners LLP had a year end market value of £493,650 (2013: £471,412) and consists of income units held in their Alpha CIF for endowment funds.

8 Debtors

	2014	2013
	£	£
Trade debtors	150,932	77,224
VAT Recoverable	14,237	-
Prepayments	16,882	4,622
	182,051	81,846

9 Creditors : amount falling due within one year

	2014	2013
	£	£
Trade creditors	76,903	79,005
VAT payable	-	18,670
Accruals and deferred income	40,260	50,815
	117,163	148,490

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

	Income 2014	Expenditure 2014	Result 2014	Income 2013	Expenditure 2013	Result 2013
	£	£	£	£	£	£
Note : Deficits appear in parentheses ()						
Special Interest Groups						
Colposcopy SIG/Genital Dermatology SIG	18,447	11,764	6,683	18,610	11,665	6,945
HIV SIG	-	-	-	-	-	-
Herpes Simplex SIG	-	-	-	-	-	-
British Co-Operative Clinical Group	-	1,148	(1,148)	-	-	-
HPV SIG	1,750	1,775	(25)	7,429	3,477	3,952
Bacterial	12,270	24,117	(11,847)	19,400	11,441	7,959
Sexual Dysfunction Group	23,039	14,929	8,110	-	796	(796)
Adolescent Special Interest Group	3,546	2,183	1,363	9,315	9,465	(150)
Clinical Effectiveness Group	-	2,891	(2,891)	-	3,034	(3,034)
NCCG Group	36,907	31,147	5,760	33,037	22,171	10,866
National Audit Group	-	20,197	(20,197)	-	1,086	(1,086)
Doctors in Training	1,000	61	939	2,033	2,630	(597)
Web Team	-	-	-	-	465	(465)
Media External Communications Group	-	49,522	(49,522)	-	36,319	(36,319)
Nurses / Health Advisors	-	-	-	-	-	-
BASHH IT Group	-	-	-	-	-	-
HIV Medicine	47,855	27,937	19,918	58,726	26,248	32,478
Mentoring Committee	-	98	(98)	-	896	(896)
Clinical Standards Unit	-	29,692	(29,692)	-	16,656	(16,656)
Pharmacy Group	-	-	-	-	-	-
Public Panel	-	3,263	(3,263)	-	2,340	(2,340)
Public Health Group	-	-	-	-	208	(208)
MSM SIG	11,292	11,923	(631)	-	-	-
Special Interest Groups: Sub-Total	156,106	232,647	(76,541)	148,550	148,897	(347)

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Other Educational Meetings/Courses						
Educational Meetings	15,517	22,487	(6,970)	-	23,868	(23,868)
Joint Meetings	34,831	22,597	12,234	26,855	13,763	13,092
BASHH Course in STI & HIV	37,000	17,529	19,471	60,850	57,122	3,728
STIF Course	51,175	32,746	18,429	58,240	29,701	28,539
STIF Competency	29,185	11,186	17,999	19,645	13,169	6,476
Spring Meeting (See note below)	336,098	223,873	112,225	264,289	123,262	141,027
Other Edu. Meetings/Courses: Sub-Total	503,806	330,418	173,388	429,879	260,885	168,994
Regional Branches						
East Anglia	-	-	-	-	-	-
Ireland	-	-	-	-	-	-
Mersey	-	-	-	110	-	110
Thames North East	-	-	-	-	4,185	(4,185)
Thames North West	400	-	400	-	-	-
Thames South East	-	-	-	-	-	-
Thames South West	-	-	-	-	-	-
North West	-	-	-	-	-	-
Northern	-	-	-	150	25	125
Oxford	3,700	2,820	880	1,280	190	1,090
Scotland	2,755	3,478	(723)	10,080	3,932	6,148
South West	2,860	1,728	1,132	2,930	2,807	123
Trent	2,195	2,273	(78)	4,639	2,280	2,359
Wales	4,533	3,230	1,303	3,377	2,179	1,198
Wessex	8,150	6,496	1,654	4,650	3,973	677
West Midlands	10,147	4,594	5,553	4,300	4,540	(240)
Yorkshire	3,200	3,467	(267)	6,468	4,415	2,053
Regional Branches: Sub-Total	37,940	28,086	9,854	37,984	28,526	9,458
TOTALS	697,852	591,151	106,701	616,413	438,308	178,105

During the year 2014 the spring meeting was held through a joint arrangement with BHIVA. The revenue and the cost stated above represents BASHH's share of the meeting. The 2013 spring meeting was entirely held by BASHH and was not a joint arrangement.

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11 Statement of funds

	At 01-Aug-13 £	Income £	Expenditure £	Investment gains £	Transfers £	At 31-Jul-14 £
Endowment funds						
Robert S Morton Lecture fund	10,000	-	-	-	-	10,000
Total Endowment fund	<u>10,000</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>10,000</u>
General reserve	1,550,962	916,409	827,253	28,645	-	1,668,763
Total unrestricted fund	<u>1,550,962</u>	<u>916,409</u>	<u>827,253</u>	<u>28,645</u>	<u>-</u>	<u>1,668,763</u>
Restricted funds :						
The Robert S Morton Lecture Fund	3,139	-	-	-	-	3,139
Cathy Harman Memorial Appeal	1,011	-	-	-	-	1,011
Department of Health	-	59,200	59,200	-	-	-
Total restricted funds	<u>4,150</u>	<u>59,200</u>	<u>59,200</u>	<u>-</u>	<u>-</u>	<u>4,150</u>
Total funds	<u>1,565,112</u>	<u>975,609</u>	<u>886,453</u>	<u>28,645</u>	<u>-</u>	<u>1,682,913</u>

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.

The Department of Health fund represents income and expenditure received and expended specifically for the development of a new pro forma to assess for child sexual exploitation.

Net Assets of the Funds of Charity

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	-	983,968	684,795	-	1,668,763
	<u>-</u>	<u>983,968</u>	<u>698,945</u>	<u>-</u>	<u>1,682,913</u>

12 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.