

**BRITISH ASSOCIATION FOR SEXUAL  
HEALTH AND HIV (BASHH)**  
(A Company Limited by Guarantee)

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**Report and Financial Statements**

**Year ended: 31 July 2018**

**Charity no: 1148196**

**Company no: 07863350**

WEDNESDAY



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09/01/2019  
COMPANIES HOUSE

**British Association for Sexual Health and HIV**  
*Established 2003 through the merger of MSSVD (est.1922) and AGUM (est.1992)*

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**BASHH ANNUAL REPORT**  
**YEAR ENDED 31<sup>st</sup> JULY 2018**

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## **Legal and Administrative**

**Trustees and Directors:**

President	Dr Olwen Williams OBE	
Vice President	Dr Jonathan Ross	
General secretary	Dr Alan Tang	
Treasurer	Dr Kaveh Manavi	
Chair - Education committee	Dr Daniel Richardson & Dr Claire Dewsnap	
Chair - Clinical Governance Committee	Dr Ashini Fox	
Fellow to the board	Dr John McSorley	
Fellow to the board	Dr Laura Waters	
Fellow to the board	Dr Rachael Jones	
Fellow to the board	Dr Colm O'Mahoney	
Fellow to the board	Dr Darren Cousins	
Fellow to the board	Dr Carol Emerson	
Doctors in Training Rep	Dr Deborah Kirkham	
Health Adviser rep – board	Mr Merle Symonds	
Nurse Rep. – Board	Mr Jodie Walker-Hayward	
SAS Rep – board	Dr Sashidharan Parameswaran	
Lay trustee	Mr Neil Jenkinson	
Immediate past President	Dr Elizabeth Carlin	
	Dr Elizabeth Foley	(resigned 12 Jan 2018)
	Dr Jannette Clarke	(resigned 12 Jan 2018)
	Dr Karl Hollows	(resigned 12 Jan 2018)
	Dr Margaret Alice Kingston	(resigned 12 Jan 2018)
	Dr Jillian Pritchard	(resigned 12 Jan 2018)
	Dr Liat Sarner	(resigned 12 Jan 2018)
	Mr Jonathan William Roberts	(resigned 12 Jan 2018)
	Dr Jackie Sherrard	(resigned 12 Jan 2018)
	Dr Rajul Patel	(resigned 12 Jan 2018)

**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 (incorporating the directors report) for the year ended 31 July 2018**

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-end 31 July 2018. The financial statements comply with the Charities Act 2011; the Companies Act 2006; the Articles of Association and are prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102 Charities SORP)

#### **Introduction**

We have the pleasure of submitting British Association of Sexual Health and HIV (BASHH) annual report for the year ended July 2018, which details the Association's many activities and achievements in line with its charitable aims, that continue within a responsive organisational framework.

Sexual health, reproductive health and HIV services across the UK continue to face challenges from a myriad of sources. In England, the on-going tendering of services and tight financial constraints continue to pose significant challenges for providers and commissioners alike. Whilst in Northern Ireland, Wales and Scotland, increasing demand with limited investment in services and workforce is a major concern. In light of these challenges, BASHH has collaborated with a range of national representative bodies, professional and third sector organisations to raise the importance across the UK of good sexual health and to maintain high quality services in a time where the emergence of multi-resistant gonorrhoea and a significant rise in numbers of cases of syphilis is causing concern.

To raise these issues, in January 2018, BASHH set up an on-line 'Save our Sexual Health Services' public petition supported by 25 leading patient, professional and third sector organisations. The petition supported by a proactive social media campaign was signed by 7000 individuals over a 6 month period. BASHH has produced key metrics 'the Hot Six' to aid services identify their pressure points and aid pan UK benchmarking. Evidence gathered supports the campaign to improve funding of services.

We have responded to several consultations including the Public Health Prescribed Measures, and review of 'The National Health Service (Charges to Overseas Visitors) (Amendment) Regulations 2017' and Assaults on Emergency Workers (Offences) Bill 2017-19.

Through partnership working we have secured a programme to deliver the quadrivalent human papilloma virus (HPV) vaccine for boys and national vaccination programme for men who have sex with men (MSM) across the UK. Pre-exposure prophylaxis (PrEP) is provided for high risk individuals in Scotland, Wales and Northern Ireland on the NHS but only accessible via PrEP Impact clinical trial in England. BASHH have called for PrEP to be available in England by April 2019 prior to the trial being concluded.

Production of guidelines and standards are an essential aspect of our remit. Our Clinical Effectiveness Unit have produced three new guidelines of which one was co-produced with BHIVA and another with both BHIVA and FSRH.

Our educational activities provide high quality content which receives excellent feedback on a variety of platforms. The activities continue to provide our Members and the wider community of health professionals with excellent educational events across the UK throughout the year. The joint BHIVA /BASHH conference in Edinburgh attracted over 1000 delegates and our annual joint meeting with FSRH was fully subscribed.

The media team have had an exceptionally busy year, contributing to media enquiries, appearing on TV and radio programmes. Close collaboration with BHIVA media team enabled both Associations to gain a wider reach and raise the profile of contemporaneous issues in the field of sexual health and HIV. Our twitter @BASHH\_UK increased its followers to over 6000.

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 trustees (who are also directors of BASHH for the purposes of company law) are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the trustees to prepare financial statements for each financial year, which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP 2015 (FRS 102);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

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

In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

### **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 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 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 and 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 were 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. A further revision of the Articles of the Association was approved by the membership on 13 October 2017.

The main objectives of BASHH, as stated in its governing document are

- To promote, encourage and improve the study of and the practice of diagnosing, treating and managing sexually transmitted infections, HIV and other sexual health problems.
- To innovate and deliver excellent tailored education and training to health care professionals, trainers and trainees in connection with the provision of sexual health and HIV care
- To determine, monitor and maintain standards of governance in the provision of sexual health and HIV care
- To advance public health in relation to sexually transmitted infections, HIV and other sexual health problems.
- To champion and promote good sexual health and provide education in relation to sexually transmitted infections HIV and other sexual health problems to the public.

### **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 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**

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 of Trustees 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 2018 was 1123, compared with 986 members on 31 July 2017.

Through a membership drive to attract nurses to join BASHH, along with a reduced membership rate and educational and training opportunities such as STIF Competency, the number of nurse members has increased considerably. Nurse figures had increased by 48 from a baseline of 57, bringing us to 105 nurse members in July 2018.

A new Sexual Health Adviser and Nurse Group was launched in March 2018 to drive professional development and performance standards for 2 key professional groups working in sexual health and HIV.



BASHH has continued to work to ensure that the membership categories are simplified, that members are correctly categorised according to their membership grade and that membership details are kept up date. New members can join using an on line application form without the requirement for support by a fellow and member, and all applications are reviewed by the General Secretary and ratified by the BASHH Board. Board approved substantially reducing subscription rates for doctors in training for a four-year period commencing in August 2017. Membership cards are issued to all members to allow electronic registration at BASHH events and automatic CPD registration at CPD approved events. Most members prefer to be communicated with electronically and a decreasing number have communication sent by post.

### **Financial review**

BASHH had a stable financial year. The joint meeting with BHIVA and dividends and investment gains from our investment portfolio contributed to an overall robust and positive financial results with a net surplus for the year of £19,557. The value of the investments has continued to rise and has contributed significantly to BASHH's reserves. However due to the financial commitments to pay in advance for the venues for the BASHH annual spring conferences until 2021 (deposits in excess of £100,000 have been paid as at 31 July 2018) BASHH's cash reserves dropped from £466,142 at the end of the previous financial year to £306,459 at the end of this financial year. These deposits will be utilised subsequent to holding the spring conferences in future years and the revenues from these conferences should have a positive effect on the cash balances. Although the association's financial state remains robust, it is important to note that without the investment income and the growth in investment assets the association's costs currently and the during the last couple of years outweigh its income from its normal charitable activities. Subsequent to the year end the world stock markets have been in decline and it is likely that the results next year show negative returns from our investments. As we expect a turbulent few years post Brexit for the stock market, it would be important to note that our finances may come under strain in the coming years. The main drivers of our expenses are our educational meetings and secretariat fees. They each have increased by 15% in 2018. Our contract with KSAM is to be renewed in January 2019. The current proposal is a 12% increase in our secretariat fees and this would impact also on our future finances. Detailed results of our activities during the year are given within these audited financial statements.

### **Principle funding sources**

Income for the charity comes from investments, membership subscriptions, and educational events. Because of the charity's stable financial position, the annual membership fee was not increased in 2018. The joint BASHH/ BHIVA conference was financially successful. The surplus generated was smaller than the meeting held during 2014. BASHH may have to plan its resources around a lower expectation of income from the meetings in future years. Results from the other main educational events managed and delivered by the association's special interest groups are given within the financial statements.

### **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.

### **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 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 were historically held in funds split equally between Saracens Investment Managers and St. James Management.

### **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 strongly supports the administrative infrastructure that facilitates and enables the rich output of resources and events that benefits members and non-members. BASHH's output includes national standards with a completely revised edition planned for early 2019, that have been a rich resource for commissioners and providers of sexual health services in the 4 nations and many countries abroad. Novel Standards for Outreach Services were published in 2017 and Standards for Online Services in conjunction with the Faculty for Sexual and Reproductive Health were developed in 2018. High quality independent guidelines across the range of the specialty are regularly reviewed and updated by jobbing clinicians, scientists and epidemiologists who work on an honorary basis for the benefit of all parties interested in high quality clinical management of sexual health. 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. This is particularly important in the current challenging healthcare environment where resources are stretched and value for money must be demonstrated in all educational products. The Educational committee (EC) and Special Interest Groups (SIGs) have developed and maintained educational programmes providing high levels of specialist training and skill, whilst embracing a wider, more integrated sexual health remit 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. They develop and deliver educational programmes and courses. They also contribute to education and training by generating publications and research, developing guidelines and recommendations in collaboration with other BASHH groups and external organisations, and reviewing and responding to documents on behalf of BASHH. Individual reports detailing specific contributions are available in the BASHH Annual Review. This year, the SIGs have provided several well-established courses such as the BASHH microscopy course, SAS and Doctors in training meetings, the genital dermatology course, surgical techniques in GUM course, ABC of sexual dysfunction course, the Diplomas in GUM and HIV revision courses, STI Foundation theory and competency courses and the HIV Masterclass. There have also been new courses developed including two joint HIV nurse training packages with the national HIV Nurses association (NHIVNA). These are called 'STIF-NHIVNA core competency' training and 'STIF NHIVNA advanced competency' training. Some BASHH educational products have also been delivered internationally, including a STI Foundation course delivered in Lusaka, Zambia in July 2017. In early 2018 new BASHH group specifically representing Nurses and Health Advisors has been established which now also contributes to the EC.

### **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. SIGs take it in turn to organise these meetings and they often take a two-part structure, organised by two individual SIGs. This year, the October meeting was lead by the Adolescent SIG (CSE theme) and Education committee (Medical Education theme). The January meeting was lead by the GSM (WSW theme) and HIV SIGs (Issues specific to women living with HIV). The March meeting was organised by the Bacterial SIG and Public Health England and the September meeting was organised by the HSV SIG and GSM SIG. These were all well attended with excellent evaluation. Availability of podcasts/webcasts of the lectures has been reinstated since January and continues to facilitate access for those BASHH members who are unable to attend in person. Programmes are available on the BASHH website.

### **Other meetings**

Fourth Joint Conference of BASHH with the British HIV Association (BHIVA) took place in Edinburgh in April 2018. It was again very highly evaluated and proved to be an excellent educational event. The annual Joint BASHH /FSRH meeting in January also continues to be well attended and very successful. The Conference and Communications secretary's report will provide more detailed feedback.

### **Further EC plans**

The EC has established a new Fellowship for Doctors in Training called the BASHH Educational Fellowship. Three applications of high calibre were received this year and the successful candidate, Dr Laura Gillespie (Sandyford Sexual health Service, Glasgow), has commenced a 12-month educational project with the STIF Competency group. The EC plans to award one fellowship per year going forward, if suitably qualified candidates apply.

Next year's BASHH spring meeting will be held in Birmingham and preparations are well underway. The BASHH Board has agreed to cancel the Sept 2019 Scientific meeting and instead support the attendance of

junior BASHH members at the IUSTI conference in Tallin next year. The ASIG will be running a BASHH Symposium on sexual exploitation at this meeting. Plans are underway to try and establish an international educational fund to help support and promote BASHH's educational projects being delivered overseas.

### **Clinical Governance Committee**

#### **Membership**

This group consists of a Chair, Secretary and Regional Representation from the Branch Chairs. In addition, there are Professional Group Representatives from Nurses, Health Advisers, Staff & Associate Specialists, and Doctors in Training. Other groups within BASHH feed into this committee, the Clinical Effectiveness Group, the Clinical Standards Unit, the National Audit Group, the Integrated Information Group and the Web Team.

Chair : Dr John McSorley

Secretary : Dr Mohamed Ghanem

#### **Objectives**

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

#### **Meetings**

The Committee holds meetings on the same days as the Scientific Meetings. In the Year ended 31st July 2018, 3 face to face meetings were held, a 4th meeting was held as a teleconference utilising Adobe Connect for document review in June 2018, as the IUSTI meeting was the Scientific Meeting supported by BASHH that quarter.

#### **Significant activities**

Spotlight discussions were held on topics maintaining quality within new contracts for services and addressing issues arising from contract changeovers and retendering ; maintaining standards for online STI screening services and integration with face to face services; the rollout of the PrEP IMPACT Trial and PrEP services, and service issues arising across the UK including ways to improve the interactions of branches with local BASHH members.

The CGC contributed to BASHH Survey of impact of service changes in 2017/18 and commenced work on developing a BASHH recognised acronym glossary to support local service usage within local guidelines

The Royal College of Physicians provided a pathway for action when Regional Advisers for Service were unavailable for input into consultant appointments and this was formally agreed and adopted by the Committee.

Regional Advisers and Consultants continue to contribute to this work

The CGC contribute to the generation of and content of papers created by BASHH Officers for external partner organisations affecting sexual health policy

### **Performance/Outputs in the year 2017/18**

The functions and geographical coverage of branches in relation to effectiveness of meetings, clinical networks, safety and intelligence reporting, and effective representation of local members was reviewed and discussed formally. No changes of boundaries or formal mergers have taken place but regions were encouraged to consider and support joint meetings between co-terminous branches.

Advice on Ceftriaxone usage, spectinomycin usage was discussed and strategies circulated to support services in context of occasional stock shortage and in management of suspected penicillin allergy in different clinical settings.

Communication and dissemination of information relating to Hepatitis A outbreak, and management of supply chain issues with Hepatitis A, Hepatitis B and Twinrix vaccination stock across the regions, was co-ordinated and supported.

Accurate minutes of meetings were kept and published

### **Future plans**

To facilitate CGC members fulfilling branch, group and national roles by providing travel expenses if not employer-funded, and increasing the use of teleconferencing.

To develop a BASHH resource of common acronyms and glossary to support a diverse range of services maintaining local guidelines

To support BASHH commitment to equitable geographical provision of safe, effective and accessible on-line services that support high standard face to face sexual health services

### **Conference and Communications 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.

#### **Joint Faculty of sexual and reproductive health and BASHH conference**

This one day joint conference took place at the Royal society of Medicine on Friday 19th of January 2018. This was a fully booked conference which attracted clinicians from a sexual health and primary care background. The programme was organised by a joint FSRH –BASHH committee, Dr Daniel Richardson, Ms

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Ceri Evans, Dr Ulrike Sauer and Dr Claire Dewsnap, with even support delivered by FSRH events manager, Jyoti Palmer, and for BASHH by KSAM, Sam Dignan. Previously, BASHH and FSRH would alternate organisation of the conference. This year a memorandum of Understanding will be formally agreed regarding overall responsibilities for each part of the conference organisation with the aim of regular routine shared responsibility for conference delivery. Evaluation of the conference was excellent. An overall surplus was made from conference of £29K that will be shared equally between BASHH & FSRH.

**BASHH 2018 conference was a Joint BASHH BHIVA conference.**

The events management was managed by Mediscript on behalf of BHIVA. The conference was held at the international Conference Centre, Edinburgh. There were a total of 935 delegates. The conference was organised in conjunction with BHIVA by Dr Daniel Richardson and Dr Laura Waters. The conference made an overall surplus for BASHH of £61K.

BHIVA, jointly with MSD Pharmaceutical company, provided 8 travel bursaries to medical, nursing and scientific delegates.

The conference was sponsored by the following companies

Gilead Sciences Ltd	HIV Trainees Club
HIV i-Base/UK Community Advisory Board	Waverley Care
Ferring Pharmaceuticals Ltd	Mildmay
HIV Anti Stigma Consortium /	Atlas Genetics Ltd
Lothian Patients Forum	Oxford Immunotec Ltd
SH:24	Body & Soul
Hologic Ltd	eHIV-STI (Health Education England)
Public Health England	Inform Sexual Health
Roche Diagnostics Ltd	SpeedX Ltd
Cepheid UK Ltd	Idox Health
NAZ Project London	Intec Products Inc
Terence Higgins Trust	National AIDS Trust
ViiV Healthcare UK Medical	BD Diagnostics
Janssen	Sophia Forum
National HIV Nurses Association(NHIVNA)	African Health Policy Network
HIV Scotland	HIV Pharmacy Association (HIVPA)
MSD Ltd	Make a Difference Trust (MAD)
ViiV Healthcare UK Ltd	Positively UK
Gedeon Richter UK Ltd	Dietitians in HIV/AIDS (DHIVA)
Dunelm Pharmaceuticals Ltd	Kora Healthcare

The civic reception was held at the ICC, Short speeches to welcome delegates were made from Dr Catherine Calderwood (Chief Medical Officer for Scotland) and Councillor Joan Griffiths MBE (Deputy Lord Provost of the City of Edinburgh), along with Dr Imali Fernando (BASHH Local Host) and Professor Clifford Leen (BHIVA Local Host).

Outstanding quality research was reflected in the oral and poster presentations. Of the 485 abstracts submitted, 445 were selected - 45 as oral presentations and 400 as poster presentations.

This year's Gala Dinner was an impressive event held at The Assembly Rooms in the city centre. Dr Mags Portman received a lifetime achievement award for her tireless efforts in improving access to PrEP.

A full list of prizes are listed here:

**The BHIVA/BASHH Best Social sciences and Community based work**

**P147** How does a national mentor mother training project support women living with HIV through pregnancy? A qualitative evaluation of 4M: My Health, My Choice, My Child, My Life" **Miss Laura Kwardem, Salamander Trust**

**O29:** "Trans:mission – a community-led HIV testing initiative for trans people and their partners at a central London" **Mr Aedan Wolton, cliniQ CIC**

**The BHIVA/BASHH Best Case Presentation Award**

HHV-8 a diagnosis to debate **Dr Hardeep Kang, Manchester University NHS Foundation Trust**

**BHIVA/BASHH Best Abstract Presentation from an Undergraduate Award**

**O31:** Mapping the violence landscape among female sex workers in Karnataka, south India: associations between violence exposure by perpetrator, and HIV/STI risk. **Miss Alicja Beksinska, London School of Hygiene and Tropical Medicine**

**BHIVA/BASHH Best Sexual Health Poster Presentation Award**

**P103:** Kissing but not sex is the strongest risk factor for oropharyngeal gonorrhoea in men who have sex with men: a cross-sectional survey. **Dr Eric Chow, Melbourne Sexual Health Centre, Australia**

**BHIVA/BASHH Best HIV Poster Presentation Award**

**P71:** Awareness of pre-exposure prophylaxis (PrEP) in the black and minority ethnic (BME) community: results of a questionnaire survey. **Dr Nadia Ekong, Leeds Teaching Hospitals NHS Trust**

**BHIVA/BASHH Best Sexual Health Oral Research Presentation Award**

**O42:** Are all HIV postal sampling kits the same? Dried blood spots significantly outperform conventional mini-tube sampling in a real world comparative review. **Dr Mathew Page, Birmingham Heartlands Hospital**

**BHIVA/BASHH Best HIV Oral Research Presentation Award**

**O23:** Met and unmet health, welfare and social needs of people living with HIV. **Ms Meaghan Kall, Public Health England**

In addition, there were 28 commended posters and 6 commended Oral presentations.

Feedback from the joint conference was excellent with 97% of responders either agreeing or strongly agreeing that the programme and its delivery met their expectations.

**Future events:** the BASHH annual conference 2019 will be held at Birmingham International conference Centre, 30th June 2019 to 2nd July 2019. The local Host is senior Health Adviser and sexual Health Nurse, Jodie Walker-Haywood.

### **Public media and website activities**

The BASHH public panel is a group of lay, professional and third sector members, which aims to involve patients and the public in the work of BASHH. In addition, a lay research panel, which reports to the main panel and is run collaboratively with the Terrence Higgins Trust (THT), provides lay input into sexual health orientated research proposals and projects. There are approximately 30 members across both panels.

One of the core activities of the public panel is the review and co-production of STI treatment guidelines and patient information leaflets associated with those guidelines. This year, the panel has run an event, in collaboration with Brook young people, to ensure a new young person's STI management guideline had strong patient involvement. The panel has also contributed strongly to new guidance on Mycoplasma genitalium and gonorrhoea by supporting lay membership of these guideline writing groups. Another key collaboration this year has been with the Family Planning Association (FPA) with panel members providing editorial input to a new series of animated patient information films (sexwise). Finally, panel members are part of the review team for the NHS 'Health Unlocked' resource, where the public can ask questions and find answers to their sexual health queries.

The lay research panel performed three project reviews this year and, under new leadership, is poised to expand and develop into a valuable resource for STI researchers, funded by BASHH and supported by THT. Lay members are given training and are remunerated for their travel and the time they spend on project reviews.

Beyond these core activities, the panel organised a successful concert party in November 2017, open to the public, which celebrated the centenary of the Venereal Diseases Act through song.

The Media Group has responded swiftly to a multitude of media requests throughout the year, including those from online media, newsprint, radio and television. BASHH provided expert opinion on recent increased rates of sexually transmitted infections, particularly gonorrhoea and syphilis, and including the first case of gonorrhoea which is resistant to all standard antibiotics. The recent public health funding cuts prompted a strong media response. Clinic closures, particularly following the London Transformation Project, attracted much attention and BASHH has highlighted the need to maintain high quality clinical sexual health services measured against nationally agreed standards, which are resourced appropriately. BASHH also supported the roll out of the Human Papillomavirus vaccine to men who have sex with men, and the planned inclusion of all boys of school age, reducing the previous inequality in vaccine provision.

For the BASHH website, we aim to

- Improve the ease of access for BASHH members to educational content on the BASHH website.
- Improve and update public areas of the website and promote the BASHH guidelines "app"
- Increase the use of Branch website areas to increase engagement with local branch activities and ease administration burden for BASHH groups
- Enhance channels of communication with BASHH members using website members area and social media
- Roll-out adobe connect video conferencing facility across all BASHH groups to allow remote meetings (business and educational)
- Use Twitter where we have 6,500 followers providing a significant avenue for disseminating BASHH's message to a large group quickly.
- Re-introduce BASHH scientific meetings recordings on the website



Our future plans are to

- Digitize most of BASHH's processes which currently use paper (website updates, newsletter requests) using web-based electronic forms, improving the experience for BASHH members.
- Formally creating of a BASHH social media group across media group and web team.

### **Public Benefit**

The Association has maintained and increased its commitment to public benefit, as demonstrated in this report. The Association's work, across all sectors of the community, in celebrating the centenary of the establishment of sexual health services, 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 work in delivering modern educational programmes, developing cutting edge guidance and information commission assured patient resources, and in seeking to support and influence decision makers in local and national government are all aimed at safeguarding high quality, confidential sexual health services for the public benefit.

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. The process used by the Association to produce its guidelines was re-accredited by NICE in May 2016 and is valid until January 2021. The guideline section remains 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. These Standards are currently completing its review process. 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.

The trustees confirm that the association has fully complied with its duty to have regard to public benefit in accordance with the Charity Commissions public benefit guidance.

### **Report on STIF Lusaka**

#### **12-13 July 2017**

Lusaka University Teaching hospital is the main tertiary referral centre in Zambia, with their Dermatology clinic (led by Dr Owen Ngalamika, Consultant Dermatologist) being the only STI specialist service available. STIs therefore present to a wide range of hospital clinicians, including Infectious diseases, Internal medicine, Urology and Gynaecology and are often managed within those settings. As facilities in the hospital for diagnostics have improved, Dr Ngalamika has been involved in writing specific STI management guidelines moving from the WHO syndromic approach to following an etiological approach. In collaboration with the Zambian Medical Association and Dr Ngalamika, a team of BASHH members with significant experience of delivering STIF courses travelled to Lusaka between the 10th and 15th of July to deliver a STIF theory course for local hospital clinicians in order to aid implementation of these new STI

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care guidelines. The faculty consisted of Dr Jaime Vera, Dr Matthew Grundy Bowers, Ms Emma Collins and Dr Ashini Fox (Course Director). With permission from BASHH, the standard UK STIF Core and Plus course was modified to suit the Zambian audience and received excellent feedback. Pre and post course questionnaires demonstrated a significant improvement of participant knowledge and the workshop-based approach to medical education was particularly valued. STIF material was provided by BASHH at no cost to the Zambian audience, faculty members donated their time for free, and their flights and course running costs were funded through a BMA development grant. The now proven feasibility of running international STIF courses has led to further requests for such collaboration in the year to come.

**Plans for the Future**

BASHH are strongly committed to the smooth running of its core business over the coming year and delivering on its charitable objectives. The Association will continue to champion the provision of quality, accessible sexual health and HIV services within the mixed commissioning environment with an appropriate workforce and adequate funding. We will provide representation to the national governments and key policy and decision makers, as necessary, for all four nations in the UK.

BASHH will continue to press for gender-neutral HPV vaccination, for PrEP to be available to all high risk individuals throughout the UK and will promote good antibiotic stewardship to reduce the risk of antimicrobial resistance.

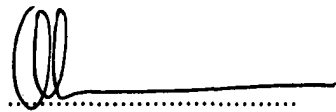
We will provide a wide range of educational activities to support clinicians to deliver first rate care. Our revised eLearning resource, eHIV-STI and our growing STI Foundation (STIF) portfolio will provide training that is relevant to practice in the UK and internationally. STIF was provided in a resource-poor country, Zambia, free of charge by a team from BASHH this year.

We will complete 3rd revision of the Standards for the Management of STIs early next year and will continue with our rolling review of current guidelines as their review date becomes due. We will continue to embed and extend our social media profile. The Association will continue to build on its existing relationships with a wide range of national representative bodies, professional and third sector organisations as well as other sexual health stakeholders and will work collaboratively to maximise opportunities to improve all aspects of sexual health and HIV across the UK.

**Auditors**

A resolution proposing that Farrington & 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 7 December 2018.



Dr Olwen Williams OBE  
Trustee



Dr Alan Tang  
Trustee

## Report of the auditors

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

#### Opinion

We have audited the financial statements of BASHH (the 'charitable company') for the year ended 31 July 2018 which comprise of the Statement of Financial Activities, the Balance Sheet, the Statement of Cashflows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

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 2018 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

#### Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or

- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

### **Other information**

The trustees are responsible for the other information. The other information comprises the information included in the trustees' annual report, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

### **Matters on which we are required to report by exception**

We have nothing to report in respect of the following matters in relation to which the Charities (Accounts and Reports) Regulations 2008 require us to report to you if, in our opinion:

- the information given in the financial statements is inconsistent in any material respect with the trustees' report; 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.

### **Responsibilities of trustees**

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, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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In preparing the financial statements, the trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

### **Auditor's responsibilities for the audit of the financial statements**

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 objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our auditor's report.

### **Use of our report**

This report is made solely to the charitable company's trustees, as a body, in accordance with Part 4 of the Charities (Accounts and Reports) Regulations 2008. 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.



**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 8 January 2019

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 2018

	Notes	Unrestricted Funds £	Restricted Funds £	Endowment Funds £	Total 2018 £	Total 2017 £
<b>Income &amp; Endowments from:</b>						
<b>Charitable activities</b>						
Membership Subscriptions		192,794	-	-	192,794	188,184
Educational meetings and courses	9	628,538	-	-	628,538	545,783
Investment income	2	28,956	-	-	28,956	25,930
<b>Total income and endowments</b>		<b>850,288</b>	<b>-</b>	<b>-</b>	<b>850,288</b>	<b>759,897</b>
<b>Expenditure on:</b>						
Charitable Activities	3	901,953	-	-	901,953	822,093
<b>Total expenditure</b>		<b>901,953</b>	<b>-</b>	<b>-</b>	<b>901,953</b>	<b>822,093</b>
Net gains on investments	6	71,222	-	-	71,222	106,371
<b>Net income /(expenditure)</b>		<b>19,557</b>	<b>-</b>	<b>-</b>	<b>19,557</b>	<b>44,175</b>
<b>Transfers between funds</b>		<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Net movement in funds</b>		<b>19,557</b>	<b>-</b>	<b>-</b>	<b>19,557</b>	<b>44,175</b>
<b>Reconciliation of funds:</b>						
<b>Fund balances brought forward at 1 August 2017</b>		<b>1,783,699</b>	<b>4,150</b>	<b>10,000</b>	<b>1,797,849</b>	<b>1,753,674</b>
<b>Fund balances carried forward at 31 July 2018</b>	10	<b>1,803,256</b>	<b>4,150</b>	<b>10,000</b>	<b>1,817,406</b>	<b>1,797,849</b>

All of the above results derive from continuing operations.

The statement of financial activities includes all gains and losses recognised during the year. BASHH has no other gains or losses other than those stated above.

The notes on pages 24 to 32 form part of the financial statements.

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**Balance Sheet**

	NOTES	As at 31.07.18 £	As at 31.07.17 £
<b>FIXED ASSETS</b>			
Investments	6	1,527,155	1,428,889
<b>TOTAL FIXED ASSETS</b>		<b>1,527,155</b>	<b>1,428,889</b>
<b>CURRENT ASSETS</b>			
Debtors	7	233,408	98,838
Bank balances		306,459	466,142
		539,867	564,980
<b>CURRENT LIABILITIES</b>			
Creditors - Amounts falling due within one year	8	( 249,616)	( 196,020)
<b>NET CURRENT ASSETS</b>		<b>290,251</b>	<b>368,960</b>
<b>TOTAL NET ASSETS</b>		<b>1,817,406</b>	<b>1,797,849</b>
<b>FUNDS</b>			
Endowment (Capital) Funds	10	10,000	10,000
Restricted Income Funds	10	4,150	4,150
Unrestricted Funds	10	1,803,256	1,783,699
<b>TOTAL CHARITY FUNDS</b>	10	<b>1,817,406</b>	<b>1,797,849</b>


The financial statements are prepared in accordance with the special provision of Part 15 of the Companies Act 2006 relating to small companies and in accordance with the Financial Reporting Standard (FRS102) (effective 01 January 2015)

For the year ending 31 July 2018 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 7 Dec 2018 and signed on their behalf by:



Dr Kaveh Manavi  
Trustee

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**Statement of Cash Flows**

Year ended 31 July 2018

	NOTES	2018 £	2017 £
Cash flow from operating activities	11	( 161,595)	( 146,963)
<b>Net cash flow from operating activities</b>		<b>( 161,595)</b>	<b>( 146,963)</b>
<b>Cash flow from investing activities</b>			
Dividends, interest from investments		28,956	25,930
Purchase of Investments		( 27,044)	( 220,895)
<b>Net cash flow from investing activities</b>		<b>1,912</b>	<b>( 194,965)</b>
<b>Net decrease in cash and cash equivalents</b>		<b>( 159,683)</b>	<b>( 341,928)</b>
<b>Cash and Cash Equivalents as 1 August 2017</b>		<b>466,142</b>	<b>808,070</b>
<b>Cash and Cash Equivalents as 31 July 2018</b>		<b>306,459</b>	<b>466,142</b>
<b>Cash and Cash Equivalents consists of:</b>			
Cash at Bank and in Hand		306,459	466,142
<b>Cash and Cash Equivalents as 31 July 2018</b>		<b>306,459</b>	<b>466,142</b>



## Notes forming part of the financial statements

For the year ended 31 July 2018

### 1. Accounting policies

#### a) Basis of preparation

The financial statements have been prepared under the historical cost convention in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102), the Companies Act 2006 and the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) - effective 1 January 2015. The functional currency of the Charity is considered to be GBP because that is the currency of the primary economic environment in which the Charity operates.

BASHH meets the definition of a public benefit entity under FRS102. Assets and liabilities are initially recognised at a historic cost or transaction value unless stated in the relevant accounting policy note(s).

#### b) Critical accounting estimates and areas of judgements

In the view of the trustees in applying the accounting policies adopted, no judgements were required that have a significant effect on the amounts recognised in the financial statements nor do any estimates or assumptions made carry a significant risk of material adjustment in the next financial year.

#### c) 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.

#### d) 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.

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.

**e) Income recognition**

All income is included in the Statement of Financial Activities (SoFA) when the charity is legally entitled to the income and after any performance conditions have been met, and 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 2018, 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.

**f) 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.

**g) Irrecoverable VAT**

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

**h) Investments**

Investments are a form of basic financial instrument and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing quoted market price.

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The statement of financial activities includes the net gains and losses arising on revaluation and disposals throughout the year.

The charity does not acquire put options, derivatives or other complex financial instruments.

All gains and losses are taken to the Statement of Financial Activities as they arise. Realised gains and losses on investments are calculated as the difference between sales proceeds and their opening carrying value or their purchase value if acquired subsequent to the first day of the financial year. Unrealised gains and losses are calculated as the difference between the fair value at the year-end and their carrying value. Realised and unrealised investment gains and losses are combined in the Statement of Financial Activities.

**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.

**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.

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**2. Investment Income**

	2018	2017
	£	£
Interest receivable	1,913	5,034
Dividends receivable from investments and unit trusts	27,043	20,896
	<b>28,956</b>	<b>25,930</b>

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

	2018	2017
	£	£
Cost of Educational Meetings (note 9)	632,692	541,831
Cost of Educational Journals	57,877	58,737
Developing Clinical Standards	400	4,425
Contribution to non-BASHH groups:		
- Family Planning Association	9,000	20,000
Governance costs (note 4)	30,660	29,330
Secretariat fees (See note below)	136,495	124,162
Committee meeting and travel costs	9,527	9,126
Printing, Postage & Stationary	1,110	1,358
General administration and sundry costs	24,192	33,124
	<b>901,953</b>	<b>822,093</b>

There are 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 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**

	2018	2017
	£	£
Trustees travel and subsistence (note 5)	19,905	19,859
Professional fees and insurance	2,375	1,093
Fees payable to the charity auditors :		
For Audit	7,000	7,000
For other services	1,380	1,378
	<b>30,660</b>	<b>29,330</b>

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**5. Trustees remuneration**

The trustees neither received nor waived any emoluments during the year (2017: £ Nil)

Out of pocket expenses were reimbursed to trustees as follows:

	<b>2018</b>	<b>2017</b>	<b>2018</b>	<b>2017</b>
	No of Trustees	No of Trustees	£	£
Travel, subsistence and accommodation	19	19	19,905	19,859
Other	-	-	-	-
	<b>19</b>	<b>19</b>	<b>19,905</b>	<b>19,859</b>

**6. Fixed Asset Investments**

	<b>2018</b>	<b>2017</b>
	£	£
Cost or market value as at 01 August 2017	1,428,889	1,101,623
Additions	27,044	220,895
Disposal proceeds	-	-
Net investment gains	71,222	106,371
<b>Market value as at 31 July 2018</b>	<b><u>1,527,155</u></b>	<b><u>1,428,889</u></b>

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 £27,044 (2017: £220,895) represents the cost of additional units acquired during the year.

The Investments managed by St James Place had a year end market value of £640,172 (2017: £592,825) and consists of accumulation units held in their Global Equity, Equity Income, International Equity and International Corporate Bond unit trusts. The Investments managed by Sarasin and Partners LLP had a year end market value of £886,983 (2017: £836,064) and consists of income units held in their endowment funds.

**7. Debtors**

	<b>2018</b>	<b>2017</b>
	£	£
Trade debtors	105,585	52,144
VAT Recoverable	12,777	-
Prepayments	115,046	46,694
	<b><u>233,408</u></b>	<b><u>98,838</u></b>

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**8. Creditors : amount falling due within one year**

	<b>2018</b>	<b>2017</b>
	<b>£</b>	<b>£</b>
Trade creditors	170,796	123,669
VAT payable	-	827
Accruals and deferred income (see note below)	78,820	71,524
	<b>249,616</b>	<b>196,020</b>

Accruals and deferred income above includes £55,347 (2017: £44,179) of deferred income. This income consists of event registration fees and sponsorship fees for events held subsequent to the year end and within twelve months of the financial year end.

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

	Income	Expenditure	Result	Income	Expenditure	Result
Note : Deficits appear in parentheses ( )	2018	2018	2018	2017	2017	2017
	£	£	£	£	£	£
<b>Special Interest Groups</b>						
Colposcopy SIG/Genital Dermatology SIG	25,730	17,971	7,759	23,036	16,680	6,356
HIV SIG	-	-	-	-	-	-
Herpes Simplex SIG	-	-	-	-	-	-
British Co-Operative Clinical Group	-	-	-	-	-	-
HPV SIG	-	-	-	-	99	( 99)
Bacterial	58,877	67,927	( 9,050)	15,455	17,969	( 2,514)
Sexual Dysfunction Group	19,987	15,133	4,854	-	1,551	( 1,551)
Adolescent Special Interest Group	-	308	( 308)	4,517	3,677	840
Clinical Effectiveness Group	-	11,669	( 11,669)	-	3,336	( 3,336)
SAS Group	32,290	27,990	4,300	34,751	28,308	6,443
National Audit Group	-	16,552	( 16,552)	-	13,948	( 13,948)
Doctors in Training	-	-	-	2,040	735	1,305
Web Team	-	31	( 31)	-	137	( 137)
Media External Communications Group	-	50,573	( 50,573)	-	64,392	( 64,392)
Nurses / Health Advisors	-	-	-	-	-	-
BASHH IT Group	-	-	-	-	244	( 244)
HIV Medicine	16,525	14,742	1,783	23,000	16,577	6,423
Mentoring Committee	1,355	1,530	( 175)	( 95)	480	( 575)
Clinical Standards Unit	-	-	-	-	-	-
Pharmacy Group	-	-	-	-	-	-
Public Panel	-	1,970	( 1,970)	-	1,949	( 1,949)
Public Health Group	-	355	( 355)	-	-	-
MSM SIG	4,733	8,407	( 3,674)	( 75)	1,336	( 1,411)
<b>Special Interest Groups: Sub-Total</b>	<b>159,497</b>	<b>235,157</b>	<b>( 75,660)</b>	<b>102,629</b>	<b>171,418</b>	<b>( 68,789)</b>

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<b>Other Educational Meetings/Courses</b>						
Educational Meetings	2,667	18,534	(15,867)	8,492	23,901	(15,409)
Joint Meetings (See note below)	27,748	12,487	15,261	27,634	13,280	14,354
BASHH Course in STI & HIV	29,568	34,213	(4,645)	58,988	39,929	19,059
STIF Course	55,231	39,696	15,535	54,643	40,417	14,226
STIF Competency	28,150	32,613	(4,463)	36,205	28,934	7,271
Spring Meeting (See note below)	308,722	247,450	61,272	238,560	206,026	32,534
<b>Other Edu. Meetings/Courses: Sub-Total</b>	<b>452,086</b>	<b>384,993</b>	<b>67,093</b>	<b>424,522</b>	<b>352,487</b>	<b>72,035</b>
<b>Regional Branches</b>						
East Anglia	-	-	-	-	-	-
Ireland	-	-	-	-	-	-
Mersey	-	-	-	-	77	(77)
Thames North East	-	-	-	-	-	-
Thames North West	-	-	-	-	-	-
Thames South East	-	-	-	-	-	-
Thames South West	-	-	-	-	-	-
North West	-	-	-	-	-	-
Northern	-	-	-	-	-	-
Oxford	733	587	146	(108)	595	(703)
Scotland	825	229	596	4,560	4,664	(104)
South West	6,797	4,492	2,305	5,650	5,147	503
Trent	1,875	1,732	143	-	-	-
Wales	2,700	1,879	821	4,700	3,443	1,257
Wessex	4,025	3,623	402	3,830	4,000	(170)
West Midlands	-	-	-	-	-	-
Yorkshire	-	-	-	-	-	-
<b>Regional Branches: Sub-Total</b>	<b>16,955</b>	<b>12,542</b>	<b>4,413</b>	<b>18,632</b>	<b>17,926</b>	<b>706</b>
<b>TOTALS</b>	<b>628,538</b>	<b>632,692</b>	<b>(4,154)</b>	<b>545,783</b>	<b>541,831</b>	<b>3,952</b>

During the year BASHH held a joint meeting with Faculty of Sexual & Reproductive Healthcare (FSRH). The income and cost stated in these accounts relate only to the share of BASHH.

The 2018 Spring Meeting was held jointly with BHIVA as equal partners. The revenue and costs stated above represent BASHH's share of the revenue and costs from this meeting.

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**10. Statement of funds**

	At 01-Aug-17 £	Income £	Expenditure £	Investment gains £	Transfers £	At 31-Jul-18 £
<b>Endowment funds</b>						
Robert S Morton Lecture fund	10,000	-	-	-	-	10,000
<b>Total Endowment fund</b>	<u>10,000</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>10,000</u>
<b>General reserve</b>	1,783,699	850,288	901,953	71,222	-	1,803,255
<b>Total unrestricted fund</b>	<u>1,783,699</u>	<u>850,288</u>	<u>901,953</u>	<u>71,222</u>	<u>-</u>	<u>1,803,255</u>
<b>Restricted funds :</b>						
The Robert S Morton Lecture Fund	3,139	-	-	-	-	3,139
Cathy Harman Memorial Appeal	1,011	-	-	-	-	1,011
<b>Total restricted funds</b>	<u>4,150</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>4,150</u>
<b>Total funds</b>	<u>1,797,849</u>	<u>850,288</u>	<u>901,953</u>	<u>71,222</u>	<u>-</u>	<u>1,817,405</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.

**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	-	1,527,155	276,100	-	1,803,255
	<u>-</u>	<u>1,527,155</u>	<u>290,250</u>	<u>-</u>	<u>1,817,405</u>



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**11. Reconciliation of net income/(expenditure) to net cash flow from operating activities**

	<b>2018</b>	<b>2017</b>
	<b>£</b>	<b>£</b>
Net income/(expenditure) for the reporting period (as per the statement of financial activities)	19,557	44,175
(Gain)/losses on Investments	( 71,222)	( 106,371)
Dividends, interest from investments	( 28,956)	( 25,930)
(Increase)/ decrease in debtors	( 134,570)	( 15,236)
Increase/ (decrease) in creditors	53,596	( 43,601)
Net cash flow from operating activities	<u>( 161,595)</u>	<u>( 146,963)</u>

**12. Related Party Transactions**

There were no related party transactions during the reporting period.

**13. Members' Limited Liability**

The company is limited by guarantee and has no share capital. Every member promises, if the Charity is dissolved while he 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.