



**British Association for Sexual Health and HIV**

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

**A REGISTERED CHARITY  
No. 1099301**

**Annual Report of the Charity Trustees incorporating the  
Financial Accounts for the Financial Period ended 31<sup>st</sup>  
July 2009**

*Approved by the Trustees 11/12/09*

**Address registered with the Charity Commission:**

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Chartered Certified Accountants  
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This Report and the Accounts are a public document, which should be read as one to obtain the correct view of the operation of the Charity during the year under report. Copies of this document may be obtained from the Royal Society of Medicine.

Readers' comments to the BASHH Secretariat at the Royal Society of Medicine on the Format and Content of this Report would be appreciated.

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## INTRODUCTION FROM PRESIDENT

It is a pleasure to commend to you this report of BASHH's activities for the year ending July 2009. We have had another successful year and the association has continued to grow from strength to strength in delivering educational activities, clinical guidelines and audit and addressing governance issues through the work of the Education Committee, the Clinical Governance Committee and the BASHH Branches. We had the most successful Spring Meeting in our history, which we had co-hosted with the ISSTD, and for which I wish to congratulate and thank all those who were involved with organizing and running this event.

The past year has been very challenging for many colleagues and I am well aware of the challenges many have faced in dealing with issues around commissioning and tendering of services as well as the pressure of improving access, modernization, and the impact of other NHS reforms which will impact our service. We will continue to address these issues in the coming year. We have continued to foster good relations with the Department of Health as well as other sexual health organizations and we have already demonstrated the fruits of collaborative working with colleagues in BHIVA, BIS, FRSH as well as others. We have embarked on the project of defining clinical standards for managing STIs with our partner organizations and I am pleased to inform the membership that all the stakeholders as well as commissioner representatives have engaged in this important project constructively and collaboratively. We hope to have this project completed by the end of this year.

On behalf of the Board and all the members of BASHH, I wish to congratulate all the officers, as well as chairs and officers of all the BASHH committees and Branches for the superb work they have done which is reflected in this report. On a personal note I wish to express my sincere appreciation and admiration for their commitment and support during my term of office.

In addition, I would like to thank the Trustees, particularly Dr. Rachael Challenor as Chair of Trustees, for ensuring the maintenance of probity and due process in all of our charitable activity and for all the support they have given the Board during the past year.

It has been an honour to be the President of BASHH and to have the privilege of working with such a hard working and committed team of colleagues.

**Immy Ahmed  
President  
Sept 2009**



## Vice-President's Report

Reflecting back over the last twelve months, there is the familiar feeling that the NHS continues in a state of almost permanent revolution. The constant change and uncertainty at every level continues to be of concern, and I am well aware that many colleagues have suffered traumatic experiences as a result of local commissioners' decisions, and tendering exercises which have often not been conducted in a reasonable or professional manner. With the anticipated tight squeeze on public spending in the years to come, we can anticipate that the pressure is not likely to reduce. At times like these it is even more important to have a strong and influential professional association, and I firmly believe that BASHH has shown itself fit for this purpose.

In particular the initiation of the project to develop national STI care standards has been a crucial piece of work which is currently nearing completion. It is hoped that this will influence commissioners' thinking, and work to implement these standards will have to continue after their launch. This will need to be underpinned by other ongoing activities such as guideline production and revision, national audit, and the development of educational materials for level 1 and 2 sexual health services.

BASHH's long track record of numerous and diverse activities has only been possible because of the selfless and unpaid contributions that so many of its members make. The detail of this is found throughout this report, and it is hoped in some small way that this record is a mark of appreciation for all their efforts.

I should like to pay a particular tribute to the leadership displayed by our President, Immy Ahmed: truly the buck does stop with him, and I think our specialty and association have been very fortunate to have him representing us and fighting our corner in so many forums and meeting rooms over the past year. In this I have done my best to support him.

I think we have both been fortunate in having an exceptionally strong team of officers and trustees who have all discharged their responsibilities with the utmost dedication, reliability and professionalism. I should like to express my thanks and appreciation to them on your behalf.

As ever, the next year looks to be uncertain and challenging, but it would certainly be a more concerning prospect still if our specialty did not have such a robust association representing it.

**Dr Keith Radcliffe**  
**Vice-President**



## General Secretary's Report

In my second report as General Secretary of BASHH, and I am pleased to report the Association has seen growth in activity and membership this year. We continue to attract new members and Fellows and our membership at June 2009 stood at 1120, with 57 resident outside the United Kingdom.

The past year has seen active evolution of the administration of the Association, with re-negotiation of the contracts for RSM secretariat support and for the supply of the International Journal of STD and AIDS. A system of quarterly review meetings between the executive officers of RSM and BASHH has been established as part of these new contracts. Sponsorship tracking, membership and journal database reconciliation and membership services have all been scrutinised and improvements made through these links. Excellent professional services from the RSM team in the BASHH secretariat have been crucial to the smooth running of the central business functions, and I would like to extend my personal thanks to the salaried staff involved especially to Liz Odette and to Rachel Flower.

The wide scope of our educational, political and media work activities is well described in the following Report. We have seen our members actively involved in developing standards of practice and teaching in the fields of genitourinary medicine, sexual health and HIV. These continue to be complemented by the active involvement of BASHH in governmental consultation exercises and collaborative discussion with sister societies and academic colleges. The selfless support of members running all the BASHH groups and regions and delivering educational events is gratefully acknowledged. We have all benefited from their expertise and dedication. I look forward to the development and evolution of our educational and political activities with confidence.

**Dr Jan Clarke**  
**General Secretary**



## Conference and Communication Secretary's Report

The Spring Meeting this year was held jointly with the ISSTD from 28 June to 1<sup>st</sup> July 2009 at the QEII Centre in London. The meeting had a record attendance with 1402 registered delegates. All the sessions were extremely well attended.

The academic programme included plenary sessions given by international experts in their fields including STIs, novel microorganisms and STI disease control. Following this were 4 or 5 parallel tracks each day. Altogether 779 abstracts were accepted and presented as either an oral or poster presentations. The standard of the meeting was excellent.

The social programme started with a Welcome Reception at the QEII Centre which was buzzing and the Gala dinner held at the New Connaught Rooms in Covent Garden where delegates danced away the evening.

The meeting was a great success thanks to the hard work of the organising committee. Particular thanks go to Professor Cathy Ison and Dr Janet Wilson for their tireless commitment to deliver a meeting which will be remembered for many years to come.

Our next Spring Meeting will be the 2nd joint meeting with the British HIV Association, which will be held in Manchester from 20-23 April 2010.

A joint meeting was held with the Faculty of Sexual and Reproduction Health in January 2009, which was well supported by both BASHH and Faculty members. A further joint meeting with the Faculty has been planned for 22<sup>nd</sup> January 2010 and other planned future meetings include a one-day conference with the Royal College of Physicians on 25<sup>th</sup> June 2010.

**Dr Elizabeth Foley**  
**BASHH Conference & Communications Secretary**



## Report from the Education Committee

- Educational Committee meetings
  - To be reduced to 3 per year
- Educational meetings
  - To be reduced to 5 OGMs/Focus per year
  - OGM at BHIVA – proposed change to BASHH Symposium
- Reviews
  - underway
  - EC Website KER/NT- proposal by some members to have access to full BASHH website without password
  - OGMs MTF/KER On-line survey completed. To be submitted for publication.
  - Conflict of Interest of Speakers. Agreement with BHIVA to develop joint Guidance. MTF to report back to EC.
- Webcast of OGMs – to be piloted for OGM on 2<sup>nd</sup> October
- E-learning for Health led by JS, reporting via SAC, progressing. First sessions underway.
- STIF
  - Working Group on role of STIF in context of e-learning for health development and Diploma in SRHC held in spring. As a result of this to be a review of current STIF, with STIF steering committee producing new course, to be piloted and launch proposed in 2010.
  - STIF competencies (attachment to be discussed at Board, carried over from last meeting) (enc)
- STIF competencies. Needs to be renamed and publicised within BASHH.
- Sexpression – links established with Medical students organisation.
- Association for Young Peoples' Health – BASHH registered as member
- Microscopy DVD. Statement on copyright produced by Hon Secretary (enc).
- Responses to consultations on behalf of BASHH
  - completed
    - GMC consultation on adult confidentiality (AP/KER/HIV SIG).
    - Consultation on NICE child abuse guidelines (KER/ASIG)
    - GMC consultation on 'Tomorrows Doctors' (NT)
  - Underway
    - NICE guidelines on TB (Prof R Miller/HIV SIG)
    -
- pharmacy group SIG being set up led by Richard Lau
- HPA fellowship
  - Being reviewed (CI/AR)
- Diploma course for HIV
- Course being established with BHIVA
- Publications
  - Don't Forget the Children. Joint BHIVA/BASHH/BIS
  - UK National Guidelines on United Kingdom National Guideline on the Management of Sexually Transmitted Infections and Related Conditions in Children and Young People (2009)
- Correspondence /other issues
  - Sexual and Reproductive Health Clinical Studies Group
  - Faculty of Forensic and Legal Medicine – Consideration of new speciality, Diploma



- Guidance on standards for CT screening without Healthcare professionals (HPA CT screening programme/ Brook)
- Federation of Infection Society – request for BASHH to be re-involved
- NST on Violence against women and girls
- Teenage sexual health campaign

**Dr Karen Rogstad**



## 2007/08 OGM Scientific Programme

**3/10/2008**

### **Afternoon OGM**

Sexual Dysfunction SIG

BASHH survey and audience attitudes to Sexual Dysfunction- Dr Pippa Green, Withington Hospital, Manchester

Update on female sexual arousal- Professor Sandra Leiblum, New Jersey USA

Are medications for female sexual dysfunction helpful? -Professor Kevan Wylie, Porterbrook clinic, Sheffield

Professorial lecture- "Erectile dysfunction and more..."- Professor Wallace Dinsmore, Belfast

Putting sexual dysfunction into a Middle Eastern/Muslim context- Professor Dinesh Bhugra, Institute of psychiatry, London

### **Evening OGM**

BASHH President Communication

Adolescent SIG

Adolescents with HIV-there's more to life than drugs"

Dr Caroline Foster, Consultant Paediatrician

St Mary's Hospital Paddington, London

Overview of RCPCH Physical signs in Child Sexual abuse; STI perspective

Dr Karen Rogstad, Royal Hallamshire Hospital, Sheffield

**10/10/2008**

### **BHIVA/BASHH OGM**

Epidemiology of undiagnosed infection -Andrew Phillips

Why do people refuse testing -Graham Hart

Delivering normalised HIV testing outside GUM -George Kinghorn

**9/1/2009**

### **Afternoon OGM**

HIV SIG

HIV prevention-what works and what doesn't

Psychological and counselling interventions

Dr Lorraine Sherr, University College London Hospital, London

Physical interventions including PEP, PREP and Circumcision

Dr Mauro Schecter, San Paulo, Brazil

Criminalisation of HIV transmission 2009 update

Ms Lisa Power, Terrence Higgins Trust

### **AGM**

### **Evening OGM**

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## HIV SIG

### HIV treatment update

Dr Ian Williams, University College London Hospital, London

### HIV Treatment in Pregnancy

Dr Annemiek De Ruiter, Guys and St Thomas' Hospitals Trust, London

### Professorial inaugural lecture

One hundred years of the Brazilian

Prof Rob Miller- University College London Hospital, London

## **22/3/2009**

### **Afternoon OGM**

How to teach & how we learn in Sexual Health & HIV medicine: using the evidence

Teaching & Learning a skill

Dr Dason Evans, Senior Lecturer in Medical Education & Sexual Health Clinician, St George's Medical School, London

Teaching when there is no time

Dr Peter Cantillion, Professor of Primary Care, National University of Ireland, Galway

What's new in BASHH Education?

- *STIF Competencies*: Dr Claudia Estcourt, Barts and the London School of Medicine & Dentistry
- *STIF Pharmacy*: Dr Jyoti Dhar, Leicester Royal Infirmary
- *eHIV-STI, an overview*: Dr Jackie Sherrard, Churchill Hospital, Oxford
- *Integrating Public Health into GUM curriculum: progress & plans*; Prof Jackie Cassell, Brighton & Sussex Medical School
- *STI/HIV Course*: Dr Liz Foley, Southampton University Hospitals NHS Trust
- *STIFF HIV*: Dr Gill Dean, Brighton & Sussex University Hospitals Trust

### **Evening OGM**

Colposcopy and Genital Dermatoses SIG

Honorary life fellow lecture:

More than 30 years in Genitourinary Medicine: personal recollections

Dr Alexandar McMillan

A practical approach to penile skin

Prof Chris Bunker, Chelsea and Westminster Hospital, London

Diagnosis and Management of AIN

Dr Paul Fox, Ealing Hospital, London

## **12/6/2009**

### **Afternoon OGM**

HSV SIG

You're Welcome Launch- GUM involvement

Department of Health

Herpes viruses and immunosenescence

Dr Graham Pawelac, Professor of Immunology, University of Tubingen, Germany

HSV-2 and HIV – What do we make of the Africa data?

Dr Phillip Mayaud, London School of Hygiene and Tropical Medicine

Herpes Viruses and Dementia

Professor Ruth Itzhaji

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University of Manchester

Consultation on proposed revisions to the national KC60 codes and what you need to know  
Dr Mary Poulton, King's College Hospital, London

**Evening OGM**

Honorary life fellow lecture:  
A long road to recovery  
Dr Shamala Chandramani

Non-consultant Health care professional presentations  
Should brain MRI be the first line neuroimaging modality for HIV infected patients presenting with focal neurology  
Andrew Wilson, UCL, London  
BASHH undergraduate prize winner

Mucopurulent cervicitis: current UK practice  
Dr Rebecca Adlington, Mortimer Market Centre, London (Winner)

Shame on you- The psychosocial impact of genital warts  
Catherine Jeynes, Derriford Hospital

HIV Compartmentalisation in Cerebrospinal fluid (CSF)  
Dr Ruth Sayer, Mortimer Market Centre, London

Parental attitudes towards the Human Papilloma Virus (HPV) vaccine in ethnic minorities  
Dr Sangeetha Shanmuga Sundaram, Royal South Hants Hospital, Southampton

Structured interview by health advisers to address long term needs of HIV patients  
Richard Williams, Warren Browne Unit, Southlands Hospital, Shoreham-by-sea



## Special Interest Groups HIV Special Interest Group

- Dr Adrian Palfreeman - Chair
- Dr Andy Winter
- Dr Annemiek Deruiter
- Dr Anton Pozniak
- Dr Chloe Orkin
- Dr Simon Edwards
- Dr Gary Brook
- Dr Vincent Lee
- Dr Lisa Power
- Dr Martin Fisher
- Dr Mark Nelson - Chair of Hepatitis Special Interest Sub Group
- Dr Nicky Mackie
- Dr Mary Poulton
- Dr Sanjay Bhagani
- Dr Sat Das
- Dr Tristan Barber
- Dr Edmund Wilkins - (co opted from the BHIVA conference committee)

2009 has been an interesting year.

Meeting held so far:

### **BASHH/ BHIVA joint Diploma and HIV revision course**

This was held on 24<sup>th</sup> August 2009 at the Chelsea and Westminster Hospital and was organised by Vincent Lee. The course was fully booked with over 40 trainees attending and we had excellent feedback. BASHH provided secretariat support

### **HIV Focus Meeting**

This took place on the 4<sup>th</sup> September 2009 with approximately 100 delegates at the RSM. The theme for the day was "HIV in the next decade".

We had 6 companies sponsoring the event enabling us to offer free registration. There was a comprehensive program with ample time for a discussion both with an expert panel and the audience with excellent feedback for a very successful day.

### **Meetings planned**

Joint BASHH/BHIVA meeting on the 9<sup>th</sup> October after the BHIVA autumn meeting

This will focus on the implementation of NICE prevention guidelines in HIV and GUM settings.

### **HIV Masterclass**

A provisional programme is being developed and the course will be held on 4<sup>th</sup> - 5<sup>th</sup> March in Warwick.

### **Ordinary General Meeting January 2009.**

We have a programme prepared for this. The focus is on ethical issues around HIV (testing children, assisted conception, unconscious patient and disclosure to GP) and an HIV update. Invites to speakers have been sent out.

**Dr Adrian Palfreeman**



## Herpes Simplex Virus Advisory Panel

Jane Bickford  
Anne Geretti  
Jane Deayton  
Marian Nicholson  
Nigel O'Farrel  
Simon Barton

Co-chairs: Raj Patel, John Green

The SIG organised a very successful OGM in June. Graham Pawelac from Tubingen reviewed the impact of herpes viruses on immune functioning particularly with ageing. Ruth Itzhaki looked at evidence for the involvement of herpes viruses in dementia. Philip Mayaud provided an overview of research on the interaction between HSV infection and HIV and identified the areas of uncertainty. SIG members participated in the preparation of the revised IUSTI HSV guidelines. The SIG is currently planning an e-conference in the New Year using one of the web conferencing platforms.

**Dr John Green**



## Sexual Dysfunction Special Interest Group

David Goldmeier Chair  
Pippa Green Vice-Chair

John Green  
Emile Morgan  
Alan Tang  
Eric Curless  
Kathryn Ecclestone (SpR representative)  
Carol Emerson  
Vanessa Griffiths  
Uday Joshi  
Karl Hollows (staff grade representative)  
Penny Mostyn  
Daniel Richardson

The group now consists of 13 members who will be meeting on 11th November 2009 at the Terence Higgins Trust London to discuss strategy for the coming year. The SIG presented an afternoon OGM in October 2008 at the RSM. This included Professor Sandra Leiblum from the USA talking about sexual arousal and the inaugural Professorial Lecture on erectile dysfunction from Wallace Dinsmore. Feedback from the 200 attendees was excellent. The SIG has carried out a national survey of GU/HIV SpRs to ascertain their current sexual dysfunction practice and wishes for training in sexual dysfunction which has been accepted by International J STD AIDS for publication. A paper on how to get training in sexual dysfunction in a GU setting is available on the SIG website. A paper on recommendations for the management of persistent sexual arousal disorder in women has been published in the International J of STD AIDS. An "ABC of sexual dysfunction" to be held at the RSM on October 20<sup>th</sup> 2009 is nearly fully booked.

Clinical enquiries and advice in the sexual dysfunction area can be directed to the chairperson at [david.goldmeier@imperial.nhs.uk](mailto:david.goldmeier@imperial.nhs.uk) who will ensure an expert opinion on any relevant topic.

**Dr David Goldmeier**



## Human Papillomavirus (HPV) Special Interest Group

Dr C Sonnex (Chair)  
Dr R Gilson (Scientific secretary)  
Dr D Rowen (Treasurer)  
DR S Bates  
Dr P Fox  
Dr P Goon  
Dr R Hillman  
Dr C Lacey  
Dr R Maw  
Dr M Nathan  
Dr K Soldan  
Dr N Steedman

The HPV SIG has held three meetings in the previous year. An advisory document on HPV vaccination for GU Medicine practitioners has been placed on the BASHH website. Group members are involved with multi-centre studies addressing the psychological and treatment cost implications of genital warts and an audit of HPV vaccination amongst GU Medicine clinic attendees. Screening for AIN in HIV positive and negative MSM and the immunology and epidemiology of ano-genital HPV infection have been discussed and studies are currently being undertaken by group members.

In the past year the group has organised a BASHH OGM and a workshop on surgical techniques for GU Medicine practitioners.

**Dr Chris Sonnex**



## Bacterial Special Interest Group

Catherine Ison – London, Chair  
Frances Keane – Truro, Secretary  
Jonathan Ross – Birmingham, Treasurer  
Caroline Carder – London  
Catherine Lowndes – London  
Elizabeth Claydon – Barnstaple  
Arnold Fernandes – Bath  
Justin Gaffney – London  
Beng Goh – London  
Phillip Hay – London  
Patrick Horner – Bristol  
Eva Jungmann – London  
Angela Robinson – London  
S. Uthayakumar – Stevenage  
Sarah Alexander – London

### Activities

- Sarah Alexander joined the steering group in October 2008 and has taken responsibility for managing the BSIG webpage

- Promotion of the DVD on Microscopy of STIs, launched in March 2008, has continued through its website ([www.bsig-resources.org.uk](http://www.bsig-resources.org.uk)), advertisements in scientific journals and at a stand at the ISSTD 2009. DVDs have been sold in the United Kingdom, Australia and across Europe.
- Despite the production of the DVD the microscopy courses remain popular and oversubscribed. One dark-field microscopy course ran in January 2009, and three Microscopy courses were held in November 2008, February and May 2009.
- The microscopy courses have been organised for over 10 years and a subcommittee of the steering group (Beng Goh, Phillip Hay, Cathy Ison and Mike Savage) reviewed their future. It was concluded that despite production of the DVD and changing clinic practice, there is still a need for practical teaching. The courses will continue to be organised as previously and will maintain CPD credits rather than become affiliated to a college or university.
- The BSIG held steering group meetings in October 2008 and March 2009.
- The BSIG initiated the review of guidelines for gonorrhoea and Chlamydia.

**Dr Cathy Ison**



## **Adolescent Special Interest Group**

Angela Robinson (Chair)  
 Sarah Heke (Secretary)  
 Greta Forster  
 Liat Sarner  
 Kimberley Forbes  
 Katia Prime  
 Dawn Wilkinson  
 Sophie Forsyth  
 Laura Mitchell  
 Olwen Williams  
 Karen Rogstad  
 Emma Street  
 Amanda Thomas  
 Rebecca Adlington  
 Alan Tang  
 Ceri Slater  
 Melinda Tenant - Flowers  
 Rita Browne  
 Daniel Richardson

The Adolescence Special Interest Group has had 2 steering group meetings in 2008/9. Enthusiastic younger consultants have joined the group and Kimberley Forbes as the new secretary has revitalised the ASIG website.

Outputs from the group include putting on a BASHH OGM on 3<sup>rd</sup> October 2008 on HIV and adolescents. The BASHH editorial 'You're Welcome' was published in Sexually Transmitted Infections June 2009 to compliment a study in progress. The 'National Guidelines on Management of Children and Young People' has completed its consultation process and is in press. 'Don't Forget the Children' had ASIG input and was endorsed by BASHH and printed as



a BASHH/CHIVA /BHIVA publication. Several members with others from BASHH contributed to the updating of the RCPCH Physical signs in child sexual abuse.

The documents reviewed and responded to on behalf of ASIG or BASHH include Adolescent health and pharmacy, NICE Guidance on Child maltreatment where BASHH was a stakeholder, Drs Sarnar and Forster commented on DOH Consultation on a National Framework for assessing Children and Young People's Continuing Care. Dr Dawn Wilkinson was the nominated member to represent BASHH at the RCP transition event; Members sitting on CHIVA and HypNET provide feedback on these groups' activities and input into guidelines which have included producing HPV vaccination guidelines and Guidance on Sexual Health of adolescents with HIV for which Rita Browne was the nominated ASIG representative.

Following suggestions from ASIG, the BASHH SpR course will now include 2 extra modules, one on HIV and adolescents formulated by Dr Katia Prime and the other on sexual health and adolescents by Dr Melinda Flowers.

**Dr Angela Robinson**



## **Colposcopy and Genital Dermatology Special Interest Group**

Deepa Bansal  
Christine Bates  
Sarah Edwards (Chair)  
Imali Fernando  
Sethi Gulshan  
Emile Morgan  
Timothy Moss  
Mayura Nathan  
Sashidharan Parameswaran (Secretary)  
Jillian Pritchard  
Nicola Steedman (Treasurer)  
B Serisha  
Alan Tang (Webmaster)

Over the past year the new group has met to set objectives, and has been working on a new Dermatology module for the Sexually Transmitted Infection Foundation course, which we hope will be trialled in the near future. We are also in the process of reviewing the data on GU Physicians' dermatology experience, in order to plan future educational events. An additional survey on trainees' dermatology experience and training needs is also planned.

The group continues to maintain its links with the British Society for Colposcopy and Cervical Pathology, and is also looking at the use of the colposcope as an examination tool in GU medicine.

The SIG hosted the evening meeting in March, with two practical presentations demonstrating the wide remit of the group. Prof Chris Bunker spoke on "A practical approach to penile skin" and Dr Paul Fox gave an overview of the "Diagnosis and Management of AIN".

**Dr Sarah Edwards**



## British Co-operative Clinical Group

Represented Group:	Representative:	Date:
<b>BCCG</b>	<b>Dr Raymond Maw</b>	<b>3 September 2009</b>
<b>Review of Activities as per business plan:</b>		
<p>Business Meetings were held on 3 October 2008 and 20 March 2009</p> <p>Abstract – Survey of Sexual Health Services in UK Prisons Alan Tang, Raymond Maw and Philip Kell on behalf of the British Cooperative Clinical Group (BCCG). Presented at BASHH meeting July 2009</p> <p>S E McAndrew, OE Williams, K E Rogstad, P D Kell on behalf of the British Cooperative Clinical Group. Management of under 16 year old in UK Genito-Urinary Medicine Clinics. International Journal of STD &amp; AIDS 2008; 19: 625-628</p> <p>McMillan A, Kell P, Wart H on behalf of the British Cooperative Clinical Group of the British Association for Sexual Health and HIV. Diagnosing Chlamydia and managing proctitis in men who have sex with men: current UK practice. STIS 2008 Sex Transm Infect 2008 Apr; 84(2):97-100. Epub 2007 Dec 12. PMID: 18077609[PubMed – indexed for MEDLINE]</p>		
<b>Key Issues since last meeting:</b>		
<p>Imminent change of Chair and Honorary Secretary</p> <p>R D Maw is stepping down after approximately 4 years as Chair and 6 years as Honorary secretary</p> <p>The replacement has not yet been finalised – this is usually an internal process and I am happy to keep it as such</p>		
<b>Suggested Agenda Items:</b>		
<p>Change of Chair / Honorary Secretary</p>		
<p>Dr R D Maw 03 September 2009</p>		



## STI & HIV Course

### *Steering Group Membership*

Dr Elizabeth Foley - Chair  
Ms Tracie Woods - BASHH Course Secretary

### **Day Organisers**

Dr Melinda Tenant-Flowers  
Dr David Hawkins  
Dr Paddy Horner  
Dr Beng Goh  
Dr Greta Forster  
Dr David Rowen  
Dr Raj Patel (SAC Chair)  
Dr Nicola Mackie  
Dr Annemiek de Ruyter  
Dr Karen Rogstad (Chair of BASHH Education Committee)  
Dr Jan Clarke (BASHH Treasurer)

This 10-day course covering the epidemiology, presentation, management, up to date research, policy and service aspects of STI and HIV care is held twice a year every Spring and Autumn in London. The course is remains extremely popular and well evaluated with places filled well in advance.

The additional one day revision workshops held in Southampton and Manchester prior to the Diploma in GU Medicine examination OSCE have proved to be very successful.

Particular thanks go to Tracie Woods, course secretary and the day organisers who work very hard to constantly improve and update their modules. Without their continuing support the course would be impossible to deliver. I am especially grateful to Dr Melinda Tenant-Flowers and Dr David Hawkins who have stepped down from their role as day course organisers this year for their many years of commitment to the programme. Thanks also to Dr Vincent Lee and Dr Sam Samraj for running the OSCE revision courses and to the Institute of Materials, Metals and Minerals for use of their facilities.

**Dr Elizabeth Foley**



## STI Foundation Course

### STIF Steering Group Members

Jyoti Dhar - Chair  
Nick Theobald - Vice Chair  
Sue Bird - Secretariat  
Stephen Kegg - GU Physician  
Ushan Andrady - GU Physician (Wales)  
Alison Currie - GU Physician (Scotland)  
Richard Pattman - GU Physician (Northern)  
Conrad White - GU Physician (Northern)  
Kate Shardlow - General Practitioner/RCGP  
Angela Robinson - BASHH Representative  
Claudia Estcourt - GU Physician  
Sally Whittet - General Practitioner  
Colin Roberts - RCN Representative  
Karen Piegsa - Faculty of Family Planning and Reproductive Health  
Jane Hutchinson - Co-opted: STIF Competency Project  
Cindy Sethi - Co-opted Member (Guy and Thomas's)  
Becky Blackburn - Sexual Health Nurse Practitioner  
Gill Bell - Nurse Consultant in Sexual Health Advising

Between August 2008 and July 2009, 86 STIF courses ran across the UK, attracting 3514 delegates. The Steering Committee acknowledges this is because of the continued enthusiasm and commitment of the individual course organisers and course directors. Since the course was started in 2002, more than 20,000 delegates have attended.

The steering group met twice – to review content, update some workshops and we introduced the new workshop on Risk Reduction and Motivational Interviewing in January 2009.

An update on the initiatives undertaken last year is as follows: -

STIF competencies – the initial pilot and evaluation of a package of GUM clinic based teaching and assessment of sexual health competencies for Primary Care practitioners wishing to deliver locally enhanced services (LES) in sexual health within primary care has been completed and the second phase is currently being undertaken in a number of varied clinics across the country. BASHH is now planning to build additional competency assessments in the STIF Competency framework to provide two levels:

- one for GPs & practice nurses wishing to deliver an LES service in sexual health (this pilot)
- a second level aimed at those wishing to offer a Level 2 service.

We would like to take this opportunity to thank Claudia Estcourt and Jane Hutchinson for taking the lead on this complex task.

STIF changes and revisions – with the introduction of the e-Learning for Health teaching, the format of STIF needs to be updated to utilise the benefits of delivering the knowledge to delegates on-line. We plan to use the STIF contact time to concentrate more on applying the knowledge and practicing skills (such as history taking) in the same case-based format but in a more condensed course. This will be piloted in spring 2010 and ready from August 2010. As a result there will be monitor changes only to update the course material in December 2009.

STIF-Plus - Work is underway on teaching units on Hepatitis, Syphilis and Genital dermatology. These will be available in early 2010 and will be incorporated into the new format for STIF.

Finally, the STIF on-line forum now provides Course organisers with the opportunity to share good practice and ideas with each other – but isn't being used very much! We would encourage you to post comments here to help the development of the course.

**Dr Nick Theobald**  
**Chair, STIF Steering Group**



## Medical Student & Undergraduate Prizes 2007-2008

### Medical Student & Undergraduate Prizes 2008-2009

This year we had 7 excellent essays from medical undergraduates for considerations for the association's annual prize. This year the prize was awarded to Andrew Wilson from University College of London. His essay title was 'Should brain MRI be the first line neuroimaging modality for HIV infected patients presenting with focal neurology'

### BASHH/Health Protection Agency Fellowships

BASHH and HPA continue to successfully run a programme of honorary joint Fellowships for physicians in high specialist training in Genitourinary Medicine. These projects may focus on Epidemiology or Microbiology and a fellowship is undertaken for one year and each Fellow undertakes a project under the supervision of a CDSC member of staff.

Dr Sarah Anne Schoeman from the Centre for Sexual Health in Leeds is working with local HPA to roll out Serological testing algorithm for recent HIV seroconversion (STARHS) in Leeds to detect any recent HIV infection. It is part of the current national monitoring of HIV to include testing for HIV incidence as an indicator of HIV transmission.

Dr.Tanya Welz from King's College Hospital London has been doing a project with a Public Health / Epidemiology focus under supervision of Prof.Jackie Cassell. The aim of the project is to develop and refine a methodology to measure the coverage of HIV testing amongst patients with HIV indicator conditions, at regional level. The proposed methodology will not require local audit or case notes review and could, if found to be robust, be used for periodic regional 'surveillance' of HIV testing coverage in Primary Care and specialist outpatient clinics. Dr.Welz presented the work in progress at the HPA conference in Coventry.

### Named Lectures

#### Professorial lecture

Erectile dysfunction and more

Professor Wallace Dinsmore, Belfast

One hundred years of the Brazilian

Prof Rob Miller- University College London Hospital, London

#### Honorary life fellow lecture

A long road to recovery

Dr Shamala Chandramani

**Dr Karen Rogstad**



## Report from the Clinical Governance Committee

The year ending 31 July 2009 has once again been a busy one for the Clinical Governance Committee (CGC). The medico-political change of recent years continued against a backdrop of a more difficult economic environment. These changes in context challenge clinicians and commissioners to ensure the delivery of high quality and equitable care despite the inevitable financial constraints.

During the past year the significant differences in health service delivery between England, Scotland, Wales and N Ireland have become more apparent in CGC discussions. The experience reported by branch and group chairs indicate what is happening on the ground and provides a valuable insight into how we might learn from other countries within the UK. The branches continue to grow in stature and increasingly reflect the multidisciplinary nature of BASHH. A challenge for branches will be to make better use of their websites as a resource to support local delivery of BASHH objectives.

The turmoil of 2007 has, for several members, continued in 2008, as reflected in CGC discussions. The tendering of sexual health services as the first option remained a concern in some parts. It is anticipated that an informed and collaborative approach between commissioners and clinicians and other stakeholders will bear fruit in due course. True partnerships and quality commissioning are both needed to safeguard and promote excellence in service delivery.

The figures for 48-hour access to Genitourinary Medicine services continue to improve. The CGC supports improvement in access figures if these are achieved without compromising choice, the quality of care delivered or the experience of the service user. Excellence in STI care supported by the pillars of clinical governance should be a shared aim for **all** stakeholders including, most importantly, service users and the public.

CGC itself links branches, groups and committees reporting through CGC with the strategic direction of Board. CGC work includes numerous items of practical interest to clinicians as well as representing BASHH in various joint projects and national consultations. Work completed or nearing completion in the BASHH year 2008 include a joint project with the Health Protection Agency (HPA) on the reporting of viral hepatitis and work with the South West Strategic Health Authority and HPA on sexual health and blood borne virus services in prisons. Consultations included the cooperation and competition guidelines, registration of Health Advisers and the Health Select Committee review of commissioning. CGC members feature widely in, or contribute to, many ongoing BASHH initiatives led by others, particularly those related to clinical governance such as the development of the STI standards document, electronic records to support audit and increasing patient and public involvement.

CGC acts as a direct support mechanism for members through the branch chair. Problems identified locally can be brought, where appropriate, by the branch chair for discussion at CGC. All BASHH members can benefit from this discussion via the CGC minutes and subsequent branch meetings. It should come as no surprise that in a time of uncertainty, this is a significant component of the work of the CGC.

This work is set against the backdrop of the Darzi Report, World Class Commissioning; practice based commissioning, revalidation and uncertainty over the nature of partnership arrangements between clinicians, commissioners and other providers. Some colleagues express concern regarding service sustainability, excess zeal in the pursuit of 48-hour access figures if this is to the detriment of patient choice and quality of care and also fragmentation of service provision. A shared understanding by clinicians, commissioners, users and other stakeholders as articulated in the STI standards document currently under development will hopefully bring some calm to recently choppy waters.

The BASHH committees reporting to CGC (namely the Clinical Effectiveness Group, the National Audit Group, the BASHH Information Group and the British Cooperative Clinical Group) all continue to be very productive as will be evident in the pages that follow. I thank the chairs of these committees for their support and for getting their feedback to me in a timely fashion as this facilitates communication between committee, Board, CGC and BASHH membership.

I would again like to thank branch chairs for their support of local colleagues and branches and also group chairs and all those who have led or contributed to various pieces of work or assisted CGC by submitting timely reports. Finally, in what is my last report on behalf of CGC, I give special thanks to Elizabeth Carlin for her support and tireless hard work as CGC Secretary over the last 4 years.

**Dr Mike Abbott**





## Clinical Effectiveness Group

Dr Keith Radcliffe (Chair)  
Dr Mark FitzGerald  
Dr Guy Rooney (demitted in year)  
Dr Neil Lazaro  
Dr David Daniels  
Dr Gill McCarthy  
Dr Ann Sullivan (appointed in year)  
Dr Margaret Kingston (appointed in year)

During the 12 month period in question the CEG met three times.

Considerable improvements have been made to the CEG section of the BASHH website due to the superb efforts of Neil Lazaro who has taken on responsibility for this

The following guidelines were updated and published on the BASHH website: sexually acquired reactive arthritis, non-gonococcal urethritis, candidiasis, balanitis, syphilis, hepatitis.

Work was undertaken on updating the following guidelines: epididymo-orchitis, sexual assault, young people, PEPSE. It is hoped that these revisions will be completed in the near future.

In addition, a national guideline on HIV testing was produced in collaboration with BHIVA and the British Infection Society. This guideline has been published, and also appears on the societies' websites. It was formally launched at a reception held at the Royal College of Physicians in London in September 2008.

Work continues on producing a new guideline on advice to patients on safer sex.

Mark FitzGerald represented the CEG on a Health Protection Agency short-life working group on the use of NAAT for diagnosing gonorrhoea and chlamydia. The Group is chaired by Prof Cathy Ison. It is hope that this guidance will be finalised soon, and will inform the ongoing revision of the gonorrhoea and chlamydia testing guidelines previously produced by BASHH and currently available on the website.

Publications: -

- *British HIV Association, BASHH and FSRH guidelines for the management of the sexual and reproductive health of people living with HIV infection 2008:* A. Fakoya et al, HIV Medicine (2008), **9**, 681-720.
- *UK National Guidelines on the Management of Syphilis 2008:* Margaret Kingston et al, International Journal of STD & AIDS 2008: **19**: 729-740.

A major development in year, which follows on from the Darzi Report, is that a new organisation will be set up to be known as NHS Evidence. This will be overseen by NICE and will kite-mark producers of high-quality guidelines. The need to pass this accreditation process has led the CEG to review its methodology, a piece of work which is ongoing. One of the things that will need to be done as part of this process is to establish more robust lay input into guideline production in future.

A statement on the window period for Chlamydia was produced and published on the BASHH website.

Dr Mark FitzGerald attended the Guidelines International Network conference in Helsinki on behalf of BASHH, and fed back to the CEG and Board on what he learned there. He also represented BASHH at a meeting held at the Centres for Disease Control in Atlanta, USA, during which the CDC updated its STD management guidelines (a process which is carried out every 4 years).

Individual members of the CEG continued to liaise with outside agencies, including: Royal College of Physicians Clinical Effectiveness Forum (Mark FitzGerald), BASHH National Audit Group (David Daniels, subsequently Ann Sullivan), Map of Medicine (David Daniels), Family Planning Association (Neil Lazaro, subsequently Ann Sullivan), NHS Clinical Knowledge Summaries (Neil Lazaro), US National Guidance Clearing House (Mark FitzGerald). In connection with the latter, it is of interest to note that each individual BASHH guideline available on the NGC received between 5-10,000 hits each year.

**Dr Keith Radcliffe**



## National Audit Group (NAG)

**Chair** Chris Carne  
**Vice Chair** David Daniels  
**Hon Sec** Hugo McClean  
**Director of Development** Anatole Menon-Johansson  
**BHIVA Representative** Ed Wilkins, Alison Rodger  
**Scotland** Steve Baguley/Daniel Clutterbuck  
**Wales** Helen Bailey, Sarah McAndrew  
**N.Ireland and BCCG** Chair Raymond Maw  
**Anglia** TC Harry/Raouf Moussa  
**Essex** Gail Crowe  
**Merseyside** Ravindra Gokhale  
**North Thames** Ann Sullivan, Eva Jungmann  
**Northern** Sarup Tayal  
**North-West** Ashish Sukthankar  
**Oxford** Adil Isaac/Gill Wildman  
**South East Thames** Cindy Sethi  
**South-West** Arnold Fernandes  
**South-West Thames** Steven Estreich  
**Trent** Jyoti Dhar  
**Wessex** Reena Mani  
**West Midlands** Kaveh Manavi  
**Yorkshire** Amy Tobin-Mammen  
**Co-opted Members** Paul Bunting, Irene Vaughan, Mike Walzman, Nicola Low

### 2008 NATIONAL AUDIT OF SEXUAL HISTORY TAKING

Presented as poster at ISSTD/ BASHH Congress 2009, London, and Hugo McClean co-chaired the session on audit.

#### ***Reports published in Int J STD AIDS:***

a) McClean H, Carne C, Bhaduri S, Gokhale R, Sethi G, Daniels D; National Audit Group of the BASHH. UK National Audit of Sexual History-taking: clinic policies audit. *Int J STD AIDS*. 2009 May; 20(5): 355-7.

b) Carne C, McClean H, Bhaduri S, Gokhale R, Sethi G, Daniels D; National Audit Group of the BASHH. UK National Audit of Sexual History-taking: case-notes audit. *Int J STD AIDS*. 2009 May; 20(5): 351-4.

### 2009 NATIONAL AUDIT ON ASYMPTOMATIC SCREENING

This on-line audit of performance against the BASHH *UK National STI Screening and Testing Guideline* closed on 31 July 2009.

### GUM CLINIC ELECTRONIC RECORDS AND APPLICABILITY FOR CLINICAL AUDIT

Hugo McClean is chairing a "virtual group" to produce recommendations to improve the quality of data extraction for clinical audit from clinic electronic care records.

### SHARING OF CHLAMYDIA AUDIT DATA FOR FOLLOW-UP OF NATIONAL OUTCOME STANDARDS REPORT

Hugo McClean and Chris Carne are collaborating with Keith Radcliffe and Nicola Low on this. The BASHH 2007 Chlamydia Audit provides a large dataset that may be useful for review of the outcome standards for chlamydial partner notification

#### **DEVELOPMENT OF GUIDANCE TO REGIONAL AUDIT CHAIRS**

**The purpose of this document is to describe and support the role of the BASHH Regional Audit Chair in connecting BASHH national audits to regional and local clinical audit and quality improvement.**

#### **PREPARATION OF REVISED AND NEW AUDIT PROFORMAS**

Work continues to keep the NAG proformas up to date for audit against the new and revised CEG proformas. These proformas are posted on our pages on the BASHH web-site and can be used as a basis for local and regional audits.

#### **NATIONAL AUDIT GROUP WEBPAGE**

In addition to the audit proformas, the resource on previous national audits and regional audit reports on the NAG webpage continues to be updated

**Dr Chris Carne  
Chair, National Audit Group**



## Report from the NCCG/SAS Group

### Achievements during 2008-2009 include:

#### Annual Conference

11<sup>th</sup> Annual NCCG Conference held at the University of Nottingham, 12–13 September 2008

- 196 delegates attended – with excellent feedback
- Positive credit balance achieved

#### Publications

Bailey HR, Mullan H, Pinsent S, Sashidharan PN, Theobald N  
Non-consultant career grade doctors in genitourinary medicine – are they up to the job?  
National survey 2007  
Int J STD & AIDS 2009; 20:14-15

#### Planned Activity for 2009 – 2010

12<sup>th</sup> Annual Conference: University of Nottingham 18-19 September 2009  
National Audit: Pelvic Inflammatory Disease

#### Meetings

Three committee meetings were held during the year, including the AGM, which was held at the Annual Conference, at Nottingham.

At the AGM, a decision was taken, after a majority vote, that the group should change its name to Staff and Associate Specialists (SAS) GUM Group, as the term NCCG was felt to be universally unpopular and outdated.

The Group Constitution and Terms of Reference have been revised and will be presented to members at the Annual Conference 2009, for ratification. The BASHH SAS Doctors' Induction Pack has also been revised

A number of Committee members had the opportunity to attend the Dip GUM examination as observers, and are now in a position to provide feedback and guidance to those SAS doctors planning to take this examination

#### Executive Committee Membership

<b>John Lee</b>	(Chair) Conference Committee, Clinical Governance Committee
<b>Helen Mullan</b>	(Secretary) Conference Committee, BASHH Board
<b>Nick Theobald</b>	(Financial Officer) Conference Committee, Education Committee
<b>Helen Bailey</b>	Conference Committee
<b>Melissa Bracken</b>	
<b>Avneet Chowdhury</b>	Conference Committee
<b>Caroline Cooper</b>	
<b>Wafaa Eltantawy</b>	
<b>Margaret Hatwell</b>	
<b>Karl Hollows</b>	Conference Committee (2009)

**Helen Keane**  
**Lamont Law**  
**Neil Lazaro** Conference Committee  
**Vendela McNamara** Conference Committee (2009)  
**Carlos Oroz**  
**Sue Pinsent**  
**Jane Richards**  
**M Itty Samuel**  
**PN Sashidharan**  
**Nicky Waddell**  
**Mervyn Lee** Conference Committee (2009)

**Dr John Lee**



## Nurse and Health Advisor Report

### Representation

In keeping with the BASHH ethos of multidisciplinary collaboration, nurses and health advisors are represented on many committees and special interest groups.

There are around 100 nurse members of BASHH which represents approximately 10% of the total membership.

As the specialty increasingly embraces the concept of nurse delivered services it is important that BASHH attracts more nurse members so that this section of the workforce is able to contribute to the continuing modernisation of sexual health services.

### Cathy Harman memorial Fund

BASHH are planning to introduce an award in memory of Cathy Harman who sadly died earlier this year. Cathy trained as a nurse at Westminster Hospital in the early 1980s. It is planned that the award will be awarded to a multidisciplinary team for innovation. Many nurses and others who knew Cathy have contributed to the initiation and organisation of this award.

### Clinical preparation

Although many trusts have supported the development of specialist nursing roles such as nurse practitioner and consultant nurse there remains a lack of consensus regarding clinical and academic preparation for these advanced roles. Discussions are ongoing regarding a way forward both within BASHH and in other nursing forums.

**Jane Bickford**



## Doctors-in-Training in GU Medicine

### Doctors-in-Training weekend, University of Warwick, 26 & 27 September 2008

This annual event was a great success. There were a record-breaking 65 doctors registered, with a good turn-out from all parts of the UK. The programme was varied and included sessions on pulmonary disease in HIV, hepatitis co-infection, STI testing, business planning and working in Liberia. We were very grateful to Jackie Cassell for leading interactive public health sessions for the second year running. There was huge disappointment at the lack of a disco, but only until we found the games room and got stuck in to some very competitive pool, table football and power ballad karaoke. Many thanks to Sris Allan and Caroline Thng for organising.

### Curriculum and Assessments

Doctors-in-training were instrumental in helping revise the GUM curriculum, including new sections addressing the need for more management and leadership training in preparation for the consultant role. They also piloted new assessment tools including a Patient Feedback Survey, and Teaching and Audit assessments, and helped with the process of moving onto E-portfolios.

**Dr Katherine Coyne**



## Website Report

### **BASHH Web Team**

Dr Ade Apoola  
Dr Dave Kellock  
Prof Jonathan Ross  
Dr Nick Theobald  
Ms Louise Simms-Hughes  
Ms Hannah Wood (BASHH Secretariat)

The Webteam has focussed on improving the usability of the BASHH website.

The Webteam are looking to further develop the following within the next year.

- Reviewing the library page to better allow visitors to see what books are owned by BASHH.
- Increase the site profile by launching a clinician blog.
- Increase the site traffic through a charity Google adword campaign.
- Webcasting of OGMs.
- Promoting the website via social networking sites
- Presenting more STI information to the general public

**Dr Ade Apoola**



## Media and Communications Group

### **BASHH Media Group Report 08/2008-08/2009**

Dr Mark Pakianathan (Chair)  
Dr Simon Barton  
Dr Claudia Estcourt  
Dr Helen Ward  
Dr Rak Nandwani  
Dr Keith Radcliffe  
Dr Steve Taylor  
Dr Colm O'Mahony  
Dr Olwen Williams  
Dr Angela Robinson  
Dr Peter Greenhouse  
Dr George Kinghorn  
Dr Immy Ahmed) Executive board members have close liaison with  
Dr Jan Clarke) the media group and are copied into all communications  
Dr Keith Radcliffe)

### **Introduction**



The BASHH Media Group consists of fellows who are media trained who are able to be spokespersons for BASHH when there are media enquiries. The Media Group work closely with Munro and Forster Communications who in addition to media support to the Board on strategy and external stakeholder engagement.

### **Media Activity**

Highlights throughout the year have included an interview with Claudia Estcourt on BBC Radio 4 Woman's Hour, Peter Greenhouse starring on 'Who Do You Think You Are', and Steve Taylor superbly weaving key message on HIV testing into a Daily Mail article on HIV cures.

Working with MedFASH we publicised the launch of new HIV testing guidelines, achieving widespread coverage in a number of medical journals including the BMJ, HSJ, and Pulse, as well as national coverage through The Times and BBC online.

### **Policy and strategy**

M&F produced a detailed policy report on the implications of the removal of HIV from specialist commissioning. Please contact [harriet.smith@munroforster.com](mailto:harriet.smith@munroforster.com) <<mailto:harriet.smith@munroforster.com>> for a copy.

BASHH responded to the Health Select Committee's request for evidence on the commissioning inquiry. The submission, lead by Mike Abbot, was supported by BASHH members detailing their experiences of commissioning practice, and in particular the level of commissioner engagement with clinicians.

### **Stakeholder engagement**

During the first half of the year, M&F worked closely with the HPV SIG and met representatives from SPMSD to discuss the production of a business case for Gardasil to be included in the catch-up programme. BASHH met with Kevin Barron MP, Chair of the Health Select Committee in December 2008 who confirmed that he would take the vaccination issue with the Minister, and Baroness Gould wrote to Dawn Primarolo to make the case for Gardasil in the catch-up programme.

Mark Pakianathan and M&F also met with the THT and BHIVA to explore the potential opportunities for joint working to encourage more testing on HIV.

M&F also secured BASHH a place on a new Department of Health HIV reference group and lead the response to the London Assembly Report on Young Londoners' Sexual Health

**Dr Mark Pakianathan**



## Sexually Transmitted Infections

Sexually Transmitted Infections is continuing to build on its strengths as a high quality research journal, as evidenced by 428 papers submitted in the first 10 months of the year, and 176 papers published over the last 12 months. Our impact factor remains stable at 2.571 reflecting the journal's international appeal, with half of our 1780 print subscribers coming from the UK, 16% from North America, 17% from Europe and many others from a wide range of localities.

An attractive feature of the journal for both authors and readers is the publication online of papers prior to their appearance in print. In future, the "Online First" version will be fully formatted, making these papers more convenient to download and read.

As many readers will know, Professors Helen Ward and Rob Miller have stepped down as editors, following an extremely successful tenure during which the journal has gone from strength to strength. The new Editorial Committee is a dynamic mixture of the wise and experienced with the young and thrusting, and balances our UK commitments with the global outlook needed in today's clinical and publishing world.

Sarah Edwards has taken on the role of Education Editor, and will lead the commissioning of clinical articles which "reach the parts that Guidelines cannot reach". Regular BASHH communications will also appear, and we are planning ways to use the website as a powerful tool of communication with and between clinicians, in the consultation room.

We would like to thank the readership for their continued support for the journal. As always the Editor and Publishers are grateful to our reviewers, many of whom are members of BASHH, our Deputy and Associate Editors and also to our Editorial Board. We always welcome the input of the BASHH membership, particularly ideas on how the journal can serve you better. Do look out for our editors at conferences and BASHH meetings, or contact us by e-mail, if you have ideas that can help us work together.

**Professor Jackie Cassell**



## International Journal of STD & AIDS

The International Journal of STD & AIDS is the only monthly publication combining STDs and HIV and has now had 20 full years of publication.

The number of papers submitted is now approx 700 annually, an increase from 500 two years ago. Editorial policy is biased towards reader's interest rather than impact factor (readers' interest has been assessed by survey and by the number of internet "hits"). Lag in publication for some articles continues to be a problem and this is being addressed. The International Journal continues to encourage papers from trainee doctors who sometimes find it difficult to publish articles and case reports and audit reports are encouraged. Audit reports are a particularly valuable contribution in health service comparison and provide a reference for others carrying out audit. As the International Journal is a mouth piece for BASHH, priority is generally given to BASHH recommendations or guidelines as well as articles which are of topical interest to BASHH members. This of course includes the reports of the British Cooperative Clinical Group and reports from the Special Interest Groups. The turnaround time from submission to decision has improved with 82% of authors notified that their articles have been accepted within 1 month. The authors of 88% of rejected papers receive an email of rejection within 1 month.

After 20 years, this will be my last editor's report. It is time to pass on to others. I very much hope they enjoy it as much as I have.

I would like to particularly thank all referees who have helped with a difficult task which may appear thankless. Without their reports, publication would be impossible. Finally I would like to thank all the authors and The Royal Society of Medicine and everyone who has helped with the continued success of the International Journal over the past 20 years. In particular I would like to thank James Bingham, Willie Harris, Michael Waugh, Nicol Thin and Howard Croft (RSM) without whose vision the journal would never have started

**Professor Wallace Dinsmore**



## **Librarian's Report**

In the last year my greatest find has been a copy of a classic in the history of obstetrics and the anatomy of the pelvis. Henry Deventer. *Chirurgicae Quibus Manifestatur Artis Obstetricandi Novum Lumen. Ex Libris Karolinska Institute. Stockholm. Lugduni Batavorum (Leiden) 1701* with 38 engravings.

We have also been very fortunate through the good offices of the Royal Society of Medicine Library to obtain a bundle of papers written for the publishers Heinemann by the late Dr. A. H. Harkness the West End Venereologist and author of *Non-Gonococcal Urethritis*, 1950 but which lay for years in the files of a member of their staff. They conjure up the specialist's world of the 1940s and 1950s with colourful essays on Wartime London as seen through the eyes of a venereologist with a large and cosmopolitan practice, views much in advance of his times on homosexuality, and pithy comments on some of his colleagues, and topics such as circumcision. These will take sometime to edit for hoped for publication.

During the summer I was happy to enable Dr. Peter Greenhouse and a team from BBC to utilise BASHH Library and RSM Library in which syphilis in the family of an actor in the late nineteenth and early twentieth centuries played a role in family history as in so many families. Unfortunately I did not see the final programme on TV as I was in an expert witness in a case before the Hong Kong Medical Council at the time.

**Dr Michael Waugh**



**British Association for Sexual Health and HIV**

**Trustees' report and Consolidated Financial Statements**

**FOR THE YEAR ENDED**

**31 JULY 2009**

**A Registered Charity  
No. 1099301**

**Registered Address  
1 Wimpole Street  
London W1G 0AE**

**BASHH TRUSTEES' SUMMARY REPORT AND CONSOLIDATED FINANCIAL STATEMENTS  
FOR THE  
YEAR ENDED 31 JULY 2009**

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**BASHH TRUSTEES' SUMMARY REPORT AND CONSOLIDATED FINANCIAL STATEMENTS  
FOR THE  
YEAR ENDED 31 JULY 2009**

Legal and Administrative Information

Status:

Registered Charity  
Registration Number: 1099301

Trustees:

Dr Rachel Challenor  
Professor Jonathan Ross  
Dr Simon Barton  
Dr Keith Radcliffe  
Dr Richard Lau  
Mr Michael Bell

Principal Officers:

Dr Imtyaz Ahmed-Jushuf  
Dr Keith W Radcliffe  
Dr Janette Clarke  
Dr Rajul Patel  
Dr Elizabeth Foley

Registered Office and Operations Address:

1 Wimpole Street,  
London, W1G 0AE

Administrators:

Royal Society of Medicine  
1 Wimpole Street,  
London, W1G 0AE

Bankers:

Bank of Scotland,  
St James Gate,  
14-16 Cockspur Street,  
London, SW1Y 5BL

Auditors:

Farringdon & Co.  
176 Franciscan Rd  
London, SW17 8HH

## **THE ANNUAL ACCOUNTS AND THE ANNUAL REPORT**

1. Regulations issued under the Charities Acts, require the Trustees to produce Annual Accounts and an Annual Report. These documents effectively complement each other and should be read and interpreted as a single document. The Accounts and the Report are public documents and copies may be obtained from the BASHH Secretariat in the Academic Department of the Royal Society of Medicine.
2. This constitutes the fifth Annual Report of the Association. It covers the year ended 31<sup>st</sup> July 2009.

## **HISTORY OF BASHH: DEVELOPMENT AND CONSTITUTION**

### **INAUGURATION OF THE ASSOCIATION**

3. The Association was established on 1<sup>st</sup> April 2003 through the merger of The Medical Society for the Study of Venereal Diseases (MSSVD) (est. 1922) (charity number 264744) and The Association for Genito-Urinary Medicine (AGUM) (est. 1992) (charity number 1064583) and is a registered charity (charity number 1099301). The Association was formally registered with Charity Commission on 15<sup>th</sup> September 2003. At this time, the net assets of the merging charities were transferred to BASHH and then those charities were wound up.

### **CONSTITUTION AND RULES**

4. The affairs of the Association are regulated by its Constitution and Rules originally adopted in final form on 31<sup>st</sup> July 2003 by the Foundation Members and Trustees and amended by the meetings of Members on 21<sup>st</sup> November 2003, 28 October 2007, 11 January 2008, 27<sup>th</sup> June 2008 and 9<sup>th</sup> January 2009.
5. Copies of the Constitution and Rules may be obtained from the BASHH Secretariat in the Academic Department of the Royal Society of Medicine.

### **MEMBERSHIP**

6. Membership was / is open to:
  - 6.1 Each Member of the MSSVD and AGUM charities applying on or before the 31<sup>st</sup> July 2003.
  - 6.2 Medical practitioners, scientists in the field of medicine, other healthcare workers and other persons allied to healthcare from anywhere in the world, who have shown a commitment to the specialty. Criteria for commitment to the specialty are that the applicant should be currently working in or have contributed to the specialty or an allied field.
  - 6.3 Fellows and ordinary members who have retired and to those other persons who in the view of the Board have made a significant contribution to the specialty and / or to the BASHH (also to MSSVD and/or AGUM) during their working life.

But not to corporate bodies, institutions, public bodies or other organisations

7. The Association currently consists of 1124 members in total of which 1065 are based in the UK and 59 are based overseas. These figures represent the position for the Membership period as at 31 July 2009.

### **OBJECTIVES**

8. The objectives of the Association are:
  - 8.1 To promote, encourage and improve the study and practice of the art and science of diagnosing and treating sexually transmitted diseases including all sexually transmitted infections, HIV and other sexual health problems.

- 8.2 To advance public health so far as it is affected by sexually transmitted diseases and to promote and encourage the study of the public aspects of sexually transmitted diseases including all sexually transmitted infections, HIV and other sexual health problems.
- 8.3 To advance the education of the public in all matters concerning the medical specialty of Genitourinary Medicine (hereinafter referred to as 'the specialty'), to include the management of HIV infections and the broader aspects of sexual health.
- 8.4 To promote a high standard in the medical specialty of Genitourinary Medicine to include the management of HIV infections and the broader aspects of sexual health.

In promoting activities in the furtherance of the above Objects the Association will seek to ensure that non-members, throughout the UK, in Ireland and the rest of the World, as well as Members of the Association are able to benefit.

## ORGANISATION

- 9. The Charity is governed by six Trustees with the General Secretary being responsible for liaison with the Charity Commission on its behalf.
- 10. The activities of the Association are organised and run by an elected Governing Board supported directly by two Standing Committees which are accountable to the membership through the board, these are:
  - i. The Education Committee
  - ii. The Clinical Governance Committee
- 11. Special Interest Groups (SIGs) help to develop the study of sexually transmitted infections and to train medical and other staff in the specialty of Genito-Urinary Medicine through, inter alia, regular meetings of the Association, which are open to non-members.
- 12. Branches have been created for UK home nations and English regions. These non-autonomous branches have replaced the former divisions of MSSVD and AGUM, and all financial transactions of these branches are now administered and audited through the Association's accounts prepared by the Royal Society of Medicine (RSM), (refer paragraph 23). It is hoped that further non-autonomous Branches will be created in the future.

## 13. TRUSTEES

The Trustees of the Association are:

- 13.1 The **President** or the **Vice President** elected for two years, the appointment to be confirmed by the Board.
- 13.2 The **Immediate Past President** in office for two years.
- 13.3 Two elected **Members of the Governing Board** (other than the General Secretary, Conference and Communications Secretary, Treasurer or any other officer {excluding the President or Vice President and the Immediate Past President}) appointed by the Board for a period of two years but able to be re-appointed for a further consecutive two years.
- 13.4 One member of the Association not being a member of the Board elected by the members by postal / electronic ballot for a period of two years but able to be re-appointed for a further consecutive two years, referred to as the **Independent Trustee**.
- 13.5 One **lay trustee** position was approved in January 2008. This person will join the Trustees as a non-member of BASHH. The role is being advertised but there was no incumbent appointed in 2008.



14 Incumbent Trustees for the period were:-

- Independent Trustee and chair: Dr Rachel Challenor
- Immediate Past President: Dr Simon Barton
- Vice President: Dr Keith Radcliffe
- Member of the Governing Board: Dr Claudia Estcourt (to March 2009)
- Member of the Governing Board: Dr Richard Lau (from March 2009)
- Member of the Governing Board: Prof. Jonathan Ross
- Lay Trustee: Mr Michael Bell (from March 2009)

### **TRUSTEES' RESPONSIBILITIES**

15 The Trustees are responsible for their annual report, and for the preparation of financial statements for each financial year which give a true and fair view of the incoming resources and the application of resources of the charity and group during the year, and of the state of affairs as at the end of the financial year. In preparing these financial statements, the Trustees are required to:

- ensure that the most suitable accounting policies are established and applied consistently;
- make judgements and estimates which are reasonable and prudent;
- state whether the applicable accounting standards and statement of recommended accounting practice have been followed, subject to any material departures disclosed and explained in the financial statements ; and
- Prepare financial statements on a going concern basis unless it is inappropriate to presume that the charity and group will continue in operation.

16 The Trustees have overall responsibility for ensuring that the charity and group have appropriate systems and controls, financial and otherwise. They are also responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and group and enable them to ensure that the financial statements comply with Charities Act 1993. They are also responsible for safeguarding the assets of the charity and group and for their proper application as required by charity law, and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities and to provide reasonable assurance that:

- the charity is operating efficiently and effectively;
- all assets are safeguarded against unauthorised use or disposition and are properly applied;
- proper records are maintained and financial information used within the charity, or for publication, is reliable;
- The charity complies with relevant laws and regulations.

17 The Trustees hereby declare that in adopting the attached financial statements they have discharged their responsibilities as outlined above.

## MANAGEMENT AND ADMINISTRATION

18. The Governing Board is made up of 18 Members :

The following five Officers:

- (i) The President
- (ii) The Vice President
- (iii) The General Secretary
- (iv) The Conference and Communications Secretary
- (v) The Treasurer

➤ The Chairman of the Clinical Governance Committee

➤ The Chairman of the Education Committee

(A nominee of the respective Committee may represent these Board Members when they are unavoidably absent. A representative may not vote at a Board meeting)

- Representative of NCCG doctors (serving for two years)
- Representative of nurses (serving for two years)
- Representative of health advisers (serving for two years)
- Representative of Doctors-in-Training (serving for two years)
- Six Fellows serving for two years (three retiring in rotation each year)
- The Immediate Past President

21. The principal Officers of the Association for the period under report were:-

- President Dr Imtyaz Ahmed-Jushuf
- Vice President Dr Keith W Radcliffe
- Honorary Secretary Dr Jan Clarke
- Honorary Treasurer Dr Rajul Patel
- Conference and communications Secretary Dr Elizabeth Foley

22. Details of the constituent members of the Board are shown as Appendix 1.

23. Administrative and accountancy support to the Board, to the Trustees and to the Officers is provided through a contract with the Royal Society of Medicine, which is on a fixed fee basis and is subject to an annual review.

## FINANCIAL POSITION

24. The financial position of the Association for the year ended 31 July 2009 is shown in the full set of Financial Statements on pages 13 to 22. These include; a Statement of Financial Activities (the income and expenditure statement), a Balance Sheet and Notes to the Accounts. The Notes identify the accounting policies adopted by the Trustees and provide more detailed explanations of the figures in the main statements.

25. The Honorary Treasurer's Report below, identifies the key features of the financial position.

26. The Chairman's report and the Secretary's Report below provide further financial and other information about issues relating to the Charity's activities.

The Final Accounts are covered by an Audit Report shown on page 12, prepared by Jailesh Patel, Statutory Auditor on behalf of Messrs. Farrington & Co, Chartered Certified Accountants and Statutory Auditors.

Signed for and on behalf of the Trustees:

Signature : \_\_\_\_\_

**Dr Rachel Challenor**  
Chairperson of Trustees

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Dr Jan Clarke**  
General Secretary

Date: \_\_\_\_\_

## **Statement by the Chair of Trustees**

The trustees are responsible for dealing with all funds and property and for ensuring that nothing done by or for BASHH will adversely affect its status as a charity. The full responsibilities are outlined elsewhere in this report under the legal and administrative information.

BASHH continues to go from strength to strength. The Association's finances during 2008-2009 remain sound despite the uncertain financial environment. The trustees exercise their duties of care, compliance and prudence seriously and we continue to take all appropriate advice to protect BASHH investments.

All trustees have received re-imbusement of travel expenses incurred whilst attending meetings as shown in the accounts.

We have been fortunate in recruiting Mike Bell as a lay trustee. He joined the Trustee Body at the beginning of the year. His input has been invaluable and he has brought a new perspective to the Trustee Body.

All charities must have charitable purposes or aims that exist for public benefit. This is known as the "public benefit requirement".

There are two key principles of public benefit, which are:

1. there must be an identifiable benefit or benefits, and
2. benefit must be to the public or a section of the public.

The trustees have given due consideration to public benefit before approving each of the many and varied activities undertaken by BASHH over the last 12 months. We believe that public benefit is an integral part of all that BASHH does.

This is my fourth and final statement as Chair of Trustees. I would like to take this opportunity to thank the BASHH Officers and all my fellow trustees with whom I have worked during the past four years. Together, they have made it easier for me to fulfill my role and it has been a privilege to serve BASHH as the Chair of Trustees.

**Dr Rachel Challenor**  
**Chair of Trustees**

## **General Secretary's report**

The year in question has been a most successful one for the Association.

Membership has increased to a total of 1124 as of June 2009, of whom 408 are Fellows and 59 of whom reside outside the United Kingdom.

Standard annual returns have been made to the Charity Commissioners for England and Wales, who have also been informed of the changes made to the BASHH constitution at the fourth Annual General Meeting held on 9<sup>th</sup> January 2009.

The Memorandum of Agreement with the Royal Society of Medicine was re-negotiated and a separate MOU was agreed with RSM Press for supply of the International Journal of STD & AIDS to our members.

There are no outstanding legal issues pertaining to the running of the Association.

**Dr Janette Clarke**  
**General Secretary**

## **Honorary Treasurer's Report**

My second report as Treasurer covers the sixth financial period for the British Association for Sexual Health and HIV (BASHH).

This financial year has been the first year of working with the RSM under the new contract arrangements. The costs of administration through the BASHH secretariat, and maintaining our accommodation arrangements at the RSM now cost substantially more than they did so in previous years. This reflects the decision of the RSM to charge a more realistic market rate reflecting the upgraded facilities that we now receive. The new contract should benefit both the society and the RSM through the explicit statement of quality expectations for provided services.

Quarterly meetings have been established with the senior management team at the RSM to help identify problems at an early stage so as to set up/modify support and processes. To this end we have achieved tighter management of the membership database, the journal subscriptions register, room bookings and a new process for invoice generation (requiring purchase order numbers- reducing the number of dated invoices that are written off). Some outstanding issues remain currently unresolved- the reporting of balances, activities and invoice issue and collection for the societies branches and special interest groups on a regular basis, the collection of membership dues in a timely fashion and the prompt termination of journals when members resign. These will be the focus of meetings in the upcoming year.

This is the first year where we have prepared consolidated group accounts in order to incorporate the results of BASHH-ISSTD 2009 Ltd a subsidiary company that was specifically formed in order to host a large international educational conference in London during spring 2009. The event was held through the subsidiary company in order to minimise for BASHH the various risks associated with such large events and important skills and lessons have been learnt. The consolidated accounts incorporate the results of the company and the notes to the accounts give full details of the results of the subsidiary.

The financial crisis of 2008-2009 has yet to have its maximum impact on the society's income from reserves and investments. We have seen a modest decline from approximately £57,000 in 2007-2008 to £33,000 in this financial year. This trend will continue as base interest rates have now fallen to well below 1% and these rates will reflect the rates on bank deposits. The trustees and treasurer will be reviewing the options in December 2009 when the current fixed term deposits mature.

Despite the tight financial climate the society's accounts show a healthy position. The year has seen our net surplus income amounting to over £204,000. This has been a tremendous achievement for the Association and principally reflects a major contribution to our funds by the BASHH spring meeting (joint ISSTD-BASHH meeting July 2009). Outside of this meeting the organisation's income was roughly balanced by expenditure where the society continues to be principally reliant on income from courses and meetings.

During the last year the Board has approved an ambitious plan for the development of STI standards, has supported a project at the RCP looking at Alcohol and Sex and continued its support of the media strategy and the APPG (Pro-choice and Sexual Health)- these plans alone account for over £150,000 of BASHH's spending plans.

Dr Karen Rogstad and Dr Mike Abbott have overseen business planning for SIGs and branches. Business planning has been much smoother this last round than in previous years and reflects the growing familiarity of the SIGs and Branches with the annual process.

### *Risk Management*

The trustees regularly review the major risks to which the charity is exposed and systems are established to minimise or mitigate those risks. Risks are minimised by the implementation of various procedures, review of financial data and procedures for authorisation of all payments.

#### *Investment Policy and Reserves*

In line with the Trustee's advice last year the Charity will attempt to build its' reserves to ensure a sufficient financial cushion to maintain key activities should pharmaceutical income become limited (there is some evidence from negotiations with major sponsors that this is already happening). To this end the charity plans to move £800,000 to higher interest deposit accounts in December 2009 and build on these reserves in the coming years.

I would like to thank all the pharmaceutical companies who have provided support for educational, scientific and social activities.

I gratefully acknowledge the professional advice available to me over this year. The Association's auditors (Mr Jailesh Patel at Farrington & Co) have advised on appropriate matters.

The accounts have been prepared by Mr Patrick Heneghan of the Royal Society of Medicine, and thanks are due to the BASHH secretariat within the Academic department at the RSM for their hard work and support. A full and detailed financial report is included elsewhere in this report, which has been independently audited. Thanks are also extended to my fellow officers and the BASHH trustees for their help and guidance. I am particularly grateful to Dr Janette Clarke for her continued advice and support.

In summary, this year, despite the considerable pressures on the Charity and the financial turmoil within the banks and financial markets, we continue to grow as an organisation whilst effectively managing risks. The Association remains in good financial health.

**Dr Raj Patel**  
**Honorary Treasurer**

## **Independent Auditors' Report to the Trustees of BASHH**

We have audited the group and charity financial statements of BASHH for the year ended 31 July 2009 which comprise the group Statement of Financial Activities, the group and charity Balance Sheets, and the related notes. These financial statements have been prepared under the accounting policies set out therein.

This report is made solely to the charity's trustees, as a body, in accordance with Sections 43 of the Charities Act 1993 and the regulations made under that Act. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

### ***Respective responsibilities of Trustees and auditors***

The trustees' responsibilities 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) are set out in the Statement of Trustees' Responsibilities.

We have been appointed as auditors under section 43 of the Charities Act 1993 and report in accordance with regulations made under that Act. Our responsibility is to audit the financial statements in accordance with relevant legal and regulatory requirements and International Standards on Auditing (UK and Ireland).

We report to you our opinion as to whether the financial statements give a true and fair view and are prepared in accordance with the Charities Act 1993. We also report to you if, in our opinion the information given in the Trustees Annual Report is not consistent with those financial statements, the charity has not kept sufficient accounting records, if the charity's financial statements are not in agreement with these accounting records or if we have not received all the information and explanations we require for our audit.

### ***Basis of opinion***

We conducted our audit in accordance with International Standards on Auditing (UK & Ireland) issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgements made by the trustees in the preparation of the financial statements, and of whether the accounting policies are appropriate to the charity's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error. In forming an opinion we also evaluated the overall adequacy of the presentation of information in the financial statements.

### ***Opinion***

In our opinion:

- the financial statements give a true and fair view, in accordance with United Kingdom Generally Accepted Accounting Practice, of the state of the Parent Charity and Group affairs as at 31 July 2009 and of the Group's incoming resources and application of resources for the year then ended ;
- the financial statements have been prepared in accordance with the Charities Act 1993.

Jailesh Patel – Statutory Auditor  
For and on behalf of Farringdon and Co  
Chartered Certified Accountants and Statutory Auditors  
176 Franciscan Road  
London SW17 8HH



**BRITISH ASSOCIATION FOR SEXUAL HEALTH AND HIV**  
**CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31**  
**JULY 2009**

		CHARITABLE FUNDS				Total Funds (31 July 2008)
	Notes	Un- restricted Funds	Restricted Funds	Endowed Funds	TOTAL FUNDS	
		£	£	£	£	£
<b>INCOMING RESOURCES</b>						
<b>Activities in furtherance of the charity's objects:</b>						
Promoting training and education	2	194,927			<b>194,927</b>	188,020
Educational meetings and courses	17	444,259			<b>444,259</b>	408,954
Educational meeting - subsidiary activity	3	896,529			<b>896,529</b>	-
Other Income	16	2,675			<b>2,675</b>	-
<b>Investment income</b>					-	
Investment and Other Income	4	32,736	398		<b>33,134</b>	57,179
<b>Total Incoming Resources</b>		<b>1,571,126</b>	<b>398</b>	-	<b>1,571,524</b>	<b>654,153</b>
<b>RESOURCES EXPENDED</b>						
<b>Expenditure in furtherance of the charity's objects:</b>						
Promoting training and education	5	(253,507)	-	-	<b>(253,507)</b>	(233,721)
Educational meetings and courses	5	(374,865)	-	-	<b>(374,865)</b>	(396,537)
Educational meeting - subsidiary activity	3	(677,973)	-	-	<b>(677,973)</b>	-
Developing Clinical Standards		(34,816)	-	-	<b>(34,816)</b>	-
Governance costs	8	(25,391)			<b>(25,391)</b>	(27,544)
<b>Total Resources Expended</b>		<b>(1,366,552)</b>	-	-	<b>(1,366,552)</b>	<b>(657,802)</b>
<b>NET INCOMING RESOURCES / (RESOURCES EXPENDED) BEFORE TRANSFERS</b>		<b>204,574</b>	<b>398</b>	-	<b>204,972</b>	<b>(3,649)</b>
<b>GROSS TRANSFERS BETWEEN FUNDS</b>						
		-	-	-	-	-
<b>NET INCOMING RESOURCES / (RESOURCES EXPENDED) AFTER TRANSFERS</b>		<b>204,574</b>	<b>398</b>	-	<b>204,972</b>	<b>(3,649)</b>
<b>FUNDS BROUGHT FORWARD</b>		930,879	2,516	10,000	<b>943,395</b>	<b>947,044</b>
<b>FUNDS CARRIED FORWARD</b>	18	<b>1,135,453</b>	<b>2,914</b>	<b>10,000</b>	<b>1,148,367</b>	<b>943,395</b>

THE NOTES ON PAGES 15 TO 22 FORM PART OF THESE ACCOUNTS

**BRITISH ASSOCIATION FOR SEXUAL HEALTH AND HIV**

**CONSOLIDATED BALANCE SHEET AS AT 31 JULY 2009**

	NOTES	Group		Charity	
		TOTALS as at 31.7.09 £	TOTALS as at 31.7.08 £	TOTALS as at 31.7.09 £	TOTALS as at 31.7.08 £
<b>FIXED ASSETS</b>					
Tangible Assets	11	20,383	23,552	20,383	23,552
Investments	12	500,000	568,000	500,001	568,001
<b>TOTAL FIXED ASSETS</b>		<b>520,383</b>	<b>591,552</b>	<b>520,384</b>	<b>591,553</b>
<b>CURRENT ASSETS</b>					
Stock		13,659	20,537	13,659	20,537
Debtors- Amounts falling due within one year	13	146,790	142,129	364,103	114,926
Debtors – Amounts falling due after more than one year	13A			-	30,000
Bank & Cash balances		808,640	385,526	377,835	370,273
		969,089	548,192	755,597	535,736
<b>CURRENT LIABILITIES</b>					
Creditors - Amounts falling due within one year	14	(341,105)	(181,881)	(127,689)	(180,801)
<b>NET CURRENT ASSETS</b>		<b>627,984</b>	<b>366,311</b>	<b>627,908</b>	<b>354,935</b>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>					
		<b>1,148,367</b>	<b>957,863</b>	<b>1,148,292</b>	<b>946,488</b>
Creditors - Amounts falling due more than one year	15	-	(14,468)		
<b>TOTAL NET ASSETS</b>		<b>1,148,367</b>	<b>943,395</b>	<b>1,148,292</b>	<b>946,488</b>
<b>FUNDS</b>					
Unrestricted Funds	18A	1,135,453	930,879	1,135,378	933,972
Restricted Income Funds	18A	2,914	2,516	2,914	2,516
Endowment (Capital) Funds	18A	10,000	10,000	10,000	10,000
<b>TOTAL FUNDS</b>	<b>18</b>	<b>1,148,367</b>	<b>943,395</b>	<b>1,148,292</b>	<b>946,488</b>

Approved for and on behalf of the Trustees:

**Dr Rachel Challenor**

*Trustee*

Date : \_\_\_\_\_

**Dr Rajul Patel**

*Treasurer*

Date : \_\_\_\_\_

**THE NOTES ON PAGES 15 TO 22 FORM PART OF THESE ACCOUNTS**

**BRITISH ASSOCIATION FOR SEXUAL HEALTH AND HIV**

**NOTES TO THE ACCOUNTS**

For the year ended 31 July 2009

**1. ACCOUNTING POLICIES**

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the charities financial statements.

***Basis of Accounting***

The accounts have been prepared in accordance with applicable Accounting Standards and the Statement of Recommended Practice Accounting and Reporting by Charities (SORP 2005) issued in March 2005 and the Charities Act 1993. These financial statements are drawn up on the historic cost basis except that investment assets are carried at market value.

***Basis of Consolidation***

The consolidated accounts of the group incorporate the accounts of the Charity and its wholly owned subsidiary undertaking: BASHH/ISSTD 2009 Limited. The results of the subsidiary, as shown in note 3, are consolidated on line by line basis within the consolidated Statement of Financial Activities (SOFA). In accordance with paragraph 397 of the charities SORP 2005, no separate SOFA has been presented for the Charity alone.

***Fund Accounting***

Unrestricted funds are available for use at the discretion of the Trustees in furtherance of the general objectives of the Association. Designated funds represent amounts set aside at the discretion of the Trustees for specific purposes. The permanent endowment funds represent capital, and the income arising forms part of either restricted or unrestricted funds. Restricted funds are subject to specific restrictions imposed by donors.

***Incoming Resources:***

• ***Subscription Fees***

Subscriptions are payable on election, in advance for the Association's Membership Year. Subscriptions for the Membership year ended 31 July 2009, 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.

• ***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.

• ***Charitable activities***

Income from charitable activities is included in incoming resources in the period in which the relevant activity has taken place. Income from promoting training and education consists of membership subscriptions received during the year. Income from educational meetings and courses consists of registration fees and sponsorship income from Pharmaceuticals Company.

• ***Sponsorship Income***

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.

***Resources expended***

Resources expended are included in the Statement of Financial Activities on an accruals basis, inclusive of any VAT which cannot be recovered. Cost of activities in the furtherance of the objectives of the charity includes direct as well as allocated support costs. The various support costs are allocated to charitable activities where these are clearly identifiable to an activity. Where the expenditure relates to several activities then these are allocated in proportion to the income generated by the charitable activity.

***Investments***

Investments are included in the balance sheet at Market Value.

***Tangible Assets***

Books purchased in the year are written off to expenditure and not capitalised.

***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.

***Stocks***

Stocks of training materials purchased during the year are written off to expenditure. Unsold stocks of training materials produced for sale are included as an asset at the lower of cost or net realisable value.

***Fixed Assets & Depreciation***

Fixed assets are stated at cost or estimated market value at the date of receipt where assets have been donated to the charity.

Depreciation is provided to write off the cost (or market value at the date of receipt) less estimated residual values of all fixed assets over their expected useful lives at the following rates.

Website development costs - - 25% per annum straight line

**2. MEMBERSHIP AND MEMBERS' SUBSCRIPTIONS**

Membership Category	Members as at 31.07.09	Subscriptions Received 2008 – 2009	Members as at 31.07.08	Subscriptions Received 2007 – 2008
		£		£
Career & Training Grade	325	<b>60,642</b>	331	61,020
Fellow	408	<b>103,161</b>	399	99,750
Retired Fellows	44	<b>2,360</b>	43	2,320
Honorary Life Members	27	-	29	-

Clinical Assistant	104	<b>13,346</b>	108	13,830
Non-Medical Staff	190	<b>12,786</b>	160	11,100
GPs and others	26	<b>2,632</b>	-	-
<b>TOTALS</b>	<b>1,124</b>	<b>194,927</b>	<b>1,070</b>	<b>188,020</b>

UK Members	1,065		1,014	
Non-UK Members	59		56	
<b>TOTALS</b>	<b>1,124</b>		<b>1,070</b>	

### 3. INCOME FROM THE SUBSIDIARY'S ACTIVITIES

The Charity owns the entire share capital of ISSTDR/BASHH 2009 Limited. The subsidiary was specifically formed in order to host a one off international educational conference in London during 28 June to 1 July 2009. Its results for the educational event as extracted from the audited accounts are summarized below. The educational meeting having been completed, it is the intention of the trustees to dissolve the subsidiary in due course.

	Subsidiary		Charity	
	Year to 31.07.09	Period to 31.07.08	Year to 31.07.09	Year to 31.07.08
	£	£	£	£
Registration fees, Sponsorship & Other Income	<b>896,529</b>	-	<b>639,186</b>	596,974
Event Costs: subsidiary	<b>(677,973)</b>	-	-	-
Surplus Income over event expenditure	<b>218,556</b>	-	-	-
Governance costs	<b>(5,515)</b>	(750)	<b>(19,876)</b>	(26,794)
Other Income	-	-	<b>2,675</b>	-
Interest Receivable	<b>635</b>	354	<b>33,431</b>	58,747
Interest Payable (See Note Below)	<b>(932)</b>	(1,922)		
Net Income /(deficit) for the year	<b>212,744</b>	(2,318)	<b>655,416</b>	628,927
Gif Aid Donation	<b>(209,576)</b>	-	<b>209,576</b>	-
Gross Incoming resources: Charity	-	-	<b>864,992</b>	628,927
Costs of Charitable Activities	-	-	<b>(663,188)</b>	(630,258)
	-	-	-	-
<b>Retained Income</b>	<b>3,168</b>	(2,318)	<b>201,804</b>	(1,331)

The interest payable by the subsidiary to the parent charity has been accounted for on receivable basis by the charity. The subsidiary has accounted the total interest payable in the year of the event. In order to facilitate consolidation the subsidiary interest figures has been restated on a payable basis.

### 4. INVESTMENT AND OTHER INCOME

	Group		Charity	
	Year to 31.7.09	Year to 31.7.08	Year to 31.7.09	Year to 31.7.08
	£	£	£	£
Bank Interest Receivable	<b>33,134</b>	57,179	<b>33,431</b>	58,747

## 5. EXPENDITURE INCURRED IN FURTHERANCE OF THE CHARITY'S OBJECTS

	Charitable Activities	Support Costs (note 7)	Total 2009	Total 2008
	£	£	£	£
Promoting training and education (see below)	116,096	137,411	253,507	233,721
Educational meetings and courses (Note 6 & 7)	277,847	97,018	374,865	396,537
<b>TOTALS</b>	<b>393,943</b>	<b>234,429</b>	<b>628,372</b>	<b>630,258</b>

“Promoting training and education” costs of £116,096 above consist of the costs for the publication of two journals sent to Members of BASHH £112,766, the journals being the International Journal of STD and AIDS, and Sexually Transmitted Infections; and expenditure on cataloguing the BASHH Library £3,000, and purchasing Library books £330.

## 6. EXPENDITURE INCURRED IN RESPECT OF EDUCATIONAL MEETINGS & COURSES.

CHARITABLE ACTIVITIES		Year to 31.7.09 £	Year to 31.7.08 £
<b>Special Interest Groups and Branches</b>			
SIG General Expenditure		28,669	22,563
SIG Conference Expenditure		164,298	177,974
STI Foundation Course		35,227	52,241
Educational Meetings		11,474	(4,049)
	SIGs sub-total	239,668	248,729
Regional Branches' General Expenditure		1,698	2,456
Branch Meetings		36,481	39,027
	Regions sub-total	38,179	41,483
<b>Total Special Interest Groups and Branches Expenditure</b>	Note 17	<b>277,847</b>	<b>290,212</b>

## 7. SUPPORT COSTS

	Promoting Training & Education £	Educational Meetings & Courses £
Printing & Postage	2,465	4,339
RSM Management fees & room hire	104,798	23,260
Travel & Subsistence	7,033	6,791
General administration costs	4,550	20,352
Media & Public relations	18,565	42,276
Total this Year 2008-2009	<b>137,411</b>	97,018
Total previous Year -2007-2008	<b>115,145</b>	106,325
<b>Total Investment Income</b>	<b>33,134</b>	57,179
	<b>33,431</b>	58,747

## 8. GOVERNANCE COSTS

	Group		Charity	
	Year to 31.07.09	Year to 31.07.08	Year to 31.07.09	Year to 31.07.08
	£	£	£	£
BASHH Board Meetings	5,742	5,360	5,742	5,360
BASHH Trustee Meetings	269	1,615	269	1,615
Audit fees	11,770	9,620	8,020	9,620
Other professional fees	7,610	10,949	5,845	10,199
<b>TOTALS</b>	<b>25,391</b>	<b>27,544</b>	<b>19,876</b>	<b>26,794</b>

## 9. REMUNERATION OF TRUSTEES

The Trustees were not remunerated for any services they provided to the Association, or on its behalf.

## 10. PAYMENTS MADE TO TRUSTEES

	Year to 31.7.09	Year to 31.7.08
	£	£
Travel Expenses and Subsistence; including expenses incurred whilst attending meetings. Payments were made to 6 trustees ; (2008 ; 6 Trustees)	7,013	9,130

## 11. TANGIBLE FIXED ASSETS

Cost or Valuation	Website Development Costs	Charity Total	Group Total
	£	£	£
at 1 <sup>st</sup> August 2008	23,552	23,552	23,552
Additions	3,553	3,553	3,553
At 31 <sup>st</sup> July 2009	27,105	27,105	27,105

Depreciation			
at 1 <sup>st</sup> August 2008	-	-	-
Charge for the year	6,722	6,722	6,722
At 31 <sup>st</sup> July 2009	6,722	6,722	6,722

Net Book Value			
At 31 <sup>st</sup> July 2009	20,383	20,383	20,383
At 31 <sup>st</sup> July 2008	23,552	23,552	23,552

## 12. FIXED ASSET INVESTMENTS

Funds held as investments at 31 July 2009 were as below:

	Group		Charity	
	Year to 31.7.09	Year to 31.7.08	Year to 31.7.09	Year to 31.7.08
	£	£	£	£
Bank Holdings:				
Allied Irish Bank : Term Deposits	500,000	568,000	500,000	568,000
Shares:				
Investment in subsidiary - ISSTDR/BASHH 2009 Limited ( See note below)			1	1
<b>Total Fixed Assets Investments</b>	<b>500,000</b>	<b>568,000</b>	<b>500,001</b>	<b>568,001</b>
Analysed as:				
BASHH Reserve Fund : Unrestricted : Term Deposits	490,000	558,000	490,000	558,000
R.S. Morton Lecture Fund : Endowed : Term Deposits	10,000	10,000	10,000	10,000
Cost of share holding in ISSTDR /BASHH 2009 Limited ( See note below)			1	1
<b>Total Fixed Assets Investments</b>	<b>500,000</b>	<b>568,000</b>	<b>500,001</b>	<b>568,001</b>



The Charity owns the entire share capital of ISSTDR/BASHH 2009 Limited. The subsidiary was specifically formed in order to host a one off international educational conference in London during Spring 2009. Its results for the educational event as extracted from the audited accounts are summarised in Note 3.

### 13. DEBTORS / PREPAYMENTS

	Group		Charity	
	Year to 31.07.09	Year to 31.07.08	Year to 31.07.09	Year to 31.07.08
	£	£	£	£
Fixed Term Investment : Interest due for July 2009	3,218	2,848	3,218	2,848
ISSTDR/BASHH 2009 Ltd : Interest & Capital	-	-	33,503	2,571
ISSTDR/BASHH 2009 Ltd : Gift Aid Donation (see note 3)	-	-	209,576	-
Sponsorship, Registration Fees, and amounts due from Joint meetings	80,226	90,006	80,226	90,006
Pre-Paid RSM Contract fees	31,809	-	31,809	-
Meeting and conference prepayments	4,029	48,158	4,029	18,521
Trade debtors	12,545	-	-	-
Other debtors	1,291	980	1,291	980
VAT recoverable	13,672	137	451	-
<b>Totals</b>	<b>146,790</b>	<b>142,129</b>	<b>364,103</b>	<b>114,926</b>

#### 13A. DEBTORS: Amounts falling due within one year

As described elsewhere in the financial statements BASHH formed a subsidiary company, ISSTDR/BASHH 2009 Limited to host an educational conference in London during 2009. BASHH holds the one issued share in the company. BASHH provided funds to the above company in order to facilitate organisation of the conference prior to any registration fees or sponsorship support being available for this conference in 2009.

A loan of £30,000 was made to this company, at an interest rate of 1% above the base rate of National Westminster Bank. The loan was secured by a Debenture over the assets of the Company. The loan together with accrued interest was repaid to BASHH subsequent to the year end.

#### 14. CREDITORS: Amounts falling due within one year

	Group		Charity	
	Year to 31.07.09	Year to 31.07.08	Year to 31.07.09	Year to 31.07.08
	£	£	£	£
Journal Publishers	32,214	66,350	32,214	66,350
Sponsorship and Registration Fees in advance	60,337	40,317	60,337	40,317
Meeting and Conference Expenses	4,229	31,556	4,229	31,556
Management and Administration	-	2,232	-	2,232
Payment due to RSM : Management contract	-	8,257	-	8,257
Bank Overdraft	-	18,362	-	18,362
Amounts due to MedFASH re Clinical Standards	17,408	-	17,408	-
Loan from ISSTDR	13,318	-	-	-
Trade Creditors	194,735	-	-	-
Sundry Creditors	2,351	-	1,301	-
Professional Fees	16,513	13,105	12,200	12,025
VAT	-	1,702	-	1,702
<b>Totals</b>	<b>341,105</b>	<b>181,881</b>	<b>127,689</b>	<b>180,801</b>

#### 15. CREDITORS: Amounts falling due more than one year

	Group		Charity	
	Year to 31.07.09	Year to 31.07.08	Year to 31.07.09	Year to 31.07.08
	£	£	£	£
Loan from ISSTDR	-	14,468	-	-

<b>Totals</b>	-	14,468	-	-
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## 16. GENERAL INCOME

	Group		Charity	
	2009 £	2008 £	2009 £	2008 £
<b>General Income and non-specific donations</b>	<b>2,675</b>	-	<b>2,675</b>	-

## 17. Summary of Income & Expenditure arising from Educational Meetings & Courses.

	Incom e 2,009 £	Expend . 2,009 £	Result 2,009 £	Incom e 2,008 £	Expend . 2,008 £	Result 2,008 £
Note : Deficits appear in parentheses ( )						
<b>Special Interest Groups</b>						
Educational Meetings	12,325	11,474	851	21,175	(4,049)	25,224
Joint Meetings	(1,000)	-	(1,000)			
	105,49					
BASHH Course in STI & HIV	8	71,800	33,698	88,530	64,873	23,657
	121,62			109,18		
STIF Course	0	35,227	86,393	4	52,241	56,943
Spring Meetings	-	290	(290)	90	(267)	357
Colposcopy SIG	-	-	-	-	-	-
HIV SIG	(7,600)	270	(7,870)	36,127	31,474	4,653
Herpes Simplex SIG	-	-	-	-	-	-
British Co-Operative Clinical Group	-	420	(420)	-	380	(380)
HPV SIG	-	808	(808)	-	396	(396)
Bacterial	31,181	24,480	6,700	16,423	11,268	5,155
Sexual Dysfunction Group	(990)	779	(1,769)	14,083	3,364	10,719
Adolescent Special Interest Group	-	196	(196)	-	438	(438)
Clinical Effectiveness Group	-	1,674	(1,674)	-	1,958	(1,958)
NCCG Group	41,472	31,884	9,589	32,950	35,106	(2,156)
National Audit Group	-	4,080	(4,080)	-	5,863	(5,863)
Doctors in Training	14,329	8,789	5,540	13,060	12,250	810
			(10,251)			
Web Team	-	10,251	)	-	2,855	(2,855)
Media External Communications Grp	-	-	-	-	569	(569)
Nurses / Health Advisors	-	-	-	-	(60)	60
BASHH IT Group	-	425	(425)	-	3,874	(3,874)
HIV Medicine	64,960	32,321	32,639	-	55	(55)
Mentoring Committee	-	402	(402)			
<b>Special Interest Groups sub-total</b>	<b>381,79</b>	<b>5 235,570</b>	<b>146,225</b>	<b>331,62</b>	<b>2 222,588</b>	<b>109,03</b>

<b>Joint Meetings</b>						
Faculty of Family Planning & Reproductive Health Care : BAD, EADV, St John's & BASHH	2,507	(206)	2,713	31,235	18,218	13,017
London meeting : 2005	6,180	-	6,180	-	2,152	(2,152)
BHIVA/BASHH/BIS	-	2,612	-	-	319	(319)
BASHH/ASTDA: New York :May 08	-	969	(3,581)	787	5,451	(4,664)
ISSTD/BASHH : July 2009		722	(722)	-	-	-
<b>Joint Meetings – sub total</b>	<b>8,687</b>	<b>4,097</b>	<b>4,590</b>	<b>32,022</b>	<b>26,140</b>	<b>5,882</b>

<b>Regional Branches</b>						
East Anglia	-	-	-	529	752	(223)
Ireland	-	-	-	-	-	-
Mersey	3,000	387	2,613	-	-	-
Thames North East	1,375	2,895	(1,520)	-	-	-
Thames North West	250	426	(176)	-	-	-

Thames South East	-	-	-	-	-	-
Thames South West	-	-	-	-	-	-
North West	-	75	(75)	1,702	1,647	55
Northern	160	193	(33)	100	181	(81)
Oxford	-	-	-	266	249	17
Scotland	7,605	8,004	(399)	8,380	6,917	1,463
South West	4,417	4,216	201	2,017	1,646	371
Trent	12,989	7,789	5,200	4,186	4,196	(10)
Wales	3,043	263	2,780	3,601	2,540	1,061
Wessex	5,723	5,652	71	6,677	6,874	(197)
West Midlands	5,203	2,896	2,307	12,049	9,597	2,452
Yorkshire	10,012	5,384	4,628	5,803	6,885	(1,082)
<b>Regional Branches : sub-total</b>	<b>53,777</b>	<b>38,180</b>	<b>15,597</b>	<b>45,310</b>	<b>41,484</b>	<b>3,826</b>
	<b>444,25</b>			<b>408,95</b>		<b>118,74</b>
<b>TOTALS</b>	<b>9</b>	<b>277,847</b>	<b>166,412</b>	<b>4</b>	<b>290,212</b>	<b>2</b>

## 18. NET ASSETS OF THE FUNDS OF CHARITY AND GROUP

The Charity's net assets belong to the various funds as follows:

<b>Funds</b>	<b>Fixed Assets</b>	<b>Investments</b>	<b>Net Current Assets</b>	<b>Long Term Liabilities</b>	<b>Fund Balances</b>
	£	£	£	£	£
Endowment funds		10,000			<b>10,000</b>
Restricted funds			2,914		<b>2,914</b>
Unrestricted funds	20,383	490,001	624,994	-	<b>1,135,378</b>
<b>Charity</b>	20,383	500,001	627,908	-	<b>1,148,292</b>
Subsidiary's Reserves	-	(1)	76	-	<b>75</b>
<b>Group</b>	20,383	500,000	627,984	-	<b>1,148,367</b>

## 18A. MOVEMENTS IN THE YEAR: ENDOWMENT, RESTRICTED AND UNRESTRICTED FUNDS

<b>Funds</b>	<b>Balance at 01-Aug-08</b>	<b>Incoming Resources</b>	<b>Amounts Expended</b>	<b>Transfers</b>	<b>Balance at 31-Jul-09</b>
	£	£	£	£	£
<b>Endowment Funds</b>					
Capital - Robert S Morton Lecture Fund	10,000	-	-	-	<b>10,000</b>
<b>Restricted Funds</b>					
The Robert S Morton Lecture Fund	2,516	398			<b>2,914</b>
					-
<b>Unrestricted Funds</b>					
	933,972	674,894	(683,064)	209,576	<b>1,135,378</b>
<b>Charity</b>	946,488	675,292	(683,064)	209,576	<b>1,148,292</b>
Subsidiary	(3,093)	897,164	(684,420)	(209,576)	<b>75</b>
<b>Group</b>	943,395	1,572,456	(1,367,484)	-	<b>1,148,367</b>

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.

#### **19. ONGOING CONTRACTUAL OBLIGATIONS**

The Association has a contract with the Royal Society of Medicine for administrative support. The cost to BASHH for this service with effect from 1 October 2008 is £11,883 per month. The Association has agreed to contract with RSM for preferential membership subscription rates for *the International Journal of STD and AIDS* and with the BMJ Publishing group for subscriptions to *Sexually Transmitted Infections*. The amount payable for the journals by BASHH is based on the number of members receiving the respective journals. The total costs for this financial year are stated as Journal Costs in note 5 above.



## Committees Associated with BASHH

### **Speciality Advisory Committee**

The SAC has met formally on three occasions during the last year but has also held a number of important sub committee meetings. We have mainly been concerned with developing the curriculum so as to make a submission in late 2009 to the PMETB. This will be the first opportunity the SAC has had to extend and develop the GUM curriculum in the last 3 years and represents an important opportunity for the speciality to make key changes. BASHH and the FRSH have worked with the SAC to help develop the curriculum in four key areas, HIV care, management and leadership, public health and contraception.

The SAC have also been working closely with the college to develop workplace based assessments, the role out of the e-portfolio and developing national job specifications ready for national recruitment programmes.

The SAC remains busy and I am indebted to its nominated and co-opted members as well as the college staff for their efforts in helping to achieve its work schedules.

**Dr Raj Patel**



### **Joint Speciality Committee (JSC) for Genitourinary Medicine, Royal**

**The committee meets twice a year. Issues discussed in the last year include:**

Relicensing and specialist recertification, where the speciality is represented by Mark Fitzgerald and Angela Robinson on the College's recertification group. The engagement of the speciality in developing and advising on specialty specific assessment is essential. There is a need to ensure that BASHH national audits consider topics that could be useful tools for revalidation, at a clinician level.

**NPSA subspecialty patient safety advisers:**

Dr Daniels as Secretary of the JSC and a BASHH representative on the Committee has agreed to become the specialty contact for the NPSA to whom they could refer serious incidents for speedy clinical advice.

**College conference and lecturers 2010**

BASHH / JSC have been given a college conference in June 2010. Dr Foley will take the lead on behalf of the speciality.

**Map of Medicine**

Under the leadership of the secretary GUM, has done pathways for Gonorrhoea and Herpes. There was a general feeling that GUM should take the lead in the development of any further pathways relating to STIs.

**Standards in STI services:**

The committee and college have been involved in the working group developing STI care standards.

**New speciality of sexual and reproductive health:**

The JSC has been working with BASHH and the RCOG to develop the STI component of the curriculum for the new speciality.

**Membership - Joint Specialty Committee for Genito-Urinary Medicine**

<b>RCP</b>		
1	Dr Jackie Sherrard	
2	Mrs Barbara Byer	Patient and Carer Network
3	Dr Chris Carne	
4	Dr Raj Patel	SAC
5	Dr Vincent Lee	New Consultants rep
6	Mr Roy Latham	Patient and Carer Network
7	Dr Mark Pakianathan	Workforce
<b>BRITISH ASSOCIATION FOR SEXUAL HEALTH AND HIV</b>		
8	Dr Imtyaz Ahmed	President
9	Dr David Daniels	
10	Dr Sarah Schoeman (alt) Dr Georgina Morris	Societies' Trainee representative
<b>COLLEGES</b>		
11	vacancy	Scottish Colleges
12	Dr Liz Foley	RCOG
<b>RCP ex officio</b>		
13	Professor Ian Gilmore	President
14	Dr Rodney Burnham	Registrar

**Dr Jackie Sherrard**



## **BMA Dermatology & Venereology Sub-Committee**

BASHH is represented on this committee by me and Colm O'Mahony. This committee is a vibrant link between dermatology and genitourinary medicine clinicians and provides to the British Medical Association immediate feedback and responses on issues both related to our specialties and to board and medical professions. Particular issues which have been discussed during the year include the accuracy and timeliness of diagnosis of skin cancer by skin biopsy; the use of tendering and contestability to increase the plurality of providers of sexual health services, and the governance challenges and dangers which this creates; the importance of confidentiality for patients attending sexual health services, both in terms of their medical records and the use of data for assuring payment; and underpayment by results between different primary care trusts and providers.

These issues have been actively debated and raised with the British Medical Association through the CCSC, who have taken appropriate action including motions tabled at the annual CCSC conference.

**Dr Simon Barton**



## **The British Federation Against Sexually Transmitted Infections**

The BFSTI met on 2 occasions during this 12 month period. Among the issues discussed and debated were:

The Sexual Health Independent Advisory Group/MedFASH review of the National Sexual Health Strategy (presentation by Ruth Lowbury); the funding increase for contraceptive services and the Teenage Pregnancy IAG report (2008); the decision on the choice of HPV vaccine. The BFSTI followed this discussion with a letter to the Department of Health questioning their decision regarding the choice of HPV vaccine.

In 2009, the group was addressed by a representative of the Youth Parliament with regard to the Parliament's sexual health strategy and there were discussions regarding smoking and its relationship with cervical cancer (presentation by Peter Greenhouse).

In 2008 Dr Peter Greenhouse, Consultant GUM physician from Bristol became the Secretary of the BFSTI.

**Dr Patrick French**



## UEMS

- **New faces** - my term of office expires at the end of the year and my successor will be Dr Simon Barton. I shall demit also as Treasurer and my successor will be Prof Veli-Matti Kahari of Finland. Prof Harald Gollnick of Magdeburg demitted as President in Berlin, in October and is replaced by Prof Magdalena Czarneck-Operacz of Poznan.
- **Board examination** – the third examination took place in Frankfurt, in August; there were six candidates and all passed. A British GU physician could not sit the examination successfully, as two thirds of the exam' is on dermatology. A Council for European Medical Assessments (CESMA) has been established to promote Board examinations but, because of the principle of subsidiary, cannot be supported by the UEMS Management Council. CESMA is negotiating with the Education Commission in Brussels with a long term view to recognising these examinations.
- **Venereology subcommittee** – with the new President from Eastern Europe, where Venereology is more important than in the west, it has been decided to establish a Venereology subcommittee.
- **Assessments of training centres** – a UEMS document exists outlining policy on training centre visits. None have happened to date and there are few volunteers as the centre to be visited has to pay all the expenses of the visiting team.
- **Website** – a new section website is now up and running – [www.uems-ebdv.org](http://www.uems-ebdv.org)
- **European management guidelines** - the UEMS, along with the European Foundation for Dermatology (EDF), approve guidelines on the whole field of dermatovenereology.
- I wish my successor good luck

**Dr James Bingham**





## European Academy of Dermato-Venereology (EADV)

EADV is a non profit making organisation with its registration in Lugano, Switzerland. The structure of the organisation has now been regularised and the accounts for year 2007 and 2008 agreed.

Until July this year, there were two UK board members, one from dermatology and one from venereology. However because the membership fell below 100 there is only now one representative which is from venereology. It is imperative that we should increase the ordinary membership (standing at 98) in order to secure both a position for dermatology and one for venereology at next year's election in July.

Professor Andreas Katsambas as EADV President has overseen the running of two successful conferences in Bucharest and Berlin 2009. There have been excellent symposia, workshops and courses in STIs albeit relatively few. Two 'venereology' talks at Bucharest were highlighted in the top ten ranked presentations for the whole meeting. Professor Katsambas was asked by 'IUSTI Europe' to nominate an EADV Board Member for the IUSTI guideline committee which has now been agreed. He is supportive of raising the venereology profile but challenges remain to increase the educational content for venereology physicians in meetings and to support best practice in venereology across Europe. Dr Colm O'Mahony now chairs the PR and media committee, Dr Michael Waugh the Ethics committee, Dr Angela Robinson remains a member of the finance committee as well as the EADV Board representative. Future meetings in 2010 will be Cavtat, Croatia and Gottenburg, Sweden.

**Dr Angela Robinson**

**BRITISH ASSOCIATION FOR SEXUAL HEALTH AND HIV**  
**ELECTED MEMBERS OF THE BOARD FOR THE YEAR ENDED 31 JULY**  
**2009**

<b>Position</b>	<b>August 2008 – July 2009</b>	<b>August 2007 – July 2008</b>
President	Dr Imtyaz Ahmed-Jusuf	Dr Imtyaz Ahmed-Jusuf
Vice President	Dr Keith Radcliffe	Dr Keith Radcliffe
General Secretary	Dr Jan Clarke	Dr Jan Clarke
Honorary Treasurer	Dr Raj Patel	Dr Raj Patel
Conference and Communications Secretary	Dr Elizabeth Foley	Dr Janet Wilson
Clinical Governance Committee - Chair	Dr Mike Abbott	Dr Mike Abbott
Education Committee - Chair	Dr Karen Rogstad	Dr Karen Rogstad
Immediate Past President	Dr Simon Barton	Dr Simon Barton
Representative of Doctors- in-Training in GUM	Dr Katherine Coyne	Dr Katherine Coyne
HA Rep - Board	None (Mr Martin Murchie seconded)	Mr Jamie Hardie
Representative of Nurses	Ms Jane Bickford-Smith	Ms Vanessa Griffiths
SAS Representative	Dr Helen Mullan	Dr Helen Mullan
Fellow	Dr Richard Lau	Dr Claudia Estcourt
Fellow	Dr Emile Morgan	Dr Emile Morgan
Fellow	Professor Jonathan Ross	Professor Jonathan Ross
Fellow	Dr Sris Allen	Dr Alan Tang
Fellow	Dr Joseph Arumainayagam	Dr Gary Brook
Fellow	Dr Fiona Boag (retired March 09)	Dr Fiona Boag



**BASHH Education Committee 2009**

Immy Ahmed	BASHH President
Gill Bell	Health Advisor Representative
James Bingham	
Jan Clarke	BASHH Secretary
Jyoti Dhar	STIF Chair
Wallace Dinsmore	Journal Editor (Int Journal of STI & AIDS)
Sarah Edwards	Colposcopy and Genital Dermatoses SIG Chair
Claudia Estcourt	Academic Representative
Liz Foley	BASHH STI/HIV Course Director
David Goldmeier	Sexual Dysfunction SIG Chair
John Green	HSV SIG Chair
Vanessa Griffiths	Nurse Representative (Retiring)
Cathy Ison	Bacterial SIG Chair
Vincent Lee	EC secretary
Rob Miller	Journal Editor (STI)
Emile Morgan (Retiring)	Colposcopy and Genital Dermatoses SIG Chair
Adrian Palfreeman	HIV SIG Chair
Raj Patel	BASHH Treasurer; HSV SIG Chair
Keith Radcliffe	BASHH Vice President
Colin Roberts	Nurse Representative
Angela Robinson	Adolescent SIG Chair
Karen Rogstad	EC Chair
John Saunders	Doctors in Training Representative
Chris Sonnex	HPV SIG Chair
Caroline Thng	Doctors in Training Representative (Retiring)
Nick Theobald	SAS Representative; EC IT Representative
Helen Ward	Journal Editor (STI)
Michael Waugh	BASHH Librarian
Janet Wilson	BASHH Communication and Conference secretary



## Chairs of Special Interest Groups

<i>Colposcopy SIG</i>	Dr Sarah Edwards
<i>HIV Sig (Incl. Masterclass)</i>	Dr Adrian Palfreeman
<i>Herpes Simplex SIG</i>	Prof George Kinghorn
<i>British Co-operative Clinical Group</i>	Dr Raymond Maw
<i>HPV SIG</i>	Dr Chris Sonnex
<i>Bacterial SIG</i>	Dr Cathy Ison
<i>Sexual Dysfunction Group</i>	Dr David Goldmeier
<i>Adolescent Special Interest Group</i>	Dr Angela Robinson
<i>Clinical Effectiveness Group</i>	Dr Keith Radcliffe
<i>NCCG Group</i>	Dr John Lee
<i>National Audit Group</i>	Dr Chris Carne
<i>Doctors in Training</i>	Dr Katherine Coyne
<i>Web Team</i>	Dr Ade Apoola
<i>Media External Communications Group</i>	Dr Mark Pakianathan
<i>Nurses/Health Advisors</i>	Jane Bickford
<i>Undergraduate Education</i>	Dr Claudia Escourt
<i>Journal Editors</i>	Prof Wallace Dinsmore Prof Jackie Cassell
<i>UEMS Representatives</i>	Dr James Bingham
<i>EADV Representative</i>	Dr Angela Robinson



## BASHH Clinical Governance Members 2008/9

Chairman	Dr Mike Abbott
BASHH Vice-President	Dr Keith Radcliffe
Secretary	Dr Elizabeth Carlin
SAS Representative	Dr John Lee
Nurse	Ms Jean Beard
Health Advisor Representative	Ms Ceri Evans

### Regions Branch

### Chair

East Anglia	Dr Susie Forster
N. Ireland	Dr Carol Emerson
Mersey	Dr Debashis Mandel
North East Thames	Dr Celia Skinner
North West Thames	Dr Nigel O'Farrell
North West	Dr Wafaa Wasef
Northern	Conrad White
Oxford	Dr Patricia Williams
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South East Thames	Dr Carry S. Peters
South West	Dr Andrew De Burgh-Thomas
South West Thames	Dr Jillian Pritchard
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Wales	Dr Olwen Williams
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Yorkshire	Dr Usha Kuchimanchi



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**Appendix 5**

## **BASHH Honorary Life Fellows**

Baroness Gould of Potternewton  
Baron Fowler of Sutton Coldfield  
Sir Donald Acheson  
Professor MW Adler  
Dr O Arya  
Dr D Barlow  
Dr J Barlow  
Dr J Barrow  
Dr R Basu Roy  
Dr JS Bingham  
Dr S Chandramani  
Dr E Curless  
Professor LM Drusin  
Dr BA Evans  
Dr JRW Harris  
Professor KK Holmes  
Dr A Lawrence  
Professor A Luger  
Dr A Macmillan  
Dr AZ Meheus  
Dr John K Oates (Deceased)  
Professor D Petzoldt  
Professor P Piot  
Dr E Rees  
Dr P Rodin (Deceased)  
Dr G Ridgway  
Dr CBS Schofield  
Dr M Shamanesh  
Dr A Stary  
Professor E Stolze  
Professor D Taylor-Robinson  
Dr RNT Thin  
Dr WI Van Der Meijden  
Professor J Wallin  
Dr MA Waugh