

BASHH



BASHH

(A Company Limited by Guarantee)

Report and Financial Statements

Year ended: 31 July 2015

Charity no: 1148196

Company no: 07863350

British Association for Sexual Health and HIV

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

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DRAFT

Legal and Administrative

Trustees and Directors:

President	Dr Janette Clarke	
Vice President	Dr Elizabeth Carlin	
General secretary	Dr Elizabeth Foley	
Treasurer	Prof. Jonathan Ross	
Conference and Communications Secretary	Dr Daniel Richardson	
Chair - Education committee	Dr Jackie Sherrard	
Chair - Clinical Governance Committee	Dr Alan Tang	
Fellow to the board	Dr Benjamin Goorney	
Fellow to the board	Dr Leena Sathai	
Fellow to the board	Dr Nneka Nwokolo	
Fellow to the board	Dr John McSorley	
Fellow to the board	Dr Jillian Pritchard	
Fellow to the board	Dr Liat Sarnier	
Doctors in Training Rep	Dr Anna Hartley	
Health Adviser rep – board	Ms Ceri Evans	
Nurse Rep. – Board	Mrs Kate Day	
SAS Rep – board	Dr John Lee	
Lay trustee	Mr David Roberts-Jones	
Immediate past President	Dr Janet Wilson	
	Dr Sris Allan	(resigned 09 Jan 2015)
	Dr Alan McOwan	(resigned 09 Jan 2015)
	Dr Cecilia Priestley	(resigned 09 Jan 2015)
	Dr Emily Lord	(resigned 09 Jan 2015)
	Mr Colin Roberts	(resigned 09 Jan 2015)

Registered Office:

Chester House, 68 Chestergate
Macclesfield, Cheshire SK11 6DY

Auditors:

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

Bankers:

Lloyds TSB
PO Box 1000 Andover BX1 1LT

Solicitors

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

Investment Managers:

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

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

BRITISH ASSOCIATION FOR SEXUAL HEALTH AND HIV

Report of the Trustees for the year ended 31 July 2015

The trustees, who are also directors of the charity for the purposes of the Companies Act, submit their annual report and the audited financial statements for the year end 31 July 2015. The trustees have adopted the provisions of the Statement of recommended Practice (SORP) "Accounting and Reporting by Charities" issued in 2005 in preparing the annual report and financial statements of the charity.

Introduction

We are pleased to submit the BASHH annual report for the year ended July 2015. The Association's activities and achievements continue within a well-developed organisational framework.

BASHH has been functioning in a highly politicised external healthcare environment this year, with a UK wide general election, a devolution vote in Scotland and a strategic review of sexual health services in Wales. This second year of implementation of the Health and Social Care Act in England has resulted in changes in commissioning for sexual health, reproductive health and HIV services in England with threats to service delivery and quality evident during early implementation of novel service specifications in some areas. BASHH has intervened to alert central government and local government representative groups such as the Local Government Association when patient experience or audit data indicated risk to safe and effective care. BASHH continues to survey lead clinicians and senior officers had a very busy engagement programme with ministers, shadow ministers and influential parliamentarians to represent concerns about current and future service needs and quality standards.

BASHH has developed cordial working relations with national representative bodies in public health and local government and we hope to take forward joint educational events to improve our understanding of this new working environment. We have enhanced our collaborative work with the Royal College of Physicians in areas of mutual interest, with joint representation to parliamentarians at Party conferences in autumn 2014. We have modernised and expanded our media group with enhanced social media and website activity.

An appendix to the BASHH/MEDFASH Standards for the Management of Sexually Transmitted Infections to promote practice standards for outreach services is under development from our Clinical Standards Unit with launch date expected in March 2016.

We have had continuing input into a number of important documents and consultations this year, especially around HPV vaccine for boys and MSM, the accountability mechanisms available to sexual health service commissioners and on the future of medical training. A feasibility study of a national HIV-STI audit programme as part of the Health Quality Improvement Programme led by BASHH in conjunction with BHIVA and MEDFASH was commenced this year. We were invited to contribute to the Chief Medical Officer's campaign on Antibiotic guardianship and raised awareness of the need to regulate antibiotic prescribing for gonorrhoea via online pharmacies.

Guidance on confidentiality in sexual health, in the new commissioning environment has yet to be formally defined in the Code of Practice for health care records. BASHH, working with sister professional

organisations and patient advocacy groups persuaded the Department of Health to issue interim guidance pending a binding legal framework.

Our training modules continue to expand and develop. We had a very successful Spring meeting in Glasgow in June 2015 along with many other high quality educational events across the UK and throughout the year.

We have developed a liaison group of senior officers of BASHH and FRSH to discuss matters of common concern, especially in regard to training requirements for integrated sexual health services.

In summary, BASHH is continuing to deliver excellent educational and scientific meetings, striving to influence decision makers in local and national government to promote excellence in public health and service standards and contributing to expert groups in Sexual Health and HIV. This spectrum of activity could not be delivered without the energetic and passionate involvement of our members, Officers and Trustees, to whom our thanks are again due.

Structure, Governance and Management

Statement of Trustees Responsibilities

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

Select suitable accounting policies and then apply them consistently;

- make judgments and estimates that are reasonable and prudent
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business
- state whether applicable accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements

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

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

Organisational Structure

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

A governing Board of at least 12 elected trustees governs the Association, the immediate past President and a lay trustee appointed by the elected trustees. The trustees are also directors of the charitable company. Currently there are 19 trustees. The voting membership of the Board consists of: -

- The President who is the Chairperson of the Board
- Six Board Officers – Vice President, General Secretary, Honorary Treasurer, Conference and Communication Secretary, Chair of the Education Committee, Chair of the Clinical Governance Committee
- The immediate past President of BASHH
- Six Fellows of BASHH
- One Specialty and Associate Specialist Member of BASHH
- One Doctor in training Member of BASHH
- One Nurse Member of BASHH
- One Health Adviser Member of BASHH
- One Lay trustee

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

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

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

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

Governing document

The governing document for BASHH is the memorandum and Articles of the Association, which was signed on the 30 September 2011 by the first trustees of the incorporated organisation. Since then further resolutions have been agreed at the AGM on 14 March 2014, the AGM on 9th January 2015 and at the OGM on 13 March 2015. It provides details of the objects; powers; benefits to members and trustee; membership and trustee arrangements; general meeting conditions; notices, resolutions and voting provisions; the requirement for records and accounts; and the particulars of indemnity, limited liability, guarantee and dissolution of the Association.

Recruitment and Appointment of the BASHH Board

The BASHH Board is recruited from the BASHH members and fellows of BASHH, except for the immediate past President who is automatically a member of the Board and the lay trustee. The lay trustee is recruited and appointed from outside the Association by the elected trustees, using an external advertisement process followed by informal interview of selected individuals. For all the other Board positions BASHH members are individually informed about the posts that are available and nominations are sought.

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

This year, following the changes to the association's articles, the election process for contested posts candidates for Trustee positions and members of the Clinical Governance Committee was able to revert to voting prior to the Annual General Meeting. This was conducted by the Electoral Reform Service (ERS) using a secure online voting website, as well as paper voting where necessary.

Trustee Appointment, Induction and Training

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

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

Risk Management

The Finance and Governance Committee of BASHH has continued its regular programme of reviewing the Association's activities and ensuring that BASHH has appropriate risk management strategies in place.

A new risk evaluation and reporting system, including mitigating actions, has become operational over the past year and this will be reviewed on a regular basis. In addition, a risk assessment with mitigation is required for all new projects prior to consideration by the Association and due regard for risk has been embedded in all groups and committees in the organisation.

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

Support Services

A variety of support services are in place to support the work of the association and its administration. Since 1 February 2013 central support services (secretariat, membership and financial) have been provided by Kingston Smith Association Management (KSAM) who are the largest association management company in the UK. This has allowed BASHH to streamline support services to facilitate a more comprehensive and integrated administrative structure including administrative support of the BASHH Annual Conference, the SAS annual conference and elements of the Sexually Transmitted Foundation (STIF) course.

Membership Review

The membership services have been administered by KSAM since 1 February 2013.

Membership recruitment remains strong and there have been new applications for membership into both medical and the non-medical categories, reflecting our multidisciplinary ethos, as well as a number of resignations and deaths. The total number of members on 31 July 2015 was 972, compared with 995 in July 2014.

Over this year BASHH has worked to ensure that the membership categories are simplified, that members are categorised according to their membership correctly and that membership details are kept up to date. In future, new members will be able to join using an online application form and membership cards will be issued to all members. This will simplify registration at BASHH events. Most members prefer to be communicated with electronically although a small proportion still have communication sent by post.

Financial review

BASHH had a stable financial year and our investment portfolio contributed to an overall positive financial balance. The results for the year are stated on page 19 of these statements. There was a net surplus during the year of £58,781 compared to £117,801 the year before. The primary reason for this reduction is due to the spring meeting which being a joint meeting in the previous year produced a larger surplus.

The association increased its investment in administrative support for the delivery of its educational courses and conferences to ensure that these remain of high quality and attractive to attendees.

Principle funding sources

Income for the charity comes from three principle sources – membership subscriptions, educational meetings and investment income. In view of the charity's stable financial position, the annual membership

fee was not increased in 2015. Our annual scientific conference was held in Glasgow and was financially successful. Other educational meetings were run throughout the year led by the association's special interest groups and their respective revenue and costs are shown in these financial statements.

Reserves policy

The Trustees reviewed the reserves policy and renewed its intention to maintain the level of reserves at an amount sufficient for the Association to function for at least two years in the event that it does not receive any further income. This will mitigate the financial risk associated with running large conferences and ensure that BASHH's existing contractual obligations can be met. The Association also wishes to have sufficient reserves available to respond rapidly when required to commission new sexual health guidelines or standards documents, or respond to external consultations.

Investment policy

The investment policy was reviewed by the Trustees with agreement that sufficient funds to allow the association to function for at least one year will be retained in accounts which permit access within a maximum of three months. The balance of reserves is invested after taking professional financial advice and adopting a low to medium risk approach. Investments are currently held in funds split equally between Saracens Investment Managers and St. James Management.

Plans for future periods

BASHH plans to continue providing a lead for those delivering sexual health and HIV services, and to promote high quality education and training in this area. During a time of rapid change in sexual health commissioning and the proposed use of different service models, the association has sufficient funds to develop independent high quality guidelines on the management of sexually transmitted infections and the delivery of appropriate clinical services. The annual scientific conference in 2016 will be held in Oxford and planning for this meeting is ongoing.

Objectives, Activities and Performance

Mission Statement

BASHH Aims:

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

Education Committee

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

The Special interest groups (SIGs)

The SIGs are responsible for leading on development of educational materials, meetings and training needs analyses within their specialist areas. In the last year the SIGs have provided a range of courses including the microscopy course, genital dermatology course, surgical techniques in GUM course, ABC of Sexual Dysfunction course, the Diplomas in GUM and HIV revision courses and a number of regional STI Foundation courses. An e-knowledge assessment linked to the course has been developed as was piloted in year. The number of GUM nurses and Health Advisors undertaking STIF Competencies are increasing and an integrated course with additional contraceptive competencies is currently being piloted for GUM nurses working in integrated sexual health services.

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

[http://www.bashh.org/BASHH/About BASHH/Annual Reviews/BASHH/About BASHH/Annual Review.aspx](http://www.bashh.org/BASHH/About%20BASHH/Annual%20Reviews/BASHH/About%20BASHH/Annual%20Review.aspx)

BASHH Scientific Meetings

The EC has the responsibility of providing 4 scientific meetings annually, which are free to delegates, including invited lectures from BASHH Honorary Life Members and Professorial lectures. Six SIGs (HPV, dermatology, Bacterial, Public Health, HIV, Sexual dysfunction) put together meetings in 2014-15 and the fourth meeting covered sexual health issues in the Four Nations of the UK. These were well attended with excellent evaluation. Recent innovations include the electronic collection of evaluation, and once feedback is submitted online and then the attendance certificate can be downloaded / printed. Podcasts/webcasts of the OGM lectures has continued to facilitate access for those unable to attend in person.

Other meetings

The EC oversees the Annual Conference and the 2015 in Glasgow attracting 402 delegates, and excellent evaluation. BASHH co-hosted a meeting with IUSTI Europe in Malta in September 2014 which had 60+ BASHH delegates and included BASHH delivering a STIF course to 40 Maltese clinicians.

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

STI & HIV course

This has now been running for the last 2 years with Modules 1 & 2 in the Spring and modules 3&4 in the Autumn. This appears to be successful with increased delegate numbers and good feedback. At present

the reduction in frequency of running the modules does not appear to disadvantage delegates wishing to sit the DipGUM but this will be kept under review.

Further EC plans

The role, membership and terms of reference of the EC has been reviewed to ensure it remains fit for purpose with the strategic aims of coordinating the delivery of education within BASHH and supporting clinicians in maintaining knowledge and expertise to deliver high quality services.

Barcoded membership badges are being introduced in late 2015, which will enable easier logging of attendance at events for CPD purposes. Next year's BASHH spring meeting will be held in Oxford and preparations are well underway.

The resources committed to the October 2015 scientific meeting have been redirected to support BASHH members attending the joint BASHH / IUSTI Europe meeting in September 2015, reducing the registration fee by €100 for BASHH members. A pilot of running a scientific meeting out of London will take place in Manchester in 2016. There will be a new director of the STI and HIV course from 2016 who will undertake a review of all aspects of the course including structure and content.

Clinical Governance Committee

Membership

Alan Tang - Chair
Sophie Brady - Secretary
Branch Chairs
Nurse, Health Adviser, SAS and Doctors in Training representatives
Clinical Effectiveness Group
Clinical Standards Unit
National Audit Group Chairs

Objectives

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

Significant Activities

- During the year, 4 meetings were held and issues from the Board discussed.
- Spotlight discussions were held during committee meetings focusing on development of services under the new commissioning arrangements. One discussion attempted to address the issue of realignment of clinical relationships after winning or losing competitive tenders.

- The Patient Safety issue with solubility of benzathine penicillin was reported to the MHRA and practical guidance disseminated to all CGC members and on to medical and nursing leads in local services.
- The Vice President gave a presentation on Six Steps to Successful Tendering to members of the CGC at the March 2015 meeting.
- Regional reports contributed to intelligence on the outcomes of services post-tendering and innovative approaches to funding services such as integration of health and social care budgets.

Performance/Outputs in the year 2014/15

- Branch Chairs pledged support for the Halve It Coalition to reduce undiagnosed HIV infection and late presentations by disseminating information for local services on how to collaborate with testing initiatives and representations at local councils to pass motions on increasing availability of HIV testing.
- In response to the BASHH Members' Survey and at the suggestion of the Education Committee, a Scientific Meeting outside of London was mooted, and it was agreed that the June 2016 meeting would be organised by the Northern Branch and held in Manchester.

Future plans

- Integrate the survey functions of the dissolved Clinical Development Group into the work of the CGC and Branches by ensuring that survey design expertise, dissemination and analysis are maintained.
- Accrue intelligence on the impact of the Public Health Grant cut on quality and effectiveness of STI services.
- Action planning from results of the Lead Clinician Survey 2015.

Conference and Communication Activity

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

30th January 2015 Joint meeting of BASHH and the Faculty of Sexual and Reproductive Health:

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

BASHH Annual Conference, Glasgow, Scotland.

Daniel Richardson, conference secretary, Rak Nandwani, local host and the KSAM conference team lead by Candi Bond Gunning and Christine Rousseau organised this year's annual conference in Glasgow. Details can be found at:

http://www.bashh.org/BASHH/Education/BASHH_Spring_Conference/BASHH_Spring_Conference_2015/BASHH/Education/BASHH_Spring_Conference/BASHH_Spring_Conference_Glasgow_2015.aspx

The Conference held at the Royal Concert Halls in Glasgow. There were over 500 delegates. The conference was sponsored by the following companies: Vivid, Janssen, SP-MSD, Abbvie, Gilead Sciences, Cepheid, BD, Atlas-Genetics, Bristol Myers Squibb, BBI healthcare, Genprobe-Hologic, Blythe-Systems, STI (BMJ), Wrenlabs, Zesty, Source Bioscience, Axsys.

The conference scientific committee received and reviewed 323 abstract papers: there were 33 oral presentations, 6 undergraduate presentations, 5 clinical case reports and 254 poster presentations. Speakers included: Professor Sheena McCormack, Professor Paul Flowers, Professor Jonathan Ross, Professor Roger Williams, Professor Brian Gazzard, Dr Laura Waters, Dr Katrina Erskine, Dr Marion Everett, Dr Claudia Estcourt, Dr Adam Bourne and Dr Andrew Winter. The Welcome reception was held in the Civic Chambers. The speakers Dinner was held at the House for an Art lover and the Gala dinner was held at Kelvingrove museum. The feedback was excellent.

Prizes:

Commended posters:

- 1. 'Find Your Mate'! An interactive game to support the teaching of sexual history taking to medical students.**

Kate Horn¹, Jo Fitzgerald¹, Ben Tometzki²

¹Royal United Hospital Bath NHS Foundation Trust, Bath, UK, ²Glasgow University Medical School, Glasgow, UK

- 2. Service evaluation of care needs of young people aged under 25 living with HIV: are they consistent?**

Siew Yan Teo¹, Jennifer Murira¹, Rachel Notman², Amy Evans¹

¹Leeds Teaching Hospitals, Leeds, UK, ²Department of Clinical and Health Psychology, Leeds, UK

- 3. Experiences of men who have sex with men (MSM) when engaging in the partner notification process three months following a HIV diagnosis.**

Jonathan Roberts¹, Eileen Nixon¹, Nicky Perry¹, Nigel Sheriff², Daniel Richardson¹

¹UK, Brighton & Sussex University Hospitals NHS trust, Brighton, ²UK, University of Brighton, Brighton

- 4. Uptake and acceptance of combined HIV POCT & STI screening for MSM in community settings during National HIV Testing Week**

Kevin Turner¹, Billy Clarke¹, Cecilia Priestley¹, Sara Scofield¹, Cordelia Chapman²

¹Dorset County Hospital NHS Foundation Trust, Weymouth, UK, ²The Royal Bournemouth and Christchurch Hospitals NHS Trust, Bournemouth, UK

- 5. Evaluation of interfering substances common to swab and urine specimen using the BD MAX™ CT/GC and CT/GC/TV assays, a new automated molecular assay.**

Keith Thornton, Amy Hoover, Lakeisha Galloway, Craig Zeman, Danielle Koffenberger.

UK, Becton Dickinson, Sparks Maryland

- 6. Patient stories: what can we learn from listening to healthcare workers with HIV**

Tracey Buckingham, Larissa Mulka, Daniel Richardson.

Brighton & Sussex University Hospitals NHS Trust, Brighton, UK

Commended clinical cases:

1. Case series: managing desquamative inflammatory vaginitis in trans-men

Kate Nambiar, Deborah Williams, Tamara Woodroffe, Alison Parnell, Daniel Richardson.
Brighton and Sussex University Hospitals NHS Trust, Brighton, UK

2. Gonococcal tenosynovitis in two HIV-infected heterosexual males: delayed diagnoses following negative urine NAAT testing

Jonathan Shaw, Peter Flegg, John Sweeney.
Blackpool Sexual Health Services, Blackpool, UK

Commended orals:

1 TV in primary care - is there more out there than we think?

Jane Nicholls¹, Paddy Horner³, Katy Turner³, John Macleod³, Paul North², Ralph Ferguson², Margaret May³, Peter Muir²

¹UK, Bristol Sexual Health Centre, Bristol, ²UK, Public Health England, Bristol Laboratory, Bristol, ³UK, Department of Social and Community Medicine, University of Bristol, Bristol

2 Understanding continuing high HIV incidence: sexual behavioural trends among MSM in London, 2000-2013

Adamma Aghaizu, Anthony Nardone, Andrew Copas, Danielle Mercey, Sonali Wayal, Vicky Parsons, Graham Hart, Richard Gilson, Anne Johnson

¹UK, Public Health England, London, ²UK, University College London, London

Maggie Godley Prize:

Experience of the tender process and integration of sexual health services: staff survey: Cara Saxon UK, Bridgewater Community Healthcare NHS Foundation Trust, Manchester

Undergraduate prize winners:

Access to GUM clinics in the UK – A worsening picture : Tim Prescott, Vanessa Hayden, Elizabeth Foley. University of Southampton, Southampton, UK

Undergraduate prize winners runner up:

Asymptomatic Lymphogranuloma venereum in known HIV positive MSM; Is it more common than we think? Daniel Ward¹, Meg Boothby², Penny Goold², Emma Hathorn².

¹ University of Birmingham, Birmingham, UK; ²Whittall Street Clinic, University Hospitals Birmingham NHS Foundation Trust, Birmingham, UK

IUSTI Malta: BASHH co-badged the IUSTI Europe conference in St Julian's in Malta 18-20th September 2014. The Conference was hosted by Dr Joe Pace and the scientific Committee was chaired by Dr Jackie Sherrard.

Future: BASHH conference events

Joint IUSTI-BASHH conference, Sitges, Spain 24-26th September 2015

Joint BASHH-FSRH conference 15th January 2016

BASHH conference, Oxford 10-12 July 2016

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

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

Public, Media and Website activities

The Public Panel is drawn from the public representing a rich variety of the population and different life experiences. It has been consulted across a range of the Association's activities, including providing a lay opinion to BASHH's Clinical Effectiveness Group on guidelines, leaflets and other electronic resources and regarding a feasibility study of a national HIV-STI audit programme within the Health Quality Improvement Programme.

BASHH has continued to support the work of Testing Faith, a project led by a London HIV charity (NAZ Project London). Testing Faith aims to educate and engage faith leaders in HIV/AIDS awareness and to promote HIV testing in black and ethnic minority communities. Over the past year the project has been extended and has held pilot events outside London as well as continuing in the capital. Next year a new Public Panel Chair, Dr Craig Tipple, will take the work programme forward and it is anticipated that this will include work on the development of internet information on sexual health for the general public.

The Media Group, led by Mr Peter Greenhouse, has been very active in supporting HPV vaccination for boys and MSM and in raising awareness of the need to regulate antibiotic prescribing for gonorrhoea via online pharmacies. They have worked with the Association's media office at Munro and Forster to respond rapidly to media enquiries and have proactively engaged with the media to effectively raise the profile of sexual health and BASHH.

Over the past year BASHH has been pleased to welcome new members to the Media Group with a particular focus on increasing the number tweeting on behalf of BASHH. Twitter continues to go from strength to strength with 3000 followers and about 800 likes on Facebook.

The BASHH website has been updated and refreshed, including the re-design of the home page to incorporate a public forum via Health Unlocked www.healthunlocked.com/BASHH and a BASHH twitter feed showing tweets by @BASHH_UK.

Online payment and registration for BASHH educational events has been extended to more educational events and online feedback with electronic attendance certificates are now used for BASHH scientific meetings.

Public Benefit

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

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

The Association's courses, national and local, have been highly successful over the past year and much of the educational programme has been free to both members and non-members. BASHH supports the publication of two international journals (STI and Int J STD & AIDS) and subsidised journals are provided to some membership categories. This benefits professional education and hence the care of the public.

The BASHH guidelines sit on the public facing side of the BASHH website and are accredited by NICE. Statistics show that the guideline section is the most visited area of the website. Our Standards for the Management of STIs are widely endorsed and are used by commissioners in service specifications and to measure performance. The Association also provides support to local and national government through expert advice, representation and briefing papers to promote good sexual health for the entire health community.

Plans for the Future

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

BASHH will continue to support members across all the United Kingdom, offering assistance with representation for all four nations to their national governments and key policy makers.

BASHH will work closely with the Royal College of Physicians, the Association for Directors of Directors of Public Health, Public Health England and other key stakeholders to monitor and evaluate changes in clinical practice, service delivery, workforce training and recruitment consequent to the major funding challenges following transition to local authority commissioning in England.

BASHH will continue to press for gender neutrality in HPV vaccination, and supporting opportunistic HPV vaccination for young MSM.

BASHH will develop and expand its STIF portfolio, including new educational material and developing modules for integrated care and health advisers. We will continue to improve access to our educational meetings through rotating some of our national meetings to venues outside London, support regional meetings and work with European colleagues to enhance STI training.

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

BASHH will continue to work with sister charities and patient advocacy groups to press for legal requirement for confidentiality of healthcare and records of care in sexual health services to be included in the Code of Practice for healthcare providers.

Statement of disclosure of information to auditors

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

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

Auditors

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

This report was approved by the Board on 11th December 2015:

.....
Dr J. Clarke
Trustee

.....
Dr E. Foley
Trustee

Report of the auditors

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

We have audited the financial statements of BASHH for the year ended 31 July 2015 which comprise the Statement of Financial Activities, the Balance Sheet and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and Financial Reporting Standard for Smaller Entities (effective April 2008) (United Kingdom Generally Accepted Accounting Practice applicable to Smaller Entities).

This report is made solely to the charitable company's trustees, as a body, in accordance with section 144 of the Charities Act 2011 and the regulations made under section 154 of that Act. Our audit work has been undertaken so that we might state to the charitable company's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditor

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

The trustees have elected for the financial statements to be audited in accordance with the Charities Act 2011 rather than the Companies Act 2006. Accordingly we have been appointed as auditor under section 144 of the Charities Act 2011 and report in accordance with regulations made under section 154 of that Act.

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

Scope of the audit of the financial statements

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

Opinion on financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 July 2015, and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice (applicable to smaller entities); and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Matters on which we are required to report by exception

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

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

Jailesh Jashbhai Patel
Statutory Auditor

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

Date ___ December 2015

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

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Statement of Financial Activities

(including income and expenditure account) for the year ended 31 July 2015

	Notes	Unrestricted Funds £	Restricted Funds £	Endowment Funds £	Total 2015 £	Total 2014 £
<u>Incoming Resources</u>						
Investment Income	2	20,925	-	-	20,925	19,130
Activities in furtherance of the charity's objects:						
Membership Subscriptions		198,312	-	-	198,312	199,427
Educational meetings and courses	9	558,381	-	-	558,381	697,852
Grant and similar income		-	-	-	-	59,200
Other incoming resources		-	-	-	-	-
Total incoming resources		777,618	-	-	777,618	975,609
<u>Resources expended</u>						
Cost of activities to further the charity's objects	3	726,353	-	-	726,353	858,798
Governance costs	4	31,329	-	-	31,329	27,655
Total resources expended		757,682	-	-	757,682	886,453
Net incoming resources / (resources expended) for the year. Net income for the year.		19,936	-	-	19,936	89,156
Realised gains on investment assets		-	-	-	-	-
Net incoming resources / (resources expended) including realised gains on investments		19,936	-	-	19,936	89,156
Unrealised gains on investment assets	6	38,845	-	-	38,845	28,645
Net movement in funds		58,781	-	-	58,781	117,801
Fund balances brought forward at 1 August 2014		1,668,763	4,150	10,000	1,682,913	1,565,112
Fund balances carried forward at 31 July 2015	10	1,727,544	4,150	10,000	1,741,694	1,682,913

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

The notes on pages 21 to 27 form part of the financial statements.

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Balance Sheet

	NOTES	As at 31.07.15 £	As at 31.07.14 £
FIXED ASSETS			
Tangible Assets		-	-
Investments	6	1,039,625	983,968
TOTAL FIXED ASSETS		1,039,625	983,968
CURRENT ASSETS			
Stock		3,266	3,944
Debtors	7	104,404	182,051
Bank balances		708,511	630,113
		816,181	816,108
Creditors - Amounts falling due within one year	8	- 114,112	- 117,163
NET CURRENT ASSETS		702,069	698,945
TOTAL NET ASSETS		1,741,694	1,682,913
FUNDS			
Endowment (Capital) Funds	10	10,000	10,000
Restricted Income Funds	10	4,150	4,150
Unrestricted Funds	10	1,727,544	1,668,763
TOTAL FUNDS	10	1,741,694	1,682,913

These accounts have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008).

The financial statements were approved and authorised for issue by the trustees on 11th December 2015 and signed on their behalf by:

.....
Prof. Jonathan Ross
Trustee

Notes forming part of the financial statements

for the year ended 31 July 2015

1 Accounting policies

a) Basis of preparation

The financial statements have been prepared under the historical cost convention, with the exception of investments which are included at market value. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP), "Accounting and Reporting by Charities" published in 2005 and the Financial Reporting Standard for Smaller Entities (effective April 2008) and the Charities Act 2011.

b) Company status

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

c) Fund accounting

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

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

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

d) Incoming resources

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

▪ Grants, Donations and Legacies

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

- When donors specify that donations and grants given to the charity must be used in future accounting periods, the income is deferred until those periods.
- When donors impose conditions which have to be fulfilled before the charity becomes entitled to use such income; the income is deferred and not included in incoming resources until the preconditions for uses have been met.

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

▪ **Subscription Fees**

Subscriptions are payable in advance for the Association's Membership Year. Subscriptions for the Membership year ended 31 July 2015, which were not received at the time of preparation of these accounts, are considered to be uncollectable and accordingly no credit is taken into the accounts.

▪ **Educational Meetings**

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

e) Resources expended

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

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

f) Irrecoverable VAT

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

g) Investments

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

h) Stock

Stock consists of purchased educational material for resale. Stocks are valued at the lower of cost and net realisable value. Items donated for resale or distribution are not included in the financial statements until they are sold or distributed.

i) Website development costs

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

j) Foreign currencies

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

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k) Governance costs

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

l) Corporation tax

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

2 Investment Income

	2015	2014
	£	£
Interest receivable	4,113	2,941
Dividends receivable from investments and unit trusts	16,812	16,189
	<u>20,925</u>	<u>19,130</u>

3 Cost of activities to further the charity's objectives

	2015	2014
	£	£
Cost of Educational Meetings (note 9)	519,708	591,151
Restricted funds expenditure (note 10)	-	59,200
Cost of Educational Journals	62,780	63,447
Secretariat fees (See note below)	105,975	104,543
Committee meeting and travel costs	14,477	9,697
Printing, Postage & Stationary	1,909	7,117
General administration and sundry costs	21,504	23,643
	<u>726,353</u>	<u>858,798</u>

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

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4 Governance Costs

	2015 £	2014 £
Trustees travel and subsistence (note 5)	16,163	13,319
Professional fees and insurance	7,166	6,336
Fees payable to the charity auditors :		
For Audit	8,000	8,000
For other services	-	-
	31,329	27,655

5 Trustees remuneration

The trustees neither received nor waived any emoluments during the year (2014: £ Nil)

Out of pocket expenses were reimbursed to trustees as follows:

	2015 No of Trustees	2014 No of Trustees	2015 £	2014 £
Travel and subsistence	16	19	16,163	13,319
Other	-	-	-	-
	16	19	16,163	13,319

6 Fixed Asset Investments

	2015 £	2014 £
Cost or market value as at 01 August 2014	983,968	939,134
Additions	16,812	16,189
Disposal proceeds	-	-
Net investment gains	38,845	28,645
Market value as at 31 July 2015	1,039,625	983,968

Fixed asset investments consist of listed UK Unit Trusts managed by Sarasin and Partners LLP and St James Place and are held for their investment returns. Additions of £16,812 (2014: £16,189) represent additional units acquired during the year.

The Investments managed by St James Place had a year end market value of £498,851 (2014: £490,319) and consists of accumulation units held in their Equity Income, Ethical and International Corporate Bond unit trusts. The Investments managed by Sarasin and Partners LLP had a year end market value of £540,774 (2013: £493,650) and consists of income units held in their Alpha CIF for endowment funds.

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7 Debtors

	2015 £	2014 £
Trade debtors	84,444	150,932
VAT Recoverable	-	14,237
Prepayments	19,960	16,882
	104,404	182,051

8 Creditors : amount falling due within one year

	2015 £	2014 £
Trade creditors	47,875	76,903
VAT payable	4,267	-
Accruals and deferred income	61,970	40,260
	114,112	117,163

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

	Income 2015 £	Expenditure 2015 £	Result 2015 £	Income 2014 £	Expenditure 2014 £	Result 2014 £
Note : Deficits appear in parentheses ()						
Special Interest Groups						
Colposcopy SIG/Genital Dermatology SIG	19,840	13,418	6,422	18,447	11,764	6,683
HIV SIG	-	-	-	-	-	-
Herpes Simplex SIG	-	-	-	-	-	-
British Co-Operative Clinical Group	-	628	(628)	-	1,148	(1,148)
HPV SIG	10,000	8,146	1,854	1,750	1,775	(25)
Bacterial	16,353	9,539	6,814	12,270	24,117	(11,847)
Sexual Dysfunction Group	(128)	1,715	(1,843)	23,039	14,929	8,110
Adolescent Special Interest Group	8,143	5,796	2,347	3,546	2,183	1,363
Clinical Effectiveness Group	-	2,601	(2,601)	-	2,891	(2,891)
SAS Group	35,265	25,801	9,464	36,907	31,147	5,760
National Audit Group	-	2,122	(2,122)	-	20,197	(20,197)
Doctors in Training	2,083	3,101	(1,018)	1,000	61	939
Web Team	-	52	(52)	-	-	-
Media External Communications Group	-	42,553	(42,553)	-	49,522	(49,522)
Nurses / Health Advisors	-	-	-	-	-	-
BASHH IT Group	-	-	-	-	-	-
HIV Medicine	21,462	22,625	(1,163)	47,855	27,937	19,918
Mentoring Committee	-	-	-	-	98	(98)
Clinical Standards Unit	-	1,034	(1,034)	-	29,692	(29,692)
Pharmacy Group	-	-	-	-	-	-
Public Panel	-	2,856	(2,856)	-	3,263	(3,263)
Public Health Group	-	-	-	-	-	-
MSM SIG	-	1,345	(1,345)	11,292	11,923	(631)
Special Interest Groups: Sub-Total	113,018	143,332	(30,314)	156,106	232,647	(76,541)

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Other Educational Meetings/Courses						
Educational Meetings	5,500	27,086	(21,586)	15,517	22,487	(6,970)
Joint Meetings	35,129	15,626	19,503	34,831	22,597	12,234
BASHH Course in STI & HIV	44,841	47,108	(2,267)	37,000	17,529	19,471
STIF Course	61,482	65,572	(4,090)	51,175	32,746	18,429
STIF Competency	33,185	17,288	15,897	29,185	11,186	17,999
Spring Meeting (See note below)	237,191	177,041	60,150	336,098	223,873	112,225
Other Edu. Meetings/Courses: Sub-Total	417,328	349,721	67,607	503,806	330,418	173,388
Regional Branches						
East Anglia	-	-	-	-	-	-
Ireland	-	-	-	-	-	-
Mersey	-	66	(66)	-	-	-
Thames North East	-	-	-	-	-	-
Thames North West	-	-	-	400	-	400
Thames South East	-	-	-	-	-	-
Thames South West	-	-	-	-	-	-
North West	-	-	-	-	-	-
Northern	-	-	-	-	-	-
Oxford	425	476	(51)	3,700	2,820	880
Scotland	5,310	4,428	882	2,755	3,478	(723)
South West	5,670	4,828	842	2,860	1,728	1,132
Trent	3,583	2,250	1,333	2,195	2,273	(78)
Wales	6,262	8,517	(2,255)	4,533	3,230	1,303
Wessex	2,090	1,914	176	8,150	6,496	1,654
West Midlands	1,902	300	1,602	10,147	4,594	5,553
Yorkshire	2,793	3,876	(1,083)	3,200	3,467	(267)
Regional Branches: Sub-Total	28,035	26,655	1,380	37,940	28,086	9,854
TOTALS	558,381	519,708	38,673	697,852	591,151	106,701

During the previous year the spring meeting was held through a joint arrangement with BHIVA. The revenue and the cost stated represents BASHH's share of the meeting. The 2015 spring meeting was entirely held by BASHH and was not a joint arrangement.

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10 Statement of funds

	At 01-Aug-14 £	Income £	Expenditure £	Investment gains £	Transfers £	At 31-Jul-15 £
Endowment funds						
Robert S Morton Lecture fund	10,000	-	-	-	-	10,000
Total Endowment fund	10,000	-	-	-	-	10,000
General reserve	1,668,763	777,618	757,682	38,845	-	1,727,544
Total unrestricted fund	1,668,763	777,618	757,682	38,845	-	1,727,544
Restricted funds :						
The Robert S Morton Lecture Fund	3,139	-	-	-	-	3,139
Cathy Harman Memorial Appeal	1,011	-	-	-	-	1,011
Total restricted funds	4,150	-	-	-	-	4,150
Total funds	1,682,913	777,618	757,682	38,845	-	1,741,694

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

Net Assets of the Funds of Charity

Funds	Fixed Asset £	Investments £	Net Current Assets £	Long Term Liabilities £	Fund Balances £
Endowment funds	-	-	10,000	-	10,000
Restricted funds	-	-	4,150	-	4,150
Unrestricted funds	-	1,039,625	687,919	-	1,727,544
	-	1,039,625	702,069	-	1,741,694

11 Members' Limited Liability

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